Translated from *Rev Prescrire* November 2007; **27** (289): 804

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Experts and conflicts of interest

Roche is seeking to expand the market for its cancer drug, erlotinib (see this issue p. 6). This is only to be expected from a company that relies on maximising its drug sales and stock value. After all, treatment with this drug costs about 2000 euros a month.

After obtaining marketing authorisation in some forms of lung cancer, Roche saw the licensing committee of the European Medicines Agency (EMEA) reject an application for the use of erlotinib in advanced-stage and metastatic pancreatic cancer in July 2006. The committee considered that the adverse effects of erlotinib in this setting outweighed its limited efficacy.

When Roche appealed this decision, EMEA convened a special session including a panel of four experts to examine the application in late 2006. The expert panel issued a favourable opinion and the drug was finally approved for use in metastatic pancreatic cancer (1).

However, other than the addition of a retrospective subgroup analysis with a low level of evidence that favoured the product, the same application was submitted.

***Prescrire* asked EMEA for copies of the four experts' conflict of interest statements: all four experts had links to pharmaceutical companies, and two of them had dealings with Roche. One expert's statement dated up to 2004 and had not been updated since (2).**

Conflict of interest statements certainly do not guarantee scientific integrity.

When will policy makers and regulators do what it takes to ensure that scientific expertise is independent of drug companies and serves the public interest?

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1- European Medicines Agency "Questions and answers on the change to the marketing authorisation for Tarceva" 14 December 2006: 2 pages.
2- European Medicines Agency "Lettre à la revue Prescrire" 29 June 2007: 12 pages.

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