

Introduction by the ERA-EDTA Ethics Committee
Paris - France, May 27, 2012

An essential feature of a scientific and medical professional association such as the ERA-EDTA is the acceptance by its elected leaders and members of ethical guidelines which outline responsible behavior and personal obligations with respect to colleagues and the public in general. The propositions in this document are intended to limit the risk of actions that serve the self-interest of individuals and, as a consequence, to strengthen the intellectual impact of the ERA-EDTA.

The complexity of the modern world has significantly increased the need for mutual trust and verifiable transparency. Members of ERA-EDTA, as well as the healthcare community and the general public, must be enabled to make their own judgments about the truth and credibility of statements made on behalf of the ERA-EDTA, or during its events. Therefore, full disclosures of interests must be made by all representatives of the ERA-EDTA and all speakers at ERA-EDTA meetings at the beginning or at the end of any oral or written presentation and statement.

The purpose of policies that regulate the interactive relationships between the medical profession and industries dealing with pharmaceutical and medical device development is to govern permissible activities, avoid financial conflicts of interest and prevent, as far as possible, the introduction of bias in medical recommendations which would violate public trust.

There is clearly a real need for collaboration between medical science researchers and industry in order to achieve progress and make key discoveries in medicine; technology transfer is important to achieve improvements in the health of the population. However, the impact of marketing by industry on the professionalism and practices of physicians has received increasing attention in the light of knowledge of its influence on attitudes and behaviors. A large body of research suggests that physicians may be biased by financial involvement with industry even if many of them do not perceive themselves to be. Commercial healthcare organizations know that gifts may have a significant influence on doctors and this is why many such institutions do not allow their employees to accept even small gifts.

Individuals who lead large scientific and/or medical organizations may easily influence the behavior and decisions of members of such organizations. In addition, being involved in the publications of studies, presenting personal views in congresses or educational meetings, and/or writing reviews have a real impact on the medical community and health policy. Therefore, integrity and close adherence to a strict moral or ethical code, as well as common honesty, is crucial. Even if scientific misconduct and dishonesty are rare, the leadership must remain exemplary given the responsibility of their senior position: the more senior the position, the greater is the potential for conflicting relationships. The common relationships are: consulting, paid speaking presentations, research funding, advisory boards, research organization and/or partnership including publications. In a few cases, this may be a role as 'ghost author' of a publication that i, being involved in its production but not being listed as an

author. Alternatively, the names of senior scientists may be included in the list of authors of industry-sponsored publications when they have had little involvement with them. Clinicians may be influenced by the inclusion of the senior scientist's name among the authors and view the publication as being the result of unbiased scientific research. In such situations, possibly modified and incomplete information may eventually exert influence on medical recommendations. Despite wide access to medical information, clinical decision-making remains difficult for the individual physician so opinions expressed by reputed institutions and recognized scientists have a real impact on the treatment of patients.

Relationships between academic and scientific leaders, researchers, clinicians and industry have both benefits and risks. In general, the public grants the medical profession considerable discretion in setting its own standards. A robust Disclosure of Interests (DoI) policy is important in helping to ensure that the ERA-EDTA maintains a high standard of probity.

ERA-EDTA Ethics Committee

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