



An Exploratory Study on the Role of Continuing Medical Education (CME) in Influencing Drug Prescription Patterns

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Based on Internship at Orizia Healthcare

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Objectives of the Study

Main Objectives:

- Assess CME's influence on prescribing.
- Compare independent vs pharma-sponsored CME.
- Examine demographic factors.
- Explore educational and ethical perceptions.

Sub-Objectives:

- Understand motivation to attend CME.
- Examine branded product promotion.
- Evaluate perceived bias and ethics.

Research Questions

- To what extent does CME influence prescribing?
- How do different types of CME differ in impact?
- What role do demographics play?
- What ethical concerns do doctors raise?



Research Methodology



Design: Descriptive, exploratory, quantitative.



Population: Urban physicians in Bathinda.



Sample: 250 doctors (75.8% response rate out of 330 approached).



Sampling: Stratified random sampling.



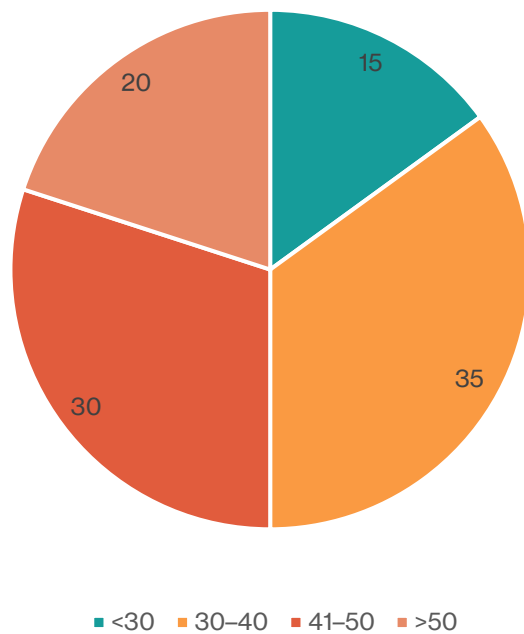
Tool: 17-question structured questionnaire.



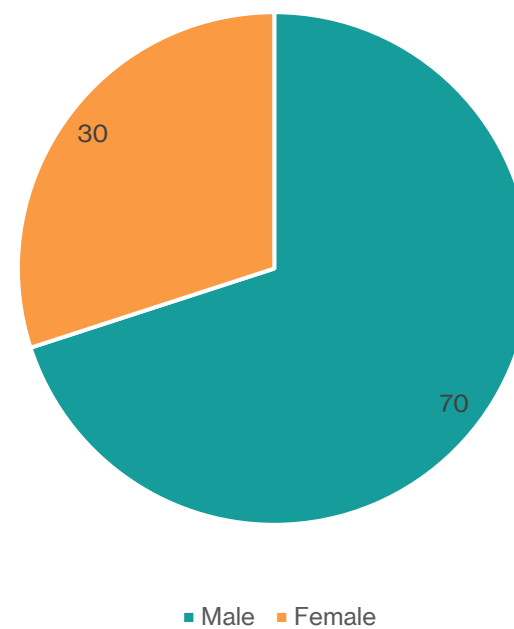
Analysis: Descriptive statistics, graphs, thematic analysis.

Demographics

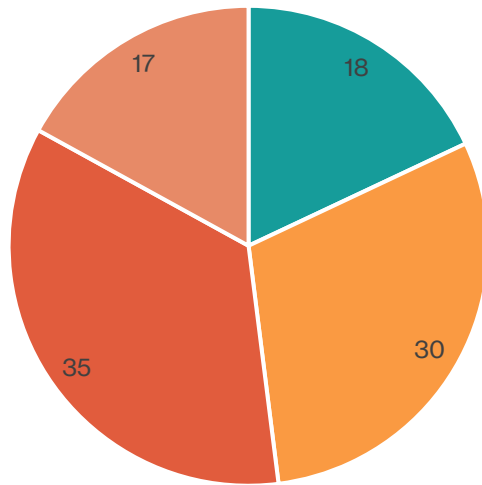
Doctor Age Group(%)



Doctor's Gender (%)

