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### 2004 Meeting Report Reforming and Refinancing CME: Global Implications?

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NEW YORK -- "We ain't seen nothing yet when it comes to regulation of the pharmaceutical industry," exclaimed Bruce J. Bellande, PhD, Executive Director, Alliance for Continuing Medical Education, Birmingham, Alabama, speaking of the current environment in the United States here at the recent Ninth Annual Meeting of the Global Alliance for Medical Education.

Over the last few years, government scrutiny and investigation of the drug industry has increased dramatically, with pharmaceutical companies paying out more than \$6 billion in fines, noted Dr. Bellande. In 2003, the U.S. Office of Inspector General issued its compliance program guidance for pharmaceutical manufacturers. Now, with the passage of the Medicare drug benefit bill, estimates are that the government will be paying an additional \$600-\$700 billion to the pharmaceutical industry. With that kind of money at stake, government regulations will only increase, he added.

There is also heavier scrutiny of physicians, Dr. Bellande pointed out. The Federation of State Medical Boards is considering the implementation of a maintenance of licensure system, which would be a continuous process, as opposed to the periodic licensure of physicians that is now in place.

The CME community's system of self-regulation is also intensifying. The Accreditation Council for CME has issued new Standards for Commercial Support, which will probably be endorsed in September. "The major difference between the current Standards and the draft Standards is that we are now required to go beyond disclosure and must resolve--I'll repeat: resolve--conflict of interests. That is a huge change," Dr. Bellande emphasized.

To eliminate inappropriate pharmaceutical industry influence in CME, the Conjoint Committee on CME, which comprises the major professional medical organizations in U.S., is "calling on providers to design all continuing medical education with the best evidence that is available. I always liked the cliché, 'Science sells better than promotion ever will,'" Dr. Bellande said.

The committee also recommends that CME providers seek out alternative funding sources. A more balanced approach to funding CME will not only help ensure objectivity in CME, but it will also counter the public perception that CME depends predominantly on pharmaceutical industry support, Dr. Bellande explained.