MEDICINE AND THE MEDIA

Who’s watching the watchdogs?

Doctors should be wary of the increasing entanglement of medical journalists and the drug industry, warn Lisa Schwartz, Steven Woloshin, and Ray Moynihan.

As watchdogs the media play a vital role in highlighting interconnections between doctors, researchers, and the drug industry. But who watches the watchdogs? Financial ties between medical journalists and for-profit companies they cover in their reporting have received little attention in the media or from the research community. Such ties warrant scrutiny, not least because many of us first learn about new treatments from the news media, and these reports can affect the way the public uses health care. The media also affect medical practice by influencing the medical literature: journal articles that get media coverage are more likely to be subsequently cited, regardless of the article’s intrinsic value. To promote awareness and provoke debate we discuss three areas of “entanglement”: education of journalists, awards for journalists, and the actual practice of journalism.

Education of journalists

Industry sponsorship of training and further education of journalists now occurs in a variety of contexts—universities, conferences, and professional associations—raising similar concerns to those that apply to education of doctors.

The University of North Carolina’s master’s degree in medical journalism, one of the first in the United States, has at least two important forms of financial relations with drug companies. Its post of Glaxo Wellcome distinguished professor of medical journalism is an endowed position created by a grant from the company worth $333 000 (£215 000; €260 000). Also, Pfizer offers a medical journalism scholarship at the university that aims “to improve the breadth and quality of reporting of health and medical issues in minority or disadvantaged communities.” The scholarship is worth $28 000 a year and also offers healthcare benefits.

The current Glaxo Wellcome professor, Tom Linden, told the BMJ that his salary was paid directly by the university, that no strings were attached to either of the sponsorships, and that sponsors had no input into the programme. Professor Linden, who acted briefly as a consultant to Glaxo in the late 1990s and is currently making a television documentary with his students that is partly funded by Pfizer, said he was grateful for support for the programme from the industry. “As long as the funding has no strings attached,” he said, “then I don’t think one is compromised by receiving funding from any particular industry.” Although there is no suggestion that this sponsorship has influenced the university’s curriculum, we think that it could send a symbolic message to students and engender a subtle sense of loyalty to the industry.

Like some university programmes, the American Medical Writers Association, whose members include reporters and public relations specialists, receives sponsorship from the drug industry. Eli Lilly was a key sponsor of the association’s 2008 annual conference, and the company also sponsors its student scholarships. Its president elect, Cindy Hamilton, said that although her organisation accepted sponsorship for receptions and certain meals at conferences, all sponsorship of speakers must be approved by the association’s executive committee, to

<table>
<thead>
<tr>
<th>Medical journalism awards funded by drug and healthcare companies</th>
<th>Purpose</th>
<th>Nature of award</th>
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<tbody>
<tr>
<td>Eli Lilly and Boehringer Ingelheim’s Embrace award</td>
<td>$25 000</td>
<td>A trip to Washington, DC, and Paris</td>
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<tr>
<td>Roche international award for obesity journalism</td>
<td>Global initiative to recognise excellence in reporting on overweight and obesity</td>
<td>Two prizes of €7500 and a trip to attend an international obesity congress</td>
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<tr>
<td>Boehringer Ingelheim Eloquium COPD communication award</td>
<td>International initiative to recognise journalists who extend the public’s awareness and understanding of chronic obstructive pulmonary disease</td>
<td>€5000</td>
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<tr>
<td>Eli Lilly’s Luminous award</td>
<td>To recognise outstanding journalism in the field of oncology around the world</td>
<td>Seven day international trip for two or a cash donation of $10 000 in form of a scholarship in winner’s name</td>
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<tr>
<td>Pfizer’s Eureka prize for health and medical research</td>
<td>Given to an Australian journalist or communicator who effectively and accurately communicates medical or healthcare research to the Australian public</td>
<td>$10 000 (£4500; €5200; $6600)</td>
</tr>
<tr>
<td>GlaxoSmithKline Irish medical media awards</td>
<td>Given by Irish journalists in categories of print, broadcast, commercial electronic media, and consumer broadcasts</td>
<td>€1000 for each category winner, €7500 for overall Irish health journalist of the year, and €2000 for young Irish health journalist of the year</td>
</tr>
<tr>
<td>International Osteoporosis Foundation journalism awards</td>
<td>Outstanding print reporting about osteoporosis (separate awards for general press and medical journalist)</td>
<td>$300 to $5000; first place winners receive an all expenses paid trip to the foundation’s world congress</td>
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maintain balance and reduce bias. As in the case of continuing medical education of doctors, sometimes sponsors play a more active role in the content of sponsored education. For example, at a large conference of ethnic minority journalists in 2008, a well attended lunch focusing on diabetes was sponsored by the maker of a diabetes treatment. According to a Wall Street Journal blog the company selected speakers and set the agenda, although panellists came up with their own presentations.  

**Journalism awards**  
One of the more astonishing forms of financial ties between journalists and drug companies is the sponsored award, which often involves lucrative cash prizes or opportunities for international travel (see table). For example, Eli Lilly and Boehringer Ingelheim have cosponsored an award for “reporting on urinary incontinence,” carrying a prize of international travel.  

Boehringer has an award for reporting on “chronic obstructive pulmonary disease,” offering prizes worth €5000 each. Eli Lilly one for reporting on oncology, and Roche one for “obesity journalism,” with a prize of €7500.  

Sometimes awards are sponsored by organisations that are themselves heavily funded by industry, such as the non-profit Mental Health America. Its 2007 annual report shows that almost half of its funds came from drug companies, including more than $1m each from Bristol Myers Squibb, Lilly, and Wyeth. Studies of similar interactions between the industry and medical professionals show that they can produce feelings of reciprocity in the beneficiary and can affect prescribing judgments, and we believe that journalists who accept such prizes may be engendering conflicts of interest for themselves.  

**The practice of journalism**  
The BMJ has previously reported incidents where public relations firms advertise for freelance journalists to write stories for trade publications and drug companies directly sponsor video material featuring high profile broadcasters presenting what looks like news but is more like promotion.  

A powerful contemporary example of entanglement involves a television network called Accent Health, said to be watched monthly by more than 10 million viewers in US medical waiting rooms.  

**A way forward?**  
These examples raise disturbing questions about relations between the industry and medical journalism, notwithstanding uncertainty about their extent or effect. Growing evidence from the biomedical literature indicates that industry sponsorship matters, because it is associated with more favourable research outcomes and because interactions with the industry result in more prescribing of the sponsor’s drug. We suspect that entanglement may also matter in journalism. To enhance the credibility of medical journalism some action could be taken now. Our three simple suggestions (see box) build on basic principles already advocated by journalists’ organisations and media outlets.  

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**Three ways to disentangle financial ties between medical journalists and healthcare industries**

**Education of journalists**
Training and further education of medical journalists should not be funded by the healthcare industries that the journalists cover, whether the education is delivered by universities or professional associations.  

**Journalists’ awards**
To avoid real or perceived conflicts of interest medical journalists should not accept from the healthcare industries they cover any awards, scholarships, gifts, travel, special treatment, or anything that could be seen as affecting what or how news is reported.  

**The practice of journalism**
Just as medical journals require disclosure of conflicts of interest, medical journalists should disclose any financial or non-financial assistance from the industry in researching or writing their stories, including identifying quoted patients and experts with ties to the industry. Conflicts of interests of sources should routinely be disclosed.

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References are available on bmj.com