by those responsible at McGill. The online case was subsequently and appropriately modified.

**Bernard Marlow**
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**Competing interests:** None declared.
DOI:10.1503/cmaj.050169

**[McGill University’s Associate Dean of CME replies:]**

The McGill Centre for Continuing Medical Education developed and accredited the case study “A hypertensive snow bird.” The Centre stands behind this case as both valid and important.

Dr. Lexchin’s letter was forwarded to us by the CFPC and resulted in an internal review of the case. The review found no evidence that the use of the generic term telmisartan was influenced by the sponsor (Boehringer Ingelheim) or mdBriefCase. The review made several recommendations, all of which were implemented by the Centre and mdBriefCase and included changing the word telmisartan to “ARB” (angiotensin receptor blocker) in the online version, in response to Dr. Lexchin’s concerns.

The Centre firmly believes in the delivery of high-quality unbiased CME and appreciates comments on content accredited by McGill.

**Michael D. Rosengarten**
Associate Dean of Continuing Medical Education
McGill University
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**Competing interests:** Dr. Rosengarten did not receive payments, etc., from the company sponsoring the article. Income for his department was derived from mdBriefCase and was used to cover expenses and to fund CME projects.
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**[The President of mdBriefCase replies:]**

I agree that the CFPC should not be accrediting CME programs that have a commercial bias. With more than 4000 physicians visiting our site each month to access more than 30 courses, credibility is critical to the continued success of www.mdbriefcase.com.

Medical schools and associations create the content of the courses we offer. All of these courses are accredited by the College. This means they must meet guidelines (available on our home page) set by both the College and the CMA. These guidelines state that CME programs “must meet accepted ethical standards, particularly regarding commercial support.”

Dr. Lexchin submitted his concerns with regard to the program “A hypertensive snow bird” to the CFPC in April 2005. As a result, there was a third-party review of this course by the CFPC. It concluded there was no evidence of commercial bias.

This course has been taken by hundreds of physicians. In the course evaluation, participants are asked, “Was this program free of commercial bias?” Participant rating for this course is 4.87 out of 5 (with a rating of 5 meaning “completely unbiased”).

At mdBriefCase we will continue to provide high-quality online CME programs, created by leading Canadian medical institutions, and following the standards of the College and the CMA.

**Greg Cook**
President
mdBriefCase

**Competing interests:** None declared.
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**Conforming to ICMJE principles**

There is increasing concern about interactions between academic investigators and the pharmaceutical industry, particularly relating to financial and other conflicts of interest, access by investigators to all research data and the ability of investigators to take full responsibility for the results of studies funded by industry. The latter 2 concerns led to a revision of the guidelines for the submission of articles to biomedical journals published in 2001 by the International Committee of Medical Journal Editors (ICMJE). Four years after publication of that commentary, clinical trial agreements between academic medical centres and industry still do not conform to the ICMJE principles.

The Canadian Association for Immunization Research and Evaluation (www.caire.ca), a network of investigators from academia and public health,