



Physician-industry collaboration has societal benefits

By Dr. David M. Barrett and Dr. Harry R. Jacobson - 03/08/13 11:40 AM ET

It's in our nature to want to romanticize invention and innovation. We conjure up images of the lone inventor, working diligently night after night in his or her garage until, in one glorious moment, intellectual lightning strikes and the next great life-changing or lifesaving device has emerged.

In real life, it seldom works that way. The history of medical innovation in this country is defined by dedicated physicians, academicians and researchers working with the healthcare industry to develop new cures, treatments and technologies that extend and enhance patients' lives. The physician-industry relationship is one that benefits all Americans. Doctors guide companies in making sure new innovations will work as they're envisioned when they reach the operating room or the patient's bedside. Companies make sure medical professionals are properly trained in the use of new drugs and devices.

These collaborations have led to the invention and widespread use of penicillin, pacemakers, statins, deep brain stimulation treatments, cervical discs and literally thousands of additional innovations that make our population healthier.

As physicians, educators and individuals who serve on the boards of medical innovation companies, we're deeply concerned about the future of physician-industry collaboration and, with it, the prospects for continued advancements in healthcare. The working relationships between doctors and healthcare companies that have generated so much progress have come under fire, and these frequently-unfounded criticisms may deter many of our country's finest medical minds from participating in the innovation process. This would be a catastrophic trend for current and future patients.

Look at some of the headlines we've seen in major newspapers and wire services over the past year or so: "Million-dollar payments to surgeons raise questions," "Payments to doctors by pharmaceutical companies raise issues of concern," "Financial ties bind medical societies to drug and device makers." What we're seeing is a lot of smoke being blown without actual fires. Payments that fund medical education and the development of new treatments are being stigmatized, even though physician societies and health trade associations have long had in place rigid ethical codes of conduct to prevent conflicts of interest and improper behavior.

We are now seeing implementation of new federal "sunshine" laws that will require drug and device makers to report to the government virtually all exchanges of value between companies and health care providers. This kind of transparency is good. If it leads, however, to the presumption of nefarious behavior on the part of doctors and hospitals, patients will be hurt when providers shy away from collaborative work with industry.

This problem isn't one that can be remedied with a new law or regulation. Rather, the news media and policymakers alike need to do a better job of communicating to the American public the true context of resources being exchanged between physicians and industry. From the media standpoint, alarmist headlines and shallow reporting have led to an environment in which consumers and patients can easily believe that doctors are taking payoffs to promote particular drugs or devices, when that is most certainly not the case in these working relationships. We have seldom, if ever, read a news story in which it was fully explained how physician-industry collaboration led to a new medical breakthrough. The focus is almost exclusively on the money.

Policymakers, too, have a responsibility to tell the whole story. If, in constructing new sunshine laws, you're going to point out problems in the system for reporting exchanges of value, you should also be telling your constituents how important these collaborations are to their health and well-being. Too often, we're just hearing a very negative one-sided story.

The fact is, the news media, politicians, doctors, academicians and hospitals all believe in transparency, independent judgment and patient-centered behavior, but that's not the impression the American people are receiving.

Over the course of our respective careers, we've seen unimaginable changes in the practice of medicine from our medical school years to today, but we also believe that the true golden age of healthcare is still in our future. How soon we get there will be determined, in large degree, by whether we encourage or undermine the innovative processes that have brought us this far.

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