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Washington, DC 20037, of any change of address. © Copyright 1976, American Pharmaceutical Association, 2215 Constitution Ave., N.W., Washington, DC 20037; all rights reserved. A favorite, albeit harmless, pastime of those people involved in either conducting or reporting pharmaceutical research is to speculate on the future trends, directions, magnitude, and shape that such research is likely to assume. A key factor which is missing from this hypothetical equation is the thinking and viewpoint of those who "pay the tab" and who, as such, are in the ultimate position of decision making.

Recently, a high-powered conference was held in Washington to discuss various aspects of the economic impact of health-care legislation and, more specifically, to assess the probable economic effects if national health insurance were to be enacted. One of the speakers was the president of a major pharmaceutical company, with a definite reputation for being research oriented.

The speaker was John J. Pfeiffer of Winthrop Laboratories, a division of Sterling Drug, and in his remarks he included some pointed comments relative to future research in the pharmaceutical industry. He appeared to be making these predictions irrespective of national health insurance; its enactment would have no evident influence on the changes he believes will be coming in the management of drug research.

On this subject, he began by noting that progress dictated the necessity of industry continuing a major research commitment and of making sure that the necessary funds for this purpose would be available. Having stated this initial premise, he then expressed a corollary view that industry also has a "mandate that we must monitor the output of research." Recognizing and admitting that such an approach would be quite complex, he offered three specific beliefs: (a) that research must be subjected to some sort of business and management operating controls; (b) that marketing considerations must have greater input into what is done in the research arena; and (c) that clinical efficacy testing alone will no longer be sufficient—industry testing of drugs for comparative efficacy will become essential.

Mr. Pfeiffer went on to express the further viewpoint that:

"Only the projects with the greatest return on investment will be pursued. Only research that has a greater than even chance of success will be allowed to continue. Projects will be measured more frequently and a greater number of 'Go and No-Go' decision steps will be necessary. In effect, the great opportunity will be in the proper use of research as a 'tool of management'."

He elaborated by citing the need to improve the efficiency of research efforts and to adopt new philosophies of directing and administering research. As examples, the speaker predicted that research will be more centralized as a service function, there will be greater sharing of research, and even joint ventures will be established between independent firms having a common area of interest. He concluded with the observation that management will need to develop and exercise a much more hard-nosed attitude concerning the likelihood of a payoff developing. This would be in contrast to the present relatively easygoing climate in which it is "hard to kill some projects" once they have commenced, even though it becomes apparent that the probability of achieving success is not great.

Surely, Mr. Pfeiffer's views will come as a surprise to many who are currently engaged in pharmaceutical research. Undoubtedly, many of our readers will be disturbed by these comments and disagree with them. Our purpose in stating them in this column, however, is not to debate whether these views are just or unjust, valid or invalid, necessary or unnecessary. Rather, we feel that it is important that our readers be aware of the current thinking at corporate levels, inasmuch as these policies will control the general thrust and operating budget for industry research and, thereby, will determine much of the future course and direction of pharmaceutical research activity.

Edward S. Felom