

Student action reduces industry influence in US medical schools

Abstract

- Relationships with drug companies influence the practices of medical students and healthcare professionals.
- To ensure that medical education remains patient-focused, the American Medical Student Association (AMSA) is calling for medical schools to establish stringent rules governing their relationships with industry.
- Since 2007, AMSA has been rating medical schools according to the rules they have established to minimise conflicts of interest.
- The score is based on a list of 14 criteria designed to prevent conflicts of interest, and it is used each year to rate American medical schools.
- The 14 criteria include gifts and meals, for example, but also pharmaceutical sales representative access to campus, industry funding of talks

and presentations, and education on conflicts of interest.

- The 2014 AMSA scorecard showed that more than two-thirds of US medical schools had established excellent or robust rules governing students' relationships with industry. Their number is growing from year to year, as reflected by the steady increase in the number of schools that ban pharmaceutical reps from visiting students.
- In 2014, AMSA also began to score teaching hospitals, and found that two-thirds of them had implemented robust rules for avoiding conflicts of interest among their students.

- The AMSA scorecard is backed up by actions intended to promote student awareness of conflicts of interest, including an AMSA guide laying out the desired content of the conflict-of-interest curriculum.

Rev Prescrire 2016; 36 (387): 58-64.

Criteria used by the American Medical Student Association to rate medical schools and teaching hospitals in 2014

AMSA uses various criteria to judge exposure to industry influence. In 2014, the criteria were scored from 1 to 3. A score of 3 corresponds to a "model policy" based on rules that are effective for avoiding or limiting industry influence. A score of 2 ("good progress toward model policy") corresponds to more limited rules with inadequate enforcement. A score of 1 indicates the total absence of rules.

Criteria applying to medical schools

● Gifts and meals

Score 3 (model policy). No industry-funded gifts or meals, regardless of nature or value.

Score 2 (good progress toward model policy). Industry funding allowed for:

- Gifts or meals worth no more than \$10;
- gifts limited to educational items (textbooks),
- meals provided at industry-funded accredited continuing medical education events, or when provided on-site as part of an indirect grant from industry.

● Industry-funded promotional speaking relationships

Score 3. No industry payment for promotional presentations or talks. Remuneration for talks is only permitted if they are not promotional in nature, but purely educational; and if industry has no role in determining or approving presentation content.

Score 2. Industry-funded speaking relationships are regulated but with less stringent content control and compensation rules, etc.

● Attendance of industry-funded promotional events

Score 3. Faculty, students and trainees are prohibited or discouraged from



attending industry-sponsored promotional events. Attendees cannot accept industry reimbursement for travel or other remuneration.

Score 2. Attendance allowed, but attendees cannot accept industry reimbursement for travel or other remuneration.

● **Participation in industry-funded medical conferences or training sessions**

Score 3. Industry support for residents and medical students to attend conferences or training is prohibited.

Score 2. Industry support to attend conferences or training is allowed, but there are one or more safeguards in place to ensure the funds are not used by the company to establish a marketing relationship with the trainee.

● **Accredited continuing medical education**

Score 3. Industry funding is not accepted for the support of accredited continuing medical education courses, except in certain circumstances that the faculty explains to AMSA; for example, a course that would otherwise be prohibitively expensive for the physician concerned.

Score 2. Commercial support accepted, but at least one measure is in place to prevent promotional content; for example, requiring more than one sponsor for any event; not allowing departments to make a profit from industry funding; requiring participants to cover some of the cost of the programme, such as meals.

● **Ghostwriting and honorary authorship**

Score 3. Industry-funded ghostwriting and honorary authorship are strictly prohibited.

Score 2. The practice is discouraged, but not prohibited.

● **Consulting and advising relationships**

Score 3. Consulting or advising relationships for purely commercial or marketing purposes are prohibited or actively discouraged. Research and scientific activities are not prohibited but are strictly regulated.

Score 2. All consulting and advising relationships (research, scientific activities and commercial relationships) are allowed but regulated.

● **Access for pharmaceutical sales representatives**

Score 3. Pharmaceutical sales representatives are not allowed access to any faculty or trainees in medical schools. However, faculty may invite other industry scientists who are not acting as sales representatives for specific discussions that do not involve marketing a specific product.

Score 2. Pharmaceutical representatives are allowed to meet with faculty, provided the meetings take place only in non-patient care areas and by appointment only.

● **Access for medical device representatives**

Score 3. Medical device representatives are permitted in patient care areas only for legitimate reasons not related to marketing, such as providing necessary technical assistance and/or training on devices and other equipment already purchased.

Score 2. Medical device representatives are permitted in patient care areas, but site access is regulated in some way (such as requiring an appointment).

● **Conflict of interest disclosure**

Score 3. Speakers must disclose their conflicts of interest to the host institution, as well as to trainees and any other audiences.

Score 2. At least one of the above types of disclosure is required.

● **Conflict-of-interest curriculum for medical students**

Score 3. Conflict-of-interest education is required for medical students. The materials must reflect and cover most of the curricular content and objectives set out in the AMSA standards for a “model curriculum.”

Score 2. Conflict-of-interest education is required for medical students, but it is more limited and does not meet the AMSA standard.

● **Extension of conflict-of-interest policies to all school affiliates**

Score 3. The policy must apply to both of the following:
– All employees (full/part-time or volunteer faculty) and students/trainees
– Wherever faculty and trainees are working, even if the affiliated institution does not have the same policy.

Score 2. At least one of the above demands is met.

● **Enforcement and sanctions of policies**

Score 3. General oversight to ensure compliance with conflict-of-interest policies and sanctions for non-compliance.

Score 2. Oversight or sanctions, but not both.

Criteria specific to teaching hospitals

The scoring system for teaching hospitals includes three specific criteria, in addition to the 11 criteria shared with medical schools; gifts, meals, speaking, accredited continuing medical education, ghostwriting, consulting or advising relationships with industry, conflict-of-interest disclosures, and education on conflicts of interest, monitoring, and sanctions.

● **Industry-funded travel**

Score 3. No industry-funded student travel allowed, except travel necessary for training in the use of a medical device already purchased by the hospital, etc.

Score 2. Travel funding allowed, but with measures to ensure it is not used to establish commercial links with students.

● **Free samples**

Score 3. Sample distribution prohibited, with very few exceptions.

Score 2. Sample distribution allowed in limited, specific conditions and in patients’ interests, with hospital approval, while ensuring they are not used for commercial purposes.

● **Teams involved in purchases of medicines and medical devices**

Score 3. If relationships with industry exist, then teaching staff or team members involved in purchases must not be allowed to influence purchasing decisions concerning medicines or medical devices from the same company.

Score 2. Rules are less strict, requiring disclosure of conflicts of interest, for example, but allowing participation in purchasing decisions.

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• American Medical Student Association “AMSA Scorecard 2014 - Methodology.” amsascorecard.org accessed 5 May 2015: 11 pages.