

[In these minutes: Conflict of Interest Policy Discussion Continued, GAPSA Funding]

ACADEMIC HEALTH CENTER STUDENT CONSULTATIVE COMMITTEE (AHC SCC) MINUTES

WEDNESDAY, MARCH 24, 2010

5:00 - 6:00 p.m.

488 CHILD REHAB CENTER

[These minutes reflect discussion and debate at a meeting of a committee of the University of Minnesota Senate; none of the comments, conclusions, or actions reported in these minutes represent the view of, nor are they binding on the Senate, the Administration, or the Board of Regents.]

PRESENT: Daniel Stein (chair), Paul Anagale (Medical School-Duluth), Nathan Bell (Clinical Lab Sciences), Brandon Burk (Pharmacy-Duluth), Robb Garni (Dentistry), Rebecca Klismet (Pharmacy-Twin Cities), Meredith Lukasek (Nursing-Twin Cities), Sean Corvin for Meghan Mason (Public Health), Hilary Reich (Medical School – 3rd Year), Eden Sonn (Nursing – Rochester), KauChee Vang (Clinical Lab Sciences – Rochester), Andy Wicks (Physical Therapy)

REGRETS: Ganesh Babulal (Occupational Therapy), Megan Meyer (Dental Therapy)

ABSENT: Ashley Johnson (Occupational Therapy – Rochester), Paul Syverson (Veterinary Medicine), Tanya Wilber (Dental Hygiene)

OTHERS ATTENDING: Brianne Keeney

GUESTS: Professor Macaran Baird, chair, Department of Family Medicine and Community Health, Medical School.

I). Daniel Stein convened the meeting and welcomed all those present.

II). Mr. Stein introduced the main agenda item, a continued discussion of the draft Individual Business or Financial Conflict of Interest policy. He then introduced Dr. Mac Baird, chair, Medical School's Department of Family Practice and Community Health.

Dr. Baird thanked the committee for inviting him to discuss this very important topic. He began by sharing background information about himself and noted that prior to coming to the University he had worked at the Mayo Clinic as its insurance plan medical director and also taught in Family Medicine. Prior to Mayo Clinic, Dr. Baird reported working at HealthPartners as their medical director for Primary Care, and, it was in this capacity where he first began to experience the dilemmas associated with various degrees of potential conflict of interest, particularly related to the pharmaceutical industry.

Dr. Baird stated that he has been involved in the development of several COI policies, e.g., University of Minnesota Physicians (UMP), University of Minnesota Medical School, Academic Health Center, etc.

Given the University receives State of Minnesota funding to help train the next generation of physicians and researchers, it needs to be clear about how it manages conflict of interest issues, stated Dr. Baird. Because the University is a state resource, it is held to a different standard than other organizations when it comes to handling conflict of interest matters. Recent media articles have implied that the University has not done a good job of managing conflict of interest matters.

Mr. Stein explained to Dr. Baird that the committee is considering formulating a position statement as it relates to the draft Individual Business or Financial Conflict of Interest policy. To be clear, stated Dr. Baird, he is very interested in the conflict of interest discussions that are taking place on campus, but he does not consider himself an authority on the subject. In that spirit, Dr. Baird stated that he is willing to offer his opinion about this subject, but requested that members view it in that light.

A member asked Dr. Baird to comment on the University's American Medical Student Association (AMSA) ranking (<http://www.amsascorecard.org/>) relative to its conflict of interest policy. What is it about the University's policy that AMSA gives the University a provisional 'C' or 'D' ranking as opposed to Mayo Clinic's 'A' ranking? Candidly speaking from a personal perspective, stated Dr. Baird, the University has not done what it takes to gain the public's trust around conflict of interest matters, irrespective of whether the lack of trust is justified or not. The media has declared the University as failing to adequately manage issues related to conflict of interest. Additionally, unlike other organizations that have taken a public stance on this issue, the fact that the University has not, likely influenced the lower ranking by the AMSA. Once the University adopts a systemwide conflict of interest policy, it will undoubtedly improve its AMSA ranking. A systemwide policy covering a complex institution like the University is very rare, and is a bold step, which hopefully will serve to measure the University in a more favorable light.

