

CASE AUTH/3876/2/24

COMPLAINANTS v NOVO NORDISK

Allegations about disclosure of transfers of value

CASE SUMMARY

This case was in relation to transfers of value to healthcare organisations and patient organisations that were allegedly unreported, inaccurately reported, and misreported by Novo Nordisk between 2015 and 2022.

The outcome under the 2015 Code was:

Breach of Clause 24.1 (2015 Code)	Failing to document and publicly disclose annually certain transfers of value made directly or indirectly to health professionals, other relevant decision makers and healthcare organisations
Breach of Clause 24.4 (2015 Code)	Failing to make disclosures annually in respect of each calendar year in the first six months after the end of the calendar year in which the transfers of value were made
Breach of Clause 27.7 (2015 Code)	Failing to make publicly available a list of patient organisations which it supports
No Breach of Clause 24.1 (2015 Code) (x2)	Requirement to document and publicly disclose annually certain transfers of value made directly or indirectly to health professionals, other relevant decision makers and healthcare organisations
No Breach of Clause 27.7 (2015 Code)	Requirement to make publicly available a list of patient organisations which it supports

The outcome under the 2016 Code was:

Breach of Clause 24.1 (2016 Code)	Failing to document and publicly disclose annually certain transfers of value made directly or indirectly to health professionals, other relevant decision makers and healthcare organisations
Breach of Clause 24.4 (2016 Code)	Failing to make disclosures annually in respect of each calendar year in the first six months after the end of the calendar year in which the transfers of value were made
Breach of Clause 27.7 (2016 Code) (x4)	Failing to make publicly available a list of patient organisations which it supports
No Breach of Clause 24.1 (2016 Code) (x3)	Requirement to document and publicly disclose annually certain transfers of value made directly or indirectly to health professionals, other relevant decision makers and healthcare organisations

No Breach of Clause 24.4 (2016 Code)	Requirement to make disclosures annually in respect of each calendar year in the first six months after the end of the calendar year in which the transfers of value were made
No Breach of Clause 27.7 (2016 Code) (x2)	Requirement to make publicly available a list of patient organisations which it supports

The outcome under the 2019 Code was:

Breach of Clause 24.1 (2019 Code) (x7)	Failing to document and publicly disclose annually certain transfers of value made directly or indirectly to health professionals, other relevant decision makers and healthcare organisations
Breach of Clause 24.4 (2019 Code) (x7)	Failing to make disclosures annually in respect of each calendar year in the first six months after the end of the calendar year in which the transfers of value were made
Breach of Clause 27.7 (2019 Code) (x7)	Failing to make publicly available a list of patient organisations which it supports

No Breach of Clause 24.1 (2019 Code) (x5)	Requirement to document and publicly disclose annually certain transfers of value made directly or indirectly to health professionals, other relevant decision makers and healthcare organisations
No Breach of Clause 24.4 (2019 Code) (x4)	Requirement to make disclosures annually in respect of each calendar year in the first six months after the end of the calendar year in which the transfers of value were made
No Breach of Clause 24.5 (2019 Code)	Requirement that the information disclosed must remain in the public domain for at least three years from the time of disclosure
No Breach of Clause 27.7 (2019 Code) (x3)	Requirement to make publicly available a list of patient organisations which it supports

The outcome under the 2021 Code was:

Breach of Clause 2 (2021 Code)	Bringing discredit upon, and reducing confidence in, the pharmaceutical industry
Breach of Clause 5.1 (2021 Code)	Failing to maintain high standards
Breach of Clause 28.1 (2021 Code) (x3)	Failing to document and publicly disclose annually certain transfers of value made directly or indirectly to health professionals, other relevant decision makers and healthcare organisations
Breach of Clause 29.1 (2021 Code) (x5)	Failing to make publicly available annually a list of patient organisations to which it provides donations, grants or sponsorship or with whom it has engaged to provide contracted services over the reporting period

Breach of Clause 29.2 (2021 Code) (x5)	Failing to meet the disclosure requirements for the provision of donations, grants or sponsorship to a patient organisation
Breach of Clause 31.1 (2021 Code) (x3)	Failing to make disclosures annually in respect of each calendar year in the first six months after the end of the calendar year in which the transfers of value were made
No Breach of Clause 28.1 (2021 Code) (x12)	Requirement to document and publicly disclose annually certain transfers of value made directly or indirectly to health professionals, other relevant decision makers and healthcare organisations
No Breach of Clause 29.1 (2021 Code) (x2)	Requirement to make publicly available annually a list of patient organisations to which it provides donations, grants or sponsorship or with whom it has engaged to provide contracted services over the reporting period
No Breach of Clause 29.2 (2021 Code) (x2)	Requirement to meet the disclosure requirements for the provision of donations, grants or sponsorship to a patient organisation
No Breach of Clause 31.1 (2021 Code) (x12)	Requirement to make disclosures annually in respect of each calendar year in the first six months after the end of the calendar year in which the transfers of value were made
No Breach of Clause 31.2	Requirement that the information disclosed must remain in the public domain for at least three years from the time of first disclosure

**This summary is not intended to be read in isolation.
For full details, please see the full case report below.**

FULL CASE REPORT

A complaint was received about Novo Nordisk Ltd regarding the above from three complainants who were colleagues at two separate universities.

COMPLAINT

The complaint wording is reproduced below:

“Our earlier complaint to the PMCPA (Case AUTH/3763/4/23) highlighted Novo Nordisk’s failure to report payments to two healthcare organisations (henceforth HCOs). Novo Nordisk attributed this to categorisation issues within the company’s finance system. This revelation made us extremely concerned about the possibility that these unreported payments might be part of a wider pattern of poor payment reporting by the Company and other breaches of the Association of the British Pharmaceutical Industry Code (henceforth ABPI Code).

To establish whether this was the case, we conducted an in-depth investigation and identified multiple instances where Novo Nordisk **unreported, inaccurately reported or misreported** payments (transfers of value) to **HCOs** and **patient**

organisations (henceforth POs) between 2015 and 2022. We focused our investigation on professional medical associations reported by Novo Nordisk as payment recipients in Disclosure UK and POs reported by Novo Nordisk as payment recipients in disclosures on the Company's website. Our investigation also led us to identify unreported or misreported payments to other types of HCOs.

The following explains how we understood the key definitions used.

- **Unreported payments** – instances where the company seems to have failed to report payments entirely or reported them later than mandated by the ABPI Code. These payments were reported by the recipient organisations but not by Novo Nordisk in one or more relevant years.
- **Inaccurately reported payments** – instances where the company reported some payments but those mentioned by the recipient referred to a different payment purpose and/or value. Assuming correct reporting by the recipient, this suggests that the company either reported these payments inaccurately (by providing wrong details) or, failed to report them (in which case they would belong to the above category of unreported payments).
- **Misreported payments** – payments that were reported but not on the appropriate disclosure platform as required by the ABPI Code.

The unreported, inaccurately reported and misreported payments to **HCOs** constitute breaches of Clauses 24.1, 24.4 and 24.5 of the 2019 Code (2015-2020 transfers of value) and Clauses 28.1, 31.1 and 31.2 of the 2021 Code (2021 and 2022 transfers of value). In turn, the unreported, inaccurately reported and misreported payments to **POs** amount to breaches of Clauses 27.7 of the 2019 Code (2015-2020 transfers of value) and Clauses 29.1 and 29.2 of the 2021 Code (2021 and 2022 transfers of value). Collectively, we believe that these breaches amount to multiple breaches of Clause 2 of the 2019 and 2021 ABPI Code, causing a lack of transparency or at the very least confusion for regulators or members of the public who may be interested in the company's disclosure data (please see Summary). As we are not a pharmaceutical company, we urge the panel to consider any other relevant clauses of the Code that may apply in this case.

We also identified an instance of late reporting of payments to one HCO, which amounts to a breach of Clause 31 of the 2021 Code.

We started our investigation by comparing (1) payments to professional medical organisations (henceforth professional organisations) reported by Novo Nordisk in Disclosure UK and (2) payments to POs reported on Novo Nordisk's website with (3) recipients' annual accounts, published on charity regulator websites in England/Wales or Scotland (Charity Commission and Scottish Charity Regulator) and (4) payments reported on the recipient's own website (including event listings and educational materials) and annual reports/reviews.

The above checks considered only organisations **featured in Novo Nordisk's disclosures** (i.e. in Disclosure UK and disclosures of payments to POs published on Novo Nordisk's website).

To identify organisations that might have been **missed entirely from Novo Nordisk's disclosures**, we conducted additional searches on the Charity

Commission website for 'obesity' to identify obesity-related charities, which are a key focus of Novo Nordisk's collaboration. We also identified other POs and HCOs (not restricted to professional organisations at this point) during our checks on Novo Nordisk's disclosures and through additional investigative web searches.

During our web searches to identify missing organisations, we consulted the ABPI Code of Practice 2021 definitions of **HCO** and **PO** as follows:

- "Healthcare organisation' means either a healthcare, medical or scientific association or organisation such as a hospital, clinic, foundation, university or other teaching institution or learned society whose business address, place of incorporation or primary place of operation is in Europe or an organisation through which one or more health professionals or other relevant decision makers provide services" (ABPI Code 2021, Clause 1.8)
- "Patient organisation' means an organisation mainly comprising of patients and/or caregivers or any user organisation such as a disability organisation, carer or relative organisation and consumer organisation that represents and/or supports the needs of patients and/or caregivers" (ABPI Code 2021, Clause 1.15)

We include a copy of Novo Nordisk's disclosures of payments to POs during 2015 through to 2022 (inclusive) at the end of this document (Appendix A) for reference (in addition to the screenshots of specific payments provided to evidence each allegation).

The Disclosure UK reports used for our investigation were:

- Payments in 2015, 2016, 2017, 2018 – downloaded when each new database was published (e.g. July 2016)
- Payments in 2019, 2020, 2021 – downloaded in April 2023
- Payments in 2022 – downloaded in August 2023

Please note that henceforth when we refer to a payment being reported in Disclosure UK in or during a given year, as specified in the 'year' column of each Disclosure UK database we are referring to the year the payment was made rather than the year that the Disclosure UK database was made publicly available. Similarly, when we refer to payments to POs being reported in or during a given year, we are referring to the year that the payment disclosure is covering (i.e. when the payment was made).

For the unreported payments identified in our investigation, we provide multiple forms of evidence for each organisation as follows:

- a hyperlink to the original source (the hyperlink is embedded in the text – usually the year or title of the payment/sponsorship)
- relevant text copied and pasted as provided by the PO or HCO
- a screenshot of the payment/sponsorship details as provided on each organisations' website or documents (where possible we have captured as much relevant information, including dates, descriptions, Novo Nordisk's name or logo, and values – sometimes this means we include multiple screenshots to capture all relevant information)
- a screenshot of Novo Nordisk's reported payments to each organisation relevant to each case.

We divide our complaint into three parts – the first demonstrating unreported payments, the second – inaccurately reported payments, and the third – misreported payments.

We provide a summary at the end of this document (section 4) before the Appendices.

1. Unreported payments

Novo Nordisk appears to have unreported payments to **fifteen** HCOs (specifically professional organisations) named as recipients in their disclosure reports at least once between 2015-2022 (section 1.1. below) and **eight** POs named in their disclosure reports at least once between 2015-2022 (section 1.2. below).

Novo Nordisk also appears to have unreported payments to an additional **four** charities (three which were missed entirely and one which was in Disclosure UK) identified by searching ‘obesity’ in the Charity Commission (section 1.3. below) and **twenty-seven** other HCOs and POs identified during our investigation (section 1.4. below).

In total, we identified **30 organisations missed entirely from Novo Nordisk’s disclosures.**

While it is impossible to put an exact figure on the payments missing from the Company’s disclosure reports, they do include payments worth over £1.15m which Novo Nordisk made to [Organisation AA] and reported late.

We state these below in sections, with a paragraph and bullet points for each observed organisation. We provide web links to the cited reference pertaining to each organisation’s links to Novo Nordisk. The organisations are listed alphabetically.

1.1. Unreported payments to professional organisations

This section (1.1.) considers professional organisations named as recipients by Novo Nordisk at least once between 2015 and 2022. Whilst the Company reports payments to these organisations in some years, **we found evidence that additional payments may have been unreported by Novo Nordisk.**

1.1.1. [Organisation A]

Novo Nordisk reports payments to the [Organisation A] in 2020, 2021, and 2022, however [Organisation A]’s annual accounts indicate Novo Nordisk provided funding at least in some years prior to 2020. Note that the [Organisation A.1] (first payment below) does not appear in the Company’s Disclosure UK payments either.

- “Management of Chronic disease and Multimorbidity. [Organisation A.1].” 8th Nov 2018. “Meeting kindly sponsored by [alphabetised list of six pharmaceutical companies, including Novo Nordisk]”. It is unclear if [Organisation A], [Organisation A.1], or [Organisation A.2] received the

funding for the meeting from Novo Nordisk, however as Novo Nordisk first reported making a payment to [Organisation A] during 2018 and [Organisation A.1] and [Organisation A.2] do not appear in Disclosure UK, this payment is missing from Novo Nordisk's disclosures.

[Screenshot showing the above information from the organisation's website or document]

- [Organisation A]'s UK Congress on Obesity 2018 – Sponsors and Exhibitors [Novo Nordisk logo and description] (p. 26)

[Screenshot showing the above information from the organisation's website or document]

- “Where previous increases are largely attributable to the UKCO conference and the establishment of the COMs meetings, the further increase in sponsorship income for this year is attributable to an unrestricted grant from Novo Nordisk, which is intended to fund increased activities among our regional and national [Organisation A] Network Groups over 2018/2019” (p. 2, 2017/18 – accounts financial year end June 2018).

[Screenshot showing the above information from the organisation's website or document]

- “We are very grateful to Novo Nordisk for their continued and generous support of the [Organisation A] Networks” (p. 3, 2018/19 – accounts financial year end June 2019)

[Screenshot showing the above information from the organisation's website or document]

Novo Nordisk's payments to [Organisation A] in Disclosure UK:

[Image of a spreadsheet showing 14 payments]

1.1.2. [Organisation B]

Novo Nordisk reports payments to [Organisation B] in 2015, 2016, 2018, 2019, 2020, 2022, however [Organisation B] reports receiving funding from Novo Nordisk for annual events in 2017 as well as 2016, 2018, 2019, 2020, and 2022. The 2017 payment is missing.

- 11th [Organisation B] Annual Conference 3rd February 2017

[Screenshot showing the logos, including Novo Nordisk, of “the companies who sponsor the conference”]

Novo Nordisk's reported payments to [Organisation B] in Disclosure UK:

[Image of a spreadsheet showing six payments]

Novo Nordisk's reported payments to [Organisation B] in disclosures of payments to POs (2019):

[Screenshot showing disclosure of £3,000.00 for sponsorship of the 2019 conference (stand space)]

Also note the incomplete name of the organisation in the above disclosure.

1.1.3. [Organisation C]

Novo Nordisk reports one payment to [Organisation C] in 2019, however Novo Nordisk is named as a 'principal partner' in [Organisation C]'s accounts in 2021 and 2022 (note the same text appears in the accounts for December 2021 and 2022 suggesting this covers both calendar years).

- “We have continued to build positive relationships with [Organisation C] partners, sponsors and industry including establishing eight principal partners ([alphabetised list of seven pharmaceutical companies, including Novo Nordisk] for 2021/22” (p. 10) and “[Organisation C] Principal Partners” section lists Novo Nordisk (p. 13, annual accounts financial year end 31 December 2021)

[Screenshot showing the above information from the organisation's website or document]

- “We have continued to build positive relationships with [Organisation C] partners, sponsors and industry including establishing eight principal partners ([alphabetised list of seven pharmaceutical companies, including Novo Nordisk] for 2021/22” (p. 9) and “[Organisation C] Principal Partners” section lists Novo Nordisk (p. 15, annual accounts financial year end 31 December 2022)

[Screenshot showing the above information from the organisation's website or document]

Novo Nordisk's payment to [Organisation C] in Disclosure UK:

[Image of a spreadsheet showing one payment]

1.1.4. [Organisation D]

Novo Nordisk report one payment to [Organisation D] in 2016, however Novo Nordisk is named as an event sponsor in 2021 in a report available on [Organisation D]'s website.

- Annual Conference 2021. “Novo Nordisk has provided sponsorship to the Obesity Specialist Group (OSG) of [Organisation D] to fund the development and delivery of this event. Novo Nordisk has had no influence on the content, agenda or speaker selection and [Organisation D]'s OSG has had full control

over all elements of this event.” Note that the ‘Obesity Specialist Group’ was not mentioned in Novo Nordisk’s disclosures either.

[Screenshot showing the above information from the organisation’s website or document]

Novo Nordisk’s payments to [Organisation D] in Disclosure UK:

[Image of a spreadsheet showing one payment]

1.1.5. [Organisation E]

Novo Nordisk report payments to [Organisation E] in 2015 and 2016 (in the Company’s 2015 and 2016 disclosures of payments to POs) and 2019 (in the 2019 Disclosure UK database), however [Organisation E]’s annual accounts and website suggest that extensive Novo Nordisk financial support in the form of sponsorship was received between and after these dates (as well as 2015, 2016, 2019). Additionally, [Organisation E]’s patient arm – [Organisation E.1] – also reports Novo Nordisk funding for events. [Organisation E.1] is mentioned in Novo Nordisk’s descriptions of payments to [Organisation E] in 2015 and 2016 but subsequent payments are not disclosed by the Company. Evidence of the missing payments is organised into evidence obtained from the [Organisation E] website followed by [Organisation E]’s annual financial accounts. Where the meeting organiser was [Organisation E.1] this is indicated in square brackets.

- [Organisation E.1] 27th Annual Symposium on Women’s Health 2017 – sponsored by pharmaceutical companies including Novo Nordisk [Organisation E.1]

[Screenshot showing the above information from the organisation’s website or document]

- [Organisation E] 27th Annual Conference– 2017, “Session 6 – Below the belt...? Sponsored by Novo Nordisk” (p. 2).

[Screenshot showing the above information from the organisation’s website or document]

- [Organisation E.1] 28th Annual Symposium on Women’s Health 2018 – sponsored by pharmaceutical companies including Novo Nordisk [Organisation E.1]

[Screenshot showing the above information from the organisation’s website or document]

- Menopause Special Skills Module 2018 – sponsored by pharmaceutical companies including Novo Nordisk

[Screenshot showing the above information from the organisation’s website or document]

- Women's Health Meeting 2018 – sponsored by pharmaceutical companies including Novo Nordisk

[Screenshot showing the above information from the organisation's website or document]
- Scottish Women's Health Meeting 2018 – sponsored by pharmaceutical companies including Novo Nordisk

[Screenshot showing the above information from the organisation's website or document]
- [Organisation E] 28th Annual Conference 2018 – sponsored by pharmaceutical companies including Novo Nordisk

[Screenshot showing the above information from the organisation's website or document]
- [Organisation E.1] 29th Annual Symposium on Women's Health 2019 - sponsored by pharmaceutical companies including Novo Nordisk [Organisation E.1]

[Screenshot showing the above information from the organisation's website or document]
- Women's Health Meeting 2019 – sponsored by pharmaceutical companies including Novo Nordisk (March 2019)

[Screenshot showing the above information from the organisation's website or document]
- Women's Health Meeting 2019 – sponsored by pharmaceutical companies including Novo Nordisk (November 2019)

[Screenshot showing the above information from the organisation's website or document]
- Scottish Women's Health Meeting 2019 – sponsored by pharmaceutical companies including Novo Nordisk

[Screenshot showing the above information from the organisation's website or document]
- [Organisation E.1] 30th Annual Symposium on women's health – a virtual meeting 2020 – sponsored by pharmaceutical companies including Novo Nordisk [Organisation E.1]

[Screenshot showing the above information from the organisation's website or document]

- [Organisation E] Virtual Women's Health Meeting – with [redacted] 2020 – sponsored by pharmaceutical companies including Novo Nordisk

[Screenshot showing the above information from the organisation's website or document]

- Menopause Special Skills Module 2020 – sponsored by pharmaceutical companies including Novo Nordisk

[Screenshot showing the above information from the organisation's website or document]

- [Organisation E] Virtual Women's Health Meeting – with [redacted] 2021 – sponsored by pharmaceutical companies including Novo Nordisk

[Screenshot showing the above information from the organisation's website or document]

- [Organisation E] Virtual Women's Health Meeting – with [redacted] 2021 – sponsored by pharmaceutical companies including Novo Nordisk

[Screenshot showing the above information from the organisation's website or document]

- Post reproductive health for today's clinicians 2021 – sponsored by pharmaceutical companies including Novo Nordisk

[Screenshot showing the above information from the organisation's website or document]

- 31st annual scientific conference 2022 – sponsored by pharmaceutical companies including Novo Nordisk

[Screenshot showing the above information from the organisation's website or document]

Annual accounts (all accounts are financial year end 31 December, therefore covering payments received during the calendar year)

- “[Organisation E] Media Campaign Following on from the success of the 2015/2016 campaign, work with [communications company] on phase two began in March. We secured two unrestricted educational grants totalling £70,000 from Novo Nordisk and from [named pharmaceutical company] to finance this. A further survey was conducted with women, based around the effect of menopause on relationships and in the workplace and with the option for husbands/partners to take part. The launch date was 18 October, World Menopause Day.” (p. 5, 2017 annual accounts).

