

CASE AUTH/3926/6/24

COMPLAINANT v PFIZER

Allegations about promotion on social media

CASE SUMMARY

This case was in relation to two LinkedIn posts: one was made by a UK health authority, the other by an employee of that organisation. Both posts mentioned Pfizer's medicine, voxelotor, in the context of the publication of a NICE recommendation and included a link to an article published on the health authority's website. The complainant alleged that the posts had been 'liked/loved' by a Pfizer UK employee.

The outcome under the 2021 Code was:

Breach of Clause 26.1 (x2)	Advertising a prescription only medicine to the public
No Breach of Clause 5.1	Requirement to maintain high standards at all times
No Breach of Clause 2	Requirement that activities or materials must not bring discredit upon, or reduce confidence in, the pharmaceutical industry

**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 about Pfizer was received from a named, contactable complainant who described themselves as a health professional.

COMPLAINT

The complaint wording is reproduced below:

"I am writing to highlight that Pfizer employees (e.g.[named employee]) whom are portraying themselves as 'medical' continue to cross the line on social media and 'love' or 'like' posts from bodies such as NHS. These posts are referring to 'ground breaking' medicines being made available for example in Sickle Cell and funnily enough the company this individual works at also is the manufacturer of this 'life changing' drug (Voxelotor). They are coming across as medical but passively promoting these medicines through their likes on social media. You would expect them to know at their level the code requirements and company procedures which I assume Pfizer have in place. Their role and perception becomes blurry when they engage in this way and not to forget credibility. High standards are not being met."

When writing to Pfizer, the PMCPA asked it to consider the requirements of Clauses 26.1, 5.1 and 2 of the 2021 Code.

PFIZER'S RESPONSE

The response from Pfizer is reproduced below:

“Background information:

This complaint relates to two independently authored LinkedIn posts both of which were “Liked/Loved” by a Pfizer UK employee.

A post published by [a UK health authority] [stated] that ‘Thousands of sickle cell patients have been given a new treatment lifeline by the NHS from today, following the approval of a new drug for the disease. The innovative treatment could help up to 4,000 people with sickle cell disease have a better quality of life and will hopefully ease some of the symptoms faced by people living with this disease. Voxelotor is a treatment option for patients who no longer respond to, or tolerate, the commonly used sickle cell drug hydroxycarbamide, and those who cannot have blood transfusions, meaning patients could need fewer hospital trips.’

A post published by [named employee of the UK health authority] [stated] that ‘It gives me great pleasure to announce that following detailed, conscientious work with our partners and stakeholders, NHS England has made voxelotor, a medication for #SickleCell disorder available to our patients as from today. This is another marker of our absolute determination to #narrowthegap of #healthinequalities. Huge thanks to everyone who worked with us. It is a great day!’

The posts were independently authored with no involvement from Pfizer. They were issued in response to the publication, on 3rd May 2024, of NICE’s final draft guidance for Pfizer’s medicine voxelotor. Both posts linked to an article published on the [health authority’s] website giving more information about voxelotor and the recommendation from NICE.

Oxbryta (voxelotor) is indicated for the treatment of haemolytic anaemia due to sickle cell disease (SCD) in adults and paediatric patients 12 years of age and older as a monotherapy or in combination with hydroxycarbamide.

Promotion to the public (Clause 26.1)

As identified by the complainant, the LinkedIn posts issued by [a UK health authority] and [an employee of that organisation] on 3rd May 2024 were Liked/Loved by a Pfizer colleague. At the time of receiving the complaint, the colleague had 500+ connections and approximately 1,930 followers on LinkedIn. The colleague is an HCP and, whilst many of their connections and followers are likely to have either a professional interest in healthcare or be a healthcare professional, the colleague’s network also includes members of the public.

The LinkedIn posts liked/loved by the colleague contained information about a Pfizer Prescription Only Medicine (POM). Liking/loving the posts, proactively disseminated

the information to the colleague's connections and followers and thus promoted a POM to the public. Pfizer recognises that the colleague's actions did not meet the requirements of Pfizer policy and the Code and as such we accept a breach of Clause 26.1. The colleague has removed their 'like' of the [health authority's] post and their 'love' of [the other] post, thus removing these posts from the colleague's own LinkedIn feed.

Maintenance of high standards (Clause 5.1) and Upholding Confidence in the Industry (Clause 2)

[Pfizer provided details of the individual's employment history.] The colleague has no professional responsibilities relating to the Pfizer medicine that is the focus of the LinkedIn posts with which they interacted.

The Pfizer colleague had initially completed Pfizer's interactive social media training module as part of their onboarding when joining Pfizer. The training module includes the requirement to read the UK social media policy and the one-page quick reference guide. The colleague repeated this training in March 2024, less than two months before taking the actions that are the subject of this complaint. In addition to requiring colleagues to complete our interactive social media training module, Pfizer UK has issued numerous communications, reminders and calls to action relating to personal use of social media during the time that the colleague has been working for Pfizer. In addition to this, any internal company announcements related to specific medicines always include a reminder of the key elements of the social media policy, for the specific purpose of ensuring that the requirements of the policy are front of mind at times when colleagues may see third party social media posts relating to Pfizer medicines.

The table below details the key relevant communications and training issued by Pfizer to UK colleagues during the time that the colleague has been working at Pfizer.

