

## The media and continuing education: links with drug companies must be made public

### ● A French group is filing complaints.

In France, a decree issued on 25 March 2007 requires all healthcare professionals who are involved in professional education activities and lay media events to disclose any links they have with drug companies that produce or market related healthcare products (1,2). Formindep, a French forum created to promote independent medical education, was a driving force behind this decree. In 2008, Formindep examined whether the decree was being applied in practice (3).

First, the Forum monitored nearly 30 media and various other sources of information for one month (specialist and lay press, television, radio, websites, and conferences). None of the 150 healthcare professionals observed during this period declared any conflicts of interest. How-

ever, Formindep found that some of them had links to drug companies, through statements they had previously made to the French drug regulator (Afsaps) or the French National Authority for Health (HAS).

As all agreements and contracts between physicians and private enterprises must be submitted to the Council of Physicians for approval (article L.4113-6 of the Public Health Code), Formindep then asked the Council's regional offices if the absence of conflict of interest statements signified that no such conflicts existed. According to Formindep, some regional offices provided precise and detailed information, while others were elusive and some were indignant that some colleagues were under suspicion (3).

Formindep has announced its decision to file complaints with the relevant offices against healthcare professionals

who expressed their opinion about a healthcare product without declaring their conflicts of interest. A detailed report will then be published.

Conflict of interest statements cannot eliminate all undue influence but are nonetheless crucial (4). Individual healthcare professionals and their professional organisations, as well as the media, should simply respect the law as it stands.

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#### Selected references from *Prescrire's* literature search.

- 1- *Prescrire* Rédaction "Presse et formations: rendre publics les liens d'intérêts" *Rev Prescrire* 2007; 27 (284): 467.
- 2- *Prescrire* Rédaction "Presse et formations: rendre publics les liens d'intérêts (suite)" *Rev Prescrire* 2008; 28 (291): 64.
- 3- Formindep "Transparence de l'information médicale. La loi est-elle réellement appliquée?" [www.formindep.org](http://www.formindep.org) accessed 3 September 2008: 1 page.
- 4- *Prescrire* Editorial Staff "Experts and conflicts of interest" *Prescrire Int* 2008; 17 (93): 2.



See the *Prescrire in English* website for this additional text from *Prescrire International*:

### Anthracycline extravasation and dexrazoxane (continued)

- This text reproduces the statement from pharmaceutical company TopoTarget, defending its brand Savene<sup>o</sup> in response to *Prescrire's* review of dexrazoxane in anthracycline extravasation.
- The company points out an inconsistency in *Prescrire's* review: the evaluation of dimethyl sulfoxide in fact reported 77 cases of anthracycline extravasation (plus 13 cases for mitoxantrone).
- *Prescrire's* editors provide a detailed reply to the company's remarks.
- Overall, the risk-benefit balance of intravenous dexrazoxane in anthracycline extravasation remains unfavourable.

Full text in English available online at:  
[www.english.prescrire.org](http://www.english.prescrire.org)

See the inside back cover for more details on the *Prescrire in English* website.