

Letters

Correspondance

Bias-free health care

Bravo to Dr Biron et al¹ and to Drs Steinman and Baron,² in the Commentary and Debates sections respectively, for bringing our attention to the pervasive and negative effects of the influence of the pharmaceutical industry on continuing medical education. I am disappointed that Dr Marlow³ would use the guidelines in place as an argument that safeguards against undue influence are preventing this problem. One only has to attend a large continuing medical education conference (such as a Chapter meeting) and feel overwhelmed by the numerous booths hosted by pharmaceutical representatives to realize that something is wrong with the situation. We obviously are not being protected from undue influence by said guidelines.

I would also like to bring attention to another troubling issue—clear overpricing of many new drugs, such as monoclonal antibodies, which are proving useful against many cancers. When a drug such as rituximab costs \$3000 per treatment, it clearly is out of reach for most of our patients. This creates a 2-tiered system when governments will not fund this drug. Clearly, profit is taking precedence over optimal care. The pharmaceutical industry must take responsibility for creating such a situation, and, clearly, governments need to address the regulation of drug pricing.

—Joel Weinstein MD CCFP FCFP
North York, Ont
by e-mail

References

1. Biron P, Plaisance M, Lévesque P. Pharmas-co-dependence exposed. Would it be time to say, "No thanks"? *Can Fam Physician* 2007;53:1635-7 (Eng), 1643-5 (Fr).
2. Steinman MA, Baron RB. Is continuing medical education a drug-promotion tool. Yes [Debate]. *Can Fam Physician* 2007;53:1650-3 (Eng), 1654-7 (Fr).
3. Marlow B. Is continuing medical education a drug-promotion tool. No [Debate]. *Can Fam Physician* 2007;53:1650-3 (Eng), 1654-7 (Fr).

Response

Dr Weinstein implies that the presence of booths hosted by pharmaceutical representatives biases the continuing medical education (CME) provided at the College of Family Physicians of Canada's annual scientific assemblies. As the Director responsible for the annual scientific assembly portion of the Family Medicine Forum, I can attest that this is not the case, owing to the guidelines we have in place.

The CME content comes primarily from a call for abstracts. The application process requires full disclosure of competing interests. The abstracts are then peer reviewed by a planning committee of College of Family Physicians of Canada members. A needs assessment is conducted beforehand and, if any gaps are identified, speakers are invited by the planning