

Pharmaceutical industry representation on CIHR's Governing Council

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In today's *Open Medicine*, Steven Lewis brings forth provocative commentary on the appointment of Dr. Bernard Prigent, Vice President of Medical Affairs for Pfizer Canada, to the Governing Council of the Canadian Institutes of Research (CIHR).. He outlines a number of arguments against the appointment that centre around conflict of interest, and places a spotlight on the diverging agendas of pharmaceutical companies (that must, as their primary obligation, serve their shareholders) and CIHR (that must, as a public institution, serve public interest). He recounts notable dark chapters in the history of pharmaceutical industry/academia interaction, and expresses the general concern that Dr. Prigent's appointment heralds a new era of potentially troubling industry influence on Canada's health research agenda.

Lewis is not alone in his views. Over 4000 individuals signed a petition calling for reversal of the appointment, and the appointment was reviewed and debated (without unanimity) in two hearings by the House of Commons Standing Committee on Health, where the motion to withdraw the appointment was eventually upheld ~~was defeated~~. <http://www.cbc.ca/health/story/2009/12/03/pfizer-prigent-cihr-aglukkaq.html>

There are also defenders of the appointment, certainly among members of the Standing Committee on Health, and also undoubtedly beyond the committee. To broaden our readers' understanding of the debate, *Open Medicine* approached CIHR with an invitation to provide a commentary piece to accompany Lewis' article. Karen Spierkel, CIHR's Director of Communications and Public Outreach, provided an official response for the agency, with the ~~important~~ clarification that the appointment of Dr. Prigent, while based on the recommendation of the president of the CIHR, ~~is not made directly by CIHR, but rather by the~~ officially made by the Government of Canada through the Office of the Federal Minister of Health). She then went on to highlight the following points (direct excerpt):

- The CIHR Act specifies that Governing Council members are appointed by the Governor in Council. Section 7(4) of the CIHR Act outlines the appointment criteria as "the Governor in Council shall appoint as members of the Governing Council women and men who are able to contribute to the achievement of the objective of the CIHR in the overall interests of Canadians. The Governor in Council shall consider appointing women and men who reflect the highest standards of scientific excellence and women and men who reflect a range of relevant backgrounds and disciplines."
- Dr. Prigent has been appointed for his skills, experience and personal competencies. He is an experienced strategic decision maker, with a keen understanding of research and development partnerships between public and private institutions. CIHR has just renewed its Strategic Plan and a key action is to refine activities with respect to commercialization.
- Dr. Prigent's extensive experience in commercialization and pharmaceutical development will be critical to moving this forward and to achieve our mandate with respect to cures and treatments and facilitating commercialization.

- Dr. Prigent will not be able to influence CIHR funding to specific research proposals. As a member of Governing Council, Dr. Prigent will make high level budget decisions; however he will not make decisions with respect to which researchers/projects will be funded, as this is the responsibility of the Scientific Council, based on the advice of individual peer review panels.
- All Governor in Council appointments must observe the *Conflict of Interest Act*, the *Ethical Guidelines for Public Office Holders* and the *Guidelines for the Political Activities of Public Office Holders* as a condition of appointment. These documents, along with general background on the Governor in Council appointment process, are available at the following link:
www.appointments-nominations.gc.ca/prsnt.asp?page=Process&lang=eng

The other source for understanding CIHR's perspective on the appointment are the two meetings of the Standing Committee on Health. Because the first meeting is the only public forum in which Dr. Alain Beaudet and Dr. Prigent have spoken on the appointment, the *Open Medicine* editors here present extracts from that meeting for the reader's benefit.. The extracts have been scrupulously selected to present in an unbiased way what Dr. Beaudet and Dr. Prigent had to say. Elisions from the text are indicated by three dots. Readers are invited to read the entire transcripts of both meetings, which are available from the House of Commons website in PDF form at <http://www2.parl.gc.ca/content/hoc/Committee/402/HESA/Evidence/EV4275165/HESA4275165-E.PDF> and <http://www2.parl.gc.ca/content/hoc/Committee/402/HESA/Evidence/EV4302528/HESA4302528-E.PDF>.

CIHR's stance is clearly that the strategic enhancement of commercialization activities is the central element propagating this appointment, and that, in that realm, Dr. Prigent is a highly competent individual. The CIHR statement also touches on some of the mitigating strategies that are in place for at least partially managing conflict of interest, when it is present.

Open Medicine's editorial team intentionally stops here in presenting this controversy, respecting the diverging views on this issue. The points of clarification from CIHR provide a lens through which Steven Lewis' commentary can be more richly contemplated. As health care providers, teachers, and researchers, we increasingly need to make informed decisions around transparency, accountability and conflict of interest. The crux of the matter is whether or not CIHR's strategic enhancement of commercialization activities through this appointment outweighs the conflict of interest (real or perceived) that has raised misgivings among many of the scientific community. Through these pieces we simply seek to inform the scientific community, and to stimulate reflection and thoughtful dialogue among stakeholders on the challenges of reconciling potential conflict of interests with the contributions that industry partners can make to transitioning scientific discoveries to the applied healthcare marketplace.

We would have a subheading and provide the extracts below and then the citations.