Mr. Stein asked Dr. Baird to comment on the "no gifts" approach under the current draft policy, which has proven to be

troubling for some members. Dr. Baird used the example of receiving a free lunch for sitting in on a slightly biased product presentation and stated that most people will argue they can filter the information they receive without bias. Research, however, according to Dr. Baird, proves that gifts (small or large) induce a favorable response on the part of the receiver to which it is a normal human response to reciprocate. Gifts influence people, and the data is clear on this subject. Secondly, AHC students, like clinicians, are constantly seeking new information, stated Dr. Baird. With this said, when this information is presented, even if the receiver filters it as biased, it is more difficult to unlearn what was just learned than it would be to have never received the information in the first place. Thirdly, with respect to free samples, the impact is that patients generally want to continue with whatever product they were started on. Dr. Baird then highlighted the organization No Free Lunch - <http://www.nofreelunch.org/aboutus.htm> - a group of health care providers who believe that pharmaceutical promotion should not guide clinical practice.

A member stated that it is hard to understand why a patient would choose not to take a significantly less expensive generic drug that contains the same active ingredient(s) as the brand equivalent. Dr. Baird explained that, on rare occasions, there are differences in bioavailability between brand and generic drugs. However, even in instances when there are no bioavailability differences, humans respond more favorably to higher-valued medications than medications that are perceived to have a lesser value.

Dr. Baird engaged members in a spirited discussion citing several different conflict of interest examples in an effort to get members to think about conflicts that arise between a person's private interests and public obligations. Human beings are simply not logical or rationale, stated Dr. Baird, however, this fact does not mean to imply people are ill-intended or bad by nature. In response, a member stated that people should be held more accountable for their actions/decisions involving potential conflict of interest situations.

In response to a question about vendors being invited by a particular school/student organization function to present information, Dr. Baird stated that as long as any financial incentives, e.g., free lunch, is funneled through a central pool such as the dean's office, and it is left up to the discretion of that office how to best spend the money, this not the problem. The problem arises when, for example, a vendor sets up a display booth to try and engage students attending a presentation; this is considered advertising. Whenever a financial incentive is linked directly to exposure to a product, this is what the University is trying to avoid. Dr. Baird asked members to put themselves in the position of being sold a product by a very persuasive sales person. While on the one hand, this could be considered being enlightened about a new dimension in health care, the problem comes when the product is brand named and perks of some sort are distributed. When a product is brand named and linked to whatever reward is handed out, this creates a bias, which can influence how people make decisions. Dr. Baird stated that if a company provides information beyond just their product, this could be considered educational; however, if only their product information is shared, this is clearly a sales pitch, which is a conflict of interest, particularly because the University is funded, in part, by the State of Minnesota. Conflict of interest can be managed, but not eliminated.

A member voiced concern about the portion of the draft policy that requires disclosing consulting income and sharing private contractual agreement details with the University. In addition to being an intrusion into one's personal finances, this portion of the policy lends one to feel the need to protect himself/herself from legal and administrative penalties, criticism, or other punitive measures. Dr. Baird stated that it is an intrusion, but that is the price one pays for working at a publically funded institution. He added that even as a private clinician in Minnesota, there is a disclosure law (Sunshine Law) that requires all payments to all physicians be reported publically. He reminded members that the draft Individual Business or Financial Conflict of Interest policy serves as an attempt to regain the public's lost trust.

Is there a hope that students who are trained under this policy will bring this way of thinking with them as they start their careers in industry, asked a member? If so, is industry receptive to this orientation? In Dr. Baird's opinion, industry is ahead of the game. Collectively, industry has come to the realization that they need to move away from giving perks, etc., which has resulted in hefty fines and bad press for industry over the years.

Mr. Stein asked Dr. Baird to comment on the Minnesota Medical Association's (MMA) position on the University's draft policy. Dr. Baird stated that he is a MMA member, and, therefore, able to comment on their position. He stated the MMA is not at all happy with the University's draft policy because it implies that the standards for physicians in the community are different than the standards set forth at the University. Once the University's policy is adopted, the contrast between standards for public and private entities will be highlighted. An outstanding question that has not yet been clarified by the draft policy is whether adjunct faculty who teach at the University for free and who are in private practice in the community and use their University title whether they will be covered by the policy.

To conclude, Dr. Baird stated that the University, as a publically funded institution, needs to regain the public's trust, and, thus its decision to implement a systemwide draft Individual Business or Financial Conflict of Interest policy. He reminded members that this is a journey, not just a step.

Mr. Stein, on behalf of the committee, thanked Dr. Baird for attending today's meeting.

III). Before adjourning the meeting, Mr. Stein asked members if there was any other business. A member suggested inviting Kristi Kremers, GAPSA (Graduate and Professional Student Assembly) president, to speak about GAPSA's

failure to submit their fee request to the Student Services Fees Committee by the specified deadline and the implications this will have on GAPSA programming. Mr. Stein requested Renee Dempsey, Senate staff, extend an invitation to Ms. Kremers.

Hearing no other business, Daniel Stein thanked the members for attending and adjourned the meeting.

Renee Dempsey
University Senate