## MEMORANDUM

Date: September 21, 2009

From: Research Team, DDMAC

To: Elizabeth Berbakos, PRA Team, FDA

Subject: Justification to OMB for physician incentives for Mental Models Study of Health Care Providers Understanding of Prescription Drug Effectiveness (Docket No. FDA-2008-N-0589)

Physicians are a difficult group to recruit for participation in research (VanGeest, Johnson, & Welch, 2007). Sudman (1985) described five reasons why they may be difficult to recruit:

- 1) lack of time
- 2) perceived importance of the study
- 3) confidentiality concerns
- 4) past response experiences
- 5) gatekeepers (e.g., receptionists, nurses)

These reasons have been supported in more recent studies (e.g., Heywood, Mudge, Ring, & Sanson-Fisher, 1995, Kaner, Haighton, & McAvoy, 1998; MacPherson & Bisset, 1995). VanGeest et al. (2007) conducted a systematic review to determine what methods, if any, increased the participation of physicians. They found that monetary compensation increased participation compared with nonmonetary incentives, and that personal payment increased participation compared with donation to charity or other non-personal incentive (Deehan, Templeton, Taylor, Drummond, & Strang, 1997; Gattellari & Ward, 2001).

The literature suggests that physicians must be paid to induce adequate participation. Physicians are extremely busy and have maintained a wall of protection between themselves and researchers. Although we feel that \$100 is inadequate, we will attempt to recruit physicians using this rate. We will record interactions and provide a report to OMB on our progress.

## References

- Deehan, A., Templeton, L., Taylor, C., Drummond, C., & Strang, J. (1997). The effect of cash and other financial inducements on the response rate of general practitioners in a national postal survey. *British Journal of General Practice*, *47*, 87-90.
- Gattellari, M., & Ward, J.E. (2001). Will donations to their learned college increase surgeons' participation in surveys? A randomized trial. *Journal of Clinical Epidemiology*, 54, 467-491.
- Heywood, A., Mudge, P., Ring, I., & Saonson-Fisher, R. (1995). Reducing systematic bias in studies of general practitioners: The use of a medical peer in the recruitment of general practitioners in research. *Family Practice*, *12*, 227-231.

- Kaner, E.F., Haighton, C.A., & McAvoy, B.R. (1998). "So much post, so busy with practice —so, no time!": A telephone survey of general practitioners' reasons for not participating in postal questionnaire surveys. *British Journal of General Practice*, *48*, 1067-1069.
- MacPherson, I., & Bisset, A. (1995). Not another questionnaire!: Eliciting the views of general practitioners. *Family Practice*, *12*, 335-338.

Sudman, S. (1985). Mail surveys of reluctant professionals. *Evaluation Review*, 9, 349-360.

VanGeest, J.B., Johnson, T.P., & Welch, V.L. (2007). Methodologies for improving response rates in surveys of physicians: A systematic review. *Evaluation of Health Professionals*, *30*, 303-322.