THE SOFT EDGES

There's a rep outside to see you - Chris Ellis

Every day general practitioners see one or two representatives from the pharmaceutical companies. I find this involves a pleasant role reversal. Instead of having to give a patient instructions and advice one can, for a few minutes, listen to someone else giving information and advice. I switch off, sit back, relax and let it flow over me.

The different spiels or sales talks of each individual rep make an interesting study. Some are delightful naturals and others come in as if they have been wound up in the morning like clockwork robots. Some are so good they could sell me suppositories for heartburn whereas others somehow never manage to get onto my wavelength.

One of the changes that has taken place over the last twenty years is that what used to be an almost entirely male territory has been gradually taken over by the female representative. This has several bonus points for us chaps but also a few disadvantages. For instance, an ecstatically beautiful young lady comes in to see us every so often and talks in the most nonchalant and matter of fact way about vaginal itches. It all seems to spoil the romance of the occasion.

Then there is the jewellery. Apparently the women are meant to remove their wedding rings before trying to sell anything to men of any age. The lure of the unattached state is said to keep the male attention that little bit longer. On the subject of jewellery there is another charming young woman who sees me regularly and always wears a pair of elongated silver earrings like small chandeliers. When she speaks they sway gently to and fro like pendulums. Her voice is

of a steady and soothing nature so that when the soft pentothal of her voice starts and the chandeliers begin to sway, I go into a hypnotic trance. I don't know if she is aware of this or not. Maybe she puts in some hypnotic suggestions to use her products while I am under the spell.

What is more likely is that I have actually fallen asleep although I have never knowingly snored or fallen out of my chair and I am always awake when she stops talking.

Representatives, I am informed, divide general practitioners up into two main types and several subtypes. The two main groupings are the older *burnt out cerebral atrophics* and the young *synaptic hypertrophics*.

The young synaptic wants to know it all. He is the newly qualified challenger. He wants the chemistry, the side effects and the charts.

The burnt outs, on the other hand, need a slow sell. Our maximum holding capacity is three facts at a session. For instance, if it is a new drug the name should be repeated at least three times and a minimum of information must be stated in a simple form. We brain deads also need two additional things, toys and samples. Anything from a penknife to a bottle of wine will do, as we have reached the age of ethical bribery and subtle rape. Above all, please don't talk in letters or formulae. We can't remember whether the LDL should be high or low and hearing about noncompetitive inhibitors of HcmgCo reductase gives us an inferiority complex.

There is one worse than us brain dead and that is *the decerebrate*. A rep

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tells me that she visits a GP who rests his chin on his hand and just looks at her without saying a word. He doesn't flick an eyelid or give any sign that he has registered her presence. She gives her talk and then leaves not knowing whether he has heard a word or not. She is thinking of coming in topless for her next visit. This raises some exciting promises for future marketing techniques.

The rep must have quite a time out here in the bush trying to work out how he is going to be received but there are some unvarying components to the encounter that have a time honoured tradition. For instance, every drug detailed is always by far the cheapest, has the least side effects, has the greatest efficacy with the most convenience and the simplest regime. This is a gentleman's agreement of fact and involves a ritual of mutual encouragement.

The encounter is then varied by the type of representative of which two of the most typical are *The Immaculate Whites* and *The Graphs and Statistical Trials Man*.

The Immaculate Whites consist of a young man in a dazzling white safari suit with a shiny black brief case, which has expensive metal clips that deftly spring open. The sell is delivered with a confident voice and a smile that is a delight to know you and has been switched on since he brushed his teeth and talked to himself in the mirror about positive thoughts.

The Graphs and Statistical Trials Man plants open documents on the desk. They have graphs and little columns like skyscrapers rising up in different colours. Trials are quoted from a series done by Professor Van Poegenpoel at the University of Mesopotamia with the authority of scriptural infallibility. The dénouement of the performance is the glossy handout. This is a shining document with photographs of bright wholesome people and sunsets on the outside and more figures and coloured columns inside.

"I'll leave this with you. I think you'll find it interesting" is the prelude to the rep's exit and the despatch of the handout into the wastepaper basket as the door closes.

One morning, without thinking, I found myself unconsciously filing the handout straight into the wastepaper basket by my chair. I only realised what I was doing when I saw the expression on the representative's face as her eyes speechlessly followed the handout to its destiny in the bin. I apologized profusely but somehow the magic had gone out of the occasion. For some reason I haven't seen her since.

So what are the criteria for useful encounters between the GP and pharmaceutical representatives? The different styles were discussed at a recent meeting between a group of general practitioners and members of the pharmaceutical industry. The industry felt that their ideal GP tried to look interested and did not open and read his post or look around the room and whistle, while the rep was talking.

And the ideal rep for the GP? Nice legs, of course!