

# Study reveals 'extensive network' of industry ties with healthcare

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The medical product industry maintains an extensive network of financial and non-financial ties with all major healthcare parties and activities, reveals a study published by *The BMJ* today.

This network seems to be mostly unregulated and opaque, and the researchers call for enhanced oversight and transparency "to shield [patient care](#) from commercial influence and to preserve public trust in healthcare."

Although the medical product industry is a critical partner in advancing healthcare, particularly in developing new tests and treatments, their main objective is to ensure [financial returns](#) to shareholders.

In an influential 2009 report, the Institute of Medicine described a multifaceted healthcare ecosystem rife with industry influence.

Yet most studies of conflict of interests related to pharmaceutical, medical device, and [biotechnology companies](#) have focused on a single party (eg. [healthcare professionals](#), hospitals, or journals) or a single activity (eg. research, education, or clinical care). The full extent of industry ties across the healthcare ecosystem is therefore still uncertain.

To address this gap, a team of US researchers set out to identify all known ties between the medical product industry and the healthcare ecosystem.

They searched the medical literature for evidence of ties between pharmaceutical, [medical device](#), and biotechnology companies and parties (including hospitals, prescribers and professional societies) and activities (including research, health professional education and guideline development) in the healthcare ecosystem.

Data in 538 articles from 37 countries, along with expert input, was used to create a map depicting these ties. These ties were then verified, cataloged, and characterized to ascertain types of industry ties (financial, non-financial), applicable policies on conflict of interests, and publicly available data sources.

The results show an extensive network of medical product industry ties—often unregulated and non-transparent—to all major activities and parties in the healthcare ecosystem.

Key activities include research, healthcare education, guideline development, formulary selection (prescription drugs that are covered by a health plan or stocked by a healthcare facility), and clinical care.

Parties include non-profit entities (eg. foundations and advocacy groups), the healthcare profession, the market supply chain (eg. payers, purchasing and distribution agents), and government.

For example, the researchers describe how opioid manufacturers provided funding and other assets to prescribers, patients, public officials, advocacy organizations, and other healthcare parties, who, in turn, pressured regulators and public health agencies to quash or undermine opioid related guidelines and regulations.

And they warn that many other examples of harm from industry promoted products remain unexplored.

The results show that all party types have financial ties to medical product companies, with only payers and distribution agents lacking additional, non-financial ties.

They also show that policies for conflict of interests exist for some financial and a few non-financial ties, but publicly available data sources seldom describe or quantify these ties.

The researchers acknowledge that their findings are limited to known or documented industry ties, and that some data might have been missed. However, they say their strategy of systematic, duplicative searching and feedback from an international panel of experts is unlikely to have

missed common or important ties.

As such, they conclude: "An extensive network of medical product industry ties to activities and parties exists in the [healthcare](#) ecosystem. Policies for conflict of interests and publicly available data are lacking, suggesting that enhanced oversight and transparency are needed to protect patients from commercial influence and to ensure [public trust](#)."

**More information:** Mapping conflict of interests: scoping review, *BMJ* (2021). [DOI: 10.1136/bmj-2021-066576](https://doi.org/10.1136/bmj-2021-066576)

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