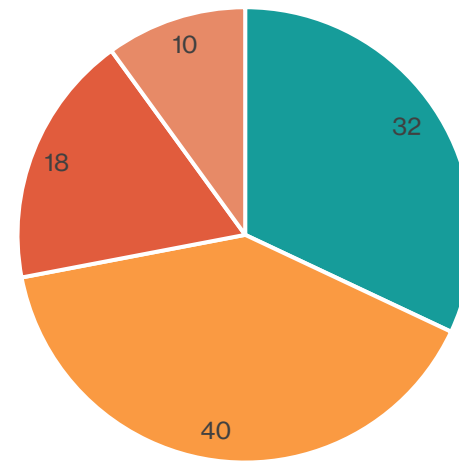


Doctor's Experience(%)



■ <5 ■ 5-10 ■ 11-20 ■ >20

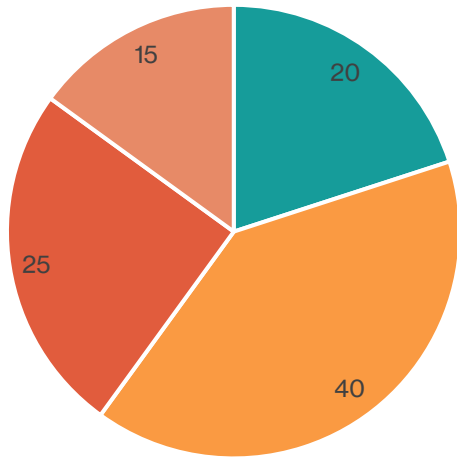
Practice Setting(%)



■ Private Clinic ■ Hospital ■ Government Facility ■ Other

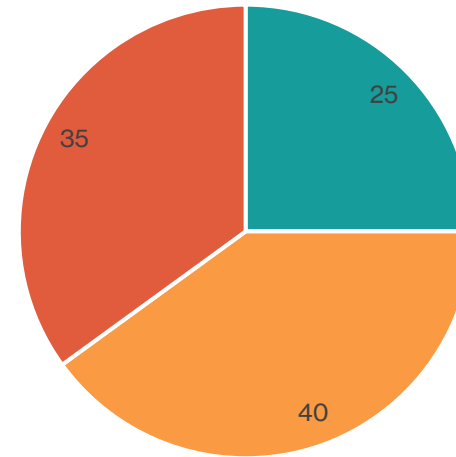
CME Participation Trends

CME Attended (Past 2 Years) (%)



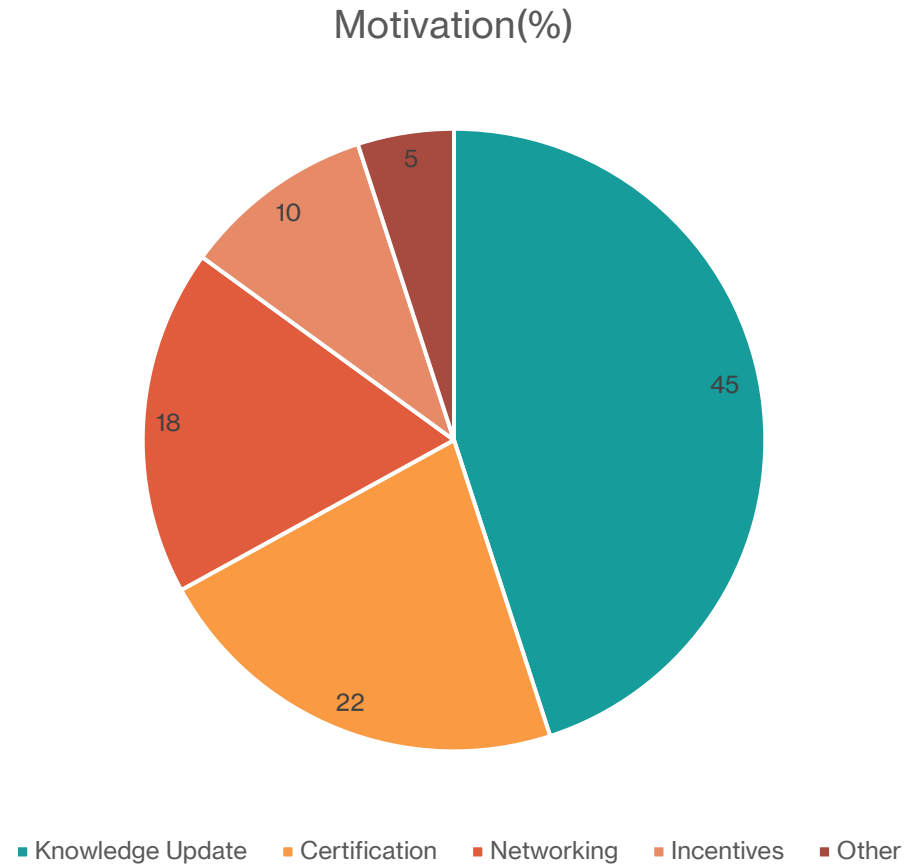
■ 1-2 ■ 3-5 ■ 6-10 ■ >10

Organizer Type (%)