Date	Details
6 th March 2023	Communication to all UK based Pfizer colleagues and contractors requiring a mandatory action to review current and historical social media to ensure compliance with the UK Social Media Policy and the Code.
7 th March 2024	Pfizer UK interactive social media training re-issued to all UK based colleagues and contractors
28 th March 2024	Communication to all UK based colleagues and contractors reminding them to complete social media training by upcoming deadline
9 th April 2024	Communication to all UK based colleagues and contractors from UK Medical Director informing them of recent PMCPA rulings and media coverage related to personal use of social media
3 rd May 2024	Communication to the UK organisation announcing that NICE had published Final Draft Guidance recommending voxelotor, including a reminder of the key elements of the social media policy

9 th May 2024	Monthly news video update for all colleagues and contractors working for Pfizer UK, including a reminder of the social media rules of engagement and link to one-page quick reference guide
10 th June 2024	Communication to the UK organisation announcing that SMC had accepted voxelotor for use within NHS Scotland, including a reminder of the key elements of the social media policy

Of specific relevance to this case is the internal company announcement issued by Pfizer on 3rd May 2024 referring to the publication of NICE Final Draft Guidance recommending Oxbryta (voxelotor). The email was approved by a final medical signatory on 3rd May 2024. The email stated that the information was for the reader's own awareness and should not be raised proactively with customers or third parties. The email also instructed recipients not to share the news on social media and not to like or share any external social media or news articles which referenced NICE's decision. It also contained a reminder about the key elements of the social media policy including a link to the full policy.

[Pfizer provided details of actions taken internally to look into the matters raised.]

We have found no evidence of any other Pfizer colleague interactions with the posts identified by the complainant. Pfizer has been let down by the decision making and actions of this individual colleague. We believe that the measures that we have taken as a UK organisation clearly demonstrate Pfizer's commitment to doing all we can to ensure that our colleagues' personal use of social media is compliant with the requirements of our social media policy and therefore the Code. We strongly assert that the actions we have taken to drive appropriate use of social media by Pfizer colleagues, particularly in the time period immediately prior to this colleague's actions, maintained the high standards expected of us and did not bring discredit upon or reduce confidence in our industry. We therefore strongly deny breaches of Clauses 5.1 and 2 of the Code of Practice."

PANEL RULING

This case was in relation to two LinkedIn posts: one was made by a UK health authority, the other by an employee of that organisation. Both posts mentioned Pfizer's medicine, voxelotor, in the context of the publication of a NICE recommendation. The posts both included a link to an article published on the health authority's website. The complainant alleged that the posts had been 'liked/loved' by a Pfizer UK employee.

The Panel accepted Pfizer's submission that the posts were independently authored and published with no involvement from Pfizer. As such, the Panel determined that the Code did not apply to the original posts.

Pfizer acknowledged that both posts had been 'liked/loved' by the Pfizer employee identified by the complainant. In the Panel's view, the UK-based employee's engagement with the posts would have proactively disseminated them to their LinkedIn connections in the UK, which included members of the public. The Panel determined that this brought the LinkedIn posts

within the scope of the ABPI Code. It was well established that if an employee's personal use of social media was found to be in scope of the Code, the company would be held responsible.

The Panel noted that the first LinkedIn post (by the health authority) contained the name of the drug ("voxelotor"), its indication ("sickle cell") and claims such as "Thousands of sickle cell patients have been given a new treatment lifeline by the NHS from today, following the approval of a new drug for the disease" and "This innovative treatment could help up to 4,000 people with sickle cell disease have a better quality of life and will hopefully ease some of the symptoms faced by people living with this disease".

The Panel noted that the second LinkedIn post (by the employee of the health authority) contained the name of the drug ("voxelotor"), its indication ("for #SickleCell disorder") and a claim in the form of a preview of the headline of the linked article: "NHS rolls out 'life-changing' treatment for thousands with sickle cell disease".

The Panel considered that the proactive dissemination of the two LinkedIn posts by the UK-based Pfizer employee to their connections, including members of the public, constituted promotion of a prescription only medicine to the public. The Panel therefore ruled a **breach of Clause 26.1** for each LinkedIn post, as acknowledged by Pfizer.

The promotion of a prescription only medicine to members of the public was a serious matter. In deciding whether there was evidence in this case that Pfizer had failed to maintain high standards, the Panel took account of Pfizer's submission that it had found no evidence of any other Pfizer employees interacting with either LinkedIn post. Pfizer submitted that the employee had since removed their interactions with the posts.

Pfizer submitted that the employee, who had no professional responsibilities relating to voxelotor, had received training on Pfizer's social media policy when they first started working for Pfizer and again less than two months before interacting with the posts at issue. The social media policy included the requirement that "posts must not include direct or indirect reference to, or link to information about licensed or unlicensed medicines (Pfizer or non-Pfizer medicines)" in relation to interacting with third party social media related to Pfizer business. Pfizer also submitted further evidence of the actions taken to ensure employees understood and adhered to its social media policy – in the form of regular reminders.

On the same day that the employee interacted with the two posts at issue, Pfizer had issued an internal company announcement about the publication of the final draft guidance by NICE (the subject of the two posts), which included the statement:

"This information is for your own awareness. Please do not raise this information proactively with customers or third parties. This information should not be shared on social media and please do not like or share any external social media or news articles which reference this decision. Please remind yourself of the UK Social Media policy and ensure that you adhere to the requirements of this policy."

Pfizer appeared to provide appropriate training and have clear company policies communicating its expectations regarding the use of social media. The Panel considered that Pfizer had been let down by a single employee. In this case, the Panel did not consider there was evidence to suggest that high standards had not been maintained. Recognising the clarity of Pfizer's compliance programme on this topic, regular messaging around social media, the content of the

post at issue and the need for proportionate regulation, the Panel considered that its concerns were addressed in the rulings of breaches of Clause 26.1 above and, therefore, ruled **no breach of Clause 5.1** and **no breach of Clause 2**.

Complaint received **13 June 2024**

Case completed **6 May 2025**