Call for Letters Regarding Disclosure of Potential Conflicts of Interest in the Managed Care Literature — Too Much, Too Little, or Just About Right?

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Several years ago, one of us (KF) took a long taxi ride in a large city. About halfway to the destination, the cabdriver informed her that he was driving especially carefully that day. “If I break one more cab in half,” he explained to his now concerned passenger, “I won’t have a job anymore.” Information is a good thing, but sometimes we receive too much information.

The editors of JMCP have noted that, like many things in life, financial disclosure in managed care literature has tended to swing toward 2 extremes during 2008. At one extreme, a commentary on value-based insurance design (VBID) was published in a major health policy journal without disclosure that its 2 authors were consultants in VBID or that 1 author is employed by a VBID center supported by 7 pharmaceutical manufacturers.1,2 At another extreme, a colleague complained that he had been asked on an application to report if he had ever accepted any money from a pharmaceutical manufacturer at any time—in a 35-year career.

As we approach AMCP’s 21st Annual Meeting and Showcase and work through another publication year, we are interested in your thoughts about financial disclosure. What defines conflict of interest? What dollar amount, if any, is irrelevant or immaterial? JMCP requires disclosure of past, current and anticipated relationships: “all … affiliations or financial involvement for the past 2 years and the foreseeable future (e.g., employment, consultancies, honoraria, lecture fees, stock ownership or options, expert testimony, grants or patents received or pending, royalties) with any organization or entity with a commercial or other financial interest in or financial conflict with the subject matter or materials discussed in this manuscript, including advisory boards, speakers’ bureaus, medication education companies, etc.” Are these time frame and scope appropriate?

Generally, we have sided with more disclosure rather than less disclosure, such as requiring that any mention of off-label use is not simply described in general terms but is specific to the drug (e.g., gabapentin) and indication (e.g., fibromyalgia) and is reported prominently in the Disclosures. We also require that medical writers be acknowledged prominently including the specific contribution to the manuscript (e.g., performed the literature search, wrote the first draft). The Editorial Advisory Board and JMCP staff have revised the author attestation forms numerous times in response to instances of incomplete disclosure of financial conflicts of interest such as consulting relationships or speaking fees and contributions made by individuals either not acknowledged as contributors or listed as authors.

The editors invite letters on this subject for potential publication in JMCP. As with all letters published in JMCP, opinions are welcome and evidence is appreciated.

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DISCLOSURES

The authors report no conflicts of interest related to the subjects or products discussed in this article.

REFERENCES