American Thoracic Society

THE POTENTIAL FOR CONFLICT OF INTEREST OF MEMBERS OF THE AMERICAN THORACIC SOCIETY

THIS OFFICIAL STATEMENT WAS APPROVED BY THE AMERICAN THORACIC SOCIETY BOARD OF DIRECTORS, JUNE 1987.

Introduction

In recent years, members of the American Thoracic Society and the American Lung Association have expressed concern about conflicts of interest that may arise for members and officers of these organizations. Examples include:

1. Individuals who serve as officers, Board members, or on policy-making committees of the ALA-ATS, who receive remuneration from, or whose research is supported by, private corporations that produce medical products.

2. Individuals in the organization who conduct activities under the auspices or financial support of tobacco companies that are the targets of the public advocacy and legislative programs of the ALA.

3. Individuals who serve as officers, Board members, or on policy-making committees of the ALA-ATS concerned with fostering a healthy environment who also relate, through their research or consultative activities, to corporations or their unions that manufacture environmentally hazardous materials.

These are only a few examples. It is clear that the future holds many occasions when difficult issues may arise that require objective and unbiased opinions, and yet, such objectivity may be difficult to establish.

In addition to real conflict of interest, there is the possible public perception of conflict of interest. Both must be minimized by organizations that utilize public funds.

Recognizing the need to explore the issue of conflict of interest of members of a voluntary health agency and a scientific society such as the ALA-ATS, the Board of Directors of the American Thoracic Society considered this issue at its meeting of June 19–20, 1986. Out of that discussion came a recommendation to convene an ad hoc committee composed of certain members of the Board of Directors of the ATS, certain ad hoc members familiar with activities of the American Thoracic Society, and two consultants experienced in the ethical, legal, and philosophical issues concerned with conflict of interest. This Committee met on November 23 and 24, 1986, for discussion of these matters and has drafted the following statement.

Statement on Conflict of Interest

The roles of medical-scientific organizations in public and economic affairs have increased as scientific knowledge has begun to influence legislative action, public perception of health issues, and the nation's economy. In matters of research and scientific observation by individual investigators, the major concerns are validity of data and the sound analysis and interpretation of data that evolve from laboratory and clinical investigation. In such efforts, the validity and the conceptual meaning of data emerge from the hypotheses, methods of study, and evaluation of the results. The author reports findings and draws conclusions as to the implications of those findings. Peer review of the publications reporting such new information serves as the method of assessing the validity, quality, and significance of the work.

However, when called upon to give judgments related to behavior, health, government legislation, or economic profit or loss, the physician and scientist often depart from reliance on analysis of data. Judgments must be rendered from personal interpretations of the meaning of studies whose results are often not definitive and are in conflict among individuals or professional groups. In such instances, scientists and physicians render opinions that are distilled from their own beliefs, perceptions, and experience. These opinions carry personal responsibility when an individual speaks for him or herself, or a broader responsibility when the individual speaks for a government agency, university, voluntary agency, scientific society, or a corporation. The objectivity of the opinion can be judged best when significant or relevant areas of conflict of interest are known.

The individual called upon to render an opinion may have a bias related to a specific interest which may be organizational, economic, or personal. In many circumstances, the potential for bias or conflict of interest may not be evident. For example, if an investigator or spokesman is in the employ of a pharmaceutical company and is rendering an opinion on a given pharmaceutical agent, there may be potential for conflict of interest. In such circumstances, disclosure of the background and professional affiliations of the spokesmen permit judgments to be made as to the possible presence of bias or conflict of interest.

Members of the American Thoracic Society are called upon to prepare statements or position papers in which recommendations based on scientifically established facts or the consensus of experts in a given field are summarized. The Officers of the Society attempt to select such committees so that individuals with different points of view or biases will come together to carry out a free, full, and vigorous discussion. Thus, it is hoped that the final report will represent a melding of the widest spectrum of opinion.

Nevertheless, officers of the American Thoracic Society and members who speak for the Society should offer to disqualify themselves from serving the Society if they have financial or contractual interests that will interfere with their acting in an unbiased manner for that service to the Society. The Committee agreed on five brief statements which address matters of conflict of interest or bias within the American Thoracic Society and the American Lung Association.

1. "Officers of the American Thoracic Society and members who speak for the Society should offer to disqualify themselves from serving the Society if they have financial or contractual interests that will interefere with their acting in an unbiased manner for the American Thoracic Society and the American Lung Association."

2. "Individuals or members of committees preparing official statements for the American Thoracic Society should disclose financial relationships or legal obligations that will or may be perceived as interfering with the task."

3. "Officers of the American Thoracic Society should exercise caution in entering into financial or legal arrangements that prejudice or bias the conduct or views of that individual in scientific, medical, or social issues related to the activities of the American Thoracic Society and/or American Lung Association. If such arrangements are perceived to exist, the individual should disclose these arrangements."

4. "Under some circumstances, foundations or corporations whose public policies are at variance with those of the American Thoracic Society and the American Lung Association

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may make available sums of money for the support of research or education. Members of the American Thoracic Society who are asked to serve on advisory boards related to such activities should be satisfied that they can carry out their deliberations in an absolutely free and unfettered atmosphere without regard for the differences in the public policy positions of the American Lung Association and the American Thoracic Society and of the granting organization."

5. "It is appropriate for American Thoracic Society members to apply for and accept grants and awards from foundations or corporations whose public policies are at variance with those of the American Thoracic Society and/or the American Lung Association if they are satisfied that the conditions of acceptance are known beforehand and there is no hindrance to the free and full publication of the results of studies carried out with the funds awarded. Full disclosure of the source of funding should be made known at the time the research is published."

By the very nature and complexity of the issues involved, these statements are general. They are meant to serve as guidelines in the wide range of activities conducted by the Society and its members. The fundamental objective is to create an awareness of the potential for conflict of interest and bias and to prevent such conflicts from interfering with the free and unfettered intellectual activity of the Society and its role as a professional society and advisor to the American Lung Association, as well as to other public, private and government agencies.

This statement was prepared by an ad-hoc committee of the ATS Board of Directors. Members of the committee were:

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