

## A supplemental income

Should practitioners be shy about selling supplements in their practices? Not if the client is informed about what's going on, says **Karen Wilson** of CLF Distribution.

**T**here's no doubt that many small businesses are experiencing difficulties as people everywhere cut back on personal spending. Private practitioners are no exception and as a consequence like other small businesses many are starting to consider other avenues in order to boost their regular income.

It's fair to say however that some "professional" individuals tend to shy away from income generating via their clients, perhaps believing that it is somehow unethical.

To people who've grown up with the NHS, where all health care is "free" (it isn't of course, but that's another story), the idea that practitioners should make any money from the supplements they recommend is anathema.

"As Holfordwatch have pointed out, the BANT Code of Ethics allows nutritionists to exploit their clients for commercial benefit by receiving commission from supplement sales. This is quite extraordinary, especially when you consider that the GMC impose heavy sanctions on its members who do similar things", said Internet commentator "gimpy", one of many voices raised against CAM practitioners.

This common view misses the point. Medical doctors regulated by the General Medical Council fall into two camps. Doctors employed by NHS hospitals or by NHS trusts are paid salaries, fees for patients and fees for services – payments that ultimately are met by tax payers, some of whom are patients receiving medical care, some of whom are not, and who have no say in the matter. The cost of medicines is free or heavily subsidised. Doctors in private medicine may be barred from receiving commission on "sales" of the drugs they prescribe, but they are free to set their own fees for the services – including medications, procedures and tests – that they recommend to patients.

Indirectly, of course, even NHS GPs are paid to recommend drugs. As an example, GPs have been "incentivised" to get blood sugar levels of diabetic patients under stricter control. A scheme introduced in 2009 pays a practice an extra £3000 if it can get half of its type 2 diabetic patients to hit a target HbA1c level – set by government, not by the practitioners' clinical judgement.

Drug company influence on doctors



has been well-documented, including by a classic paper in the Journal of the American Medical Association, where it was noted that approximately \$19 billion was being spent annually by drug companies on marketing to doctors, with thousands of drug reps bearing gifts, samples and free drug-industry sponsored conferences. "The rate of drug prescriptions by physicians increases substantially after they see sales representatives, attend company-supported symposia, or accept samples", said the researchers.

This is not a case of "they do it, so why can't we?" The ethical issue is whether the client knows what is going on or not.

When it comes to orthodox medical practice, the patient is kept in the dark about financial incentives.

We propose that CAM practitioners follow the line taken by BANT (the British Association for Applied Nutrition and Nutritional Therapy), which is ethical, despite what critics say.

As BANT's Jayne Nelson makes clear, their code of ethics ensures that the client is informed. "Our codes say 'You may recommend products or services to clients, but you must, at the time, declare any financial benefit you receive from this'", she says.

Unlike medical doctors who write prescriptions that patients take away to have filled by a pharmacist and pay a fraction of the

price for, a CAM practitioner's standard practice is to recommend products and send the client off to the high street health food store. The client pays full price and the profit is taken by the store. Some practitioners use a specialist outlet like The Nutri Centre, who on average offer 20% off retail pricing. Most practitioners choose to pass on the whole of this saving to their clients, with very few adding a small margin with which to cover their costs.

Why not be a little savvy and have the best of both worlds?

CLF is backing the new website [www.PrivatePractitioner.co.uk](http://www.PrivatePractitioner.co.uk) which gives registered CAM practitioners instant access to more than 9000 products at trade pricing. The average trade saving versus retail pricing is 33%. That leaves plenty of margin for practitioners to share with clients. That means you can provide them with good value – and an added value for your practice in their eyes – while they are on your protocol and seeing what works for them.

Meanwhile you have established a new revenue stream for your practice without the hassle of setting up your own Internet shopping website.

There's no pressure selling here; you tell your client exactly what's going on and they are free to decide whether to continue to buy their supplements via your practice or to get them from their high street store or their own favourite website.

The key to opening up this potential income stream in an ethical manner is to make sure your clients are informed. [www.privatepractitioner.co.uk](http://www.privatepractitioner.co.uk)

\* Brennan TA, et al. Health industry practices that create conflicts of interest: a policy proposal for academic medical centers. *JAMA* 2006;295 (4):429-33.

\* [www.privatepractitioner.co.uk](http://www.privatepractitioner.co.uk) Private Practitioner is a trade site allowing registered practitioners to purchase products for their clients. There is no minimum order, and all orders are delivered straight from the warehouse with next day delivery when you order online before 10am.

### About the author

Karen Wilson is marketing manager of CLF Distribution Ltd, the leading natural products wholesaler established in 1998. Contact CLF on 01725 514200 or [info@clfdistribution.com](mailto:info@clfdistribution.com), CLF is exhibiting at Natural & Organic Products Europe on 11-12 April at London Olympia.