

Medical schools tackle conflict of interest

As ties between industry and the medical community become more complex, the issue of conflict of interest in research and clinical decision-making has spilled over into the realm of medical schools.

All 17 Canadian medical schools have faculty conflict-of-interest policies that dictate what is and is not acceptable in terms of industry relationships, says Dr. David Hawkins, executive director of the Association of Faculties of Medicine of Canada.

However, there are no national standards for reporting conflicts of interest in undergraduate medical education. "As a national organization, we have not been asked to address this issue," Hawkins says. Without national standards, policies vary substantially.

For example, faculty at the University of Alberta are required to declare any potential conflicts of interest, but that information is shared only internally with supervisors whose evaluation process is not open to medical students.

"If a faculty member was advocating for a certain drug and a student asks about [a] conflict, the faculty doesn't disclose it to the student," says Dr. Lorraine Breault, director of equity at the university's faculty of medicine.

Some conflicts are allowed but are managed, says Breault. "We can't avoid all relations with the private sector, we have to use our best judgment."

Other Canadian universities require disclosure but don't follow up; still others have a hybrid approach.

The leader in addressing the issue is the University of Toronto. In September, its Faculty of Medicine introduced stringent faculty conflict-of-interest policies, including provisions that, for the first time, also apply to visiting educators.

Before beginning a lecture or talk, speakers at all teaching events in clinical settings must provide statements about their potential conflicts of inter-



Many medical students now examine the potential pitfalls of industry ties.

est, including stock holdings, honoraria, consultancies and advisory board membership. The disclosure is intended to allow students to decide for themselves whether the information they receive in lectures is truly unbiased and evidence-based, says Dr. Catharine Whiteside, the university's interim dean of medicine.

Under U of T's conflict-of-interest principles, health professionals and medical students are also prohibited from receiving direct industry sponsorship to attend conferences and from accepting payment for proposing patients as research subjects or enrolling them in trials. The conflict policy also requires physicians and medical students to disclose to patients any relationship that creates, or may be perceived to create, a conflict of interest.

Several of Canada's 17 medical schools are also educating medical students about potential pitfalls in their relationships with pharmaceutical representatives, biotechnology companies and other medical industries. In the University of Alberta curriculum, first- and second-year med-

ical students evaluate the ethical and legal questions surrounding industry sponsorship.

Students will have to deal with pharmaceutical representatives and will eventually be offered gifts and sponsorships, says Dr. William Albritton, dean at the University of Saskatchewan College of Medicine. "We need to educate them about the issues before this happens."

"It's not something to fear, but something to manage and get educated about," Breault says. "If you try to prevent conflict, you're going to have people doing it anyway, then it goes underground and you really have a problem."

The University of Ottawa has a similar program in place at its medical school. "The only way to learn about it is to discuss it, have it out in the open," says Dr. Linda Peterson, former assistant undergraduate dean in Ottawa. "The earlier the better. There is a temptation in young people to feel that [industry gifts or sponsorship] will in no way influence their decision-making." —Michelle Catton, University of Ottawa medical student, Ottawa

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