[Screenshot showing the above information from the organisation's website or document]

- “During 2017 unrestricted educational grants, website advertising and sponsorship were provided by ... Novo Nordisk....” (p. 7, 2017 annual accounts)

[Screenshot showing the above information from the organisation's website or document]

- “During 2018 unrestricted educational grants, website advertising and sponsorship were provided by ... Novo Nordisk....” (p. 6, 2018 annual accounts)

[Screenshot showing the above information from the organisation's website or document]

- “During 2019 unrestricted educational grants, website advertising and sponsorship were provided by ... Novo Nordisk....” (p. 8, 2019 annual accounts)

[Screenshot showing the above information from the organisation's website or document]

- “During 2020 unrestricted educational grants, website advertising and sponsorship were provided by ... Novo Nordisk....” (p. 10, 2020 annual accounts)

[Screenshot showing the above information from the organisation's website or document]

- “During 2021 unrestricted educational grants, website advertising and sponsorship were provided by ... Novo Nordisk....” (p. 8, 2021 annual accounts)

[Screenshot showing the above information from the organisation's website or document]

- “During 2022 unrestricted educational grants, website advertising and sponsorship were provided by ... Novo Nordisk....” (p. 12, 2022 annual accounts)

[Screenshot showing the above information from the organisation's website or document]

Novo Nordisk's reported payments to [Organisation E] in their disclosure of payments to POs in 2015 and 2016 (respectively):

[Screenshots showing three disclosures in the first list and three disclosures in the second list]

Novo Nordisk's reported payments to [Organisation E] disclosed in Disclosure UK:

[Image of a spreadsheet showing one payment]

1.1.6. [Organisation F]

Novo Nordisk reports one payment to [Organisation F] in 2021, however [Organisation F] reports receiving financial support prior to and after this. [Organisation F] is an international organisation based in Belgium but Novo Nordisk did not name [Organisation F] as a payment recipient in betransparent.be during 2020, 2021 or 2022 either.

- “[Organisation F] is grateful for the funding it receives in support of its various activities from the following industry partners: [Novo Nordisk logo]” (p. 36, 2015 annual report)

[Screenshot showing the above information from the organisation's website or document]

- “[Organisation F] is grateful for the funding it receives in support of its various activities from the following industry partners: [Novo Nordisk logo]” (p. 31, 2016 annual report)

[Screenshot showing the above information from the organisation's website or document]

- “[Organisation F] is grateful for the unrestricted financial support it receives from the following industry partners: [Novo Nordisk logo]” (p. 17, 2017 annual report)

[Screenshot showing the above information from the organisation's website or document]

- “In 2018, [Organisation F] received funding for its non-Congress related activities from: [Novo Nordisk logo]” (p. 23, 2018 annual report)

[Screenshot showing the above information from the organisation's website or document]

“In 2019, [Organisation F] received funding for its non-Congress related activities from: [Novo Nordisk logo]” (p. 23, 2019 annual report)

[Screenshot showing the above information from the organisation's website or document]

- “[Organisation F] is grateful for the unrestricted financial support it receives from its sponsors. In 2020, we received funding for our non-Congress related activities from: [Novo Nordisk logo]” (p. 19, 2020 annual report)

[Screenshot showing the above information from the organisation’s website or document]

- “In 2022, we received funding for the EUHASS activities from: [Novo Nordisk logo]” (p. 21, 2022 annual report)

[Screenshot showing the above information from the organisation’s website or document]

- “In 2022, we received funding for our Congress from: [Novo Nordisk logo]” (p. 21, 2022 annual report)

[Screenshot showing the above information from the organisation’s website or document]

Novo Nordisk’s payment to [Organisation F] reported in Disclosure UK:

[Image of a spreadsheet showing one payment]

1.1.7. [Organisation G]

Novo Nordisk reports payments to [Organisation G] in 2015, 2016, 2017, 2018, 2021, 2022. However, event details suggest that Novo Nordisk sponsored a discussion in 2019, the ‘[Organisation G] [location] School’ in 2019, and the [Organisation G] annual review states that they received funding from Novo Nordisk in 2020.

[Organisation G] is a European organisation but its headquarters are in London, UK.

- “[Organisation G] 2019 SATELLITE SYMPOSIUM DISCUSSION, SUPPORTED BY NOVO NORDISK”.

[Screenshot showing the above information from the organisation’s website or document]

- 9th [Organisation G] [location] School 2019. “We also thank Novo Nordisk for supporting the [location] School since 2018” (p. 2).

[Screenshot showing the above information from the organisation’s website or document]

- “Corporate Support in 2020. Thank you to our [Organisation G]’s corporate sponsors, whose support is invaluable in helping [Organisation G] provide many of its fantastic activities. Novo Nordisk. • Platinum [Organisation G] Connect Online sponsor • Diabetes, Obesity & Metabolism School • [location] School • Research Fellowship • Henning Andersen Prizes” (p. 11)

[Screenshot showing the above information from the organisation’s website or document]

Novo Nordisk’s payments to [Organisation G] reported in Disclosure UK:

[Image of a spreadsheet showing 36 payments]

1.1.8. [Organisation H]

Novo Nordisk reports payments to [Organisation H] in 2015 and 2016, however [Organisation H]’s annual accounts appear to report restricted funds from pharmaceutical companies including Novo Nordisk in 2017, 2018, 2019, 2020 and 2021 (as well as 2015 and 2016).

- “Gestational Diabetes Initiative – Novo Nordisk Support Grant”, “Income & Gains £79,854” (p.34) (2017) (reported in accounts financial year end 31 December 2018, note payment was received in “prior year”) [final row in the screenshot referred to below]

[Screenshot showing the above information from the organisation’s website or document]

- “Non Communicable Diseases”, “Income & Gains £158,979” (p. 33). Description of fund: “Non Communicable Diseases – Novo Nordisk, [two other companies], and [Organisation H] Grants provided by Novo Nordisk, [two other companies], and [Organisation H] to support [Organisation H]’s initiative to advocate internationally on the importance of addressing pregnancy and NCDs” (p. 35) (2018) (reported in accounts financial year end 31 December 2018) [final row in the screenshot referred to below]

[Screenshot showing the above information from the organisation’s website or document]

- “Non Communicable Diseases”, “Income & Gains £59,725” (p. 34). Description of fund: “Non Communicable Diseases - Novo Nordisk, [two other companies], and [Organisation H] Grants provided by Novo Nordisk, [two other companies], and [Organisation H] to support [Organisation H]’s initiative to advocate internationally on the importance of addressing pregnancy and NCDs” (p. 36) (2019 – accounts financial year end 31 December 2019) [final row in the screenshot referred to below]

[Screenshot showing the above information from the organisation’s website or document]

- “Non Communicable Diseases”, “income & Gains £48,678” (p. 35). Description of fund: “Non Communicable Diseases - Novo Nordisk, [two other companies], and [Organisation H] Grants provided by Novo Nordisk, [two other companies], and [Organisation H] to support [Organisation H]’s initiative to advocate internationally on the importance of addressing pregnancy and

NCDs” (p. 38) (2020 – accounts financial year end 31 December 2020) [final row in the screenshot referred to below]

[Screenshot showing the above information from the organisation’s website or document]

- “Non Communicable Diseases”, “Income & Gains £48,678” (p. 37).
Description of fund: “Non Communicable Diseases - Novo Nordisk, [two other companies], and [Organisation H] Grants provided by Novo Nordisk, [two other companies], and [Organisation H] to support [Organisation H]’s initiative to advocate internationally on the importance of addressing pregnancy and NCDs” (p. 40) (2021 – accounts financial year end 31 December 2021) [final row in the screenshot referred to below]

[Screenshot showing the above information from the organisation’s website or document]

Novo Nordisk’s reported payments to [Organisation H] in Disclosure UK:

[Image of a spreadsheet showing two payments]

1.1.9. [Organisation I]

Novo Nordisk report payments to [Organisation I] in 2015, 2017, 2020, 2021, 2022, however the [Organisation I] website refers to a survey and report sponsored by Novo Nordisk in 2018 and ‘clinical hubs’ in 2019 (as well as 2015 and 2020)

- [Organisation I] State of the Nations Survey 2018 – “The survey and this report have been funded by Novo Nordisk. The company had no input into the development or the interpretation of the survey and its findings.” (p. 199)

[Screenshot showing the above information from the organisation’s website or document]

- Introducing the [Organisation I] Clinical Hubs 2019 – “Novo Nordisk has, through a sponsorship, fully funded all costs for the technical development and hosting of the hubs. Novo Nordisk has had no influence on the content of the hubs and full editorial control remains the sole responsibility of [Organisation I].”

[Screenshot showing the above information from the organisation’s website or document]

Novo Nordisk’s payments to [Organisation I] reported in Disclosure UK:

[Image of a spreadsheet showing 26 payments]

1.1.10. [Organisation J]

Novo Nordisk report payments to [Organisation J] in 2015, 2018, 2019 however [Organisation J]'s website suggests that Novo Nordisk funded webinars in 2020 and 2021 (as well as sponsorship of workshops in 2018 and 2019).

- 2 DIABETES During Covid-19 Pandemic webinars. November 2020. "These webinars have been fully funded and organised by Novo Nordisk"

[Screenshot showing the above information from the organisation's website or document]

- The Impact of COVID-19 Pandemic Type 2 Diabetes: How do We Manage the Backlog? 2021. "This meeting has been organised and fully funded by Novo Nordisk"

[Screenshot showing the above information from the organisation's website or document]

Novo Nordisk's payments to [Organisation J] reported in Disclosure UK:

[Image of a spreadsheet showing three payments]

1.1.11. [Organisation K]

Novo Nordisk reports payments to [Organisation K] in 2015, 2017, 2019, 2020, 2021, 2022, however [Organisation K] held an event in 2018 which received funding from Novo Nordisk. The event was hosted in collaboration with [Organisation E], but Novo Nordisk did not report any payments to [Organisation E] in 2018 either. It is unclear if this unreported payment was made to [Organisation K] or [Organisation E]. There was also an [Organisation K] conference which took place in 2018 sponsored by Novo Nordisk.

- Women's Health Event – 7th September 2018. Sponsors: [Novo Nordisk logo]

[Screenshot showing the above information from the organisation's website or document]

- "[Organisation K] conference 4-6th October 2018 Glasgow - symposium: CH and RP delighted to have agreed a sponsored lunchtime symposium at [Organisation K] October conference on Friday 5th October, plus a stand in the conference hall to be shared with [named organisation]. Both have been kindly sponsored by Novo Nordisk, who have given us a free reign in how both are run." (p. 2)

[Screenshot showing the above information from the organisation's website or document]

Novo Nordisk's payments to [Organisation K] reported in Disclosure UK:

[Image of a spreadsheet showing 40 payments]

1.1.12. [Organisation L]

Novo Nordisk report payments to [Organisation L] in 2015, 2016, 2019 and 2020, however [Organisation L]'s website mentions Novo Nordisk sponsorship of a publication in 2022.

- Starting Injectable Treatments in Adults with Type 2 Diabetes. 2022 - "Novo Nordisk has sponsored the development, publication and dissemination of the guidance" (p. 2)

[Screenshot showing the above information from the organisation's website or document]

Novo Nordisk's reported payments to [Organisation L] in Disclosure UK:

[Image of a spreadsheet showing six payments]

1.1.13. [Organisation M]

Novo Nordisk reports one payment to [Organisation M] in 2018, however [Organisation M]'s website states that Novo Nordisk sponsored their meetings in 2021 and 2022.

- Hybrid Meeting 2021 – "This event was funded by the companies mentioned through event sponsorship and sponsored sessions for which we are very grateful." – Novo Nordisk logo included

[Screenshot showing the above information from the organisation's website or document]

- Annual Scientific Meeting 2022 - "This event was funded by the companies mentioned through event sponsorship and sponsored sessions for which we are very grateful." – Novo Nordisk logo included

[Screenshot showing the above information from the organisation's website or document]

Novo Nordisk's payment to [Organisation M] reported in Disclosure UK:

[Image of a spreadsheet showing one payment]

1.1.14. [Organisation N]

Novo Nordisk report payments to [Organisation N] in 2015, 2017, 2018, 2019, 2020, however [Organisation N]'s reports and website suggest that funding was received from Novo Nordisk in 2016 and since these dates. We have also included a resource

published by [Organisation N] in 2023, funded by Novo Nordisk (to be considered an unreported payment if the reason for the funding of the 2021 resources below is because the payment was made in the previous year). Also note that all of **Novo Nordisk's payments to [Organisation N] reported in Disclosure UK were categorised as 'events'**, but some of our evidence below covers education materials, further suggesting these were unreported by Novo Nordisk.

- Understanding Diabetes – information leaflet (2016). “Novo Nordisk funded the development and printing”

[Screenshot showing the above information from the organisation's website or document]

- Novo Nordisk had a timeslot for “Delegate address” at the [Organisation N] annual conference “Diabetes Care: Infinity and Beyond” in 2021. Unclear if this included funding provision.

[Screenshot showing the above information from the organisation's website or document]

- Exploring the Impact of Poor Injection Technique. December 1st 2022. “*Owen Mumford, GlucoRx and Novo Nordisk have provided sponsorship to [Organisation N] to support the costs of running this webinar and its publication.*”

[Screenshot showing the above information from the organisation's website or document]

- CORRECT INJECTION TECHNIQUE IN DIABETES CARE BEST PRACTICE GUIDELINE. March 2021. “Injection Technique Matters – Best Practice in Diabetes Care is supported by [Novo Nordisk logo]” (p. 20)

[Screenshot showing the above information from the organisation's website or document]

- KEY THINGS TO REMEMBER IF YOU USE INJECTABLE MEDICATION TO TREAT YOUR DIABETES. Date of preparation: March 2021. “Injection Technique Matters – Best Practice in Diabetes Care is supported by [Novo Nordisk logo]” (p. 4)

[Screenshot showing the above information from the organisation's website or document]

Insulin and Injection Technique over the last 100 years. November 10th 2022. “[Two named companies] and Novo Nordisk have provided sponsorship to [Organisation N] to support the costs of running this webinar and its publication”

[Screenshot showing the above information from the organisation's website or document]

- [Organisation N] Nursing Conference 2022 - Novo Nordisk was a 'Gold Plus Sponsor'

[Screenshot showing the above information from the organisation's website or document]

- For Healthcare Professionals: INSULIN ADJUSTMENT GUIDELINE YOUR GUIDE TO SAFE INSULIN ADJUSTMENT. February 2023. "Novo Nordisk have sponsored the costs of development and production of resources for both people with diabetes and HCPs on safe insulin adjustment" (p. 2)

[Screenshot showing the above information from the organisation's website or document]

Novo Nordisk's payments to [Organisation N] reported in Disclosure UK:

[Image of a spreadsheet showing 13 payments]

1.1.15. [Organisation O]

Novo Nordisk report one payment to [Organisation O] in 2019, however Novo Nordisk paid for stand space at an event in 2017.

- [Organisation O] 59th Annual Meeting. 2017 "The following sponsors have supported this meeting through a payment to exhibit a stand. It should be noted that these companies have played no part in planning the meeting and [Organisation O] does not endorse any commercial products." – Novo Nordisk listed (p. 2)

[Screenshot showing the above information from the organisation's website or document]

Novo Nordisk's reported payment to [Organisation O] in Disclosure UK:

[Image of a spreadsheet showing one payment]

1.2. Unreported payments to POs

This section (1.2.) considers POs named as recipients by Novo Nordisk at least once between 2015 and 2022. Whilst the Company reports payments to these organisations in some years, we found evidence that additional payments may have been unreported by Novo Nordisk.

1.2.1. [Organisation P]

Novo Nordisk reports payments to [Organisation P] in 2022 however [Organisation P]'s website and reports suggests that a payment was provided in years prior to this as well as 2022. [Organisation P]'s main office is in London, UK.

- World Alzheimer's Month 2021. "All of this would also not be possible without the support of our World Alzheimer's Month sponsors, and a special thanks to ... Novo Nordisk..."

[Screenshot showing the above information from the organisation's website or document]

- World Alzheimer Report 2021 "[Organisation P] would like to thank our corporate partners and donors [Novo Nordisk listed]" (p. 4, published in 2021)

[Screenshot showing the above information from the organisation's website or document]

Novo Nordisk reports making these payments to [Organisation P] during 2022:

[Image showing two payments]

1.2.2. [Organisation Q]

Novo Nordisk reports making payments to [Organisation Q] during 2015, 2016, 2019, 2021, 2022, however [Organisation Q]'s magazines refers to Novo Nordisk sponsorship between these dates as well as during (2015, 2016, 2019, 2021).

- [Organisation Q] Magazine Summer 2017 – "Thanks to our corporate sponsors who provide valuable support: ... Novo Nordisk"

[Screenshot showing the above information]

- [Organisation Q] Magazine Summer 2018 – "Thanks to our corporate sponsors who provide valuable support: ... Novo Nordisk..."

[Screenshot showing the above information]

- [Organisation Q] Magazine Winter 2018 - "Thanks to our corporate sponsors who provide valuable support: ... Novo Nordisk ..."

[Screenshot showing the above information]

- [Organisation Q] Magazine Winter 2020 - "Thanks to our corporate sponsors and supporters: July 2020-Dec 2020 – ... Novo Nordisk ..."

[Screenshot showing the above information]

- [Organisation Q] Magazine Summer 2020 – "Thanks to our corporate sponsors and supporters: Dec 2019 - July 2020 - ... Novo Nordisk..."

[Screenshot showing the above information]

Novo Nordisk's payments to [Organisation Q] reported in Disclosure UK:

[Image of a spreadsheet showing four payments]

1.2.3. [Organisation R]

Novo Nordisk reports payments to [Organisation R] in 2018 and 2019, however [Organisation R]'s website suggests Novo Nordisk provided funding for a 2020 report as well as a 2018 report.

- **CARDIOVASCULAR DISEASE CARE BEST PRACTICE. (2020)**
 “[alphabetised list of five pharmaceutical companies, including Novo Nordisk] have contributed to the funding and production of this document which has been written by [Organisation R] with input from the funding parties”.

[Screenshot showing the above information from the organisation's website or document]

While the above payment for the funding and production of a document could have been reported by Novo Nordisk in the previous year, Novo Nordisk's 2019 PO disclosure only includes a payment to [Organisation R] for corporate membership:

[Image showing one payment to [Organisation R] for 12 months' corporate membership]

1.2.4. [Organisation S]

Novo Nordisk reports payments to [Organisation S] in 2016, 2018, 2019, 2020, however [Organisation S]'s annual accounts report a payment from Novo Nordisk in 2017 as well as 2016, 2018 and 2019. Novo Nordisk currently lists [Organisation S] under 'International collaboration with patient groups', however the link provided does not provide any details of what this collaboration involves, therefore we do not know if payments have been made since 2020. Further, [Organisation S] is headquartered in the UK (and registered with the Charity Commission, [charity number provided]).

- “Incoming resources”, “Novo Nordisk £37,875” (p. 26, annual accounts financial year end 31 December 2017)

[Screenshot showing the above information from the organisation's website or document]

Novo Nordisk's payments to [Organisation S] reported in 2016, 2018, 2019 (respectively):

[Three images showing one payment, two payments and one payment to Organisation S]

Novo Nordisk's payments to [Organisation S] reported in Disclosure UK in 2020:

[Image of a spreadsheet showing one payment]

1.2.5. [Organisation T]

Novo Nordisk reports making one payment to [Organisation T] during 2018, however Novo Nordisk may have supported [Organisation T] activities since then. Whilst we note that it is unclear if [Organisation T] was the ultimate beneficiary of the funding mentioned below, [Organisation T] wrote the introductions for the reports and has Novo Nordisk's logo on the front pages. Note, there are two versions of the '[Named]' report – the content appears to be identical however the funding statement differs. Both are displayed below.

- [Named Report] (“Date of preparation February 2020”) – “The design of this document was supported by Novo Nordisk” (p. 24)

[Screenshot showing the above information]

- [Named Report]. 2020. “Novo Nordisk funded the design of this document, but had no influence over its creation, development or publication. The Language Matters Working Group Members retain full responsibility and editorial control over the content of this document.” (p. 24)

[Screenshot showing the above information]

- [Named]: Media Guidelines (report published in 2020). “Novo Nordisk has been involved in the content, funding and design of this document” (p. 1)

[Screenshot showing the above information]

Novo Nordisk's only reported payment to [Organisation T] since 2015 is during 2018:

[Image showing one payment to Organisation T]

1.2.6. [Organisation U]

Novo Nordisk reports payments to [Organisation U] in 2018, 2019, 2020, 2021, however [Organisation U]'s website and annual accounts state that payments were received in 2022.