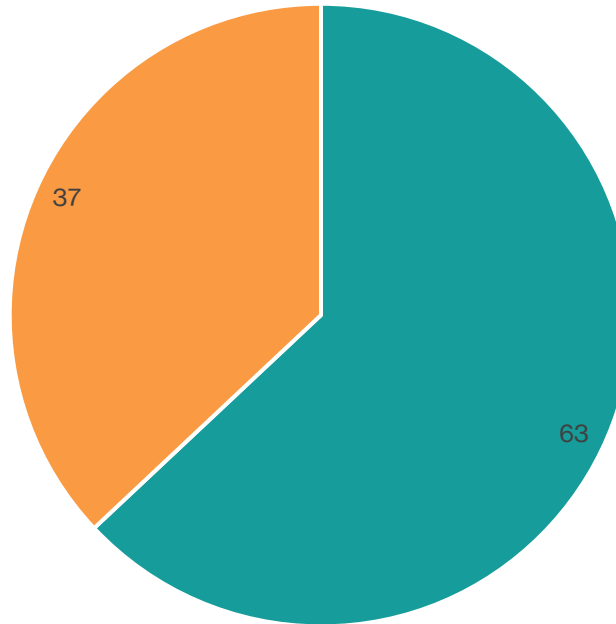
■ Independent ■ Pharma-Sponsored ■ Mixed

Motivation to Attend CME



Impact on Prescription Behavior

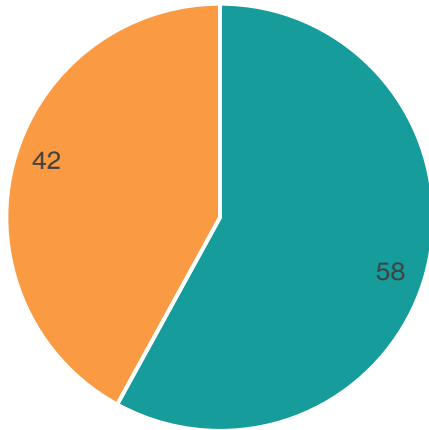
Changed Prescription After CME(%)



■ Yes ■ No

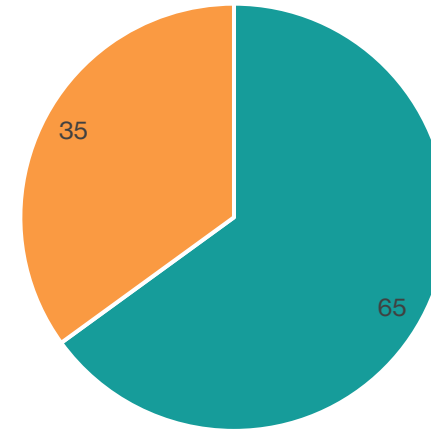
Branded Products & Promotions

Introduced to New Pharma Products(%)



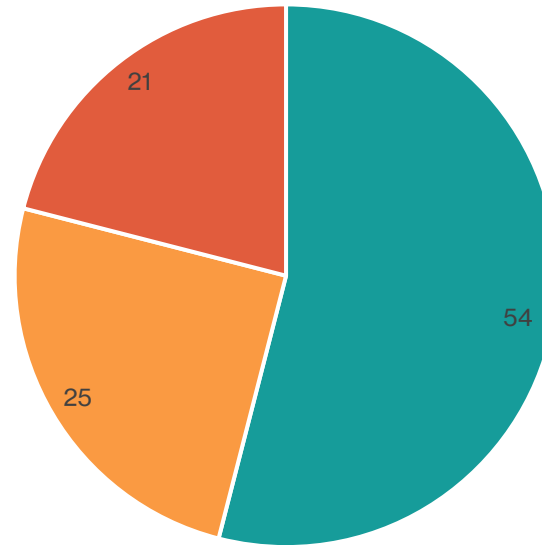
■ Yes ■ No

CME Recommended Branded Drugs(%)



