

Quotes from Reviews of:

Marc A. Rodwin

Conflicts of Interest and The Future of Medicine:

The United States, France and Japan

New York: Oxford University Press, 2011

ISBN : 978-0-1997-5548-6

Journal of Health Politics, Policy and Law; 2012 (37) 1:149-154;

Joseph White, Case Western Reserve

“In this rich and learned analysis, Marc A. Rodwin extends his work on conflicts of interest by directly comparing both problems and policies in the United States, France, and Japan. Although he has already published leading work in this field (Rodwin 1993), readers, I suspect, will learn a lot from this comparison, which builds on the analytic baseline from that previous work. A reader interested in conflicts of interest and seeking an introduction to the field could surely use this book for that purpose. It lays out issues and then demonstrates them in a wide range of contexts. Because of its comparative approach, however, the book also has advantages over any single-country study.”

Journal of the American Medical Association, 2011;305(21):2231-32;

Samuel Y. Sessions, U.C.L.A. Medical Center

The reforms proposed in the conclusion are useful and wide-ranging.... By providing a wealth of data demonstrating that these problems are by no means confined to the United States, [*Conflicts of Interest and the Future of Medicine*] will be helpful to scholars as well as intriguing to readers new to the subject.

Health Affairs, 2011; 30(8):1612-1613;

M. Gregg Bloche, Georgetown University Law School

Money and Influence at the Bedside. <http://content.healthaffairs.org/content/30/8/1612.full.html>

“His 1993 book, *Medicine, Money, and Morals*, [Rodwin] rigorously synthesized state-of-the-art knowledge about doctors’ conflicts of interest and their impact on patient care.... no one has tracked them as unrelentingly... He’s now tracked them on three continents (if Japan counts as Asia), and ... reports the dismaying results. *Conflicts of Interest and the Future of Medicine: The United States, France, and Japan* details medicine’s struggles with myriad temptations...Rodwin writes clearly, and he is soft-spoken but stinging in his account of organized medicine’s resistance to limits on self-referral, enticements from Big Pharma, and other flows of lucre....He has written an important book on an urgent topic, neglected by both political parties in the ongoing battle over health care reform.”

The American Journal of Bioethics, 2011; 11(10): 36–41;
Stephen R. Latham, Yale University

“Marc Rodwin’s *Conflicts of Interest and the Future of Medicine* succeeds admirably both at helping us learn *about* other countries and at helping us learn *from* them... The attentive reader will come away from these chapters with a sophisticated and complex understanding of the evolution of the healthcare financing system in each of the countries....The book will be of great interest to health policy analysts, health lawyers, physician leaders, regulators, and bioethicists. It is a model of descriptive and analytical comparative analysis.

“Rodwin pulls no punches, announcing that the experiences of the three countries have led him to conclude that a number of traditional reforms aimed at conflict of interest in medicine just don’t work...Rodwin supplies detailed arguments for each conclusion, based on the evidence gathered in his national case studies.”

Governance 2012; 25 (2): 349-351.
Ian Greener, Durham University

“It is hard not to be impressed by the depth of learning shown in this book. Rodwin presents a coherent account of the development of medicine in three countries, drawing relevant comparisons as he does so, identifying key sites where conflicts of interest are likely to arise. He is able to show how those sites vary from country to country and explore how they arose through the distinctive evolutionary path of medicine in each. This is a major scholarly achievement.”

“I would have no problems recommending it for courses on health policy, but I also hope it will be used in medical schools to explore the kinds of challenges the profession faces in relation to conflicts of interest.”

Perspectives on Politics 11(4) December 2013: 1224-1226.
Miriam J. Laugesen, Columbia University

“This is an important contribution to our understanding of institutionalized conflicts of interest in medicine, and it contributes to our understanding of health-care politics and comparative health policy... This book provides thoughtful insights on past, current, and future conflicts of interest in medicine for scholars and policymakers alike.”

Inquiry Spring, 2012; 49(1):75-76.

Gertard Magill, Ph.D. The Vernon F. Gallagher Chair, Professor of healthcare Ethics, Dusquesne University.