Website

- [Named initiative] November 2022. “*Novo Nordisk [and two other pharmaceutical companies] provided sponsorship to [Organisation U] to cover the costs of hosting this series of webinars for [named initiative]. No sponsor has had any influence over the content of the webinars, beyond being invited to speak at individual webinars, and full editorial control rests with [Organisation U].*”

[Screenshot showing the above information from the organisation's website or document]

Accounts (for financial year end 31 December 2022)

- “The week was made possible thanks to sponsorship from Novo Nordisk [and two other pharmaceutical companies] who had no influence over the content of the webinars, beyond being invited to speak at individual webinars. At all times, [Organisation U] had full editorial control.” (p. 10, 2022 annual accounts)

[Screenshot showing the above information from the organisation’s website or document]

- “Patient stories: our partnerships with industry, which gave funders and participants in some of our project work to talk about what it was like working together and with us. Companies participating were Novo Nordisk [and two other pharmaceutical companies].” (p. 9, 2022 annual accounts)

[Screenshot showing the above information from the organisation’s website or document]

Novo Nordisk’s reported payments to [Organisation U] in 2021:

[Image showing two payments]

1.2.7. [Organisation V]

Novo Nordisk reports one payment to [Organisation V] (in 2021), however [Organisation V]’s annual accounts state that they received Novo Nordisk funding in 2015, 2019, 2020, and possibly 2022 too. We have included the link to 2021 to evidence that this was probably not a timing issue.

- Your Journey Living with and managing a [type of condition] (June 2015, version 3) “The printing of this booklet was kindly sponsored by an educational grant from Novo Nordisk” (p. 36).

[Screenshot showing the above information from the organisation’s website or document]

- “[Organisation V] is indebted to those organisations that have funded our work through the year. These include; ... Novo Nordisk Ltd ...” (p. 11, annual accounts y/e June 2019)

[Screenshot showing the above information from the organisation’s website or document]

- “[Organisation V] is indebted to those organisations that have funded our work through the year. These include. ...Novo Nordisk Ltd ...” (p. 10, annual accounts y/e June 2020)

[Screenshot showing the above information from the organisation’s website or document]

- “[Organisation V] is indebted to those organisations that have funded our work through the year. These include. ...Novo Nordisk Ltd ...” (p. 11, annual accounts y/e June 2021)

[Screenshot showing the above information from the organisation’s website or document]

- “Our research work continues. We held our annual update for Pharmaceutical companies virtually in February 2022, and continue to work with companies on specific research and projects. For example, we have worked with Novo Nordisk on their Growth Hormone website & pen recycle launch.” (annual accounts y/e June 2022) – (unclear if this involved a financial exchange) (p. 6)

[Screenshot showing the above information from the organisation’s website or document]

Novo Nordisk’s one payment to [Organisation V] reported in 2021:

[Image showing one payment]

1.2.8. [Organisation W]

Novo Nordisk report payments to [Organisation W] in 2015, 2017, 2018, 2019, 2020, however [Organisation W]’s annual accounts indicate that Novo Nordisk funding was received in 2021/22.

- “Novo Nordisk also added £3500 to their annual donation to help and support our friendship groups. This will be used to help deliver online services for them.” (p. 5, annual accounts y/e 31 March 2022)

[Screenshot showing the above information from the organisation’s website or document]

Novo Nordisk’s most recent reported payment to [Organisation W] in 2020:

[Image showing one payment]

1.3. Unreported payments to charities mentioning obesity registered with Charity Commission

This section (1.3.) considers charities appearing on the Charity Commission website when searching ‘obesity’. **None of these organisations were named as payment recipients** by Novo Nordisk between 2015 and 2022, with the exception of [Organisation AA] which was mentioned in Disclosure UK by the Company.

1.3.1. [Organisation X]

[Organisation X] describes itself as “a society of surgeons and other health professionals (physicians, nurses, dieticians, psychologists and GPs) who specialise in the treatment of severe obesity and its metabolic complications.” ([Organisation X])

website). This aligns with the ABPI definition of a HCO. Novo Nordisk does not report any payments to [Organisation X], however [Organisation X] reports receiving sponsorship for events, journal clubs and webinars from Novo Nordisk in 2021 and 2022.

- Novo Nordisk has provided sponsorship to the [Organisation X] – Charitable Incorporated Organisation ([Organisation X.1]) to contribute towards the running costs of the [Organisation X.1]’s Annual Scientific Meeting (ASM) 2021. Novo Nordisk has had no influence over the creation, development or content of the meeting and full control remains the responsibility of [Organisation X.1] (with the exception of the Novo Nordisk symposium session indicated on the meeting programme).” (July 2021)

[Screenshot showing the above information from the organisation’s website or document]

- Novo Nordisk has provided sponsorship to the [Organisaton X] – Charitable Incorporated Organisation ([Organisation X.1]) to fund the development, delivery and promotion of this webinar. Novo Nordisk has had no influence over the content or agenda for this webinar, and full editorial control remains the sole responsibility of [Organisation X.1]” (March 2021)

[Screenshot showing the above information from the organisation’s website or document]

- “Novo Nordisk has provided sponsorship to the [Organisation X] – Charitable Incorporated Organisation ([Organisation X.1]) to fund the development, delivery and promotion of this journal club. Novo Nordisk has had no influence over the content or agenda for this meeting, and full editorial control remains the sole responsibility of [Organisation X.1].” (October 2021 – original link now broken, current link [provided] uses WayBackMachine)

[Screenshot showing the above information from the organisation’s website or document]

- Novo Nordisk has provided sponsorship to the [Organisation X] – Charitable Incorporated Organisation ([Organisation X.1]) to fund the development, delivery and promotion of this journal club. Novo Nordisk has had no influence over the content or agenda for this meeting, and full editorial control remains the sole responsibility of [Organisation X.1]. (November 2021)

[Screenshot showing the above information from the organisation’s website or document]

- “Novo Nordisk has provided sponsorship to the [Organisation X] – Charitable Incorporated Organisation ([Organisation X.1]) to fund the development, delivery and promotion of this webinar. Novo Nordisk has had no influence over the content or agenda for this webinar, and full editorial control remains the sole responsibility of [Organisation X.1].” (2022).

[Screenshot showing the above information from the organisation’s website or document]

- “Novo Nordisk has provided sponsorship to the [Organisation X] – Charitable Incorporate Organisation ([Organisation X.1]) to contribute towards the running costs of [Organisation X.1]’s Annual Scientific Meeting (ASM) 2022. Novo Nordisk has had no influence over the creation, development or content of the meeting and full control remains the responsibility of [Organisation X.1] (with the exception of the Novo Nordisk symposium session indicated on the meeting programme)”. (May 2022)

[Screenshot showing the above information from the organisation’s website or document]

1.3.2. [Organisation Y]

[Organisation Y] describes itself as “a non-profit, user led, advocacy organisation, dedicated to empowering people affected by obesity by giving them a public voice” ([Organisation Y website]) which aligns with the ABPI definition of a PO. Novo Nordisk do not report any payments to [Organisation Y], however [Organisation Y]’s annual accounts and website state they received funding from Novo Nordisk.

Annual accounts

- Unrestricted funds – Donation from Novo Nordisk - £50,000 (2018/19 – financial year end 31 August 2019) (p. 7).

[Screenshot showing the above information from the organisation’s website or document]

Website

- “We gratefully acknowledge the unrestricted underwriting of [Organisation Y]’s activities provided by: [named pharmaceutical company], Novo Nordisk UK” (no date but it is different to the companies reported in 2018/19 accounts, suggesting this refers to a different time period)

[Screenshot showing the above information from the organisation’s website or document]

- [Organisation Y]’s AGM meeting minutes for 2020 mention “Novo Nordisk are particularly interested in patient experience being used in training HCPs. Novo Nordisk might fund some patient perspective lead training for World Obesity Day.” It is not clear whether this funding was ever provided.

[Screenshot showing the above information from the organisation’s website or document]

1.3.3. [Organisation Z]

[Organisation Z] describes itself as “a self- regulating, professional association engaged in the provision of weight management solutions; to regulate and monitor

best clinical practice in the private clinic sector; interact with Government, The MHRA and NHS; provide the public with accurate information on treatments available and work with other professional bodies in the treatment of obesity” ([Organisation Z]’s charity page). This description aligns with the ABPI definition of a HCO. Novo Nordisk does not report any payments to [Organisation Z] however [Organisation Z] mentions Novo Nordisk in its annual accounts.

- “Sponsorship activities related to sponsorship from Novo Nordisk. The Association hopes that other relevant stakeholders in this sector will provide sponsorship in future years alongside Novo Nordisk” (p. 4) and “sponsorship income totally £28,668 was kindly received from Novo [sic] Nordisk” (p. 3, financial year end 31 December 2020)

[Screenshot showing the above information from the organisation’s website or document]

- “The company also agreed sponsorship from Novo Nordisk which allowed more activity to be planned for the financial year ending 31 December 2021 (the sponsorship is expected to be provided to 31 October 2021).” (p. 3, reported in financial year end December 2020 accounts)

[Screenshot showing the above information from the organisation’s website or document]

1.3.4. [Organisation AA]

[Organisation AA] was included in Novo Nordisk’s payments in Disclosure UK, but we identified some payments that are either missing or were reported late. Novo Nordisk originally reported payments to [Organisation AA] from 2015 through to 2020 (inclusive), however [Organisation AA]’s annual review and website indicate they received funding from Novo Nordisk for activities in 2021 and 2022. Novo Nordisk has now reported payments to [Organisation AA] in Disclosure UK in 2021, however these were **reported late** as they were not in the database we downloaded (as specified on page 2 of our complaint), constituting a breach of Clause 31 of the ABPI Code. The total value of the payments reported late in 2021 was £1,154,259.2 (source: Disclosure UK online search). We have included information about the 2021 payments we identified in our investigation (these are the late payments) and 2022 payments (these are the unreported payments).

- [Named Report]. “Novo Nordisk, who provided the unrestricted educational grant received by [Organisation AA] that supported this work, had no role in the study design, data collection, data analysis, data interpretation, or writing of the report” (p. 17, 2021).

[Screenshot showing the above information from the organisation’s website or document]

- “To launch the new [Organisation AA] and [named organisation] global obesity economics research, including a methodology for calculating impact or cost of inaction on continuing not to address obesity, validated by an

advisory group including World Bank and OECD, we co-hosted a side event with the Danish Ministry of Foreign Affairs, UNICEF and with support from Novo Nordisk on 21 September.” (p. 10, annual review and report financial year end December 2022)

[Screenshot showing the above information from the organisation’s website or document]

- “Support for the present report came from [Organisation AA] funds which include an unrestricted educational grant from Novo Nordisk. Novo Nordisk was not involved in the conception and design of the study methodology or in the analysis and interpretation of results” (p.2, 2022)

[Screenshot showing the above information from the organisation’s website or document]

- Each of our [named initiative] Schools were run solely by ourselves with funding from Novo Nordisk and [named pharmaceutical company], which enabled us to reach vast and diverse audiences from across the globe and increase the brand awareness of named initiative. (p. 6, 2022)

[Screenshot showing the above information from the organisation’s website or document]

[Organisation AA]’s Annual Review and Report 2022 also includes a statement highlight the extent of Novo Nordisk’s recent funding:

- “In early 2023 a key donor, Novo Nordisk, communicated that they would be delayed in honouring their funding commitments totalling over GBP 900,000 due to a possible breach of ABPI standards. This delay has continued and it is prudent to plan as if the committed funding is not going to materialise. This has created a sudden, significant funding gap in [Organisation AA]’s financial plan for 2023 and possibly for subsequent years.” (p. 25, 2022)

[Screenshot showing the above information from the organisation’s website or document]

Novo Nordisk’s payments to [Organisation AA] in Disclosure UK (before the late payments were added):

[Image of a spreadsheet showing 20 payments]

1.4. HCOs and POs missing from Novo Nordisk’s disclosure identified during investigative web searches

This section (1.4.) considers all types of HCOs and POs. **None of these organisations were not named as recipients by Novo Nordisk** between 2015 and 2022 but appear to have received payments from the Company during this period.

1.4.1. [Organisation BB]

[Organisation BB] describes itself as: “We are a non-profit organisation open to all healthcare professionals. We stand up for equality and Justice. Since its conception in 1996 with the initial aim of supporting international medical graduates, [Organisation BB] has grown in stature and influence to become one of the largest organisations of its type in the country. We are represented through 13 divisions covering all regions of the UK as well as 10 specialty forums.” ([Organisation BB] website). This description aligns with the ABPI definition of a HCO. Payments to [Organisation BB] are reported by at least one other pharmaceutical company in Disclosure UK.

- [Organisation BB] Wales Annual Conference – 20th January 2018 – [location]. “This conference is supported by [list of eight pharmaceutical companies including Novo Nordisk, and a named university].”

[Screenshot showing the above information from the organisation’s website or document]

1.4.2. [Organisation CC]

[Organisation CC] describes itself as “As an organisation, we pride ourselves as a bespoke organisation committed to working in specific disease areas. Our priority is to support the improvement of long-term conditions and sharing this at the national level to help reduce the disparity of care across patient populations. We instil confidence, passion, and innovation in healthcare professionals through education delivery and various other modalities. The pandemic has also led to a fast transition towards utilising digital space to deliver educational training across the NHS and the pharmaceutical industry. Solutions to tackle these key challenges has become a critical priority for [Organisation CC] since March 2020. We have invested substantially into new digital technologies and platforms to showcase our unique approach and increase accessibility to healthcare professionals and patients. These digital reference sources are already proving to be invaluable from a practical perspective. They are already supporting healthcare professionals in their daily clinical practice to deliver outstanding care to patients during COVID-19 and beyond.” ([Organisation CC] profile). This description aligns with the ABPI definition of a HCO.

- Practical perspective in managing patients due to the COVID-19 backlog. “Novo Nordisk has provided sponsorship to [Organisation CC] to support the costs of running this event. Novo Nordisk has no influence over the event arrangements, agenda, or the selection of speakers”.

[Screenshot showing the above information from the organisation’s website or document]

1.4.3. [Organisation DD]

[Organisation DD] describes itself as: “Professional membership is open and free to all NHS and academic professionals involved in the care of patients with cardiovascular and kidney disease, including cardiologists/cardiovascular physicians, nephrologists, diabetologists, general practitioners and allied nursing and clinical

scientists.” This description aligns with the ABPI definition of a HCO. Payments to [Organisation DD] are reported by at least one other pharmaceutical company in Disclosure UK.

- “[Organisation DD] would like to thank the following companies for their generous support of the 2017 meeting: ... Novo Nordisk...”

[Screenshot showing the above information from the organisation’s website or document]

- “[Organisation DD] would like to thank the following companies for their generous support of the 2018 meeting: ... Novo Nordisk...”

[Screenshot showing the above information from the organisation’s website or document]

- “[Organisation DD] would like to thank the following companies for their generous support of the 2019 meeting: ... Novo Nordisk...”

[Screenshot showing the above information from the organisation’s website or document]

- “This independent meeting was sponsored by... Novo Nordisk...” (2021)

[Screenshot showing the above information from the organisation’s website or document]

- “This independent meeting was sponsored by... Novo Nordisk...” (2022)

[Screenshot showing the above information from the organisation’s website or document]

1.4.4. [Organisation EE]

[Organisation EE] describes itself as: “[Organisation EE] will aim to develop a care model for children and young people with diabetes that enables consistent access to high quality care no matter where it is delivered across the [region] of England. Each [element of Organisation EE] Diabetes Network is a collaborative group of [children and young people’s] diabetes teams and other stakeholders coming together to share good practice to improve [children and young people’s] diabetes care. It is expected that information and products will be shared freely and within the spirit of collaborative working both within the network and the wider NHS system.” ([Organisation EE] website). This description aligns with the ABPI definition of a HCO. Novo Nordisk reports payments to [Organisation EE] for [region] of England (in 2019 and 2020) and [region] and [region] (in 2022), however the Company does not report any payments to [Organisation EE].

- [Organisation EE] Nurses’ Forum (June 2021) – “Novo Nordisk has sponsored the cost of the venue hire and subsistence. Novo Nordisk has

been provided with a slot on the agenda as indicated and has had no influence over the remaining agenda items”

[Screenshot showing the above information from the organisation’s website or document]

- [Organisation EE] Regional Meeting (September 2021) – “Novo Nordisk has sponsored the cost of the venue hire and subsistence. Novo Nordisk has been provided with a slot on the agenda as indicated and has had no influence over the remaining agenda items”

[Screenshot showing the above information from the organisation’s website or document]

1.4.5. [Organisation FF]

[Organisation FF] describes itself as: “[Organisation FF] offers support and education to families affected by [named condition] in the UK. Our goals are to decrease isolation for those living with [named condition], support families, and raise awareness of [named condition] in the UK.” ([Organisation FF] website). This description aligns with the ABPI definition of a PO.

- “Novo Nordisk for contributing towards our overall core costs enabling our charity to continue delivering the much needed support to our beneficiaries” (p. 14, annual report 2021/2022)

[Screenshot showing the above information from the organisation’s website or document]

- Fund names: Novo Nordisk, Type: Restricted, Purpose and Restrictions: Overall objectives [sic] and core costs, Income £ 10,000. (p. 30, annual report 2021/2022)

[Screenshot showing the above information from the organisation’s website or document]

1.4.6. [Organisation GG]

[Organisation GG] describes itself as “a new network dedicated to community and district nursing with an annual National Conference. [Organisation GG] aims to support community nursing by sharing best practice, innovations, case studies and the latest news through events, email newsletters and podcasts. Launched in September 2022, the centrepiece of this new online community is our free-to-attend, CPD accredited, National Conference. This features leading speakers and insightful live presentations on hot topics followed by Q&As.” ([Organisation GG] website). This description aligns with the ABPI definition of a HCO.

- 2022 National Conference Friday, September 16. “Sponsor disclaimer: Novo Nordisk has provided sponsorship to the ‘[Organisation GG] CONFERENCE 2022’ to cover the development costs of project administration and management. Novo Nordisk has had no influence over the creation,

development or content of the [Organisation G] CONFERENCE 2022 and full control remains the full responsibility of [Organisation G].”

[Screenshot showing the above information from the organisation’s website or document]

1.4.7. [Organisation HH]

[Organisation HH] describes itself as: “the local voice for all community pharmacies (chemists) in [region]. We represent over 530 pharmacies including single handed independent pharmacies and those owned by bigger chains. Pharmacies in our area employ in the region of 5000 staff. The NHS and local government consult [Organisation HH] on all matters relating to the NHS and public health work undertaken by community pharmacy in [region]. We are also responsible for advancing the enhanced role of community pharmacy to ensure it plays an active part in promoting health and wellbeing across [region].” ([Organisation HH] website). This description aligns with the ABPI definition of a HCO. Novo Nordisk reports payments to [organisation with similar name but for a different region of the UK] but not [Organisation HH].

- Zoom Online Meeting – “This meeting is being sponsored by Novo Nordisk Ltd” (p.1, November 2021)

[Screenshot showing the above information from the organisation’s website or document]

1.4.8. [Organisation II]

[Organisation II] describes itself as: “Since our creation in 2019 we seek to identify and promote innovation and innovators by leveraging a network of professionals and experts active around the world. Our fast growing membership includes 1,500+ healthcare professionals and business executives. We welcome the contribution of champions and partners interested in giving a voice to diabetes innovators and supporting our activities.” ([Organisation II] website). This description aligns with the ABPI definition of a HCO, however the organisation’s activities may also be interpreted as meeting the definition of a PO – [Organisation II] features in the disclosures of payments to POs in at least one other company’s disclosures.

- DIABETES CARE FOR PEOPLE OF [named ethnic origin] ORIGIN. EVERYTHING YOU ALWAYS WANTED TO ASK, 16-30 June 2021. Novo Nordisk has provided sponsorship to [Organisation II] to support the costs of running this virtual event series. Novo Nordisk has not had any input into selection of speakers, programme content or agendas.”

[Screenshot showing the above information from the organisation’s website or document]

1.4.9. [Organisation JJ]

[Organisation JJ] describes itself as: “We are the statutory committee representing people who provide community pharmacy services in [list of towns in the UK].” This aligns with the ABPI definition of a HCO ([Organisation JJ] website)

- Community Pharmacy + AGM 2021/22. “Novo Nordisk are sponsoring the AGM by inclusion on all AGM documentation” (appears on every page of the 4 page document).

[Screenshot showing the above information from the organisation’s website or document]

- [Organisation JJ] Virtual Contractor Event The Year Ahead for Community Pharmacy + AGM 2021/22. “[Organisation JJ] are grateful to the following sponsors for agreeing to sponsor the event. Novo Nordisk has made a financial contribution for corporate advertising. These companies have contributed towards the cost of this event but have not had any involvement with speaker selection or content. Novo Nordisk”

[Screenshot showing the above information from the organisation’s website or document]

1.4.10. [Organisation KK]

[Organisation KK] describes itself as: “At [Organisation KK] we aim to support people living with diabetes and health care professionals with best practice advice and guidance. We know it can be challenging living with diabetes and supporting people living with diabetes which is why we created these clear and helpful tools to ensure best practise is available to everyone to practice.” ([Organisation KK] website)

- Best Practice Guide for Conducting Virtual Multi-Disciplinary Team Meetings within Diabetes Care (2022). “This Best Practice Guide has been created by an independent Multi-Disciplinary Team. Novo Nordisk provided sponsorship for the development and production of this guide but has had no input into the content” (p. 1)

[Screenshot showing the above information from the organisation’s website or document]

1.4.11. [Organisation LL]

[Organisation LL] describes itself as: “We are an international non-profit membership organisation supporting national [named condition] associations, as well as people with [named condition], their families and the professionals who work with them. As an international umbrella organisation we bring together the national [named condition] associations, and for countries where there are no formal associations, we support medical and parent delegates as part of our global community. [Organisation LL] has contacts in over 120 countries, and is a world-wide parent-led support organisation. One of our key projects is to offer free diagnosis for [named condition]

in countries where this is not available.” ([Organisation LL] website). This aligns with the ABPI definition of a PO. [Organisation LL] is based in the United Kingdom (with an international scope) and is a registered charity with the Charity Commission for England and Wales.

