

# Medical Schools Take Stand Against Industry Gifts

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"The Pink Sheet"

Medical schools and teaching hospitals should prohibit their physicians, faculty, residents, and students from taking gifts and services from drug companies, according to the Association of American Medical Colleges.

Industry support for continuing medical education activities also should be limited, according to a report unanimously adopted by the AAMC executive council.

The association is urging member institutions to adopt policies consistent with the report by July 1, 2009.

## Many Schools Are Studying Gifts Issue

The recommendations might be particularly influential because of their timeliness—AAMC notes that many academic institutions are in the midst of developing policies on interactions with drug and device manufacturers.

AAMC cites the medical schools at the University of Pittsburgh, the University of Pennsylvania, Stanford University, the University of California at Davis, UCLA, and Yale University as institutions that have implemented such policies.

AAMC's strong stance against industry gifts to physicians comes as drug and device makers are signing on to federal legislation that would bring transparency to their financial interactions with doctors by requiring public disclosure of gifts.

But the "sunshine" approach might prove to be temporary. In addition to AAMC's call for a ban, the Massachusetts Senate adopted a bill in April that would ban pharmaceutical industry gifts of any value to physicians, their office staffs, or their families.

The medical schools report, titled "Report of the AAMC Task Force on Industry Funding of Medical Education to the AAMC Executive Council," calls on members to take the following actions:

- ▶ Ban acceptance of industry gifts by doctors, faculty, students, and residents, whether given on- or off-site.
- ▶ Either end acceptance of drug samples or manage their distribution through a centralized process.
- ▶ Restrict visits to individual doctors by industry representatives to nonpatient areas and by appointment only.
- ▶ Create a central office to coordinate distribution of industry support for CME.
- ▶ Strongly discourage faculty participation in industry-sponsored speaking bureaus.
- ▶ Bar physicians, residents, and students from using presentations ghostwritten by industry members.

## Lessons on the Drug Industry

The group also notes that medical students often take their cue from faculty and medical residents, suggesting that those in a mentoring role must lead by example in industry interactions. At the same time, most students have "limited understanding" of such issues as the process of drug development, nature of the pharmaceutical industry, product marketing, "meaning and limitation" of FDA product approval, and physician role in adverse event report-

ing, the report notes. Medical curricula should include information on these topics.

The report also emphasizes that while academic institutions are not responsible for policing activities outside their facilities, faculty and students should be advised that prohibited activities are also barred off-site.

The report affirms that "substantive, appropriate, and well-managed interactions between industry and academic medicine are vital to the public health," saying that industry and the medical community

should work together "to develop new paradigms" for scientific information transfer.

## AMA Reviewing Funding Issue

The American Medical Association also reviewed industry funding at its annual House of Delegates meeting but declined to take a clear-cut position. Its Council on Ethical and Judicial Affairs drafted a report recommending that individual physicians and institutions of medicine not accept industry funding for education.

But during their June 14-18 session, the AMA delegates referred the report for further review at the recommendation of the group's Committee on Amendments to the Constitution and Bylaws. The panel said testimony on the report noted a lack of clarity with regard to certified CME and uncertified promotional education, and concern for unintended consequences. ■

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