



## Conflicts of Interest in Medicine: What's the Problem?

## FORUM SESSION ANNOUNCEMENT

A DISCUSSION FEATURING:

**Eric G. Campbell, PhD**

*Associate Professor*

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Harvard Medical School

**Lisa A. Bero, PhD**

*Vice Chair*

Department of Clinical Pharmacy

*Professor*

Institute for Health Policy Studies

*Co-Director*

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**Ronald Bailey**

*Science Correspondent*

*Reason Magazine*

*Adjunct Scholar*

Cato Institute

*Adjunct Scholar*

Competitive Enterprise Institute

FRIDAY, MAY 15, 2009

11:45AM–12:15PM—Lunch

12:15PM–2:00PM—Discussion

### LOCATION

Reserve Officers Association

One Constitution Avenue, NE

Congressional Hall of Honor

Fifth Floor

*(Across from the Dirksen*

*Senate Office Building)*

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Over the past few years the drumbeat of concern about conflicts of interest in all aspects of medicine—from medical education to research to practice—has been growing louder. Recently, its rhythm has intensified, and now hardly a week goes by without a newspaper article about a particularly egregious example of conflicting interests or an announcement of some new institutional policy or recommendations to improve the situation. In the past few months alone, there have been an uprising among medical students; policy announcements from dozens of industry groups, medical institutions, and professional associations; and recommendations from the Medicare Payment Advisory Commission.<sup>1</sup> An Institute of Medicine committee that has been studying the issue is expected to release its report soon.<sup>2</sup>

At the heart of medicine is a belief and trust that the best interests of the patient shall prevail. Factors that can interfere with a clinician's ability to make decisions and recommendations with the patient's best interest first and foremost—if not exclusively—in mind are said to create conflicts of interests. Many things can create such conflicts, but most worrisome are financial transactions or relationships because they have been shown to be powerful in affecting judgment, often without the realization of the person whose judgment is being swayed.

Financial arrangements between medical industries and medical practitioners permeate all of medicine, and the practices under scrutiny are varied. Examples of such practices range from the blatant, such as “kick-backs” or payments to prescribe a particular test or treatment, to the subtle, such as seemingly harmless transactions like the giving of small gifts of little monetary value. Under discussion and the subject of proposed laws and policies are practices as diverse as:

- Physician ownership of diagnostic services to which they can refer their own patients<sup>3</sup>
- Industry funding of medical conferences and continuing medical education (CME) programs, either directly or indirectly through medical associations
- Participation of clinicians with relevant financial holdings on clinical guideline-writing committees and other types of advisory committees (such as those that support the Food and Drug Administration's work)
- Industry funding of research with limitations placed on publication of results
- Nondisclosure of authors' financial interests or industry “ghost-writing” of journal articles

- Ownership by patient groups of shares in companies developing products to treat their condition
- A wide variety of gifts, incentives, and inducements offered by medical salespeople to recruit or retain clients

Over the years, many organizations, institutions, and individuals have developed policies for preventing conflicts of interest. These policies vary widely, but generally have three main components: (i) identification of practices that are not allowed; (ii) requirements for disclosure of certain practices, and (iii) recusal of oneself from certain activities for which there might be a conflict.

This session is the first of two intended to examine the vast and complex landscape of conflicts of interest in medicine, and it will focus on the evidence base underlying the concerns that have received increased attention of late. The next session will examine the recommendations made by various groups, the reactions of the parties affected by these recommendations, and how the landscape is changing generally. More sessions may follow, depending on the interests of participants.

The speakers for this session have researched and are highly knowledgeable about the extent and impact of conflicts of interest and also have helped to develop conflict of interest policies for various organizations. They will describe and discuss these activities and address the following questions:

- What kinds of practices and situations create the potential for conflicts of interest? How do they affect behavior? How prevalent is the potential for conflicts of interest? How often do they actually occur? What are the consequences of conflicts of interests?
- How can conflicts of interest be avoided? How can their effects be mitigated?
- How do the benefits derived from arrangements or relationships that create the potential for conflicts of interest compare to the risks of the consequences of conflicts?

## SPEAKERS

**Eric Campbell, PhD**, is a sociologist and an associate professor of medicine in the Institute for Health Policy at the Massachusetts General Hospital and Harvard Medical School. His extensive body of research focuses on issues relating to physician conflicts of interest and professionalism. Dr. Campbell has served on study sections for

the National Institutes of Health and the Centers for Disease Control and Prevention and on committees exploring policy issues related to conflicts of interest.

**Lisa Bero, PhD**, is a professor of clinical pharmacy and vice chair of the Department of Clinical Pharmacy at the University of California, San Francisco, where she also serves as faculty in the Institute for Health Policy Studies and as co-director of the San Francisco Cochrane Center.<sup>4</sup> A significant portion of her large portfolio of research focuses on the influence of university-industry relations on the quality of research. Dr. Bero also serves on many national and international committees, several of them related to conflicts of interest and research.

Drs. Campbell and Bero both serve on the Institute of Medicine Committee on Conflict of Interest in Medical Research, Education and Practice, which is expected to release its report soon. They will present the evidence base that the committee examined about the nature, extent, and consequences of conflicts of interest in medicine.

**Ronald Bailey** is a science correspondent for *Reason* magazine and an award-winning author of numerous articles and books on science, business, and economics. He is also an adjunct scholar at the Cato Institute and the Competitive Enterprise Institute. He will present a comprehensive review that he wrote for the American Council on Science and Health titled: "Scrutinizing Industry-Funded Science: The Crusade Against Conflicts of Interest," which argues that there is little evidence that conflicts of interest have harmful consequences for research, consumers and patients, or public policy.

## ENDNOTES

1. Medicare Payment Advisory Commission (MedPAC), "Public reporting of physicians' financial relationships," ch. 5 of Report to the Congress: Medicare Payment Policy, March 2009; available at [www.medpac.gov/chapters/Mar09\\_Ch05.pdf](http://www.medpac.gov/chapters/Mar09_Ch05.pdf).
2. When the the committee's report is released, it will be available at [www.iom.edu/CMS/3740/47464.aspx](http://www.iom.edu/CMS/3740/47464.aspx).
3. For more information see: "The Ethics in Patient Referrals Act: The Stark Law and the Practice of Medicine" (Forum Session, December 14, 2007; details available at [www.nhpf.org/library/details.cfm/2589](http://www.nhpf.org/library/details.cfm/2589)) and "Medical Imaging Services: Utilization, Spending, and Appropriateness" (Forum Session, November 13, 2008, details available at [www.nhpf.org/library/details.cfm/2693](http://www.nhpf.org/library/details.cfm/2693)).
4. For more information on the Cochrane Collaboration, see "Exploring Comparative Effectiveness: Fundamentals of Evidence-Based Health and Introduction to the Cochrane Collaboration" (Forum Session, July 25, 2008, details available at [www.nhpf.org/library/details.cfm/2636](http://www.nhpf.org/library/details.cfm/2636)).