- “During the year we have received the most generous support from the Friends of [Organisation LL] (USA) chaired by [named], and also commitments for specific projects from [named pharmaceutical company] and Novo Nordisk. My thanks to them, their support has made much of what we have done possible.” (p. 4, annual accounts financial year end 31 December 2020)

[Screenshot showing the above information from the organisation’s website or document]

- “Restricted funds”, “[Organisation LL] at 30” Income £34,447 (p. 20, annual accounts financial year end 31 December 2021)

[Screenshot showing the above information from the organisation’s website or document]

- “Deferred income relates to sponsorship income received for the 2022 conference to be held in Ireland. Sponsorship has been received from [two named companies] and Novo Nordisk.” (p. 19, annual accounts financial year end 31 December 2021).

[Screenshot showing the above information from the organisation’s website or document]

- “[Organisation LL] at 30 - Funds received from Novo Nordisk to prepare for the next 30 years supporting people with PWS and their families. Due to the effect of the pandemic on [Organisation LL]’s services, which prevented a face-to-face event, Novo Nordisk agreed that the unspent portion of their grant could instead be used as sponsorship towards the 2022 conference. £23,314 of the grant funding has therefore been disclosed as sponsorship income, which is deferred to 2022 (see note 9).” (p. 22, annual accounts financial year end 31 December 2021).

[Screenshot showing the above information from the organisation’s website or document]

1.4.12. [Organisation MM]

[Organisation MM] describes itself as “a ‘self-regulating’ body for the [named specialty] sector in the United Kingdom and is a registered UK Charity. The concept of [Organisation MM] was envisioned and inspired by work commissioned by Health Education England on behalf of NHS England and the Department of Health (2016). [Organisation MM]’s charitable status reflects the overarching not-for-profit mission of [Organisation MM] which is to improve patient safety and public protection within the [named specialty] sector.” ([Organisation MM] website). This aligns with the ABPI

definition of a HCO. Payments to [Organisation MM] are reported by at least one other pharmaceutical company in Disclosure UK.

- “During 2022 [Organisation MM] entered into an agreement to work with Novo Nordisk as a new corporate member. Novo Nordisk is a leading global healthcare company whose purpose is to drive change to defeat diabetes, obesity, rare blood and endocrine disorders, to improve the lives of millions of people in the UK. The focus of our partnership recognises the important role that [named specialty] practitioners make in weight management and in fighting obesity. [Organisation MM] acknowledges that weight management is an integral component of [named specialty] practice and has agreed that the application of injectable medicines for the purpose of weight management should bring this specialism into ‘scope’ within the new proposed licence for non-surgical practice in England.” (p. 14, annual accounts, financial year end December 2022)

[Screenshot showing the above information from the organisation’s website or document]

- “The transaction of [Organisation MM]’s functions is dependent upon receipt of charitable donations received from a wide range of stakeholders in the form of pro bono goods and services and in the form of financial contributions. [Organisation MM] gratefully acknowledges the significant support and charitable assistance provided by its multiple sponsors: ... Novo Nordisk” (p. 10, annual accounts, financial year end December 2022)

[Screenshot showing the above information from the organisation’s website or document]

1.4.13. [Organisation NN]

[Organisation NN] describes itself as: “Our team of dedicated healthcare professionals create tailored behaviour and lifestyle change programs to support patients in their journey to prevent, manage and treat obesity, type 2 diabetes, pre-diabetes and other cardiometabolic conditions. The safety and efficacy of our digital therapeutic programmes are well-supported by extensive evidence from randomised controlled trials (RCTs) and other clinical studies. Headquartered in [two named locations], [Organisation NN] is at the forefront of delivering industry-leading lifestyle change and chronic disease management programmes across Europe. Our collaborations with healthcare systems, including the NHS, as well as partnerships with some of the world’s largest life science companies and health insurers allow us to impact lives on a large scale.” ([Organisation NN] website). This description aligns with the ABPI definition of a HCO.

- [Organisation NN] supports national weight loss service with [named pharmacy chain] (2020). “The funding for exclusive access to the [Organisation NN] digital coaching has been provided by Novo Nordisk”

[Screenshot showing the above information from the organisation’s website or document]

- Life Science. “Through partnerships with leading life science companies such as Novo Nordisk and [named pharmaceutical company], [Organisation NN] provides personalised patient support programmes to people living with obesity, type 2 diabetes and cardiovascular diseases.” (no date)

[Screenshot showing the above information from the organisation’s website or document]

1.4.14. [Organisation OO]

[Organisation OO] describes itself as: “Over 20,000 Healthcare Professionals trained every year. The first ‘Hot Topics’ course was held in London in September 1998 and from those small beginnings has grown today’s business which provides CPD training for over 20,000 Primary Care healthcare professionals per year. Our presenting team, led by Dr [redacted name] in [location], are all NHS GPs and Nurses who are recognised nationally and internationally within their area of expertise and work tirelessly to maintain a position at the forefront of modern practice... The team of presenters at [Organisation OO] are all practicing GPs with a genuine passion and enthusiasm for General Practice which is reflected in the teaching style at our courses.” This aligns with the ABPI definition of a HCO. Payments to [Organisation OO] are reported by at least one other pharmaceutical company in Disclosure UK.

- Hot Topics Diabetes Clinic - Tuesday 5th July 2022. “Please note: Novo Nordisk has provided sponsorship to [Organisation OO] to support the costs of running this webinar. Novo Nordisk has had no influence over the webinar arrangement, agenda, presentation or selection of speakers”

[Screenshot showing the above information from the organisation’s website or document]

- Hot Topics NASH Non-Alcoholic Fatty Liver Disease Clinic - Live Webinar - Tuesday 6th December 2022. “Novo Nordisk has provided sponsorship to [Organisation OO] to support the costs of running this Webinar. Novo Nordisk has had no influence over the Webinar arrangements, agenda, presentation or selection of speakers.”

[Screenshot showing the above information from the organisation’s website or document]

1.4.15. [Organisation PP]

[Organisation PP] describes itself as: “We are a registered charity dedicated to helping families and individuals affected by [named condition], a complex genetic disorder affecting around 1 in 2500 births in the UK. Our key aims are to provide support, raise awareness, and instigate research” ([Organisation PP] Homepage). The majority of its members are patients and carers: “We are a small charity packing a mighty punch! With a membership of over 650 individuals and families affected by [named condition], and a further 100 Associate Members who have a professional

interest in the condition, we operate remotely as a small team consisting of a part-time charity manager and a board of trustees.” (Meet the [Organisation PP] Team). The definition aligns with the ABPI definition of a PO.

- “This was helped in no small way by the generous support received from members and particularly from Novo Nordisk who funded 6 months staff resource for the charity.” (p. 3, annual accounts year end March 2021)

[Screenshot showing the above information from the organisation’s website or document]

- “Grants received, included in the above, are as follows:” “Novo Nordisk”, “[£]10,820” (p. 10, annual accounts year end March 2021)

[Screenshot showing the above information from the organisation’s website or document]

- “Grants received, included in the above, are as follows:” “Novo Nordisk”, “[£]10,900” (p. 9, annual accounts year end March 2022)

[Screenshot showing the above information from the organisation’s website or document]

1.4.16. [Organisation QQ]

[Organisation QQ] describes itself as: “a communications and events company working with healthcare professionals and the pharmaceutical industry. In partnership with a range of organisations we offer clinical and management skills training opportunities. Meetings and events that we run comply with the ABPI Code of Practice.” ([Organisation QQ] website). [Organisation QQ] also organises a conference ([named initiative]) with another HCO – [named organisation]. None of these organisations are mentioned in Novo Nordisk’s Disclosure UK payments despite their descriptions aligning with the ABPI definition of a HCO. [Organisation QQ] is mentioned in multiple other companies’ Disclosure payments.

- Medicines Optimisation in Cardiovascular Medicine 19th September 2017.
 - “MANAGING CARDIOVASCULAR RELATED CO-MORBIDITIES IN PATIENTS WITH TYPE 2 DIABETES: ADOPTING A MULTI-FACTORIAL APPROACH Anstey Room 3 & 4 [redacted] *Novo Nordisk has organised and fully funded this symposium.*” (p. 1)

[Screenshot showing the above information from the organisation’s website or document]

- “This event has been funded by the following companies through event sponsorship, sponsored satellites, posters and exhibition stands. These companies have had no input into the design or content of the conference agenda (except from sponsored satellite sessions).” “Satellite Sponsor [Novo Nordisk logo]” (p. 2)

[Screenshot showing the above information from the organisation's website or document]

- National Forum 2017. Patient-centred pharmacy. "This event has been funded by the following companies through event sponsorship, sponsored satellites, posters and exhibition stands. These companies have had no input into the design or content of the conference agenda (except from sponsored satellite sessions). [Novo Nordisk]". (p. 2)

[Screenshot showing the above information from the organisation's website or document]

- CLINICAL LEADERSHIP IN PHARMACY PROGRAMME IN [region] 2018-2019. "This programme is sponsored by the following companies:- [two named pharmaceutical companies] and Novo Nordisk" (p. 1).

[Screenshot showing the above information from the organisation's website or document]

- Medicines Optimisation in Diabetes 15th May 2018
 - REDUCING CV RISK FOR PATIENTS WITH TYPE 2 DIABETES – LATEST EVIDENCE FOR DIABETES MEDICATIONS [redacted] This satellite session has been organised and funded by Novo Nordisk. (p. 1)

[Screenshot showing the above information from the organisation's website or document]

- "This event will be funded by the pharmaceutical industry through the purchase of exhibition stands. These companies have had no input into the design or content of the workshop agenda but will be in attendance on the day. [Novo Nordisk logo]" (p. 2)

[Screenshot showing the above information from the organisation's website or document]

- Medicines Optimisation in Cardiovascular. 2nd October 2018.
 - "TREATING PATIENTS WITH DIABETES IN MY POST MI MEDICINES OPTIMISATION CLINIC [redacted] Novo Nordisk has organised and fully funded this symposium but has had no input into the content of the slides. Novo Nordisk products may be discussed during this symposium and prescribing information will be available." (p. 1)

[Screenshot showing the above information from the organisation's website or document]

- "This event has been funded by the following companies through event sponsorship and/or exhibition stands and posters. These companies

have had no input into the design or content of the workshop agenda (aside from sponsored satellite sessions) but will be in attendance on the day.” “Headline Sponsor [Novo Nordisk logo]” “Exhibition Stand Sponsors [Novo Nordisk logo]” (p. 2)

[Screenshot showing the above information from the organisation’s website or document]

- [Named initiative]. [Location] 02 November 2018.
 - “UNDERSTANDING THE CHANGING AGENDA IN THE NHS AND IDENTIFYING FACTORS INFLUENCING THE ROLE OF PHARMACISTS IN PRIMARY AND SECONDARY CARE AND COMMUNITY [meeting room] [redacted] This symposium is sponsored by Novo Nordisk who have had no input into the content of the slides.” (p. 2)

[Screenshot showing the above information from the organisation’s website or document]

- “This event has been funded by the following companies through the purchase of event sponsorship, exhibition stands, posters or sponsored satellite sessions. These companies have had no input into the design or content of the conference agenda.” “Exhibitor Stand Sponsors: [Novo Nordisk logo]” (p. 3)

[Screenshot showing the above information from the organisation’s website or document]

- Pharmacy Futures in Diabetes workshops (2019). “This series of workshops has been fully funded by Novo Nordisk. Pharmacy Management has organised the programme in partnership with Novo Nordisk Ltd.” (p. 9).

[Screenshot showing the above information from the organisation’s website or document]

- [Named initiative] 8 November 2019.
 - “Diabetes Care - An Opportunity for Pharmacy Services [redacted], Senior Pharmacist, Diabetes and Endocrinology This session has been fully funded and organised by Novo Nordisk Ltd.” (p. 1)

[Screenshot showing the above information from the organisation’s website or document]

- “This event has been funded by the following companies through the purchase of event sponsorship, exhibition stands, posters or sponsored satellite sessions. These companies have had no input into the design or content of the conference agenda.” “Sponsors [Novo Nordisk logo]” (p. 3)

[Screenshot showing the above information from the organisation’s website or document]

1.4.17. [Organisation RR]

[Organisation RR] describes itself as: “Through digital marketing and development solutions, transformational online courses, and high-quality learning modules, we help Community Pharmacy, globally, harness new technologies and digital tools that will propel their businesses into the future. The underlying principle that [Organisation RR] exists upon is helping people. We want to help Community Pharmacies and their teams, which will, in turn, help those they serve. We’re trying to cement Community Pharmacy as the most accessible face-to-face and digital holistic healthcare provider there is.” ([Organisation RR] website). This description aligns with the ABPI definition of a HCO.

- “[Organisation RR] worked together with Novo Nordisk, creating a webinar series and educating pharmacists on how they can market their weight management clinic effectively and ethically”

[Screenshot showing the above information from the organisation’s website or document]

1.4.18. [Organisation SS]

[Organisation SS] describes itself as: “the unique new digital platform for the community of healthcare professionals who care for millions of patients in primary care. It’s free to join and with the support of experts across this diverse spectrum of diseases and conditions, and offers easy access to authoritative knowledge and understanding.” ([Organisation SS] website). This aligns with the ABPI definition of an HCO. [Organisation SS] reports sponsorship from Novo Nordisk and also sponsorship from Novo Nordisk via its parent organisation ([Organisation SS.1]). Payments to both [Organisation SS] and [Organisation SS.1] are included in other companies’ payment disclosures in Disclosure UK, further evidencing that Novo Nordisk failed to report relevant payments.

- Clinical CRAFT cards: Insulin essentials for type 2 diabetes [2022 update]. “This educational resource has been sponsored by Novo Nordisk. The content generation and development has been provided independently by a qualified nurse with a special interest in diabetes on behalf of [Organisation SS] who is responsible for the content balance, current practice and evidence.”

[Screenshot showing the above information from the organisation’s website or document]

- Insulin in Type 2 Diabetes The Essentials. Webinar Thursday 12th July (2022). “Novo Nordisk has provided sponsorship to [Organisation SS.1], on behalf of [Organisation SS], to fund this educational programme for healthcare professionals. Novo Nordisk has had no involvement in the content

or delivery of this programme, which has been overseen independently by a qualified nurse with a specialist interest in diabetes.”

[Screenshot showing the above information from the organisation’s website or document]

- Essentials of insulin (1/3) – Demystifying insulin in primary care. Tuesday 29th September. (2022) “Novo Nordisk and [named pharmaceutical company] have provided sponsorship to [Organisation SS.1] to support the costs of running the series of Insulin essentials webinars and e-learning modules. Novo Nordisk and [named pharmaceutical company] have had no input into the webinar content or any of the associated materials.”

[Screenshot showing the above information from the organisation’s website or document]

- Essentials of insulin (2/3) – Making the most of insulin. Tuesday 13th October (2022). “Novo Nordisk and [named pharmaceutical company] have provided sponsorship to [Organisation SS.1] to support the costs of running the series of Insulin essentials webinars and e-learning modules. Novo Nordisk and [named pharmaceutical company] have had no input into the webinar content or any of the associated materials.”

[Screenshot showing the above information from the organisation’s website or document]

- Essentials of insulin (3/3) – Maximising the benefits: Minimising risks. Tuesday 13th October (2022). “Novo Nordisk and [named pharmaceutical company] have provided sponsorship to [Organisation SS.1] to support the costs of running the series of Insulin essentials webinars and e-learning modules. Novo Nordisk and [named pharmaceutical company] have had no input into the webinar content or any of the associated materials.”

[Screenshot showing the above information from the organisation’s website or document]

1.4.19. [Organisation TT]

[Organisation TT] describes itself as: “the membership body for paediatricians in the UK and around the world. Founded in 1996 and now with about 22,000 members in the UK and internationally, we play a major role in postgraduate medical education, professional standards, research and policy.” ([Organisation TT] website). This description aligns with the ABPI definition of a HCO. We also identified another organisation within [Organisation TT] (hosted on their website) – [Organisation TT.1] – which also reports a grant from Novo Nordisk which has not been disclosed by the Company (see final bullet point below). Payments to [Organisation TT] and [Organisation TT.1] are reported by at least one other pharmaceutical company in Disclosure UK.

- “In the financial year 2020-21, [Organisation TT] received the following grants and donations in support of its activities. These grants and donations provided support for research on retention in paediatrics, work on reducing health inequalities for children and young people with asthma, an update of the Medicines for Children information leaflets, webinars on childhood obesity and research to assess the impact of COVID-19 on children and young people.”, “Novo Nordisk £15,210” (p. 16, annual accounts year end 31 August 2021)

[Screenshot showing the above information from the organisation’s website or document]

- “Partners and Funders... Novo Nordisk...” (p. 33, Impact Report 2022)

[Screenshot showing the above information from the organisation’s website or document]

- “The launch of the Rare Disease Development Fund has got off to a good start with an educational grant from Novo Nordisk to deliver a webinar on type 2 diabetes.” (p. 3, [Organisation TT.1] Annual Report 2019-2020).

[Screenshot showing the above information from the organisation’s website or document]

1.4.20. [Organisation UU]

[Organisation UU] describes itself as: “[Organisation UU] supports our hospitals, our NHS colleagues, our patients and our researchers. From small acts of kindness to huge investments in discovery and innovation, everything we do changes lives for the better. Our extraordinary volunteers enrich the experience of patients and the support they provide to NHS staff is transformational. We’re there when patients need us, thanks to the services we provide. And the grants that we make help our hospitals to accelerate vital medical research and invest in innovations to help patients and staff. All this is made possible by the generosity of our supporters who help our hospitals go further and faster than the NHS could do alone” ([Organisation UU] website). This aligns with the ABPI definition of a HCOs. Payments to [Organisation UU] are reported in Disclosure UK by at least one other pharmaceutical company.

- “[Organisation UU] is so grateful to all who have supported us in the last year. Without our donors, partners and volunteers we could not deliver the services we provide. In particular, our special thanks to: [Novo Nordisk listed]” (p. 5, annual report financial year end March 2016)

[Screenshot showing the above information from the organisation’s website or document]

- “[Organisation UU] gratefully acknowledges the generosity of all the individuals, trusts, foundations and organisations who have so generously supported us this financial year. The support we receive from donors, volunteers and partners underpins the delivery of the services we provide. In

particular, our special thanks to: [Novo Nordisk listed]" (p. 33, annual report financial year end March 2017)

[Screenshot showing the above information from the organisation's website or document]

1.4.21. [Organisation VV]

[Organisation VV] describes itself as: "the professional membership body for pharmacists and pharmacy. ([Organisation VV] website)". This description aligns with the ABPI definition of a HCO. Payments to [Organisation VV] are reported by other pharmaceutical companies in Disclosure UK.

- Medicines Safety Conference. Invitation to Practice. Wednesday 29th November. "Many thanks to our 2017 partners and exhibitors for supporting the Medicines Safety Conference [three pharmaceutical companies] Novo Nordisk..." (p. 3)

[Screenshot showing the above information from the organisation's website or document]

1.4.22. [Organisation WW]

[Organisation WW] describes itself as: "[Organisation WW]'s mission, since forming in 2007, has been to transform and simplify healthcare delivery, recognising that medicines are inevitably at the core of patient care. We apply our combined expertise in pharmacy, strategic medicines commissioning, and change management to help health systems to redesign services and optimise both the clinical and non-clinical workforce." ([Organisation WW] website). This aligns with the ABPI definition of a HCO. Payments to [Organisation WW] are reported in Disclosure UK by other pharmaceutical companies but not Novo Nordisk despite their partnership dating back to 2016 (see below).

- "Novo Nordisk has been working with [Organisation WW] since 2016 to support NHS organisations, to optimise their pathways and clinical services, using the [Organisation WW] proprietary 4D™ methodology in facilitated stakeholder meetings. This started with [Organisation WW]'s consultancy and expertise in delivering 4D™ change programmes. Due to the success of this approach, we have now rolled out an intensive upskilling programme for our field-based market access team, whereby they become accredited to apply the 4D™ methodology to support service optimisation. I've enjoyed the collaborative approach with [Organisation WW] to create market access solutions to meet both our business and NHS customer needs" ([Organisation WW] website)

[Screenshot showing the above information from the organisation's website or document]

- Implementing the PCN DiaST Vision for Diabetes. Tuesday 5th October 2021. "This programme is funded by Novo Nordisk. This webinar has been funded

by Novo Nordisk. Speakers have not been paid to participate in this webinar. Novo Nordisk has not had any input into the content or involvement in the creation of these materials.”

[Screenshot showing the above information from the organisation’s website or document]

- Supporting GP clinical pharmacists in Scotland to manage patients with type 2 diabetes. Thursday 25th November 2021. “This webinar has been funded by Novo Nordisk. Novo Nordisk has not had any input into the content or involvement in the creation of this material.”