■ Yes ■ No

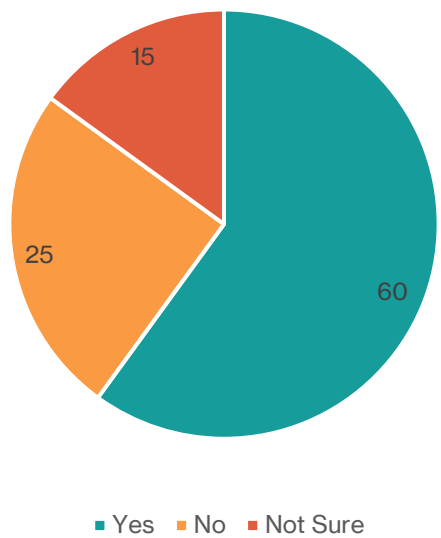
Branded Prescription Increased(%)



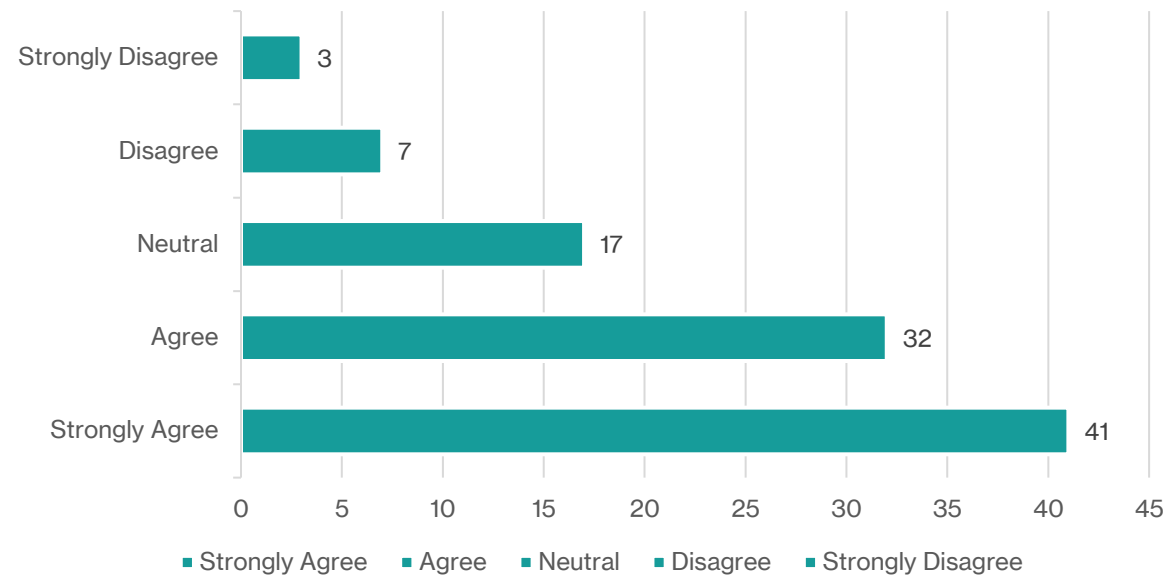
■ Yes ■ No ■ Not Sure

Perception of CME Quality

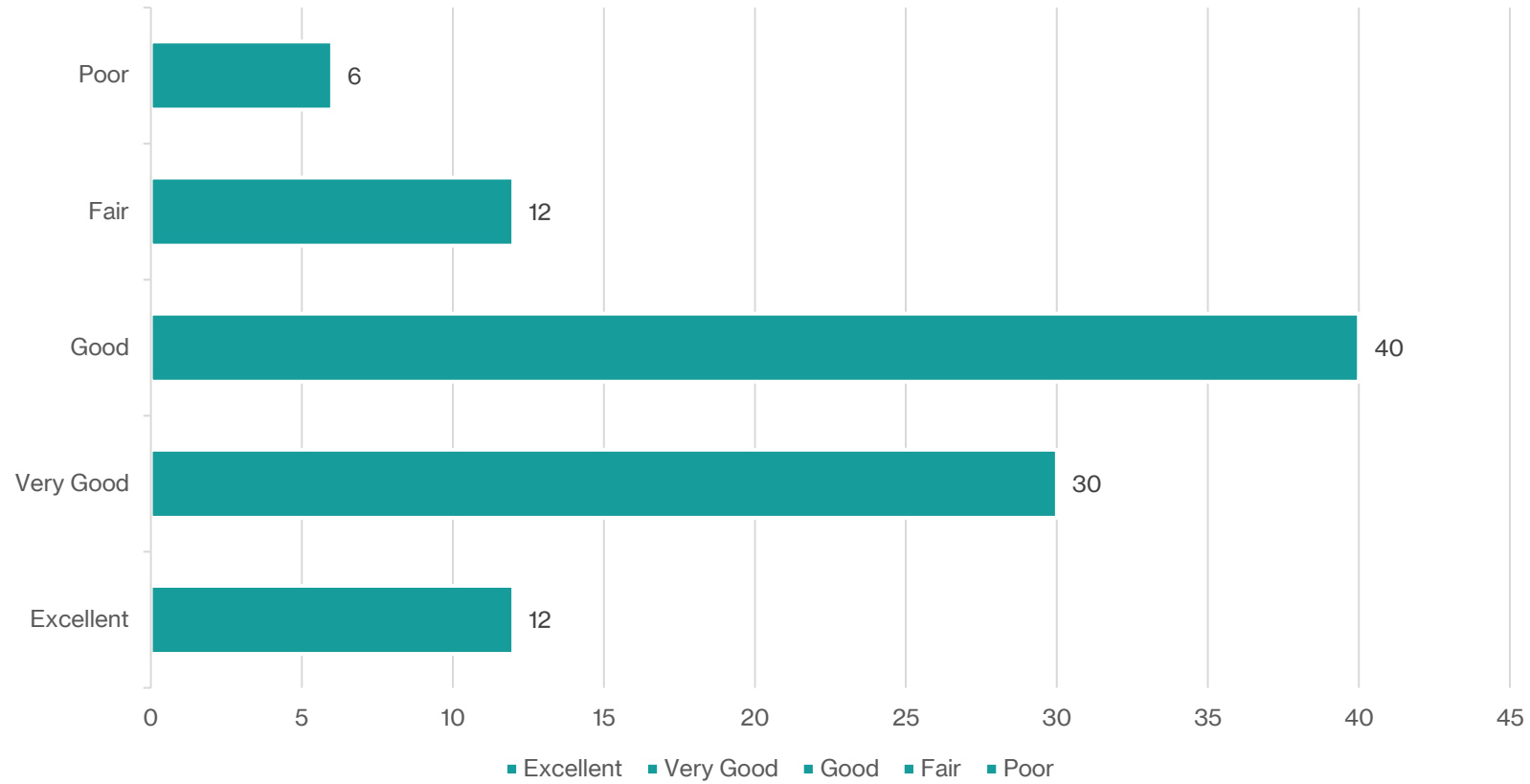
Perceived Quality Difference (Independent v/s Pharma)%



CME Free of Pharma Sponsorship(%)



Educational Value of CME (%)



Key Insights

CME changes prescription behavior significantly.

Pharma-sponsored CME introduces bias.

Doctors prefer **evidence-based, neutral** CME.

High trust exists in content when **transparency** is maintained.

Recommendations

For Pharma Companies:

- Disclose sponsorships clearly.
- Use evidence-based, neutral content.
- Co-develop CME with academic institutions.

For Practitioners:

- Evaluate CME critically.
- Balance decisions with safety, cost, efficacy.

For Policymakers:

- Set CME quality standards.
- Promote independent CME funding and audits.

Conclusion

- Continuing Medical Education (CME) significantly influences physicians' drug prescribing behavior, especially when sessions are pharma-sponsored.
- 63% of doctors acknowledged changes in prescription patterns after attending CME, and 54% reported increased branded prescribing.
- Ethical concerns remain prominent – 73% of respondents agreed that CME should be free from pharmaceutical sponsorship.
- Independent CME programs are perceived to offer better content quality, with 60% favoring them over pharma-sponsored ones.
- For pharmaceutical organizations, the key takeaway is to focus on transparent, evidence-based, and ethically guided CME programs that build trust while delivering clinical value.

Thank You