



## Conflict of Interest

Edited by Howard Bauchner, MD, and Phil B. Fontanarosa, MD, MBA

### Opinion

#### Conflict of Interest

While endeavoring to protect the interests and well-being of their patients and maintain professional competence, physicians may develop secondary interests such as the competition for patients and trainees, extramural research funding, and high-profile publications. Financial and other rewards of medical practice can create conflicts of interest. This issue of *JAMA* features 23 Viewpoint articles on conflict of interest for physicians in settings such as academic medicine, biomedical research, medical education, guideline development, health care management, and medical publishing. Two Editorials discuss the pervasive opportunities for conflict of interest in health care and medical journalism.

### Research

#### Payments From Industry to Physicians

1774

Studies have shown that financial conflicts of interest, from small gifts and meals to large sums for consulting, may alter physician decision making. To determine the types and distribution of industry-related payments to physicians in 2015, Tringale and colleagues linked data on industry payments to a national database of 933 295 licensed allopathic and osteopathic physicians. Almost half of US physicians were reported to have received a total of \$2.4 billion in industry-related payments, primarily general payments, with a higher likelihood and higher value of payments to physicians in surgical vs primary care specialties.

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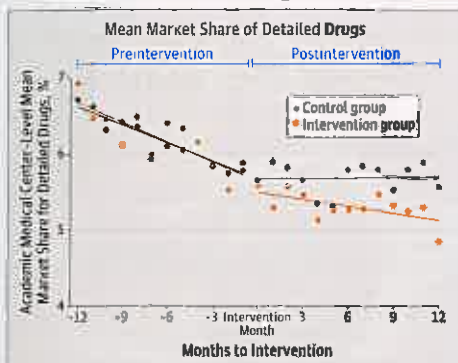
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Editor in Chief  
Howard Bauchner, MD

133 YEARS  
OF CONTINUOUS  
PUBLICATION

## Research (continued)

### Pharmaceutical Detailing Policies at Academic Medical Centers 1785



Out of concern for potential conflicts of interest, many academic medical centers have restricted sales visits from pharmaceutical representatives to clinicians, a marketing practice known as "detailing." Larkin and colleagues compared changes in prescribing before and after the implementation of detailing policies at academic medical centers vs prescribing patterns for a matched group of physicians who were not subject to detailing policies.

The authors found that restrictive detailing policies were associated with modest but significant reductions in prescribing of detailed drugs across 6 of 8 major drug classes. In an Editorial, DeJong and Dudley suggest that if detailing policies can influence prescribing, they may have an indirect effect on patients' out-of-pocket costs for prescription drugs.

Editorial 1772

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## Clinical Review & Education

### Is There a Conflict of Interest? 1796

Conflicts of interest can undermine the professional responsibility of physicians to put patients first. This article by Ginsburg and Levinson from the JAMA Professionalism series discusses a primary care physician in a large multidisciplinary practice who was concerned that one specialist was more likely than others to perform invasive procedures. After she shared these concerns with her primary care colleagues, they pooled data on their patients and discussed the findings with the clinic's medical director. This prompted the director to compare data for all the specialists in the practice in a process of quality improvement.

Author Audio Interview [jama.com](http://jama.com) CME [jamanetwork.com/learning](http://jamanetwork.com/learning)



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### Editor's Audio Summary

Howard Bauchner, MD, summarizes and comments on this week's issue.

### CME Credit

Earn CME credit by reading CME-designated articles in this issue and taking the quiz online. CME quizzes are available by topic, by date, and by US state requirements at [jamanetwork.com/learning](http://jamanetwork.com/learning).

### Author Interview

**AUDIO** Interview with Shiphra Ginsburg, MD, MEd, PhD, author of "Is There a Conflict of Interest?"

**AUDIO** Jack Gilbert, PhD, and Steve White, MD, discuss their research in "The Lung Microbiome: Key to Respiratory Ills?"

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### JAMA's Key and Critical Objectives

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