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EDITORIAL

Ethics and Transparency Committee on the Relationship Physician-Industry (CETREMI); suggestions to doctors in their relations with pharmaceutical industry

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- Medical samples and pharmaceutical sales representatives
 - 1.1. Receiving medical samples should not involve any form of material profit for the doctor.
 - 1.2. The doctor should weigh the time invested on receiving information and always put the patient's benefit ahead.
 - 1.3. Doctors who decide accepting medical samples and using them are responsible for doing it within the shelf life and prior to expiry date, as well as for their safe use.
 - 1.4. The time used by doctors to receive information is not subject to any remuneration whatsoever.
 - 1.5. Doctors are responsible for critically assessing any information received from pharmaceutical industry representatives.
- 2. Continuing medical education activities
 - 2.1. It cannot be overlooked that these events have the purpose to contribute to the physicians' updating and that other activities such as commercial or sports exhibitions, lunches or dinners, dances, excursions, etc. (that what is known as "hospitality") are secondary.
 - 2.2. Doctors can accept subsidies or support to attend a continuing education activity as long as the selection of attendees is carried out by the organizing academic organization.

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- 2.3. Doctors who participate as teachers, lecturers or speakers can receive grants to finance travel and accommodation expenses. They should submit to the organizing entity a written and signed disclosure indicating they don't have conflicts of interests with regard to the contents, and also, at the opening of their presentation, before the audience, make explicit they have no conflict of interests.
- 2.4. Upon receiving these grants it should remain clear that the purpose is not to influence on prescription habits or giving preference to certain brand.
- 2.5. Drugs and other supplies should be referred to only under their generic denomination.
- 2.6. The contents of the conference or academic participation should be directly related to the professional experience and specialty of the presenting physician.
- 2.7. Influence of sponsoring companies on the contents, presentation, selection of speakers or lecturers or publication of results should not be allowed. Funding will be accepted as a contribution in the form of unrestricted educational support.
- 2.8. When participating in a continuing education activity, the doctor should not ask for or accept presents or rewards in addition to what's described in paragraph 2.3 that could be perceived as an influential factor on his/her judgment.
- 2.9. Academic entities that organize continuing education activities should develop explicit policies that preserve independent judgment and accountability mechanisms among their members.

3. Research

- 3.1. To participate in investigations funded by a commercial entity, the doctor will be subject only to national and international legislation and will not allow external pressure, especially from the sponsor, on the results or publication of his/her research.
- 3.2. The doctor should verify that the protocol has been approved by a duly constituted Committee of Research and Ethics.
- 3.3. Doctors should refrain from participating in research trials unless the sponsors warrant the results will be published within a reasonable period of time and even when they contradict the formulated hypotheses.
- 3.4. Identifiable information on research subjects or voluntary participants should not be provided to the sponsor without the consent of the persons involved
- 3.5. The doctor should adhere to the research protocol and accept only those payments approved by the Ethics and Research Committee, which may include a compensation based on the time and work invested, but by no means on the investigation results.
- No payment should be requested or received for the sole recruitment of patients for research.
- 3.7. Doctors who register their own patients as research subjects should reveal them if they have any economic relationship with the sponsors.
- 3.8. Doctors should differentiate their roles as clinicians and as investigators, which should be

- reflected on the research contract and the informed consent. As always, if these two roles enter into some contradiction, the most important will be the patient and his/her wellbeing.
- 3.9. The acceptance of financial support should not be conditioned to the purchase or prescription of medications or health supplies.
- 3.10. Regardless of the research protocol having been approved by the committees, if during the development of the research the doctor detects not contemplated unwanted effects or unfair situations for the patient, he/she has the obligation to inform this to the responsible authorities, as well as to the committees, and withdraw from the investigation.

4. Commercial relationships

- 4.1. The doctor should not become partner of a business or company in such a way that it influences or appears to influence on the treatment of patients.
- 4.2. The doctor will be able to participate as a consultant or advisory board member if his/ her integrity is not compromised, if doesn't conflict with the obligations he/she has towards his/her patients and as long as this relationship is transparent.
- 4.3. The doctor should not induce on his/her patients the filling of prescriptions in a particular establishment or have complementary diagnostic studies made in a certain place, particularly if he/she has economic arrangements with these entities.