Study finds links between physicians setting cancer care guidelines and drug industry
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Nearly nine out of 10 physicians and researchers who helped develop a leading set of cancer care guidelines in the United States reported financial ties to the pharmaceutical and medical device industries, a University of North Carolina Lineberger Comprehensive Cancer Center study found.

Of the 125 panelists who worked on setting the National Comprehensive Cancer Network's guidelines for lung, breast, prostate and colorectal cancer, 108 received some form of industry funding. This could include general payments for food, lodging, or speaker fees as well as research funding, according to the study published in *JAMA Oncology*. The majority of those payments were within the limits set by the NCCN to prevent financial conflicts of interest, but eight guideline authors exceeded them.

While the study was not designed to explore whether the payments influenced the physician's clinical practice or the recommendations made in the guidelines, the researchers say the finding of a high prevalence of financial relationships lays the foundation for future studies looking at that question.

"The prevalence of financial relationships was fairly high among physicians who authored these cancer treatment guidelines. Knowing this, it will be important to ask whether those relationships influence the recommendations that guideline authors make," said Aaron Mitchell, MD, the study's lead author and a clinical fellow in the UNC School of Medicine Division of Hematology/Oncology.

The researchers analyzed payments in 2014 to physicians who helped write the NCCN guidelines, which can influence physician practice.

Additionally, the Centers for Medicare and Medicaid Services uses NCCN recommendations to help determine its reimbursement policy for off-label uses for prescription drugs.

The NCCN sets limits for how much physicians can receive in payments from industry and participate in setting the guidelines to reduce the risk of financial conflicts. Guideline authors cannot receive $20,000 or more from a single company or $50,000 or more in total. The researchers found in their analysis that eight physicians, or 6 percent, appeared to exceed the NCCN's financial conflict of interest limits.

"It is not a given that industry funding leads to undue influence, but it is important to analyze these relationships and the potential impact they have on care guidelines because they do influence patient care decisions and the cost of providing patient care," said study co-author Stacie Dusetzina, PhD, a UNC Lineberger member and assistant professor in the UNC Eshelman School of Pharmacy and UNC Gillings School of Global Public Health.

For their study, the UNC Lineberger researchers reviewed publicly-available data reported through Open Payments, a federal program required by a provision of the Patient Protection and Affordable Care Act that requires U.S. drug and device manufacturers to disclose transfers of financial value greater than $10 to physicians and teaching hospitals. Using this data source, the researchers identified payments to authors who were active on NCCN guideline panels for four major cancer types.

The researchers found that the vast majority - more than 95 percent—of the total financial payments from the pharmaceutical industry were in the form of research funding, as opposed to general payments for meals and travel. Approximately $29 million in research payments were paid to guideline
authors in 2014, compared to $1.25 million in
general payments.

While 84 percent of the physicians received general
payments, including fees for consulting, meals or
lodging, less than half, 47 percent, received any
research payments in 2014.

"Understanding the extent to which guideline
authors have financial relationships with the
pharmaceutical industry—and the types of financial
arrangements that they have—is useful for the
NCCN and for the public," said Dusetzina. "As we
learn more about the role of industry payments in
shaping prescribing and practice it is best to
proceed with caution and continue to encourage
transparency."

The study's authors point out that industry funding
is "all but mandatory" for academic researchers
involved in clinical trials testing new drugs or
treatment strategies. However, with some of the
panelists receiving general payments but not
research funding, the researchers raised questions
whether this finding could mean some of the
guideline authors may be receiving general
payments unconnected to research. They
cautioned that because they only looked at one
year of data, they may not be getting the full story.

"This study demonstrates the value of public
reporting to assist organizations like the NCCN to
understand the relationships of their contributors
with industry," said study co-author Ethan Basch,
MD, MSc, director of UNC Lineberger
Comprehensive Cancer Center's Cancer Outcomes
Research Program and a professor in the UNC
School of Medicine Division of
Hematology/Oncology. "This work lays the
groundwork for future research to evaluate whether
these relationships meaningfully influence guideline
recommendations or not."

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