

Congress has its own conflicts of interest

By ACSH Staff — January 19, 2012

As part of the Obama administration's 2010 health care overhaul, legislators are [pushing](#) [1] to require drug companies to publicly disclose any payments they make to physicians for research, consulting, speaking, travel, or entertainment. Congressmen contend that the new regulation, if enacted, will curb medical costs by eliminating some of the pharmaceutical companies' influence on doctors, making them less inclined to prescribe more expensive drugs and medical devices. Such disclosures will also eliminate medical conflicts of interest, consumer advocates allege, since health care professionals will be more prone to making treatment decisions in the best interest of their patients, instead of their pocketbooks.

But ACSH's Drs. Gilbert Ross and Josh Bloom have a serious bone to pick with the new proposed legislation. The theory underlying this latest power grab, says Dr. Ross, is the assumption that any dealings between drug companies and doctors is inherently corrupt amounting to bribery. But no other industrial or professional relationship is subject to such witch hunt standards. According to the regulation, manufacturers that have just one product covered by Medicare or Medicaid will have to disclose any payments provided to doctors, which will then be posted by the government on a public website. Failure to comply with the rules will result in a penalty of up to \$10,000 for each non-reported — payment. That fee jumps to \$100,000 for each payment that a company knowingly fails to report.

The new standards will also [impede productive research endeavors](#) [2], says Dr. Ross, which are commonly comprised of collaborations between drug companies and doctors. These doctors must now beware of accepting drug company trinkets, pens, or free lunches, for fear of being labeled corrupt and incurring big fines, Dr. Ross points out.

ACSH's Alyssa Pelish, however, doesn't think that the new database is totally without merit. The bill doesn't intend to curtail collaboration between doctors and Big Pharma, she says. It just aims for a public record of their financial interactions that would make doctors more accountable for their prescribing. Research has in fact demonstrated that doctors too often prescribe or over-prescribe based not on familiarity with current research, but instead on which drug reps they've been courted by.

But there's absolutely nothing wrong with that, counters Dr. Bloom. It's quite common for doctors to not have the time to keep up with all of the new drugs that enter the market, he says. They may very well be unaware of them in the absence of a visit from drug reps. Just because the information is coming from a company doesn't necessarily make it wrong. In fact, the new drugs are often superior to the old ones. Furthermore, he adds, if Congress is so interested in transparency and conflicts of interest, perhaps they should take a closer look at why they, their families, and their aides have been getting rich from insider stock trading since how they vote on

pending legislation will affect the performance of these companies. Their hypocrisy makes me sick.

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