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**The Royal Australasian College of  
Physicians' submission to the  
Medical Council of New Zealand**

**Consultation on statement on  
doctors and health-related  
commercial organisations**

**Whiringa-ā-nuku 2022**

## Introduction

The Royal Australasian College of Physicians (RACP) welcomes the opportunity to provide feedback to the Medical Council of New Zealand (MCNZ) on the consultation on its updated Statement on doctors and health-related commercial organisations (the Statement).

The RACP works across more than 40 medical specialties to educate, innovate and advocate for excellence in health and medical care. Working with our senior members, the RACP trains the next generation of specialists, while playing a lead role in developing world best practice models of care. We also draw on the skills of our members, to develop policies that promote a healthier society. By working together, our members advance the interest of our profession, our patients and the broader community.

## Overall Position

The RACP supports the revised draft Statement. Our members congratulate the MCNZ on recognising the importance of providing clear guidance to doctors to ensure they can recognise any bias or conflicts of interest that may arise from interactions with health-related commercial organisations. However, the RACP wishes to highlight areas for improvement to make the Statement more comprehensive.

## Definitions of terms (Refers to Question 2)

- The RACP is of the view that the terms identified by the MCNZ will assist doctors to recognise when there could be a real or perceived conflict involving the interests of the profession and those of commercial organisations.
- The statement usefully distinguishes between a duality and a conflict of interest and between pecuniary or non-pecuniary interests.
- The RACP notes that while a definition of health-related commercial organisations is included in the terms, a more precise and comprehensive definition could be included here. For example, commercial organisations may include the full range of institutions and enterprises with a bearing on health care, distinct from the actual work carried out by doctors in their practice.

## Managing conflicts of interest (Refers to Question 4)

- Members suggest the statement makes more explicit reference to the RACP's 2018 [Guidelines for ethical relationships between physicians and industry](#), produced to support health professionals in identifying, assessing and managing conflicts of interest<sup>1</sup>. This includes a useful chapter covering issues arising from the promotion pharmaceutical products within clinical practices due to its importance and the public concern this has evoked.
- The RACP guidelines offers specific guidance in relation to assessment and management of dualities and conflicts of interests, interactions with pharmaceutical representatives, gifts, entertainment, the use of drug samples, promotion strategies, therapeutic devices, support

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<sup>1</sup> Royal Australasian College of Physicians (RACP). Guidelines for ethical relationships between physicians and industry. Fourth edition. Sydney: Royal Australasian College of Physicians. [Internet]; 2018. Available from: [guidelines-for-ethical-relationships-between-physicians-and-industry.pdf \(racp.edu.au\)](#). Downloaded on 10 October 2022.

for meetings and other educational activities, sponsorship of travel and meetings of various kinds, and employment and consultancies.

### General comment (Refers to Question 5)

- The Statement is a comprehensive and user-friendly document which is generally fit for purpose.
- RACP members have stressed that *perceptions* of bias and conflict of interest are as significant in the mind of the public as *actual* occurrences. It is therefore imperative that the Statement guides doctors to operate on the basis that *all* organizations offering benefits of any kind to them are doing so to advance their *own* interests, not those of the doctor or his/her patients.
- All interactions between clinical practitioners and industry should actively serve the interests of patient care and population health.
- In cases where a clear benefit to clinical practice is less certain, great caution should be exercised. Where there is the slightest doubt, doctors should disengage.
- The need for caution is particularly important where there is a direct pecuniary interest or involvement. If any such interest is involved doctors should avoid engagement with commercial organisations at all costs to prevent reputational damage.
- Members have also noted that that where research is involved doctors should be aware that they may open themselves to the risk of future legal action should there be adverse outcomes.

The RACP thanks the Medical Council of New Zealand for the opportunity to provide feedback on this consultation and hopes these comments are helpful. To discuss this submission further, please contact the NZ Policy and Advocacy Unit at [policy@racp.org.nz](mailto:policy@racp.org.nz).

Nāku noa, nā



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