Lifting the veil

A Mediapart (French online journal) investigation published on 24 March 2015 called into question the conduct of several members of the French Health Products Agency’s drug approval committees and the National Authority for Health’s Pharmacoeconomic Committee during the 1990s and 2000s. According to this investigation, members of these committees, including a chairman and a vice-chairman, secretly advised pharmaceutical companies for years. The companies hoped that, in return, “the committee would look more kindly on them” (our translation).

This alleged misconduct, which has been referred to the courts, is unacceptable and shows yet again the level of complacency or even denial shown towards conflicts of interest in the French medical and pharmaceutical world. In fact, this relaxed attitude towards conflicts of interest is “taught” during university training, then reinforced during continuing education, and rewarded by a career as a “key opinion leader” and the media exposure it entails. But ultimately it is patients who lose out, too often exposed to choices that do not serve their best interests and that in some cases are even unjustifiable.

The responsibility does not only lie with health professionals and educators. Public authorities and policy makers are not firm enough in defending the public interest, rely too heavily on drug companies to fund activities that are in society’s interests, and have only gone halfway towards providing the transparency required.

For example, the French version of the “Sunshine Act”, which is supposed to provide transparency over the links between health professionals and industry, requires disclosure of €11 meals. But nothing is known about contracts for “work” or “advice”, worth thousands or tens of thousands of euros, which influence decision makers on a grand scale.

During parliamentary discussions on France’s new Health Bill, members of the governing party and opposition parties approved a government amendment requiring the publication of the exact services or advice that health professionals are contracted to provide for pharmaceutical companies, and how much they are paid. This new measure would apply to payments exceeding a certain threshold, to be set by decree, although it is not clear why it should differ from the usual threshold of €11.

It is high time for policy makers to show they have understood that the Mediator® disaster was not an exception, but the result of systemic problems that exist in France and many other countries. It is an opportunity for France to lead by example, rather than champion conflicts of interest and irrational drug use.