



The CFPC's relationship with the health care and pharmaceutical industry

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Dear Colleagues,

It is paramount that the CFPC maintains the trust of its members, their patients, and the Canadian public. The ability of the health care and pharmaceutical industry (HPI) to influence the decision making of family physicians through its relationship with the CFPC makes it crucial for the College to have well-defined policies and practices to guide its working relationship with the HPI.

In 2010 the CFPC established a task force to review and make recommendations about the CFPC's relationship with the HPI. The recommendations were highlighted and approved at our November 2013 board meeting.

The CFPC's relationship with the HPI is manifest in the exhibit hall at Family Medicine Forum (FMF), advertisements in *Canadian Family Physician*, and sponsorship of continuing professional development (CPD). The CFPC already has a policy to guide managing real, perceived, or potential conflicts of interest for members serving on committees. The task force recommendations enhance the process of declaring and resolving these real or potential conflicts. To inform its recommendations, the task force did an extensive environmental scan, reviewed the policies of other professional organizations and academic institutions, and considered the results of 1 public and 2 physician surveys.

The task force agreed to base its findings on the principles of trust, transparency, independence, accountability, and fairness. The recommendations apply to relationships with all for-profit entities that develop, produce, market, or distribute drugs, devices, products, services, or therapies that might be prescribed or ordered by doctors to diagnose, treat, monitor, manage, or alleviate health conditions. The recommendations are based on an approach of clear and conscientious management of relationships and are meant to apply to the governance and management of the CFPC, events that the CFPC organizes and accredits, and decisions made by the CFPC regarding its support for the activities of parties external to our College.

It is often easier to appreciate the implications of certain recommendations by considering real-life scenarios. One of the physician surveys considered by the task force was conducted during FMF in 2011. Respondents were asked about the degree of acceptability of the following situations:

- The CFPC is asked to grant Mainpro® accreditation for

a CPD presentation that includes a free dinner provided by a pharmaceutical or health care company.

- A pharmaceutical or health care company provides an unrestricted educational grant to sponsor scientific presentations at an Annual Scientific Assembly (ASA) or FMF.
- A pharmaceutical or health care company purchases a booth to display and discuss its products with conference registrants in the exhibit hall at a Chapter ASA or FMF.
- A pharmaceutical or health care company purchases a product-related advertisement in the journal.
- A speaker at a CFPC-accredited CPD program discloses that he is being paid an honorarium by a pharmaceutical or health care company to present this session.
- A pharmaceutical or health care company provides funding for an annual Chapter or national College award.

As we proceed with implementation of the recommendations, all of these scenarios will be affected.

The high-level summary of responses revealed that respondent members leaned toward acceptance of these situations. However, times are changing, and we need to remind ourselves that a physician's pen is the vehicle between pharmaceutical products and the patients we serve. It is important that the medical profession behaves in the most ethical and evidence-informed manner in the area of medication prescribing; your College needs to ensure that its relationship with the HPI abides by the same principles. Board members realize that this might take us slightly away from the opinions of some of our members, but we believe it is important to do this to ethically preserve the privileged relationship family doctors have with their patients.

Throughout its mandate, the task force took the perspective that sound management was required in the CFPC's relationship with the HPI. Several Chapters are moving to HPI-free ASAs. The national board and several Chapter boards support this direction. In addition to approving the recommendations, the national board requested an analysis of the effect of complete dissociation of the College from the HPI. We are currently examining the results and will be presenting them at the board's November 2014 meeting.

Do you agree with these steps, or is the CFPC going too far? We welcome your feedback. Please connect by e-mailing us at executive@cfpc.ca or commenting on this article—visit it at www.cfp.ca and click on Rapid Responses.



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Cet article se trouve aussi en français à la page 395.