“Rodwin presents a tour de force by arguing against a hefty and dominant body--the medical profession--to dramatically diminish the conflicts of interest that pervade the medical culture today. Insightfully, and indeed courageously, he advocates for reforms and policy strategies to accomplish laudable goals: to prevent, as much as possible, doctors and organized medicine from entering situations that pose conflicts of interest; to require disclosure of such conflicts (when they do arise) so that those who are affected can take protective measures; to regulate or supervise physician conduct in order to reduce such conflicts from breaching trust or abusing medical discretion; and to penalize physicians who violate patient trust, especially when harm is caused, by imposing sanctions and requiring restitution. The measures he advocates include daunting changes--for instance, exhorting physicians to rely more on government and lay oversight, such as having third-party organizations directed by nonprofessionals manage their conflicts of interest.”

Medical Law Review

Hui Yun Chan, Faculty of Law, University of Otago, New Zealand

One of the strengths of this book lies in the fresh, practical approach Rodwin proposes in which conflicts of interest in medicine can be managed. The suggested reform measures provide an alternative approach in conflict management, drawing from the experiences of the three countries he examines. His book and the relevance of the topic will appeal to policy-makers, practitioners, and scholars interested in solving the thorny problem of conflicts of interest. The bibliography, together with an extensive literature and notes to the chapters, provide a rich source of reference for those seeking to investigate this area further... Rodwin has made another important contribution to the rich discussion on conflicts of interest in medicine.

Social History of Medicine; 2011;

Nancy Tomes, Stony Brook University

“Comparative histories of any subject, including medicine, are of enormous value, yet most of us lack the patience or energy to do such work. Thus we have all the more reason to be grateful to those scholars who do, among them Marc A. Rodwin, whose book *Conflicts of Interest and the Future of Medicine* provides a comparative perspective on a particularly challenging subject: economic conflicts of interest in medical practice. By comparing how conflicts of interest and their regulation have evolved historically in France, the U.S. and Japan, Rodwin provides a fascinating, well-informed account of the changing economics of modern medicine....unlike many works of policy analysis that present only a thin veneer of history, this book has a solid historical foundation.”

“Rodwin’s lucid, learned summary of physician conflicts of interest will be enormously useful to historians, particularly those concerned with the post-1970 period. The book’s extensive footnotes and bibliography provide a guide to relevant sources in the fields of law, economics, sociology, and policy, and an appendix offers a short legal history of the concept of conflicts of interest and its evolution from Roman fiduciary law to modern civil law. This is a fine piece of work that will be of great use particularly to historians of twentieth century medicine.”

Journal of Bioethical Inquiry, 2011; 4 (1):387-388;

Adam Licurse and Aaron S. Kesselheim, Harvard Medical School and Brigham and Women's Hospital

“The existence of these incentives—and the conflicts of interest they create—is the subject of Marc Rodwin's new book, *Conflicts of Interest and the Future of Medicine*. In his history-heavy analysis of the growth and symbiosis of medicine and industry in the United States, France, and Japan, Rodwin chronicles the cultural, legal, and institutional factors that have contributed to each country's current landscape of financial incentives in clinical medicine. Each tells a different story of how organized medicine, professional self-regulation, market competition, and payers affect contemporary physician behavior and provides insight into the relationship between this behavior and health care cost.”

Journal of Law, Medicine and Ethics, 2013; 41 (4):915.

Eric G. Campbell, Director of Mongan Institute of Health Policy, Massachusetts General Hospital and Professor of Medicine, Harvard Medical School

“What makes Marc Rodwin's book quite valuable is the scope of what is considered under the rubric of FCOI, the multi-national comparisons, his in-depth consideration of the historical context in which FCOI has developed, and the chapter dedicated to reforms aimed at limiting physicians FCOI.”

“It makes a significant contribution to the overall literature on the nature, extent, and consequences of FCOI in medicine today.”

International Journal of Integrated Care, 30 January 2012 - Vol 12, January-March 2012

Thomas Kostera, Institute for European Studies/CEVIPOL, Université libre de Bruxelles

“Thanks to its comprehensive analysis of the three countries and their different regulatory frameworks this book is not only useful for legal or economic scholars/experts who are interested in dealing with conflicts of interest, but also for those who would like to study the healthcare systems of France, Japan and the USA. It is also useful as a starting point for sociologists and political scientists for studying the role of the medical profession.”