[Screenshot showing the above information from the organisation’s website or document]

- Navigating NICE [NG28] Type 2 Diabetes Guideline for your Population Virtual Workshop Tuesday 17th May 2022. “All elements of this programme have been sponsored by Novo Nordisk, including the online e-learning platform, virtual workshops and online implementation resources. Novo Nordisk has not had any input into the content or involvement in the creation of these materials. All materials have been developed independently by [Organisation WW] and [named group].”

[Screenshot showing the above information from the organisation’s website or document]

1.4.23. [Organisation XX]

[Organisation XX] describes itself as: “a registered charity founded in 1999 to promote good health in the UK’s [named ethnic group] communities. We are one of the UK’s leading British [named ethnic group] health charities. Our mission is to assist persons living in the U.K., particularly those of [named ethnic origin], who are experiencing conditions of sickness, hardship or distress in particular by supporting organizations; implementing and establishing developmental projects which serve the needs of those persons and improve their conditions of need.” ([Organisation XX] website). This description aligns with the ABPI’s definition of a PO (focus on provision of patient support) and [Organisation XX] features in at least one other company’s disclosures of payments to POs. Also, Novo Nordisk disclosed a payment to [Organisation XX] in 2013 (indicating the Company understand this to be a PO) but did not disclose any funding between 2015-2022 despite continuing to make payments.

- Awareness on type 2 diabetes in UK’s [named ethnic group] community encouraged in new report (2017)
[Screenshot showing the above information from the organisation’s website or document]

[Organisation XX] 20th Annual Conference – Thursday 28th and Friday 29th November 2019. Past, Present and Future Diabetes in [named ethnic

community]. “Thank you to all our sponsors” “Bronze sponsor [Novo Nordisk logo]” (p. 2)

[Screenshot showing the above information from the organisation’s website or document]

- [Organisation XX] & [named organisation] [Named annual diabetes] CONFERENCE – March 2021. “We would like to thank our sponsors for their support and financial contributions towards the conference. The sponsoring companies have had no input into the conference agenda, speaker selection or presentations with the exception of the Symposium session, for which the respective company are fully responsible. Gold Sponsor [named pharmaceutical company] Sponsors: [list of five pharmaceutical companies, including Novo Nordisk]”

[Screenshot showing the above information from the organisation’s website or document]

- [Named conference] – March 2022. “Sponsors: [Novo Nordisk logo].”

[Screenshot showing the above information from the organisation’s website or document]

- [Named conference] – February 2022

[Screenshot showing the above information from the organisation’s website or document]

- WEBINAR: HIGH CONCENTRATION INSULIN. November 2022. “Sponsor disclaimer: Novo Nordisk has provided sponsorship to this meeting to cover the development costs of project administration and management. Novo Nordisk has had no influence over the creation, development or content of the meeting and full control remains the full responsibility of the organisers.”

[Screenshot showing the above information from the organisation’s website or document]

- 23rd [Organisation XX] Global Annual Conference The Road Ahead: Tackling inequalities in diabetes care in a post-pandemic world. Thursday 13th and Friday 14th October, 2022. “OUR SPONSORS” “Silver Sponsors” [Novo Nordisk logo] (p. 2)

[Screenshot showing the above information from the organisation’s website or document]

1.4.24. [Organisation YY]

[Organisation YY] describes itself as “[Organisation YY] exists to raise awareness of, and support life-changing growth, developmental, neuroendocrine and mental health effects, of [named condition] in childhood during and beyond cure.” (charity report)

This aligns with the ABPI definition of a PO. [Organisation YY] also features in at least one other pharmaceutical company's disclosures of payments to POs and multiple companies' Disclosure UK payments. [Organisation YY] reports payments from Novo Nordisk on its website and annual accounts.

Website

- Survivors' Conference 2020. "THANK YOU to our sponsors, without whom this conference would not have been possible; [list of three pharmaceutical companies, including Novo Nordisk]". (p. 12)
- Surviving [named condition] (2021). "Novo Nordisk has provided sponsorship to [Organisation YY] to fund the design of this leaflet. [Organisation YY] has written and reviewed the content for this leaflet. Creation and editorial control is the responsibility of both Novo Nordisk and [Organisation YY]." (p. 13)

[Screenshot showing the above information from the organisation's website or document]

Annual accounts

- "With support from, and in collaboration with, Novo Nordisk Pharmaceuticals, [Organisation YY] produced and published printed and digital versions of its educational tools in the form of an information booklet for parents, survivors and professionals in childhood cancer survivorship centres, entitled Surviving [named condition]: Life After Cure. The leaflet is designed to inform all survivors of the specialised and service needs of those experiencing health effects as a result of [named condition], and to empower them to seek support and surveillance." (p. 7, annual accounts year end December 2021)

[Screenshot showing the above information from the organisation's website or document]

- "We are particularly grateful to Novo Nordisk and [named pharmaceutical company] for providing £15,092.40 and £24,000.00 respectively for the running of the annual conference and a new post conference series of workshops. These were educational grants from pharmaceutical companies and were in line with the regulations governing these." (p. 8, annual accounts year end December 2021)

[Screenshot showing the above information from the organisation's website or document]

1.4.25. [Organisation ZZ]

[Organisation ZZ] describes itself as: "[Organisation ZZ] talks aim to bring together individuals who have inspirational stories to share in the context of living with diabetes. The goal is to inspire us to think differently about diabetes; removing barriers and harnessing innovation and new technologies. We aim to generate discussion and new thinking through shared experience. The [Organisation ZZ] talk concept was brought to life by three doctors who specialise in diabetes and want to

support and empower those with diabetes to achieve their potential and live well.” ([Organisation ZZ] website). This description aligns with the ABPI definition of a PO (focused on patient support) and HCO (led by multiple healthcare professionals).

- [Organisation ZZ] Talk 2016. “Novo Nordisk has provided digital and administrative support for this event”.

[Screenshot showing the above information from the organisation’s website or document]

- [Organisation ZZ] Talk 2017. “[Organisation ZZ] 2017 has been brought to you with the support from the following sponsors: [Novo Nordisk logo]”

[Screenshot showing the above information from the organisation’s website or document]

- [Organisation ZZ] Talk 2022. “Novo Nordisk has sponsored the venue and catering for this meeting, and provided logistical support.”

[Screenshot showing the above information from the organisation’s website or document]

1.4.26. [Organisation AAA]

[Organisation AAA] describes itself as: “a national research institute dedicated to developing new technologies to tackle important health research challenges. The spectrum of tools under development at [Organisation AAA] are individually extraordinary, but when combined at [Organisation AAA]’s Hub, they allow us to develop tomorrow’s healthcare innovations” ([Organisation AAA]’s website). This description aligns with the ABPI’s definition of a HCO.

- “Collaboration - Novo Nordisk”. Incoming resources £145,877 (p. 24, 2021)

[Screenshot showing the above information from the organisation’s website or document]

1.4.27. [Organisation BBB]

[Organisation BBB] describes itself as: “At the heart of [Organisation BBB] is a very thorough, detailed and granular understanding of the national and local NHS, which is underpinned by our unparalleled NHS data. We use this unrivalled knowledge and expertise to help our clients understand their market, audience or therapy area. We support them to create a strategy to position their offering for maximum effect and execute this using a range of our customer engagement tools and go-to-market capabilities.” ([Organisation BBB] website). Payments to [Organisation BBB] are reported by multiple other pharmaceutical companies in Disclosure UK. Also note that [Organisation BBB.1] (part of [Organisation BBB]) reports a webinar fully funded by Novo Nordisk (see below) which is also not in the Company’s Disclosure UK report.

- [Named Regional] Diabetes Transformation and Sustainability Network – 7th June 2017. “This event has been supported by [named pharmaceutical company] through the provision of sponsorship. Delegates from Novo Nordisk and [another named pharmaceutical company] have also paid to attend. These companies have had no input into the design or content of the agenda, but will be present on the day.”

[Screenshot showing the above information from the organisation’s website or document]

- [Named regional] Diabetes Transformation and Sustainability Network – 3rd October 2017. “The regional Diabetes Transformation and Sustainability Network events are supported by [named pharmaceutical company] through the provision of financial sponsorship only. Delegates may include members of this company and Novo Nordisk who have also paid to attend. Sponsors have had no input into the design or content of the event agenda.”

[Screenshot showing the above information from the organisation’s website or document]

- [Named Regional] Diabetes Transformation and Sustainability Network – 13th September 2017. “The regional Diabetes Transformation and Sustainability Network events are supported by [named pharmaceutical company] through the provision of financial sponsorship only. Delegates may include members of this company and Novo Nordisk who have also paid to attend. Sponsors have had no input into the design or content of the event agenda.”

[Screenshot showing the above information from the organisation’s website or document]

- [Named regional] Diabetes Transformation and Sustainability Network – 17th November 2017. “The regional Diabetes Transformation and Sustainability Network events are supported by [named pharmaceutical company] through the provision of financial sponsorship only. Delegates may include members of this company and Novo Nordisk who have also paid to attend. Sponsors have had no input into the design or content of the event agenda.”

[Screenshot showing the above information from the organisation’s website or document]

- [Named regional] Diabetes Mellitus Transformation and Sustainability Network – 9th May 2018. “The regional Transformation and Sustainability Network meetings are initiated and organised by [Organisation BBB]. These Events are supported by [named pharmaceutical company] through the provision of sponsorship. Novo Nordisk have also paid to attend. These companies have had no input into the design or content of the agenda, but will be present on the day.”

[Screenshot showing the above information from the organisation’s website or document]

- What can diabetes care teach us about how to best address pandemic-related backlogs? In association with Novo Nordisk. (January 27th 2022). “This event has been fully funded and initiated by Novo Nordisk who worked with [Organisation BBB.1] to decide on the topic it covers. [Organisation BBB.1] entirely organised the event and retains editorial control over it and the associated report.”

[Screenshot showing the above information from the organisation’s website or document]

2. Inaccurately reported payments

2.1. [Organisation R] (PO)

In addition to the missed payment identified for [Organisation R] above, we also note a discrepancy between the reported purpose of payments provided by Novo Nordisk as the use of the payments by [Organisation R].

- [Organisation R] reports funding from Novo Nordisk for two reports:
 - [Named Report] (2018) – “[Alphabetised list of six pharmaceutical companies, including Novo Nordisk] have contributed to the funding and production of this document which has been written by [Organisation R] with input from the funding parties. Final editorial control lies with [Organisation R].” (p. 36)

[Screenshot showing the above information from the organisation’s website or document]

- [Named report] (2020) – “[Alphabetised list of five pharmaceutical companies, including Novo Nordisk] have contributed to the funding and production of this document which has been written by [Organisation R] with input from the funding parties. Final editorial control lies with [Organisation R].” (p. 16)

[Screenshot showing the above information from the organisation’s website or document]

- Whereas Novo Nordisk’s reported payments to [Organisation R] **do not mention reports**:
 - “12 months corporate membership” (Novo Nordisk’s disclosure of payments to patient organisations during 2018)

[Image showing one payment]

- “Support for the [Organisation R] Campaigning Committee” (Novo Nordisk’s disclosure of payments to patient organisations during 2019)

[Image showing one payment]

2.2. [Organisation CCC] (PO)

[Organisation CCC] report receiving funding from Novo Nordisk to cover the **costs of an event**, however this does not appear in Novo Nordisk's payments to POs disclosures.

- World [named condition] Day 2021 – “This event has been sponsored by Novo Nordisk including running costs and materials.”

[Screenshot showing the above information from the organisation's website or document]

- Novo Nordisk's payments to [Organisation CCC] in 2020 and 2021, respectively:

[Images showing two payments and one payment]

2.3. [Organisation H] (HCO)

Novo Nordisk reports two payments to [Organisation H] in 2015 (£55,787) and 2016 (£118,070), however [Organisation H]'s annual accounts report **higher value payments** from Novo Nordisk over 2015-2017. Combined, [Organisation H] reports a total of £268,498 from Novo Nordisk in 2015, 2016, and 2017 contrasting with Novo Nordisk's £173,857 reported in Disclosure UK during the same period.

- “Restricted funds 2015”, “[Named Initiative] Novo Nordisk Support Grant” - £101,112 (financial year end 31 December 2015, p. 21)

[Screenshot showing the above information from the organisation's website or document]

- “Restricted funds”, “[Named Initiative] – Novo Nordisk Support Grant” - £87,532 (financial year end 31 December 2016, p. 35)

[Screenshot showing the above information from the organisation's website or document]

- “Restricted funds”, “[Named Initiative] – Novo Nordisk Support Grant” - £79,854 (financial year end 31 December 2017, p. 34)

[Screenshot showing the above information from the organisation's website or document]

Novo Nordisk's payments to [Organisation H] reported in Disclosure UK:

[Image of a spreadsheet showing two payments]

2.4. [Organisation W] (PO)

There is a discrepancy in the **reported value of the payment** for [Organisation W]'s International Conference.

- [Organisation W]'s Annual Accounts report £10,000 from Novo Nordisk during the financial year 2019/2020:

[Screenshot showing the above information from the organisation's website or document]

However, Novo Nordisk reports providing a **lower value payment of £4,166.67** to [Organisation W] towards their Annual Conference during 2019:

[Image showing one payment]

2.5. [Organisation T] (PO)

[Organisation T]'s website states that Novo Nordisk provided funding for search engine optimisation (SEO) and website support, however this does not match Novo Nordisk's description of its payment to [Organisation T].

- "Novo Nordisk has donated Search Engine Optimisation (SEO) and the production of content templates to improve the online visibility of [Organisation T's website] for the benefit of [Organisation T]." (no date)

[Screenshot showing the above information from the organisation's website or document]

Novo Nordisk's payment to [Organisation T] reported in its disclosure of payments to POs during 2018:

[Image showing one payment]

3. Misreported payments

Between 2015 and 2022 Novo Nordisk misreported 65 payments worth a total of £782,020,78. These include misreported payments to POs, worth £708,720.78, and misreported payments to HCOs, worth £73,300. We provide a detailed summary of these misreported payments in what follows below.

3.1. Payments to POs reported in Disclosure UK as opposed to disclosure reports on Novo Nordisk's website

Between 2015 and 2022 Novo Nordisk misreported 58 payments, worth £708,720.78, to a total of fourteen POs.

These organisations met the definition of POs set out by in the EFPIA "Code of Practice on relationships between pharma and patient organisations" ("*Patient organisations are defined as not-for-profit organisations (including the umbrella*

organisations to which they belong), mainly composed of patients and/or caregivers, that represent and/or support the needs of patients and/or caregivers”), which has been transposed to the 2019 (Clause 27.1) and 2021 (Clause 1.15) Codes. However, in violation of Clause 27 of the 2019 Code and Clause 29 of the 2021 Code, Novo Nordisk reported payments to these organisations in Disclosure UK as opposed to the disclosure reports on its website. Specifically, please see:

- Enclosure 1 for a list of the misreported payments, and
- Enclosure 2 for a yearly summary of the misreported payments.

The misreporting resulted in a significant loss of important information for the general public, because by being placed among other payments reported in the Disclosure UK these payments lacked the descriptions required by Clause 27.7 of the 2019 Code and Clause 29.2 of the 2021 Code (“the published information must also include a clear description of each donation that is sufficiently complete to enable the reader to understand the nature of the support or the arrangements”, page 49).

Importantly, in the case of five of these fourteen organisations in at least one year payments were reported in both Disclosure UK and in a disclosure report published on Novo Nordisk’s website. This raises concerns about potential duplication of the reporting which obscures the total value of the Company’s payments. Please see Enclosure 3 for the list of these organisations.

3.2. Payments to HCOs reported in disclosure reports on Novo Nordisk’s website as opposed to Disclosure UK

Between 2015 and 2019 Novo Nordisk misreported seven payments worth, in total, £73,300, to two HCOs (see Enclosure 4 for the list of the payments and enclosure 5 for their annual summary).

These organisations met the definition of HCOs set out in Clause 1.9 of the 2019 Code. However, in violation of Clause 24.1 of the 2019 Code, Novo Nordisk reported payments to these HCOs in disclosure reports on its website as opposed to in Disclosure UK.

4. Summary

The extensive evidence of unreported, inaccurately reported and misreported payments is deeply concerning. As noted above, it points to multiple breaches of Novo Nordisk’s disclosure obligations as a company signing up to the ABPI Code. This, in our view, amounts to multiple breaches of Clause 2 as they bring disrepute upon and significantly reduce confidence in the pharmaceutical industry by failing to meet key transparency obligations. This contradiction of the ethical standards set forth by the ABPI is particularly concerning given the very important public- and patient-facing roles played by the recipients of the unreported or misreported payments.

Unlike with our previous complaint (Case AUTH/3763/4/23), the company cannot argue in this instance that the pattern of poor payment reporting resulted from a “miscategorisation” of payment recipients. Quite the contrary, here, many payments were typically reported in some years but not in others, while in other cases –

relationships with HCOs and POs were not reported at all. This inconsistent reporting behaviours suggests a systemic issue within the Company, rather than isolated oversights, again suggesting Clause 2 violations.

What is particularly worrying is that the evidence presented here most likely indicates a minimum extent of unreporting, inaccurate reporting and misreporting. For example, the recipient data typically does not mention the value of monetary transfers or in-kind payments. In addition, there could be other organisations with unreported payments of which we are not aware. Consequently, the full extent of Novo Nordisk's omissions in their disclosure reports is unknown. These ongoing issues not only risk eroding public trust in the Company, but also underscore the necessity for a rigorous and transparent reporting system. This is not only a matter of regulatory compliance but also of maintaining public confidence in the pharmaceutical sector, in line with the stated aims of its disclosure obligations.

Appendix A. Novo Nordisk's disclosure reports of payments to patient organisations 2015-2022

Appendix A1. Novo Nordisk's disclosure reports of payments to patient organisations 2015

[Screenshot of list titled 'Support provided to UK Patient Organisations by Novo Nordisk 2015']

[Screenshot of list titled 'Fees for services and consultancy in relation to services provided by UK Patient Organisations to Novo Nordisk 2015']

Appendix A2. Novo Nordisk's disclosure reports of payments to patient organisations 2016

[Screenshot of list titled '2016 support provided to UK Patient Organisations']

Appendix A3. Novo Nordisk's disclosure reports of payments to patient organisations 2017

[Screenshot of list titled '2017 support provided to UK Patient Organisations']

[Screenshot of list titled 'Fees for services provided by Patient Organisation members']

Appendix A4. Novo Nordisk's disclosure reports of payments to patient organisations 2018

[Screenshot of Novo Nordisk webpage with list titled '2018 support provided to UK Patient Organisations']

Appendix A5. Novo Nordisk's disclosure reports of payments to patient organisations 2019

[Screenshot of list titled '2019 support provided to UK Patient Organisations']

Appendix A6. Novo Nordisk’s disclosure reports of payments to patient organisations 2020

[Screenshot of list titled ‘2020 support provided to UK Patient Organisations’]

Appendix A7. Novo Nordisk’s disclosure reports of payments to patient organisations 2021

[Screenshot of list titled ‘2021 support provided to UK Patient Organisations’]

Appendix A8. Novo Nordisk’s disclosure reports of payments to patient organisations 2022

[Screenshot of list titled ‘2022 support provided to UK Patient Organisations’]

When writing to Novo Nordisk, the PMCPA asked it to consider the requirements of the following clauses:

- 2015 Code: 24.1, 24.4, 24.5, 27.7, 9.1, 2;
- 2016 Code: 24.1, 24.4, 24.5, 27.7, 9.1, 2;
- 2019 Code: 24.1, 24.4, 24.5, 27.7, 9.1, 2; and
- 2021 Code: 28.1, 29.1, 29.2, 31.1, 31.2, 5.1, 2.

Section 2 of the complaint refers to ‘Inaccurately reported payments’ and therefore Novo Nordisk was asked to also bear in mind the requirements of Clause 9.10 and its supplementary information for the 2015, 2016 and 2019 Codes, and Clause 5.5 and its supplementary information of the 2021 Code, where relevant.

NOVO NORDISK’S RESPONSE

The response from Novo Nordisk is reproduced below:

“As we have previously stated, there is a significant overlap between this case and our voluntary admission in relation to transfers of value (ToV) Case AUTH/3847/11/23, both in the ToVs at issue and the relevant clauses.

We therefore, as we have in Case AUTH/3847/11/23, acknowledge breaches of the following clauses:

- **2019 Code**
 - 24.1, 24.4, 27.7, 9.1 and 2
- **2021 Code**
 - 28.1, 29.1, 29.2, 31.1, 5.1 and 2

We note that in this case we have also been asked to respond to the requirements of Clause 24.5 (2019 Code) and the equivalent Clause 31.2 (2021 Code) which require that ToVs disclosed must remain in the public domain for at least three years from the time of disclosure. Given that, as acknowledged above and in the previous Case

AUTH/3847/11/23, there are certain ToVs that have not been disclosed at all, we acknowledge a breach of Clauses 24.5 (2019 Code) and 31.2 (2021 Code).

In terms of ToVs for 2015-2018, we note that companies are not required to retain records beyond five years after the end of the calendar year to which they relate. We can confirm that we do not have data beyond this requirement and therefore will not be responding to the relevant requirements of the 2015 and 2016 Codes. We have also been asked to respond to the requirements of Clauses 9.10 (2019 Code) and 5.5 (2021 Code). However, these clauses relate to the declaration of company involvement on particular material that companies may have sponsored, not disclosure of the figures related to that sponsorship. We therefore do not consider that these clauses are relevant and deny any breach in that regard.

