

FOR THE RECORD

Disclosure standards

The medical community must develop uniform disclosure standards for financial dealings with industry and the United States government should create a mandatory national reporting program requiring industry to make public all payments to physicians, researchers, universities, health institutions, advocacy groups or other health entities, recommends a blue-ribbon US Institute of Medicine committee on conflict of interest in medical research, education and practice.

“The public needs to be able to trust that physicians’ decisions are not inappropriately influenced by their financial relationships with industry,” the committee stated in its report, *Conflict of Interest in Medical Research, Education, and Practice*, while urging physicians, researchers, academic medical centres, professional societies, patient advocacy groups, governments, regulatory bodies and medical journals to standardize “the content, format, and procedures for disclosing financial relationships physicians and researchers have with industry” (www.iom.edu).

The call for a national reporting system for all payments by pharmaceutical, medical device and biotechnology companies is the most sweeping of a series of recent cries for stricter regulation of conflicts of interest (*CMAJ* 2009;180[5]:505).

The report argues researchers should not be allowed to conduct a clinical trial if they have a financial interest in its outcome, unless “participation is judged to be essential for the safe and appropriate conduct of the research.”

It also urges development of a new system for funding accredited continuing medical education that is entirely free of industry influence — even if that results in higher costs for physicians — and recommends that physicians be precluded from accepting any meals or gifts from industry.

The hands-off approach should also extend to anyone involved in the development of clinical practice guidelines, the committee urged.

Middle of the pack

Canada is a midlevel performer on the world’s scientific stage with but a “fair to middling trajectory” projected for its future, says the Prime Minister’s primary scientific advisory body. While support for university research is well above international norms and second only to Sweden, Canada lags behind other Organisation for Economic Co-operation and Development nations in the majority of 49 other indicators of scientific performance, the Science, Technology and Innovation Council said May 5 while unveiling its first national report card: *State of the Nation 2008: Canada’s Science, Technology and Innovation System*.

Among the areas in which Canada is most deficient: business research and development outlays, production of doctoral graduates and collabora-

tions between industry and public researchers (www.stic-csti.ca).

Peter McKinnon, council member and president of the University of Saskatchewan in Saskatoon, Sask., told reporters that the assessment was subjective. “It is council’s judgment based overall on these 50 indicators. It’s our best call.” Council Vice-Chair and Principal of McGill University in Montréal, Quebec, Dr. Heather Munroe-Blum added that the baseline assessment indicates that Canada cannot simply stay the current scientific course. “We must simply aim higher.”

Council Chair Howard Alper said that ideally, about 30% of a nation’s outlays at research-granting councils should be aimed at selected areas and 70% pegged for untargeted, curiosity-driven research in other fields. — Wayne Kondro, *CMAJ*

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Organ donation plan under development

Redesign of the nation’s organ donation system, including national oversight and allocation mechanisms for all organs and tissue, is proceeding at a crawl. But Canadian Blood Services says it hopes to complete the creation of 3 specialized registries within a year and reports some progress toward development of a strategic plan for a complete overhaul of the organ donation system (*CMAJ* 2006;175[9]:1043-45 and *CMAJ* 2008;179[7]:640-1).

The most advanced of the specialized registries is one for living donor paired exchange that is now being rolled out in all provinces, except Quebec, says Dr. Peter Nickerson, Canadian Blood Services’ executive medical director for organs and tissues. Eight potential matches have been found through the registry.

Canadian Blood Services is also developing registries for highly sensitized and urgent-status patients, as part of its \$35-million, 5-year agreement with federal, provincial and territorial governments. Nickerson is hopeful that business cases for the highly sensitized and urgent-status registries can be completed this spring and that the new registries can be rolled out in 2010.

But the completion date is difficult to project at this point, he adds.

With respect to the broader goal of ending the fragmentation that now characterizes the organ donation system, Nickerson says input from a September 2008, national conference that drew 130 participants is being compiled into a strategic plan for reform of the system. A 12-member steering committee has been struck to guide development of the strategy, which, upon completion, will be submitted to the provinces and territories for review. — Krista Seggewiss, Ottawa, Ont.