“The book provides overall a very detailed analysis of the historical and structural sources for conflicts of interest in the three countries presented. The chapter on professionalism complements the political economic perspective and avoids an overly functionalist view of coping with conflicts of interests. The detailed analysis shows that the state and insurance funds are also no ‘neutral’ actors and develops therefore to the convincing conclusion that conflicts of interest are best dealt with by a mix of market-driven, professional and public regulation.”

World Medical & Health Policy, 2011; 3(2): article9; <http://www.psocommons.org/wmhp/vol3/iss2/art9>
Arnauld Nicogossian, George Mason University

Dr. Rodwin masterfully reviews most of the reasons leading to conflicts-of-interest and draws attention to the similarities and differences between the United States', Japan's, and France's practices for managing this problem. He presents relevant examples, discusses the historical evolution of the medical ethics in each country, and proposes suitable remedial actions.... This is a well-written and scholastic treatise by an academic who studied and worked in all three countries discussed in this book.

Choice, 48-6418, RA410, 2010-46033 CIP, American Library Association
F.W. Musgrave, Ithaca College

"Rodwin provides significant context for the ongoing debate over health care policy. He posits that "the physician-doctor relationship lies at the heart of medicine," and that this relationship has been strained by conflicts between professional ethics and financial self-interests. These conflicts are interfaced with the main forms of medical practice and their interaction with the influence of organized medicine on private practice; professional self-regulation; market competition; and the roles of the state and insurers. The author presents examples from France, Japan, and the US to illustrate such conflicts and how differently the nations cope with them."

Social Policy & Administration, 2011;45(7):831–833;
Ellen Kuhlmann, University of Bremen, Germany

"Rodwin provides comprehensive, yet accessible information on the complexity of conflicts of interest and how they may shape the future of medicine in different health-care systems. This book is well written and highly topical. It will be of interest for all those who are concerned about doctors' conflicts of interest, from policymakers and academics to practitioners and the users of medical services."

"*Conflicts of Interest and the Future of Medicine: The United States, France, and Japan* offers us deeper insights into the complexity of interests that impact in doctors' decisions beyond medical reasons and that may not always benefit patients and the public interest."

Phi Beta Kappa. *The Key Reporter*. Spring, 2012, p. 12
Germaine Cornelissen-Guillaume

"To illustrate the various sources of conflicts present in today's health care system, Marc Rodwin's book starts with the story of a hypothetical patient with chest pain seeking medical help in the U.S. France and Japan... [Then] ...for each of the three countries, the author provides an in-depth review of history of the nation's medical political economy as it has been shaped by medicine, the market and the state. He examines how conflicts of were influenced by the rise of and social medical insurance, by the changing relations between and the pharmaceutical and medical device industries. The book deals with an important topic that the author thoroughly researched. By reviewing the different strategies developed by each country to respond to physicians' conflicts of inter- Rodwin provides a useful perspective for the ongoing debate on medical ethics."

Science and Public Policy 2011;38 (9):739–740;

Deborah Bassett, University of Washington School of Medicine,

“Marc Rodwin’s latest book offers a comprehensive historical analysis of medicine and politics in the US, France, and Japan and compares the conflicts of interest that exist in the healthcare systems of these three countries in order to offer some possible solutions to these problems.”

“Rodwin’s book is an important and timely call for a broad reform of the policy that regulates the relationships between medical practice and commercial interests not just in the US, France, and Japan, but throughout the world. He effectively argues that disclosure, the current most common regulator of conflict of interest in medicine, is inadequate to prevent conflicts of interest and to protect patients from potential harm. As global medicine becomes increasingly important, so will the need for international norms to regulate the practice, protect patients, and preserve a trusting relationship between patients and their caregivers in nations around the world.”

Journal of Social Policy, 2012; 41(2):441-442;

Viola Bureau, University of Aarhus, Denmark

“With its focus on doctors’ conflicts of interest, the book addresses a salient yet neglected issue in health policy .Healthcare reform in industrialized countries rarely focuses explicitly on conflicts of interests, at the same time such conflicts are inherent across healthcare systems. This reflects the fact that all health systems, although to different degrees, rely on a combination of elements of the state/public regulation, private industry/the market and professionalism as a form of private interest government. As such, the book addresses a topic which is highly relevant both from empirical and theoretical perspectives, not least also as the author adopts a cross-country comparative perspective and includes the US, France and Japan.”