The complainant also raises concerns that certain ToVs to healthcare organisations (HCOs) and patient organisations (POs) have been disclosed on the wrong platform. Whilst we acknowledge that this may be the case, Novo Nordisk was transparent in relation to these transactions and it is sometimes difficult to understand whether an organisation is a patient organisation, a healthcare organisation, or both.

Enclosure 1

It was identified in our first PMCPA audit (December 2022) which resulted in our suspension, that we did not have a formal process for the collation and disclosure of ToVs. As part of our compliance improvement activities, we developed and implemented such a process; further, we conducted a review of ToVs over the previous 3 years and identified significant gaps and omissions in our disclosure submissions. This then formed the basis of the voluntary admission referred to above.

We understand the importance of transparency in relation to any transactional relationship with healthcare professionals (HCPs), healthcare organisations (HCOs), patient organisations (POs), other relevant decision makers (ORDMs) and members of the public (MoPs) and we have conducted a thorough investigation in order to understand the issues and ensure that similar errors are not repeated. With that in mind we have developed and are in the process of executing a robust corrective and preventive action (CAPA) plan, as detailed below:

Action	Progress
Correcting all identified undisclosed ToVs.	Preliminary analysis has been undertaken as part of voluntary admission submission summary. [named consultancy] (see below) will collate final disclosure updates by end of June 2024.
Implementing a newly created Standard Operating Procedure (SOP) that details the process for the tracking and disclosure of ToVs.	SOP became effective on 24 October 2023. Training on SOP was provided to all relevant employees.

Ensuring the approval of any new vendors or changes to existing vendors are completed by the UK Compliance team.	Head of compliance notified of any updates to existing vendors as of February 2024. System changes to be implemented for new vendors by end of March 2024.
Engagement of significant external support to understand the full extent of the issue and to assist with CAPAs.	Contract with [named consultancy] signed in January 2024.
Recruiting one full time employee from the Global Novo Nordisk HCP Payment Office dedicated to UK ToV to ensure tight controls throughout the planning, tracking, and reporting stages of the ToV process.	One full time employee from HCP office in position from December 2023
Training to be carried out by the Global Business Ethics Compliance Office for teams who make cross border ToVs. This will include the principles and process behind Planning, Tracking and Reporting ToVs.	North West Europe region and Swedish affiliate have been trained to date

As noted in the CAPA above, we have engaged the services of [named consultancy] who have significant and extensive experience in supporting companies with the collation and disclosure of ToVs.

As requested, **Enclosure 2** provides details of the ToVs at issue, a full breakdown by year, recipient type (health professional (HCP), other relevant decision maker (ORDM), healthcare organisation (HCO) and patient organisation (PO), and category of ToV (e.g., fees for service, sponsorships, grants, donations etc.). This enclosure also indicates whether any of the undisclosed ToVs relate to research and development (R&D) and/or cross-border activities.

In relation to Novo Nordisk UK policies or procedures in place for the ToV period relevant to this case (2019-2022), please find enclosed:

- **Enclosure 3:** – Meetings UK – V6
 - Effective Date – 03/04/2018
- **Enclosure 4:** – Meetings UK – V7
 - Effective Date – 19/04/2021
- **Enclosure 5:** – Engaging with HCPs, ORDMs, Patients and Journalists for Services to Novo Nordisk UK – V5
 - Effective Date – 26/11/2015
- **Enclosure 6:** – Engaging with HCPs, ORDMs, Patients and Journalists for Services to Novo Nordisk UK – V6
 - Effective Date – 21/05/2019

- **Enclosure 7:** – Engaging with individuals to Provide Services to Novo Nordisk UK – V7
 - Effective Date – 01/09/2022
- **Enclosure 8:** – Working with Patient Organisations UK – V6
 - Effective Date – 16/10/2018
- **Enclosure 9:** – Working with Patient Organisations UK – V7
 - Effective Date: 28/01/2022
- **Enclosure 10:** – Working with Patient Organisations UK – V8
 - Effective Date – 22/11/2022

As previously mentioned, a lack of policies and procedures relating to ToV was identified as a gap in the early stages of our compliance improvement activities following receipt of the report for the December 2022 PMCPA audit, and an SOP was developed and became effective on 24 October 2023.

In terms of training on Code requirements in place for the ToV period relevant to this case (2019 – 2022), please find enclosed:

- **Enclosure 11:** Training history for [above] processes
- **Enclosure 12:** ToV Tracking Requirements for HCPs and HCOs
 - This information is available on Novo Nordisk’s Business Ethics Compliance Office (BECO) SharePoint site.
- **Enclosure 13:** Novo Nordisk Disclosure Process information
 - This information is available on Novo Nordisk’s Business Ethics Compliance Office (BECO) SharePoint site.
- **Enclosure 14:** 2021 ABPI Code of Practice update training
- **Enclosure 15:** Participant list for 2021 ABPI Code of Practice update training

Finally, please find enclosed

- The methodological notes for 2019-2022 (**Enclosure 16–19**)
- Copies of the written agreements with the organisations referred to in Section 2 of the complaint (**Enclosure 20–23**).

PANEL RULING

The Panel noted the complaint related to transfers of value to healthcare organisations and patient organisations that were allegedly unreported, inaccurately reported, and misreported by Novo Nordisk between 2015 and 2022.

The Panel noted that the 2015, 2016, 2019 and 2021 Codes were applicable to the 2015–2022 disclosure periods at issue. It noted the Code required disclosures to be made annually in respect of each calendar year within the first six months after the end of the calendar year in which the transfers of value were made.

The Panel further noted the Constitution and Procedure stated that the complainant had the burden of proving their complaint on the balance of probabilities. All complaints were judged on the evidence provided by the parties. In this regard, the Panel noted the complainants had relied on reports from Disclosure UK downloaded when each new database was published and had

provided extracts from these to support certain allegations together with copies of Novo Nordisk's disclosures of payments to patient organisations between 2015 and 2022 and screenshots of activities and materials indicating transfers of value had been made. Novo Nordisk submitted a spreadsheet with its comments on each matter. The Panel noted that in relation to transfers of value between 2015 and 2018 Novo Nordisk had stated it was not responding to the relevant requirements of the 2015 and 2016 Codes as it did not have data beyond five years after the end of the calendar year to which a payment related. The Panel noted that Novo Nordisk accepted breaches of Clauses 24.1, 24.4, 24.5, 27.7, 9.1 and 2 of the 2019 Code and Clauses 28.1, 29.1, 29.2, 31.1, 31.2, 5.1 and 2 of the 2021 Code. The Panel further noted that in relation to certain matters the material provided by the complainant did not clearly establish the year in which the transfer of value was made; when considering such matters the Panel bore in mind that Novo Nordisk had acknowledged certain breaches of the Code.

The Panel noted Novo Nordisk's reference to Case AUTH/3847/11/23, its voluntary admission wherein Novo Nordisk admitted breaches of the Code in relation to undisclosed transfers of value in 2020–2022 to healthcare organisations, health professionals and patient organisations. The Panel noted that this case had not been the subject of adjudication when the current case, Case AUTH 3876/2/24, was received and therefore the current case proceeded in accordance with the Constitution and Procedure. The Panel noted that certain of its comments and rulings in Case AUTH/3847/11/23 might nonetheless be relevant to the present case.

Unreported payments

The Panel noted the complainants defined unreported payments as instances where the company seemed to have failed to report payments entirely or reported them later than mandated by the ABPI Code. The Panel noted the complainants stated that the transfers of value at issue in this section were reported by the recipient organisations but not by Novo Nordisk in one or more relevant years.

a) Unreported payments to healthcare organisations

The Panel noted that Clause 24.1 of the 2015, 2016 and 2019 Codes and Clause 28.1 of the 2021 Code stated that companies must document and publicly disclose certain transfers of value made directly or indirectly to health professionals and healthcare organisations located in Europe. Clause 24.4 of the 2015, 2016 and 2019 Codes and Clause 31.1 of the 2021 Code required that such disclosures must be made annually in respect of each calendar year and must be in the first six months after the end of the calendar year in which the transfers of value were made.

The Panel noted these allegations related to unreported transfers of value made to healthcare organisations named by Novo Nordisk in its disclosure reports between 2015 and 2022. The complainants provided evidence of the additional payments in the form of copies of materials including declarations of Novo Nordisk's involvement, organisations' annual reports and financial reviews, and extracts of data from downloads of the Disclosure UK database. The Panel considered the descriptions of the organisations in this section were consistent with the definition of a healthcare organisation in Clause 1.8 of the 2021 Code.

The Panel noted 23 allegations concerned payments made between 2015 and 2018 to [Organisation A, Organisation B, Organisation E, Organisation F, Organisation H,

Organisation I, Organisation K, Organisation N and Organisation O]. Novo Nordisk submitted that companies were not required to retain records beyond five years after the end of the calendar year to which they relate and therefore it would not be responding in relation to these payments. The Panel noted that in each case the complainants had provided evidence of materials from which it appeared likely that transfers of value had been made, and extracts from downloads of the ABPI's disclosure portal, Disclosure UK, which did not include disclosures to the healthcare organisations for the relevant year or disclosures in a column on the Disclosure UK template that was consistent with the activity in the allegation. In the Panel's view and on the balance of probabilities, the transfers of value had not been disclosed as required. The Panel ruled **breaches of Clauses 24.1 and 24.4 of the 2015 and 2016 Codes**.

Novo Nordisk submitted 10 of the transfers of value made to [Organisation C, Organisation D, Organisation E and Organisation M] between 2020 and 2022 had been part of its voluntary admission in Case AUTH/3847/11/23. The Panel noted some inconsistencies in the values of the payments included in the previous case and those submitted by Novo Nordisk in this case. **[See post hoc note below]**. While it was not clear to the Panel why this should be, in all cases the values in the voluntary admission were higher and the Panel queried whether these were aggregate values covering a number of closely linked activities, such as a publication cycle or similar, including those identified by the complainants in this case. However, noting Novo Nordisk's submission and that the complainants bore the burden of proof, in the absence of evidence to the contrary the Panel considered it likely that the transfers of value in the previous case included the matters identified by the complainants in the current one and, therefore the rulings of breaches of the Code in the previous case in relation to these transfers of value applied here. Noting Novo Nordisk had already provided the undertaking in the previous case the Panel considered that it was not proportionate in the present case to make a further ruling.

The Panel noted the complainants had provided extracts from the Annual Accounts of [Organisation E] for 2017, 2018, 2019, 2020, 2021 and 2022. Each included the statement 'During [year] unrestricted educational grants, website advertising and sponsorship were provided by [named companies including Novo Nordisk].' Matters in relation to transfers of value in 2017 and 2018 were ruled upon above, and those made between 2020 and 2022 were covered by its comments above about the applicability of the rulings in Case AUTH/3847/11/23 to the present case. Novo Nordisk accepted that it had sponsored a further four meetings of [Organisation E] in 2019 where the transfers of value amounting to £2,800 in total had not been disclosed. The Panel ruled **breaches of Clauses 24.1 and 24.4 of the 2019 Code** in regard to the failure to disclose these payments.

The Panel noted that, in relation to [Organisation N], the complainants had identified four events and two publications sponsored by Novo Nordisk in 2021 and 2022. Novo Nordisk submitted that these had been disclosed erroneously against another organisation ([named organisation]) in its list of patient organisation disclosures. Novo Nordisk did not provide any documentary evidence to support this submission. The Panel noted the copies of Novo Nordisk's patient organisation disclosures for each year provided by the complainants. The Panel noted these did not show entries for [Organisation N] that corresponded to the activities at issue undertaken by [Organisation N] in 2021 and 2022, although there were disclosures for the other organisation identified by Novo Nordisk which potentially corresponded to the type of activity at issue. The Panel ruled **breaches of Clauses 24.1 and 24.4 of the 2019 Code** for the transfers of value that took place prior to 1 July 2021 and **breaches of Clauses 28.1, and 31.1 of the 2021 Code** for the transfers of value that took place after 1 July 2021.

The Panel noted one allegation related to a leaflet published by [Organisation N] in 2023 and another to sponsorship of a [Organisation M] meeting which took place in 2022 but where according to Novo Nordisk the transfers of value for each were made in 2023. The Panel ruled **no breaches of Clauses 28.1 and 31.1 of the 2021 Code** on the basis that disclosure of these payments was not required until five months after the date of the complaint.

Novo Nordisk submitted that it had made a payment to [Organisation L] in 2020 in relation to the sponsorship of the development, publication and dissemination of a guidance document however the work had not been undertaken until 2022. Novo Nordisk stated that the postponements had been documented but the Panel noted it did not provide this documentation. The Panel noted Novo Nordisk had disclosed transfers of value to [Organisation L] in 2020. In its view, the complainants had not established that the transfer of value for production of the guidance had been made in 2022 or that it had not been disclosed appropriately. The Panel ruled **no breaches of Clauses 28.1 and 31.1 of the 2021 Code**.

The Panel noted allegations regarding [Organisation J]'s sponsored webinar in 2020 and a meeting in 2021. Materials provided by the complainants indicated that these had been fully funded and organised by Novo Nordisk but that transfers of value for these were not included in Disclosure UK. Novo Nordisk's spreadsheet indicated that it had made and disclosed the payments in 2020 and 2021 to a named third party managing the events. However, it did not provide evidence to support this submission despite the events occurring within the five-year document retention period required by Clause 31.3. Noting Novo Nordisk's submission, in the Panel's view, and on balance, the complainants had not established that the transfers of value had not been disclosed and on this narrow allegation it ruled **no breaches of Clauses 24.1 and 24.4 of the 2019 Code** in regard to the 2020 webinar and **no breaches of Clauses 28.1 and 31.1 of the 2021 Code** in relation to the meeting in 2021.

The Panel noted [Organisation F] was an international healthcare organisation which was a UK registered charity until the end of 2016. The organisation moved to Brussels on 1 December 2016 although the accounts remained UK based for 2017 and 2018. Consequently, transfers of value made between 2015 and 2018 should have been disclosed on Disclosure UK. Allegations regarding payments made in these years are covered by the Panel's rulings above. Since 2019, the organisation has been entirely Brussels-based and therefore transfers of value should be disclosed on the Belgian disclosure website. The Panel was concerned that Novo Nordisk had not stated, other than for a 2021 transfer of value, whether it had taken any steps to ensure that the payments were disclosed on the Belgium platform or whether it had checked to ensure that such disclosure had occurred. In the Panel's experience, UK companies would ensure that such transfers of value were disclosed on the platform local to the HCO at issue by the local affiliate. The Panel noted the complainant's allegation that transfers of value made in 2020, 2021 and 2022 had not been disclosed on the Belgium platform. The Panel noted that the complainants had not provided any documentary evidence regarding publication on the Belgium platform and whether the UK company had taken any steps with its local affiliate in this regard. Accordingly, the Panel ruled **no breaches of Clauses 24.1 and 24.4 of the 2019 Code and no breaches of 28.1 and 31.1 of the 2021 Code**.

The complainants identified three transfers of value to [Organisation G] made in 2019 and 2020 which they alleged had not been disclosed on Disclosure UK. The Panel noted there were no related disclosures for these years although they had been made for previous and subsequent years. Novo Nordisk submitted these payments had been disclosed but that Disclosure UK had hard mapped these against [named organisation with similar name] which had the same

address and was part of the same overarching organisation. The Panel noted that Novo Nordisk had not provided documentary evidence of this hard mapping error which appeared not to have been identified by Novo Nordisk prior to receipt of the complaint and which had not been an issue in previous or following years. On balance, and on the basis that disclosure to the recipient healthcare organisation had been correctly made in previous and subsequent years, the Panel considered that disclosure in 2019 and 2020 was not in accordance with the Code and ruled **breaches of Clauses of 24.1 and 24.4 of the 2019 Code**.

The Panel noted the allegation regarding sponsorship in 2019 of [Organisation I]’s Clinical Hubs and the very clear statement on the materials that Novo Nordisk had, through a sponsorship, fully funded all costs for the technical development and hosting of the hubs. The Panel noted that the screenshot of downloaded data from Disclosure UK for the organisation, provided by the complainants, did not include any transfers of value for 2019. Novo Nordisk submitted that in 2019 it had disclosed £61,539.34 against [Organisation I]. The Panel noted Novo Nordisk had not provided any evidence from Disclosure UK to support its case despite this being within the five-year document retention period required under Clause 31.3. Having considered the submissions from the parties, and noting the screenshot of downloaded data from Disclosure UK, the Panel considered, on the balance of probabilities, that disclosure was not in accordance with the Code and ruled **breaches of Clauses 24.1 and 24.4 of the 2019 Code**.

The Panel noted the allegations about undisclosed transfers of value to [Organisation H] between 2019 and 2021 and that Novo Nordisk’s response indicated that it had not made any payments directly to the organisation since 2018. The Panel was concerned that the company stated that it had not made any direct payments but had chosen to not respond about whether indirect transfers of value had been made in relation to the activities identified in the healthcare organisation’s Annual Accounts for 2019, 2020 and 2021 and whether these had been disclosed. However, it also noted that the Annual Accounts indicated that the initiative in question was to advocate internationally on the importance of addressing pregnancy and non-communicable diseases and was funded by several companies with the funding rolled over from one year to the next. In the Panel’s view, it was not clear whether companies had made a single grant, the unused element of which rolled over to subsequent accounting years, or if grants had been made each year. On balance, the Panel considered that the complainants had not established their case on the balance of probabilities and ruled **no breaches of Clauses 24.1 and 24.4 of the 2019 Code and Clauses 28.1 and 31.1 of the 2021 Code**.

b) Unreported payments to patient organisations

The Panel noted these allegations related to unreported transfers of value made to patient organisations named by Novo Nordisk in its disclosure reports between 2015 and 2022. The complainants provided evidence of the payments in the form of copies of materials including declarations of Novo Nordisk’s involvement, organisations’ annual reports and financial reviews, and downloads of the disclosures listing for each year taken from Novo Nordisk’s website. The Panel noted the descriptions of the organisations in this section were consistent with the definition of a patient organisation in Clause 1.15 of the 2021 Code.

The Panel noted that Clause 27.7 of the 2015, 2016 and 2019 Codes stated, amongst other things, that each company must make publicly available, at a national or European level, a list of patient organisations to which it provides financial support and/or significant indirect/non-financial support, which must include a description of the nature of the support that is sufficiently complete to enable the average reader to form an understanding of the significance of the

support. The list of organisations being given support must be disclosed annually in respect of each calendar year. Disclosure must be in the first six months after the end of the calendar year in which the transfers of value were made.

Clause 29.1 of the 2021 Code was broader and stated, amongst other things, that companies must make publicly available, annually, a list of patient organisations to which it provides donations, grants or sponsorship (including in relation to events/meetings) or with whom it has engaged to provide contracted services over the reporting period. This information must be disclosed on the company website either on a national or European level. Each reporting period shall cover a full calendar year. Clause 31.1 of the 2021 Code, which applied to transfers of value to patient organisations as set out in Clause 29, stated that disclosures must be made annually in respect of each calendar year. Disclosure must be in the first six months after the end of the calendar year in which the transfers of value/payments were made.

The Panel noted Novo Nordisk had not responded to allegations relating to activities prior to 2019, in all instances the complainants had provided extracts from and links to materials from the patient organisations containing clear statements about Novo Nordisk's support for their activities. Copies of Novo Nordisk's patient organisation disclosure website for 2015, 2016, 2017 and 2018 did not include entries relating to one transfer of value to [Organisation V] in 2015, three payments to [Organisation Q] in 2017 and 2018 and one to [Organisation S] in 2017. The Panel ruled **breaches of Clause 27.7 of the 2015 Code and Clause 27.7 of the 2016 Code**.

The Panel noted Novo Nordisk's submission that three of the transfers of value identified by the complainants were included in its voluntary admission in Case AUTH/3847/11/23. These were £2,000 to [Organisation U] in 2022 for the [named initiative], and payments to [Organisation V] of £10,000 shown in the 2020 Annual Accounts and £8,000 for a specific project. While the undisclosed transfers of value to [Organisation V] in the previous case were consistent with those cited by Novo Nordisk in this instance, the amount for [Organisation U] reported in Case AUTH/3847/11/23 was larger, and the Panel queried whether these were aggregate values covering a number of closely linked activities, such as a publication cycle or similar, including those identified by the complainants in this case. However, noting Novo Nordisk's submission and that the complainants bore the burden of proof, in the absence of evidence to the contrary the Panel considered it likely that the transfers of value in the previous case included the matters identified by the complainants in the current one and, therefore the rulings of breaches of the Code in the previous case in relation to these transfers of value applied here. Noting Novo Nordisk had already provided the undertaking in the previous case the Panel considered that it was not proportionate in the present case to make a further ruling.

The Panel noted Novo Nordisk accepted that it had failed to disclose transfers of value amounting to £66,060 to [Organisation P] in 2021 and payments amounting to £5,000 to [Organisation Q] in 2020. The Panel ruled **breaches of Clauses 29.1 and 29.2 of the 2021 Code and Clause 27.7 of the 2019 Code**, respectively.

