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New UK guidance for social media content for the pharmaceutical industry

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At the end of January 2023, the Prescription Medicines Code of Practice Authority (***PMCPA***) issued its first published guidance on social medial advertising by pharmaceutical companies. The PMCPA is the independent body which administers the Code of Practice of the Association of the British Pharmaceutical Industry (***ABPI***).

It was produced in consultation with the ABPI, industry stakeholders, and the UK statutory regulator - which also acts as the sector's enforcement body for promotional activities for the most serious of cases - the Medicines and Healthcare products Regulatory Agency (***MHRA***).

The new guidance explains how to assess if a social media post is likely to comply with the ABPI Code of Practice (the ***ABPI Code***), including through the use of practical examples. The PMCPA's previous guidance on digital communications, published in 2016, addressed social media communications in a light touch way, with a focus on Twitter. However, a significant level of uncertainty remained relating to the application of the ABPI Code to social media, and as noted in our previous blog, here, social media campaigns relating to prescription-only medicines (***POMs***) and unlicensed medicinal products have been a recent particular area of focus for the enforcement activity of the Advertising Standards Authority (***ASA***).

The guidance sets out ten key tips for pharmaceutical companies posting on public social media channels, including where they share or re-share the posts of others:

1. **Links** (e.g. to other information or websites) should be used with discretion. The link itself should be made clear, have an appropriate name, and clearly indicate whether it will take the viewer to the pharmaceutical company's own materials, or third party content. The linked content should be clear regarding the

intended audience and who produced the material. Similar considerations apply when **signposting** to further information – for example, when inviting health professionals to register for a promotional meeting. Companies should take appropriate steps when signposting, to verify that viewer attempting to access the further information is part of the intended audience (e.g. healthcare professionals), and make clear – if relevant – that the material or meeting will include promotional content.

2. **Mentions** and **tags** should be used with caution, particularly to ensure that the directing of a viewer to another account does not result in a breach of the ABPI Code. This might be the case, for example, if a pharmaceutical company linked to the social media account of a healthcare professional, where that account contained promotional content for a POM.
3. **Hashtags** should also be appropriate and relevant to the content of the post. For example, a hashtag should not contain a claim for a POM. Hashtags should be considered individually, as well as collectively.
4. If a company considers that it is necessary to respond to **misinformation** or to **correct inaccuracies**, a cross-reference to factual or regulatory information must not be presented in a way which could be considered to be promotional.
5. **Corporate news and announcements** should not directly or indirectly mention products, but may reference events such as new executive appointments, corporate partnerships or acquisitions, company awards, or employee recognition. Care should be taken when deciding whether to post about or link to social media about product or pipeline milestone announcements – for example, the social media post should not mention a specific product or study, and should link to a specific section of the company's website which has a limited audience (such as investors, journalists or healthcare professionals) rather than the general public.
6. **Individual professional profiles** and **job advertisements** should avoid mentioning POMs, particularly alongside information such as therapy area or key product benefits, as this may constitute promotion. Where appropriate and proportionate, job descriptions may include brief details about named products, if it is relevant to prospective employers or employees, and would require that individual to actively search for the information (e.g. through additional clicks or scrolling).
7. Any posts intended to promote **disease awareness** or educate the public on a disease and its management must be non-promotional in nature. Particular care should be taken where the company's product is the only medicine relevant to the disease or symptoms in question, even if that product is not named. The MHRA has published specific guidance on disease awareness campaigns.

8. **Patient support materials**, such as videos showing patients how to take a medicine correctly, should be hosted in secured sections on social media platforms. For example, a video may be accessible by a patient who has been prescribed a particular medicine through a unique URL. The target audience should be limited and clearly identified (e.g. patients who have been prescribed that medicine).
9. **Influencer relationships** should be transparent. Influencers should be selected who have appropriate expertise, and they should follow all contractual obligations including having any proposed educational material for the public certified in advance, as well as the ASA's guidance on influencer advertising on social media. The risks of undue influence on healthcare professionals by influencers should be carefully considered.
10. Any posts relating to **clinical trial recruitment** should be appropriately targeted to individuals who can reasonably be assumed to fulfil the demographic or other criteria for the trial, and who are then properly screened. Companies should avoid referring to a specific product, but may provide a description that supports appropriate individuals to find out more information.

Of course, social media advertising by the pharmaceutical industry will also need to comply with generally applicable and sector-specific rules covering the advertising of medicinal products, such as the restrictions set out in the Medical Devices Regulations 2002, consumer protection legislation, and the ASA Codes, but this new guidance provides some welcome clarity and practical considerations in this complex, highly regulated area.