“Students and researchers in comparative social policy and health policy will be particularly interested in the discussion of the regulatory challenges involved in balancing public control on the one hand and private interest government on the other.”

Social Science Japan

Michael D. Fetters, University of Michigan

In the field of biomedical ethics, international comparisons help frame domestic issues and illustrate where alternatives exist when domestic debates seem to have become exhausted. Marc Rodwin... provides a robust new look at conflict of interest.

Rodwin provides an unusually rich cross-disciplinary and cross-national account, especially with regard to physician conflict of interest. Accolades to Rodwin for a job well done in delving into many salient issues, for articulating that which doesn’t and can work, and for underlining actions that show promise.

Med Hist. Jan 2013; 57(1): 154–155.

Richard Ashcreoff, School of Law, Queen Mary University of London

“Rodwin does us an important service in bringing these issues into clear sight. Too often medical ethics, health policy and indeed history of medicine focuses on the social, normative, and technological side of medical change. The economic and business side is every bit as important and influential. And while we might despair of ways to improve the practice of medicine in the face of conflicts of interest, he does show us how it could get worse without continuous public and professional efforts to resist the steady pressure of conflicts of interest on good, patient-centred medical practice.”

Santé Publique 2011;23: 151-161; <http://www.cairn.info/revue-sante-publique-2011-2-page-151.htm>

Yves Charpak, Directeur des Etudes et de la Prospective chez Etablissement Français du Sang

« Le livre est un document très imposant et qui survole tous les aspects des conflits d'intérêt ... La grande qualité du livre tient à son exhaustivité pour l'abord des conflits d'intérêts »

« L'un des messages clefs est qu'il y a un continuum de conflits d'intérêts, de natures différentes et qu'il est illusoire de penser que la simple déclaration de ces conflits d'intérêts, qui est la principale solution proposée un peu partout aujourd'hui, peut résoudre tous les problèmes »

« Il parle des conflits d'intérêts de nature financière mais aussi ceux qu'on pourrait appeler de « loyauté », quand le médecin doit aussi satisfaire un tiers autre que le patient.

Le livre entre dans le détail de ces différents types de conflits d'intérêts, en listant :

- la fourniture de service par des médecins auto employés (les libéraux chez nous), où la « bonne santé de l'activité » peut entrer en conflit avec les intérêts des patients;
- la réalisation d'actes additionnels, biologiques, radiologiques, techniques, qui entraînent aussi une meilleure rémunération ;
- les arrangements entre professionnels de santé ou même avec d'autres types de services pour organiser le marché, la circulation des patients au mieux des intérêts de tous ;
- la propriété de l'outil de travail par les médecins eux-mêmes, cliniques et hôpitaux par exemple, augmente les possibilités d'une attitude « entrepreneuriale » ;
- pour ceux qui ne sont pas auto-employés, la dépendance à une autorité qui les emploie peut créer des situations d'influence de l'employeur contraires à l'intérêt des patients et qui dépend de la « solidité » de leur contrat et de leur autorité. Ils peuvent être amenés à favoriser des jeux et intérêts institutionnels plus que l'intérêt des patients. En particulier les stratégies de réduction des coûts peuvent être contraires à l'intérêt des patients ;

– les tentatives des assureurs santé d'imposer de la capitation, du partage des risques financiers, peuvent conduire à des stratégies thérapeutiques moins optimales de la part des médecins concernés. Cela est d'autant plus vrai que ces assureurs ont un lien financier avec les médecins qui dépendent d'eux en partie ;

– les liens avec d'autres parties, sous forme de subventions, cadeaux, et autres subsides présentent un risque bien particulier, notamment quand ils viennent d'institutions fournissant des services et des produits utilisés par les mêmes médecins pour leurs patients.

Le livre raconte aussi qu'aucun des trois pays explorés n'a de système en place permettant d'éviter les conflits d'intérêts, mais qu'ils sont de nature et d'ampleur différentes, selon le pays. En particulier il insiste sur l'illusion de tout régler par la déclaration simple des conflits d'intérêts. Il suggère de les décrire et de les analyser systématiquement, en détaillant bien ce qui concerne les industries de santé, mais aussi les institutions publiques, les assurances de santé obligatoires ou non, les hôpitaux, les ONG, etc. »