The Panel noted that there appeared to have been a number of errors made in relation to transfers of value between 2019 and 2022. A transfer of value in relation to [Organisation R]'s best practice report published in 2020 did not appear in Novo Nordisk's list of patient organisation disclosures. The Panel noted Novo Nordisk's submission that the payment was made and the transfer of value was disclosed in 2019 but had been erroneously described as corporate membership. The Panel considered that, on the evidence before it, Novo Nordisk had

failed to meet the transparency requirements expected of the pharmaceutical companies by not providing accurate descriptions of the nature of the support to [Organisation R]. The Panel ruled a **breach of Clause 27.7 of the 2019 Code**.

The Panel noted the complainants alleged that Novo Nordisk had failed to report funding paid to [Organisation W] in 2021/22 although it had reported payments made to the organisation in 2015, 2017, 2018, 2019 and 2020. Novo Nordisk submitted that a payment of £3,500 reported in the annual accounts for the year ending 31 March 2022 as an addition to their annual donation to help and support [Organisation W]'s friendship groups was part of a payment made in 2020 but was incorrectly classified as corporate membership. Having considered the evidence, it appeared to the Panel that Novo Nordisk had for that accounting year made both an annual donation and the additional donation although it was not clear whether the additional payment had been made in 2021 or 2022. The Panel noted the transfer of value did not appear in Novo Nordisk's list of patient organisation disclosures for either year. The Panel considered that, irrespective of which party was correct, a breach of the Code had occurred; if Novo Nordisk was correct, the purpose of the transfer of value had been reported incorrectly, and if the complainants were correct, the transfer of value made in 2021 or 2022 had not been disclosed. The Panel ruled **breaches of Clauses 29.1 and 29.2 of the 2021 Code**.

There were three instances where in relation to matters raised by the complainants Novo Nordisk's spreadsheet indicated payments had been made to organisations in previous years but that the organisations had not reported the payments until one or two years later. Two of these related to transfers of value to [Organisation T]. The first concerned a report called '[named]' published as two almost identical versions in 2020; the second concerned '[named]: Media Guidelines' document also published in 2020. Novo Nordisk's spreadsheet indicated that the payment for the projects was made in 2018. However, the transfer of value (£50,134) disclosed in the listing of patient organisations on Novo Nordisk's website for 2018 appeared to relate to a different project – support of the community champion group for obesity, and related to a predecessor organisation. From the evidence before it, and on balance, the Panel considered that Novo Nordisk had failed to disclose the transfers of value relating to the 2020 publications and ruled a **breach of Clause 27.7 of the 2019 Code**.

c) Unreported payments to charities mentioning obesity registered with the Charity Commission

This section of the complaint concerned organisations with an interest in obesity identified by the complainants as charities registered with the Charity Commission.

[Organisation X]

The complaint concerned five transfers of value, four in 2021 and one in 2022; values were not available for any of the payments, which appeared to be sponsorships of Annual Scientific Meetings in 2021 and 2022, two webinars and journal club activities. The Panel agreed with the complainants that the description of the organisation was consistent with the definition of a healthcare organisation in Clause 1.8 of the 2021 Code and therefore transfers of value should be reported on Disclosure UK in accordance with the requirements of Clauses 28 and 31 of the 2021 Code.

Novo Nordisk submitted the payments were included in Case AUTH/3847/11/23, its voluntary admission wherein Novo Nordisk admitted breaches of the Code in relation to undisclosed transfers of value. The Panel noted that the voluntary admission included undisclosed transfers

of value to [organisation with the same name as Organisation X except for one word] of £50,000 in 2021 and £70,000 in 2022. The Panel noted that the name of the organisation identified by the complainants and that given in the voluntary admission differed. In the Panel's view it was likely that Novo Nordisk had erroneously omitted the word 'surgery' in the previous case and the organisations were the same entity. The Panel considered the transfers of value in the previous case included the matters identified by the complainants in the current one and, accordingly, the Panel made no further ruling. Noting Novo Nordisk's submission and that the complainants bore the burden of proof, in the absence of evidence to the contrary the Panel considered it likely that the transfers of value in the previous case included the transfers of value to [Organisation X] in the present case and, therefore the rulings of breaches of the Code in the previous case in relation to these transfers of value applied here. Noting Novo Nordisk had already provided the undertaking in the previous case the Panel considered that it was not proportionate in the present case to make a further ruling.

[Organisation Y]

The Panel noted the term patient organisation was used in the 2015, 2016 and 2019 Code but was first defined in the 2021 Code in Clause 1.15. The Panel agreed with the complainants that the description of the organisation was consistent with the definition of a patient organisation and therefore transfers of value should be reported on Novo Nordisk's website in accordance with the requirements of Clause 27 of the 2016 and 2019 Code and Clauses 29.1 and 29.2 of the 2021 Code.

The complainants raised three matters. Firstly, that accounts for 2018/2019 filed with Charity Commission Accounts indicated Novo Nordisk had made a £50,000 donation. Whilst this was a pre 2019 payment, Novo Nordisk nonetheless confirmed that it had made the payment in 2018. As the payment had not been included in Novo Nordisk's list of patient organisation disclosures for 2018, the Panel ruled a **breach of Clause 27.7 of 2016 Code**.

The second matter concerned a screenshot from January 2024 of the 'About' section of the organisation's website where it expressed gratitude to Novo Nordisk and another company for unrestricted underwriting of its UK activities. The third matter related to the minutes of the 2020 Annual General Meeting which stated that 'Novo Nordisk might fund a patient perspective lead training for World Obesity Day' for healthcare professionals.

The Panel noted Novo Nordisk's submission that it had only made one payment to [Organisation Y], in 2018. It was not clear to the Panel from the limited information before it whether any further transfers of value had actually been made. Underwriting implied an acceptance of financial risk but there was no evidence before the Panel that the risk had materialised. In the Panel's view the complainants had not established, on the balance of probability, that these further transfers of value had been made or when and therefore the Panel ruled **no breaches of Clauses 29.1 and 29.2 of the 2021 Code and no breach of Clause 27.7 of the 2019 Code**.

[Organisation Z]

The Panel noted the allegations related to transfers of value in 2020 and 2021 and that the description of the organisation was consistent with the definition of a healthcare organisation in Clause 1.8 of the 2021 Code and therefore, depending on the date of the payment, should be reported on Disclosure UK in accordance with the requirements of Clauses 24.1 and 24.4 of the 2019 Code or Clauses 28 and 31 of the 2021 Code.

The complainants alleged that the organisation's annual accounts for the year ended 31 December 2020 indicated that sponsorship income of £28,668 had been received from Novo Nordisk, and that further sponsorship (amount not provided) had been agreed for the financial year ending 31 December 2021.

Novo Nordisk submitted a payment of £9,556 was included in Case AUTH/3847/11/23 in respect of the 2020 payment. It made no comment regarding the funding in 2021. The Panel noted, however, that the list of undisclosed payments in Case AUTH/3847/11/23 did not include a transfer of value to [Organisation Z] in 2020. It did, however, include a transfer of value of £71,112 in 2021.

The Panel noted the discrepancy in values between the 2020 annual accounts and Novo Nordisk's submission which was substantially less. The Panel considered on the balance of probabilities that Novo Nordisk had not disclosed the transfer of value made in 2020 and accordingly it ruled **breaches of Clauses 24.1 and 24.4 of the 2019 Code**. In the Panel's view, the transfer of value made to the organisation in 2021 was covered by its ruling in Case AUTH/3847/11/23 and noting its comments above in this regard, including that Novo Nordisk had provided an undertaking and the Panel did not consider it proportionate to make a further ruling on this matter.

[Organisation AA]

The allegations related to transfers of value in 2021 and 2022. The Panel noted the description of the organisation was consistent with the definition of a healthcare organisation in Clause 1.8 of the 2021 Code and therefore transfers of value should be reported on Disclosure UK in accordance with the requirements of Clauses 28 and 31 of the 2021 Code.

The complainants alleged transfers of value for 2021 to the value of £1,154,259.20 were reported late on Disclosure UK. The complainants provided the PMCPA with a screenshot of the relevant part of the Disclosure UK data downloaded by them in April 2023; this did not include the payments at issue. The Panel noted that the complainants and Novo Nordisk stated that these payments had subsequently been disclosed although neither party provided evidence of this. The Panel noted that payments made in 2021 were required to be disclosed by 30 June of 2022. On the evidence supplied by the complainants and the parties' consistent submissions on this point the Panel considered that disclosure had not been made by the required date and therefore the Panel ruled a **breach of Clause 31.1 of the 2021 Code**.

The Panel noted the allegation of unreported transfers of value in relation to a variety of activities reported in the [Organisation AA] Annual Review 2022. No value was attached to these payments. Novo Nordisk's spreadsheet indicated that the transfers of value were disclosed but that Disclosure UK had incorrectly mapped them to another organisation ([named organisation]) at the same address. Noting that Novo Nordisk accepted that payments had been made to [Organisation AA] and had been disclosed against the wrong healthcare organisation the Panel ruled a **breach of Clause 28.1 of the 2021 Code** on the basis that that the disclosure was inaccurate.

d) Healthcare organisations and patient organisations missing from Novo Nordisk's disclosures during investigative web searches

The Panel noted the complainants had undertaken investigative web searches and had identified 27 organisations, both healthcare organisations and patient organisations, which

appeared to have received 63 transfers of value from Novo Nordisk during the period from 2015 to 2022 but which did not appear in Novo Nordisk's disclosed transfers of value on Disclosure UK for healthcare organisations or the list on the company's website for transfers of value to patient organisations. Documentary supporting evidence to show that the transfers of value had taken place was provided in the form of materials and links to documents and included, for example, acknowledgements of Novo Nordisk's involvement, the company logo in materials, and statements from annual financial reports. For the patient organisations, the Panel noted the complainants' evidence that the transfers of value were not disclosed was the absence of entries in the annual listings of disclosures of transfers of value (copies provided to the PMCPA by the complainants). For the healthcare organisations, the Panel noted that the corresponding documentary evidence would require the provision of the full data downloads for Novo Nordisk for the relevant years from Disclosure UK which the complainants had not provided and in this regard the Panel noted that it was not an investigatory body.

The Panel carefully considered the allegations and the evidence provided by the parties, noting that the complainants bore the burden of proof.

Transfers of value that Novo Nordisk submitted were part of its voluntary admission in Case AUTH/3847/11/23

The Panel noted that in relation to certain transfers of value for which the complainants had provided supporting evidence the Novo Nordisk spreadsheet stated that each was the subject of the previous voluntary admission, Case AUTH/3847/11/23, as a discrete transfer or as part of a larger transfer of value that had been disclosed. The Panel considered the evidence before it carefully and decided that on the balance of probabilities certain transfers of value were the subject of the voluntary admission. The Panel's decision in this regard applied to the following organisations and the associated transfers of value set out at point 1.4 of the complaint: [Organisation CC, Organisation HH, Organisation II, Organisation KK, Organisation MM, Organisation PP, Organisation TT, and Organisation XX]. The Panel considered therefore that the rulings of breaches of the Code in the previous case in relation to these transfers of value applied here. Noting Novo Nordisk had already provided the undertaking in the previous case the Panel considered that it was not proportionate in the present case to make a further ruling.

The complainants alleged that Novo Nordisk had sponsored three meetings for [Organisation WW] – two in 2021 and one in 2022 – which had not been disclosed. While the complainants did not provide any information regarding the values of the sponsorships, Novo Nordisk stated that transfers of value of £3,750 and £4,300 had been made with regard to the 2021 meetings and £9,000 for the 2022 meeting and that these were included in the voluntary admission. The Panel noted that these payments were substantially less than the amounts included for sponsorships in the listing for the voluntary admission which indicated that Novo Nordisk had payments for sponsorship of £73,680 in 2021 and £59,160 in 2022. While it was not clear to the Panel why there was such a large discrepancy, it nonetheless on balance considered that the current matters were covered by the ruling in Case AUTH/3847/11/23. The complainants bore the burden of proof and had not provided evidence to the contrary. The Panel considered that the rulings of breaches of the Code in the previous case applied here. Noting its comments above in relation to Case AUTH/3847/11/23, including that Novo Nordisk had provided the requisite undertaking, the Panel considered that it was not proportionate to make a further ruling on this matter.

The Panel noted the complaint in relation to transfers of value to [Organisation NN] comprised two elements: firstly, funding of exclusive access to [Organisation NN]'s digital coaching to support [named pharmacy chain]'s weight loss service in 2020, and, secondly, funding towards personalised patient support programmes which Novo Nordisk submitted related to 2021 and 2022.

Novo Nordisk submitted the funding to support the digital coaching was related to a transfer of value amounting to £182,996.40 for a national weight loss service which was included in its voluntary admission. While the Panel noted that Case AUTH/3847/11/23 included undisclosed transfers of value amounting to £78,562.80 for 2021 and £83,122.80 for 2022, the Panel could find no undisclosed transfer of value to [Organisation NN] for 2020 in that previous case. Accordingly, the Panel ruled **breaches of Clauses 24.1 and 24.4 of the 2019 Code** in relation to the funding, in 2020, of the digital coaching to support [named pharmacy chain]'s weight loss service.

With regard to the funding of the personalised patient support programmes, the Panel noted Novo Nordisk submitted that it had identified transfers of value amounting to £161,685.60 for 2021 and 2022 which had not been disclosed and which were included in its voluntary admission. The Panel noted this was consistent with the values in Case AUTH/3847/11/23 and considered that the rulings of breaches of the Code in the previous case applied here. Noting that Novo Nordisk had provided the requisite undertaking the Panel considered that it was not proportionate to make a further ruling on this matter.

Unreported disclosures acknowledged by Novo Nordisk

Novo Nordisk accepted that it had not made disclosures in relation to twelve transfers of value between 2019 and 2022. Nine related to healthcare organisations and three to patient organisations.

The following matters related to healthcare organisations.

[Organisation QQ] – The transfers of value related to a series of three workshops in 2019 and a separate event in November 2019. Novo Nordisk accepted that, in error, it had failed to disclose £58,900 in respect to the workshops and £17,800 in relation to the event.

[Organisation EE] – The company accepted that it had sponsored a meeting of the Nurses Forum in June 2021 meeting and, in error, had not disclosed the transfer of value associated with it which amounted to £603.50.

[Organisation XX] – Novo Nordisk accepted that it had not disclosed its sponsorship of a conference in 2019 where the transfer of value amounted to £15,000. The Panel noted Novo Nordisk had categorised the organisation as a healthcare organisation.

The Panel ruled **breaches of Clauses 24.1 and 24.4 of the 2019 Code** with regard to the matters above.

[Organisation JJ] – Novo Nordisk accepted that, in error, it had not disclosed a transfer of value of £800 for sponsorship of the Annual General Meeting 2021/2022.

[Organisation OO] – With regard to Novo Nordisk’s sponsorship of [Organisation OO]’s webinars in July 2022 and December 2022, the company accepted that it had failed to disclose two transfers of value which it had made to [Organisation OO]. Novo Nordisk indicated that each payment was £23,940.

[Organisation SS] – Novo Nordisk accepted that erroneously it had not disclosed a payment of £20,000 for sponsoring educational resources and a payment of £7,500 in respect of a series of webinars.

The Panel ruled **breaches of Clauses 28.1 and 31.1 of the 2021 Code** in relation to the above matters.

The Panel noted the following transfers of value made to patient organisations in 2021 which Novo Nordisk accepted had not been disclosed.

[Organisation FF] – The Annual Report for 2021/2022 indicated Novo Nordisk had made a financial contribution towards the overall costs of running the charity. The company accepted the payment of £10,000 had, in error, not been disclosed.

[Organisation YY] – The complaint related to four matters: sponsorship of a survivors’ conference in 2020, and in 2021 a leaflet on ‘Surviving a Childhood [named condition]’, the annual conference and a post-conference series of workshops. In its response, Novo Nordisk accepted that, in error, it had not disclosed transfers of value amounting to £11,092.40. The Panel noted this value was different to that in the Annual Accounts for 2021 which indicated that Novo Nordisk had provided an educational grant of £15,092.40.

[Organisation LL] – The Panel noted the Annual Accounts for 2021 referred to the receipt of funds from Novo Nordisk for a number of unidentified specific projects. In its response, Novo Nordisk stated that, in error, it had not disclosed payments of £57,916.97.

The Panel ruled **breaches of Clauses 29.1 and 29.2 of the 2021 Code** in relation to the above matters.

The Panel noted that the 2020 Annual Report for [Organisation LL] referred to commitments for specific projects being made by Novo Nordisk but in the Panel’s view this was not confirmation that a transfer of value had actually been made in 2020 and the Panel ruled **no breach of Clause 27.7 of the 2019 Code** in that regard.

Transfers of value made between 2016 and 2018

The Panel noted the complainants had identified 19 transfers of value made between 2016 and 2018 to seven healthcare organisations and one patient organisation. These were [Organisation BB, Organisation DD, Organisation QQ, Organisation UU, Organisation VV, Organisation XX, Organisation ZZ and Organisation BBB]. Novo Nordisk had not responded to these matters on the basis that they occurred prior to 2019 and it did not have data beyond the five-year retention period required by the Code.

In the Panel’s view, the complainants had established on the balance of probabilities that transfers of value had been made between 2016 and 2018 to the seven health organisations. However, noting its comments above regarding the evidential difficulties faced by the complainants in respect of demonstrating that the transfers of value to healthcare organisations

had not been reported on Disclosure UK and that the complainants bore the burden of proof, the Panel considered the complainants had not established on the balance of probabilities that the transfers of value had not been disclosed. The Panel ruled **no breaches of Clauses 24.1 and 24.4 of the 2016 Code**.

The Panel noted that for the patient organisation, Novo Nordisk had apparently provided digital and administrative support for an event in 2016 and had supported another event in 2017 but that the associated transfers of value did not appear in the listing of disclosed payments for the relevant years and, accordingly, the Panel ruled a **breach of Clause 27.7 of the 2016 Code**.

[Organisation BBB]

The Panel noted the complainants considered [Organisation BBB] to be a healthcare organisation on the basis that other pharmaceutical companies had made disclosures against the organisation. Novo Nordisk accepted one transfer of value to [Organisation BBB] in 2022 had been made but submitted that it had not considered the organisation to be a healthcare organisation. The PMCPA recognised the difficulties companies may have in classifying organisations and therefore advised companies to make their rationale clear in their methodological notes. In the Panel's view, the PMCPA would not be critical of companies over-disclosing. The Panel noted that it was not an investigatory body and that the complainants had not provided documentary evidence that [Organisation BBB] met the definition of a healthcare organisation such that disclosure was required or that the payment had not been disclosed. The Panel ruled **no breaches of Clauses 28.1 and 31.1 of the 2021 Code**.

[Organisation RR]

The Panel noted the complainants considered [Organisation RR] to be a healthcare organisation but that Novo Nordisk did not consider it to be and therefore it considered disclosure was not required. Novo Nordisk submitted [Organisation RR] was a digital agency which had been paid by a third party to host an organised Novo Nordisk meeting. The PMCPA recognised the difficulties companies may have in classifying organisations and therefore advised companies to make their rationale clear in their methodological notes. In the Panel's view, the PMCPA would not be critical of companies over-disclosing. In this instance, the Panel considered that the complainants had not established that [Organisation RR] met the definition of a healthcare organisation, nor had they established whether the third party mentioned by Novo Nordisk was a healthcare organisation and, accordingly, it ruled **no breaches of Clauses 28.1 and 31.1 of the 2021 Code**.

[Organisation DD]

Novo Nordisk submitted the transfers of value relating to meetings sponsored in 2019, 2021 and 2022 were disclosed against a third party who the agreement was with. In the Panel's view although both parties agreed that payments had been made, the complainants had not established, on the balance of probabilities, that they had not been reported on Disclosure UK. Accordingly, the Panel ruled **no breaches of Clauses 24.1 and 24.4 of the 2019 Code** in relation to the 2019 meeting and **no breaches of Clauses 28.1 and 31.1 of the 2021 Code** in relation to the meetings in 2021 and 2022.

