Time for Introspection*

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I
n the midst of many intellectually and personally satisfying experiences at the recent CHEST 2000, I found a couple of things that concerned me. Here I write about them—name tag and satellite symposia—with no malice and with considerable affection to the American College of Chest Physicians, an organization that I have belonged to for a long time.

The name tag, this time around, was designed as a neck ornament with no clip or pin and it very prominently displayed commercial drug names. I was both dismayed and disappointed at its implications for our organization and for our profession. The provision of this tag in the registration packet implies sanction of this type of advertising by the organization. Are we to be walking billboards for pharmaceutical companies?

Some may ask, are we not already accepting gifts and lending ourselves to advertisement when we carry bags, pens, and other items with drug company logos? Yes, we are, and we should reflect on our values and our patient's perceptions¹² and define the boundaries of our relationship with the pharmaceutical industry. But advertising on our chests while we attend the international meeting of a prestigious professional organization goes way beyond the boundary. Surely the pharmaceutical companies have the right to advertise and market their products and to expect appropriate space, time, and forum for these activities in meetings that are financially supported by them. But that does not include our chests!

The exhibit halls are the proper places for promoting the devices and products of industry, and by confining these activities to the exhibit halls, a separation between the commercial parts of the meeting and intellectual/professional growth parts can be made. Satellite symposia blur this line of separation. Satellite symposia are considered a needed trade-off that professional societies must make so that the annual scientific meetings are less expensive and therefore more attractive for members to attend. Should it be so, and should there a limit to the number of satellite symposia?

The number of industry-sponsored satellite symposia and the time allotted to them at CHEST 2000 appeared to be at an all-time high. Each of these symposia, sponsored by a single pharmaceutical company, clearly has a commercially driven agenda. These agendas, when allowed expression under cover of professional organizations and their associated meetings, introduce an identity bias. A recent editorial in Lancet addressed this issue and noted that elimination of identity bias depends on organizations recognizing that their public reputation rests on independence, and once given up, that independence will be impossible to reclaim.³ The editorial also suggested that organizers carefully review the content and limit the proportion of meeting content that is allotted to industry-sponsored satellite symposia.

The influence of industry sponsorship on medical education—content, objectivity, and outcome measures—has not been scrutinized to the same degree as sponsored clinical research.⁴⁻⁶ The magnitude of industry-sponsored medical education is revealed in a survey of private businesses that are medical education service suppliers. These suppliers in 1998 and 1999 billed the pharmaceutical industry $353 million for grand rounds, symposia, publications, and advisory boards.⁷ The billed amount for symposia alone was in excess of $100 million. Studies of the content of published sponsored symposia reveal that they have promotional attributes, and alert the readers to approach these symposia with skepticism.⁴,⁸ Should we not be less dependent on drug company subsidy for our continuing medical education?

Each year at the convocation ceremony, we recognize and welcome new fellows to our College. Many young physicians in training attend and present their work at the annual meeting. What messages are we giving them? It is time for introspection. Our thoughts and ideas on our profession, its integrity, and boundaries of behavior must shape the future of our College.
REFERENCES