March 9, 2009

LETTERS

An Ethics Debate at Harvard Med

To the Editor:

Re “Patching a Wound: Working to End Conflicts at Harvard Medical” (Business Day, March 3):

Bravo to the Harvard medical students who are questioning medicine’s too-close links to the pharmaceutical industry. It has been well demonstrated that the outcome of research is often altered by the source of financing, even if the researchers’ motives are pure.

The idealism of these young medical trainees should be heeded and acted upon, especially as many of them may be the medical leaders of the future. A more regulated and transparent approach would help restore integrity and trust to modern medicine.

Steve Heilig
San Francisco, March 4, 2009

The writer is co-editor of The Cambridge Quarterly of Health Care Ethics.

To the Editor:

As a physician-scientist completing his training at a hospital affiliated with Harvard Medical School, I can verify that the complex relationships between medical faculty and the pharmaceutical industry can be fraught with conflicts of interest. But I take issue with the implicit assumption that faculty members who accept drug money are driven exclusively by greed; this issue is much more complicated than it may seem at first.

Harvard Medical School’s “drug money” problem relates, in part, to a little-known fact: Harvard rarely pays the salaries of its medical faculty directly. Despite substantial revenue from tuition, most faculty members teach medical students on a volunteer basis.

Similarly, the salaries of research faculty are not paid by Harvard, but rather by grants from the National Institutes of Health, private foundations and in some instances, grants from pharmaceutical companies. If these financing sources dry up, professors are often forced to find a new job.
Thus, in many cases, money from the pharmaceutical industry doesn’t increase the take-home pay of Harvard professors; it simply allows them to maintain their employment.

Daniel Becker
Brookline, Mass., March 4, 2009

The writer is a fellow in the Renal Division of Brigham and Women’s Hospital and a clinical fellow in medicine at Harvard Medical School.

To the Editor:

Your article implies that the “more than 200 Harvard Medical School students and sympathetic faculty, intent on exposing and curtailing the industry influence in their classrooms and laboratories,” are in complete agreement that industry and private affiliation are detrimental to academic medical research. Rather, the large number of students referred to signed a petition that advocated disclosure of industry ties, not further severance of industry relations.

In fact, both “rival factions,” as the article described them, agree that disclosure is important, but so are the relationships that foster quality research, new medicines and appropriate compensation for expertise.

The implication that some Harvard physicians and researchers abuse their academic posts for purely financial gains is unfounded. Many work tirelessly to advance science and spend years with little compensation developing marketable expertise in the clinic and the laboratory.

For example, in a course-based clinic centered on multiple myeloma treatment at the Dana Farber Cancer Institute, we have seen firsthand how dramatic improvements have been achieved through productive partnerships between academia and industry.

Many of these researchers and physicians have given up potentially lucrative careers in private practice or applied science to work in academia because of their passion to educate future clinicians. Most work tirelessly to improve patient care, advance their fields and collaborate on new treatment possibilities.

As future physicians, we feel that disclosure of financial conflicts of interest is essential to protecting our patients and that accurate information is axiomatic to any medical curriculum. Our faculty, administration and students operate within an institution that we believe provides superb patient care through innovation, research and integrity.

Charles William Carspecken
Taylor Lloyd, Melina Marmarelis
Brian Thomas Kalish
Ashley R. Kochanek
Tomasz Stryjewski  
Boston, March 4, 2009  

The writers are members of the class of 2012 at Harvard Medical School.

To the Editor:

As a 1959 graduate of Harvard Medical School, looking forward three months to the 50th reunion of my class, I am embarrassed to learn that my alma mater has received an F grade from the American Medical Student Association for its poor monitoring and controlling of drug industry money.

It is shocking that both the former dean and at least one current professor at Harvard Medical School have served concurrently as highly paid board members of pharmaceutical and medical products companies, and that, until recently, professors have been allowed to serve, without disclosure in many cases, as consultants to the manufacturers of the very products about which they teach. Their students, many of whom will become the next generation of leaders in American medicine, are being critically deprived of objective teaching. I am afraid that their future patients will suffer.

The only good news in the article is that a start has been made at reform. I hope that my reunion class will nudge this commendable effort along.

Cavin P. Leeman  
New York, March 3, 2009  

The writer is an emeritus clinical professor of psychiatry at SUNY Downstate Medical Center.