

FDA Proposes New Conflict-of-Interest Limits

BY ALICIA AULT

Associate Editor, Practice Trends

The Food and Drug Administration is proposing to beef up its conflict-of-interest guidelines for experts who serve on its advisory committees, the agency announced in a teleconference.

Proposed guidelines would bar experts with stock or other financial interests worth more than \$50,000 in a particular company from reviewing that manufacturer's product, and ban voting by those who receive or own less than \$50,000.

The \$50,000 rule would be applied to any holdings or interest within 12 months of an advisory panel meeting.

The proposal was billed by FDA officials as an upgrade of guidelines that have been in effect since 2000 and were made partly

The new guidance attempts to balance the quest for transparency with the need for qualified experts; as in the past, the guidelines are not legally binding.

in response to public demands for more accountability, according to Randall Lutter, FDA acting deputy commissioner for policy.

"[The] FDA is committed to making the advisory committee process more rigorous and transparent

so that the public has confidence in the integrity of the recommendations made by its advisory committees," said Mr. Lutter in a statement issued by the agency.

However, in the briefing, he said the FDA "was not aware of any instances where decision making has been adversely affected by conflicts members might have." The new guidance attempts to balance the quest for transparency with the need for qualified experts, said Mr. Lutter.

As in the past, the guidelines are not legally binding. They are offered as suggestions to staff evaluating potential conflicts of interest by both government and nongovernment employees.

It is rare for staff to make decisions that fall outside of the guidance, though, and waivers will likely only rarely be granted, said Mr. Lutter.

For instance, if a panel member has received an individual grant or other fee of less than \$50,000 from a company for work in the hematology area, but is reviewing the company's cardiology drug or device, that person might be allowed to participate in the panel meeting.

Mr. Lutter and other agency officials would not say how they came up with the \$50,000 threshold or how many current advisory panel members might be disqualified based on that figure.

However, said Mr. Lutter, "our judgment is, it is a significant number."

The restriction applies to stocks and investments, primary employment, consulting work, contracts and grants, royalties, expert witness work, and speaking and writing fees. It does not apply to mutual funds.

The \$50,000 figure will be increased

each year in line with the consumer price index, according to the proposal.

A critic of the FDA's conflict-of-interest policies said the new guidance is a significant step forward in part because it will bar participants from voting if they have a financial conflict. They "will be identified as committee members with a taint," said Peter Lurie, deputy director of Public Citizen's Health Research Group.

In the past, even nonvoting members could influence a panel's decision, he said,

adding that the new proposal will act as a "countermeasure."

The proposed rules also could "drive the conflict rate lower," said Mr. Lurie, noting that when it comes to recruiting new advisory committee members, "there's going to be a premium on finding those who don't have conflicts."

The guidance document was posted on the FDA's Web site on March 21. Once it is published in the Federal Register, it will be open for public comment for 60 days.

The agency expects to incorporate suggestions and issue the final guidance shortly after that time, said Mr. Lutter.

To submit electronic comments on the draft guidance, visit www.regulations.gov or www.fda.gov/dockets/ecomments. Written comments may be sent to: Division of Dockets Management (HFA-305), U.S. Food and Drug Administration, 5630 Fishers Lane, Room 1061, Rockville, MD, 20852. Comments must include the docket number 2007D-0101. ■

Know the risk

Younger adolescents are also at increased risk for meningococcal disease¹

Recommend vaccination to reduce the risk

- Menactra vaccine is highly immunogenic following a **single 0.5mL intramuscular injection**^{1,2}
- Produces a strong booster response in adolescents previously vaccinated against meningococcal disease²



CPT®* Code: 90734

Menactra®
Meningococcal
(Groups A,C,Y and W-135)
Polysaccharide Diphtheria
Toxoid Conjugate Vaccine

To order, log onto
www.vaccineshoppe.com or
call 1-800-VACCINE (1-800-822-2463).

**Protect them as if they were your own—
Talk with patients today about
meningococcal disease and the
benefits of vaccination**

Safety Information

Menactra vaccine is indicated for active immunization against invasive meningococcal disease caused by *N meningitidis* serogroups A, C, Y, and W-135 in persons 11 through 55 years of age. Menactra vaccine will not stimulate protection against infection caused by *N meningitidis* other than serogroups A, C, Y, and W-135. As with any vaccine, vaccination with Menactra vaccine may not protect 100% of individuals.

There are risks associated with all vaccines. The most common adverse reactions to Menactra vaccine include pain, redness, and induration at the site of injection, headache, fatigue, and malaise. Menactra vaccine is contraindicated in persons with known hypersensitivity to any component of the vaccine or to latex, which is used in the vial stopper. Guillain-Barré Syndrome (GBS) has been reported in temporal relationship following administration of Menactra vaccine. Persons previously diagnosed with GBS should not receive Menactra vaccine. Because any intramuscular injection can cause injection site hematoma, Menactra vaccine should not be given to persons with any bleeding disorder, such as hemophilia or thrombocytopenia, or to persons on anticoagulant therapy unless the potential benefits clearly outweigh the risk of administration. If the decision is made to administer Menactra vaccine to such persons, it should be given with caution, with steps taken to avoid the risk of hematoma formation following injection. Before administering Menactra vaccine, please see brief summary of full Prescribing Information on adjacent page.

References: 1. Sanofi Pasteur Inc. Data on file (Study MTA02). September 2003. MKT9271-1. 2. Keyserling H, Papa T, Koranyi K, et al. Safety, immunogenicity, and immune memory of a novel meningococcal (groups A, C, Y, and W-135) polysaccharide diphtheria toxoid conjugate vaccine (MCV-4) in healthy adolescents. *Arch Pediatr Adolesc Med.* 2005;159:907-913.

*CPT is a registered trademark of the American Medical Association.
Menactra vaccine is manufactured and distributed by Sanofi Pasteur Inc.

sanofi pasteur
Discovery Drive, Swiftwater, Pennsylvania 18370
www.sanofipasteur.us

MKT12617-2 ©2007 Sanofi Pasteur Inc. 1/07 Printed in USA

sanofi pasteur
The vaccines business of sanofi-aventis Group