[Organisation EE]

The Panel noted this was a healthcare organisation and that transfers of value made to it should be disclosed on Disclosure UK. The complainants submitted screenshots of the agenda for a regional meeting in September 2021 which indicated Novo Nordisk had sponsored the cost of the venue hire and subsistence, and had been provided with a slot on the agenda as indicated

but had no influence over the remaining agenda items. Novo Nordisk stated that the transfer of value had been disclosed against [named NHS Trust] where the organisation resided. The Panel was mindful that the complainant bore the burden of proof and in this instance the Panel considered that the complainants had not established on the balance of probabilities that the transfer of value had not been disclosed as required and ruled **no breaches of Clauses 28.1 and 31.1 of the 2021 Code.**

[Organisation GG]

The Panel noted [Organisation GG] was a healthcare organisation and that transfers of value made to it should be disclosed on Disclosure UK. The complainants submitted a screenshot of the organisation's 2022 National Conference indicating that Novo Nordisk provided sponsorship to cover the development costs of project administration and management. Novo Nordisk stated that it had an organised slot on the programme and that no transfer of value had been made direct to [Organisation GG]. Novo Nordisk did not identify who the payment was made to or state whether it had been disclosed. The Panel was mindful that the complainant bore the burden of proof and in this instance the Panel considered that the complainants had not established on the balance of probabilities that the transfer of value had not been disclosed as required and ruled **no breaches of Clauses 28.1 and 31.1 of the 2021 Code.**

[Organisation ZZ]

The Panel noted [Organisation ZZ] was a patient organisation. Novo Nordisk submitted the transfer of value relating to an event in 2022 had incorrectly been disclosed against [a named healthcare organisation] and would be corrected. Noting that the transfer of value had both been disclosed against the wrong organisation and had not been disclosed on the correct platform, the Panel ruled **breaches of Clause 29.1 and 29.2 of the 2021 Code.**

[Organisation TT]

The Panel noted Novo Nordisk had been named as a partner and/or funder in the Impact Report published by the [organisation] in 2022. The Panel noted that the complainants had not provided any further evidence in relation to a transfer of value having been made and also that Novo Nordisk maintained no payments had been made in 2022. The Panel considered that the complainants had not established that a payment had been made in 2022 and it ruled **no breaches of Clauses 28.1 and 31.1 of the 2021 Code.**

[Organisation AAA]

The Panel noted the complainants referred to the 2021 Annual Accounts which indicated that funding of £145,877 had been provided to [Organisation AAA]. Novo Nordisk submitted this was an R&D activity included in its aggregate value on Disclosure UK. In the Panel's view the complainants had not established on the balance of probabilities that the payment had not been disclosed on Disclosure UK as required and accordingly it ruled **no breach of Clauses 28.1 and 31.1 of the 2021 Code.**

Inaccurately reported payments

The Panel noted that in relation to section 2 of the complaint, inaccurately reported transfers of value, Novo Nordisk had been asked to respond, in addition to those Clauses cited by the complainant, to Clause 9.10 of the 2015, 2016 and 2019 Codes and Clause 5.5 of the 2021 Code. The Panel agreed with Novo Nordisk's submission that these clauses related to declarations of company involvement on specific materials that companies had sponsored and

were therefore not relevant to the alleged failure to disclose transfers of value. The Panel therefore made no ruling on these clauses.

The Panel noted that the complainants defined inaccurately reported payments as instances where the company reported some payments but those mentioned by the recipient referred to a different payment purpose and/or value. The Panel noted the complainants stated that, assuming the accuracy of the recipient's declaration, the transfers of value at issue in this section were either inaccurately reported or were unreported. The Panel queried whether the complainant's assumption of accuracy was reasonable and noted in this regard the complainants bore the burden of proof.

The Panel noted that the allegations and evidence provided in relation to each organisation in this section were slightly different and thus ruled in relation to each organisation.

[Organisation R]

The Panel noted the complainants' allegation that there was a discrepancy between the reported purpose of payments published by Novo Nordisk and the use of the payments as stated by [Organisation R]. The complainants referred to two reports about cardiovascular disease written by [Organisation R] and dated 2018 and 2020, which each stated that they were funded by, among other parties, Novo Nordisk. The complainants stated that Novo Nordisk's lists of disclosures to [Organisation R] did not mention reports. Novo Nordisk had disclosed funding to [Organisation R] for a corporate membership in 2018 and support for a campaigning committee in 2019.

The Panel noted that funding for the 2020 report fell under the 2019 Code. The Panel noted that the spreadsheet provided by Novo Nordisk stated that payment was made in 2019 for a cardiovascular disease collaborative group and that this had been reported inaccurately as 12 months' corporate membership in the 2019 patient organisation disclosure list. It was implicit in Novo Nordisk's response that production of the 2020 report was part of the activity of the cardiovascular disease collaborative group. As acknowledged by Novo Nordisk the Panel ruled a **breach of Clause 27.7 of the 2019 Code**.

The Panel noted that funding for the 2018 report fell under the 2016 Code. Novo Nordisk provided no details on its spreadsheet in relation to the 2018 report as it was pre-2019. The complainants, however, provided Novo Nordisk's published list of payments to patient organisations in 2018. This did not refer to the payment in question, but did have a reference to a 12-month corporate membership of £24,000. In the absence of a response from Novo Nordisk on this point the Panel was unclear whether this was an inaccurate report, similar to sponsorship of the 2020 report, or whether sponsorship of the 2018 report had not been disclosed. Nonetheless, the Panel considered the complainants had established on the balance of probabilities that disclosure of sponsorship of the 2018 report had not been in accordance with the Code and therefore ruled a **breach of 27.7 of the 2016 Code**.

[Organisation CCC]

The Panel noted the complainant's allegation that funding for an [Organisation CCC] event in 2021, World [named condition] Day, was not disclosed by Novo Nordisk.

The Panel noted that the complainants had provided a copy of a webpage on the patient organisation website which provided details of the event, including that it was sponsored by Novo Nordisk, and a copy of Novo Nordisk's published payments to patient organisations which

showed payments by Novo Nordisk for: a Zoom webinar licence (2020), a grant (2020), and corporate membership (2021).

The Panel noted that the patient organisation event in question occurred in April 2021 and thus the provision of funds must have occurred before the 2021 Code came into force. The Panel noted the spreadsheet provided by Novo Nordisk stated that the 2021 disclosure of £10,000 for corporate membership was incorrect and should have read £2,500 for a donation agreement and £1,500 to support World [named condition] Day and that this would be corrected. The Panel noted that the published stated purpose and value by Novo Nordisk of its 2021 payment was, therefore, incorrect as alleged. In addition, a separate transfer of value had not been disclosed, which was not the subject of this allegation. The Panel therefore ruled a **breach of Clause 27.7 of the 2019 Code**.

[Organisation H]

The Panel noted the complainants' concern that the healthcare organisation reported payments totalling £268,498 from Novo Nordisk in its annual accounts between 2015 and 2017 whilst Novo Nordisk had disclosed transfers of value to the healthcare organisation totalling £173,857 over the same period on Disclosure UK. Copies of the healthcare organisation's annual accounts were provided, save for 2016 for which a screenshot of a relevant page was part of the company's response.

The Panel noted that Novo Nordisk provided no details on its spreadsheet in relation to these payments as they were pre-2019 and further stated that it had not provided any funds to this healthcare organisation since 2018.

The Panel noted that the complainants had only provided data from Disclosure UK in relation to the healthcare organisation in question which related to transfers of value disclosed in 2015 and 2016. No Disclosure UK data was provided by the complainants in relation to relevant transfers of value published in 2017.

The Panel noted that there was an apparent discrepancy between the transfers of value published by Novo Nordisk on Disclosure UK and the sums referred to in the annual accounts of the organisation. Details of expenditure from the grant were given in the annual accounts. The transfers of value in Disclosure UK for both 2015 and 2016 (screenshots were provided by the complainants) were each published in the Donations and Grants to HCOs/Benefits in kind to HCOs column with an additional 2015 payment appearing in the travel and accommodation column. The Panel considered that the purpose of the transfers of value published in 2015 and 2016 as indicated by the Disclosure UK column was not inconsistent with the purpose of the transfers of value as stated in the healthcare organisation's annual accounts, where they were described as a Novo Nordisk support grant. In relation to the value of the transfers, the Panel considered that the values published in the annual accounts bore no relation to the values published in Disclosure UK. In the Panel's view, the complainants had not established on the balance of probabilities the correct value of the transfers of value and thus whether the correct values had been disclosed. It was unclear whether those published in the annual accounts or those in Disclosure UK were correct. The Panel ruled **no breaches of Clause 24.1 of the 2015 Code and Clause 24.1 of the 2016 Code** in relation to the purpose and value of the 2015 and 2016 transfers of value.

[Organisation W]

The Panel noted the complainants' allegation that there was a discrepancy in the reported value of the payment for [Organisation W]'s International Conference; £10,000 was stated in the patient organisation's annual report for the 2019/2020 financial year (to 31/03/20) whilst a transfer of value of £4,166.67 in relation to 'sponsorship of the annual conference 2019 and membership database update' was stated in Novo Nordisk's published list of patient organisations to which it had provided funds in 2019. The Panel further noted Novo Nordisk's spreadsheet referred to sponsorship of the July 2020 conference and stated that payment was disclosed on its website but incorrectly categorised as corporate membership: an £8,500 payment in 2020 covered £2,000 membership database update, £3,000 annual conference support and £3,500 local friendship group.

The Panel noted that Novo Nordisk's spreadsheet referred to its sponsorship of the July 2020 conference which the Panel noted occurred after the end of the financial year, 31 March 2020, covered by the patient organisation's annual report. Whilst expenditure for the July 2020 conference would likely be incurred by the patient organisation before the beginning of the 2020/2021 financial year, the Panel was unclear whether the monies shown against the conference for 2019/2020 related solely to a conference that occurred in that financial year or included the July 2020 conference. The Panel noted that Novo Nordisk had been provided with the complainant's evidence and appeared to consider that the payments in the annual report 2019/2020 related to the July 2020 conference, and had responded on this basis. Novo Nordisk did not comment on its already published 2019 disclosure of £4,166.67 to support the annual conference in 2019 and membership update referred to by the complainant.

The Panel considered that the position was unclear. The original and revised figures did not correlate with the relevant patient organisation annual report. It appeared on the balance of probabilities that both the reported purpose and value were incorrect on the company's list of patient organisations to which it had provided support in 2019 and a **breach of Clause 27.7 of the 2019 Code** was ruled.

[Organisation T]

The Panel noted that the complainants had provided a screenshot of a webpage from the patient organisation's website that described Novo Nordisk as a corporate partner and stated that it had donated search engine optimisation and the production of content templates to improve the online visibility of the patient organisation's website. The webpage was undated but appeared to have been accessed in January 2024 although the date of the donation and its amount was not stated. The Panel noted that the complainants had provided a screenshot of Novo Nordisk's list of patient organisations to which it had provided support in 2018 which referred to a payment of £50,134.00 in relation to 'support of the community champion group for obesity'. The complainants' narrow allegation was that the description of the payments did not match.

The Panel noted that Novo Nordisk provided no details on its spreadsheet in relation to this matter as it was pre-2019.

In Panel's view and on the limited information before it the complainants had not established why the description of the 2018 payment disclosed by Novo Nordisk should match the description of the undated and unquantified payment on the patient organisation's webpage. The Panel noted that in the absence of further information about the payment described by the patient organisation it was not possible to establish when it ought to have been, or ought to be,

published. The complainants bore the burden of proof in this regard. The Panel ruled **no breach of Clause 27.7 of the 2016 Code**.

Misreported payments

The Panel noted that the complainants defined misreported payments as payments that were reported but not on the appropriate disclosure platform as required by the ABPI Code.

The Panel noted Novo Nordisk's acknowledgement that certain transfers of value to healthcare organisations and patient organisations may have been disclosed in the wrong place but that Novo Nordisk submitted that it was transparent in relation to these transactions and that it was sometimes difficult to understand whether an organisation was a patient organisation, a healthcare organisation or both. The Panel acknowledged that certain organisations might not fit neatly within either definition and in such circumstances it was helpful to set out the company's approach clearly in its methodological note. The Panel was not an investigatory body and made its ruling on the basis of the parties' submissions. In this regard, the Panel noted Novo Nordisk had acknowledged that certain organisations had been misclassified.

Payments to patient organisations

The complainants alleged that, between 2015 and 2022, Novo Nordisk had misreported 58 payments, worth £708,720.78, to 14 patient organisations by reporting these payments on Disclosure UK, rather than in the disclosure reports on its website. The complainants had provided the PMCPA with a list of these payments and copies of Novo Nordisk's disclosure reports of payments to patient organisations for the years 2015 to 2022. The Panel noted that the complaint referred to two other enclosures (a yearly summary of the misreported payments and a list of five organisations where payments were reported in both a disclosure report on the company's website and on Disclosure UK) but that these were not provided to the Panel as part of the complaint. The complainants did not provide the full data downloads for Novo Nordisk for the relevant years from Disclosure UK.

The Panel noted that Novo Nordisk's submission acknowledged that 10 of the 14 organisations listed in this section of the complaint were patient organisations. Novo Nordisk did not respond in relation to the other four organisations, as all the listed transactions were pre-2019.

The Panel accepted the view of both the complainants and Novo Nordisk that 10 of the 14 organisations were patient organisations. While noting that the complainants had provided no explanation of why they considered them to be patient organisations, of the remaining four organisations, in the Panel's view, two were likely to be considered patient organisations and two were not (they appeared to be hospices, more likely to be considered healthcare organisations).

Removing the two organisations that the Panel determined were not patient organisations, the payments at issue were:

- 2015 – two payments to one organisation; total: £5,800
- 2018 – one payment (£3,812.49) to one organisation, one payment (£159,843) to another; total: £163,655.49
- 2019 – one payment (£250) to one organisation, one payment (£19,061.51) to another; total: £19,311.51
- 2020 – one payment (£4,050) to one organisation, two payments (£7,884 in total) to another; one payment (£10,000) to a third; one payment (£80) to a fourth; total: £22,014

- 2021 – four payments (£72,000 in total) to one organisation, one payment (£24,352.03) to another; total: £96,352.03
- 2022 – 25 payments (£380,146.03 in total) to one organisation, four payments (£17,000 in total) to another, four payments (£841.72 in total) to a third), one payment (£2,000) to a fourth; total: £399,987.75

The Panel noted that none of these payments appeared in Novo Nordisk's patient organisation disclosure reports provided by the complainants and that it was clear that certain transfers of value to patient organisations had not been disclosed in these reports. The Panel noted, however, that the allegation in this section was that a patient organisation had been misclassified as a healthcare organisation and thus the transfer of value had been incorrectly disclosed on Disclosure UK. As such, the complainants needed to establish that not only were the transfers of value not disclosed in Novo Nordisk's patient disclosure reports, but that they had been disclosed on Disclosure UK.

The Panel noted that five of the transfers of value at issue were present in the Disclosure UK extracts provided in relation to Section 1 of the complaint (unreported payments). These were a payment of £19,061.51 to [Organisation S] in 2019 and four payments to [Organisation Q] in 2022 (total value: £17,000). As these transfers of value to patient organisations were disclosed on Disclosure UK and not in Novo Nordisk's patient disclosure reports, the Panel ruled **breaches of Clause 27.7 of the 2019 Code and Clauses 29.1 and 29.2 of the 2021 Code.**

With regard to the remaining transfers of value at issue in this section of the complaint, the Panel noted that the complainants had not provided copies of the complete downloaded Disclosure UK database for the relevant years. As such, the complainants had not established that not only were the transfers of value not disclosed in Novo Nordisk's patient disclosure reports, but that they had been disclosed on Disclosure UK, and so had not established that the transfers of value had been miscategorised by publication on Disclosure UK. The Panel therefore ruled **no breaches of Clause 27.7 of the 2015, 2016 and 2019 Codes and Clauses 29.1 and 29.2 of the 2021 Code.**

Payments to healthcare organisations

The complainants alleged that, between 2015 and 2019, Novo Nordisk had misreported seven payments, worth £73,300, to two healthcare organisations by reporting these payments in the disclosure reports on its website, rather than on Disclosure UK. The complainants had provided the PMCPA with a list of these payments and copies of Novo Nordisk's disclosure reports of payments to patient organisations for the years 2015 to 2022. The Panel noted that the complaint referred to another enclosure (a yearly summary of the misreported payments) but that this was not provided to the Panel as part of the complaint. The complainants did not provide the full data downloads for Novo Nordisk for the relevant years from Disclosure UK.

The Panel noted that Novo Nordisk's submission acknowledged that the organisations listed in this section of the complaint were healthcare organisations. While noting that the complainants had provided no explanation of why they considered them to be healthcare organisations, in the Panel's view, both organisations were likely to be considered healthcare organisations.

The Panel noted the allegation was not that the transfers of value had not been disclosed, but that they had been disclosed in the incorrect forum. From the evidence before it, the Panel accepted the complainant's allegation that these seven payments (three in 2015, three in 2016

and one in 2019) had been included in the patient organisation disclosure reports on Novo Nordisk's website.

The Panel noted the transfer of value in 2019 concerned a £3,000 contribution to the cost of an event for [Organisation B] and that this organisation also featured in Section 1a of the complaint. Within that section the extract from Disclosure UK provided by the complainants for [Organisation B] included one entry for 2019 of £3,000 in respect of a contribution to the cost of an event. The Panel noted that Novo Nordisk submitted in response to Section 1 that the payment had been double reported on both Disclosure UK and in its list of patient organisation disclosures. In the Panel's view noting the narrow allegation that the organisation had been misclassified the complainants had not established the transfer of value included in Disclosure UK for 2019 was not the one at issue and ruled **no breach of Clause 24.1 of the 2019 Code**.

Bearing in mind its comments above, the Panel did not know whether the payments in 2015 and 2016 to [Organisation E] were also disclosed on Disclosure UK. As noted above, a copy of the complete dataset from Disclosure UK for the relevant years had not been provided; the extract provided in relation to Section 1 of the complaint contained one single entry relating to a 2019 transfer of value for registration fees. Consistent with its approach above, the Panel did not consider that the complainants had established that the organisations at issue had been miscategorised by virtue of their publication in the Novo Nordisk patient organisation disclosure reports on its website as opposed to Disclosure UK. In relation to [Organisation E], a failure to disclose on Disclosure UK had not been established on the balance of probabilities. The Panel ruled **no breaches of Clause 24.1 of the 2015 and 2016 Codes**.

Duration of disclosure information in the public domain

The Panel noted that Novo Nordisk had been asked to bear in mind Clause 24.5 of the 2015, 2016 and 2019 Codes and Clause 31.2 of the 2021 Code which required disclosure information to remain in the public domain for at least three years from the time of first disclosure. Whilst the clauses had been cited by the complainants, the Panel noted that the wording of these clauses specifically referred to "the information disclosed" and considered that the complaint did not show an allegation in this regard, i.e. that a transfer of value had been disclosed on Disclosure UK but had not remained in the public domain for at least three years from the time of disclosure. The Panel therefore ruled **no breaches of Clause 24.5 of the 2019 Code and Clause 31.2 of the 2021 Code**.

High standards and Clause 2

The Panel noted that Novo Nordisk had been asked to bear in mind Clauses 9.1 and 2 of the 2015, 2016 and 2019 Codes in relation to the transfers of value at issue made between 2015 and 2020, and Clauses 5.1 and 2 of the 2021 Code in relation to the transfers of value at issue made in 2021 and 2022. The Panel, however, considered that the requirements with regard to disclosure of transfers of value in relation to healthcare organisations and patient organisations and Clauses 9.1 (2015, 2016 and 2019 Codes) and 5.1 (2021 Code) and Clause 2 were closely similar in all the versions of the Code. The Panel, therefore, decided it was appropriate and proportionate to make an overall ruling under the 2021 Code in this regard (Clauses 5.1 and 2).

The Panel noted that the disclosure of transfers of value was an important part of self-regulation and considered that the undisclosed, inaccurately reported and misreported transfers of value

noted above showed that Novo Nordisk had failed to maintain high standards; overall, a **breach of Clause 5.1 of the 2021 Code** was ruled.

In the Panel's view, transparency in relation to transfers of value was an important means of building and maintaining confidence in the pharmaceutical industry. The Panel considered that in relation to matters that occurred between 2015 and 2022 the circumstances of this case raised questions about the culture of the company and demonstrated poor governance and a lack of care in relation to the application of the disclosure processes. While the Panel was concerned that the requirements of the Code had not been met in relation to disclosure of payments made to healthcare organisations and patient organisations over multiple years, as required by the Code, it was particularly concerning that a substantial number of errors from the previous three years had not been identified during the review undertaken by Novo Nordisk which led to its voluntary admission in Case AUTH/3847/11/23 and during a time when Novo Nordisk was under audit and thus compliance should have been front of mind. The Panel noted that Novo Nordisk had developed a full CAPA plan to ensure these errors were corrected, templates were resubmitted and errors were not repeated in future disclosures.

The Panel noted Clause 2 was a sign of particular censure and reserved for such use. It noted its comments and rulings above and considered that the particular circumstances of this case demonstrated that by failing to publicly disclose payments, inaccurately reporting and misreporting payments to healthcare organisations and patient organisations over an extended period of time, Novo Nordisk had brought discredit upon, and reduced confidence in the pharmaceutical industry. The Panel therefore ruled a **breach of Clause 2 of the 2021 Code**.

The Panel decided on balance not to report Novo Nordisk to the Code of Practice Appeal Board for it to decide whether the imposition of further sanctions was appropriate. The Panel noted that Novo Nordisk had been the subject of several cases in relation to the failure to appropriately disclose transfers of value. The Panel noted that additional sanctions had been imposed and that Novo Nordisk was already the subject of the audit process at the request of the Code of Practice Appeal Board. The Panel noted that the matters raised in this case were closely similar to matters already before the Appeal Board both in terms of the nature of the matters considered and that the amount undisclosed was significant. The Panel considered that it was important that the Appeal Board was aware of this case and noted that the Appeal Board received reports of all cases completed at the Panel level and, under Paragraph 13.1 of the Constitution and Procedure, could, at that point, consider whether additional sanctions might be appropriate. The Panel noted the company was currently under an audit cycle and expected that the upcoming re-audit required by the ABPI Board would, among other things, evaluate the company's current processes in relation to disclosure of transfers of value.

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Post hoc note: In relation to the Panel's comment about "inconsistencies in the values of the payments included in the previous case [Case AUTH/3847/11/23] and those submitted by Novo Nordisk in this case" Novo Nordisk has confirmed that the figures submitted in that previous case were a best estimate, and that a forensic analysis of past transfers of value was carried out between Case AUTH/3847/11/23 and this case, leading to the amended figures provided in this case.

Complaint received **2 February 2024**

Case completed **25 October 2024**