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Stop tobacco industry sponsorship of continuing medical education

This malign industry must not be allowed to influence clinicians' learning

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In a troubling development for tobacco control, Medscape, a continuing education website for health professionals, was recently discovered to be promoting a series on smoking cessation sponsored by tobacco company Philip Morris International (PMI).¹ Observers will note the bizarre incongruity of education programmes for doctors being funded by a tobacco giant whose products are estimated to kill over a million people a year,² yet such initiatives are all part of tobacco companies' most recent attempts to rebrand themselves to ensure their continued financial health.

PMI, with the second largest market share of the global cigarette market,³ claims to be transitioning to the "health and wellness" sector, building on its acquisition of inhaler company Vectura in 2021.^{2,4} After *The BMJ's* Medscape investigation was published, evidence emerged that other courses sponsored by PMI—all focused on its version of "harm reduction"—were being offered or planned in South Africa, the Middle East, and possibly other parts of the world.⁵

After an outcry led by clinicians and health professional organisations about course content (such as quitting smoking being omitted from the suggested options for patients concerned about how to reduce their lung cancer risk), Medscape removed the content and now claims to have established a policy against accepting any tobacco industry funding for educational programmes.⁵

However, the company also claims that the content complied fully with accreditation standards set by the Accreditation Council for Continuing Medical Education.⁶ If true, the standards clearly need to be upgraded, urgently.

Vested interests

So what is wrong with a tobacco company funding courses for doctors and nurses? First, even if course content is clearly labelled as funded by Philip Morris International, many health professionals, especially those in countries where the visibility of tobacco giants is low, may be unaware that PMI is a tobacco company with a vested interest in promoting its own non-cigarette nicotine products, and therefore the risk of bias in funded content is high. A rich literature on commercial bias in medical research and education already exists, primarily focused on the influence of drug and medical device manufacturers.⁷⁻¹⁰ As a leading researcher on the topic noted, product promotion through industry funded continuing medical education (CME) is unregulated, and most health professionals cannot detect covert commercial bias, yet "industry-funded

CME is always related to business lines or products of sponsors."¹¹

Second, involvement in "harm reduction" is part of the tobacco industry's ongoing efforts to portray itself as "transformed," now offering a solution to the problems it created.¹²⁻¹⁴ While harm reduction is a legitimate public health approach, the tobacco industry's version falsely suggests that harm reduction can be achieved only by using new nicotine products such as e-cigarettes and heated tobacco products—products ostensibly targeted only at people who already smoke. Yet no tobacco company has applied for regulatory approval for these products as smoking cessation devices, and tobacco companies continue to interfere in governments' efforts to implement effective, evidence based tobacco control policies that reduce smoking and thus reduce harm.¹⁵

The tobacco industry's harm reduction narrative is also a direct challenge to the rising interest globally in planning for a commercial tobacco endgame.¹⁶ The endgame narrative calls for governments to develop and implement more aggressive policy measures to reduce access, attractiveness, affordability, and availability of tobacco products, up to and including phasing out sales of some or all products, with the ultimate goal of ending the tobacco epidemic. A financially healthy tobacco industry is fundamentally incompatible with that goal.

In contrast, the industry version of harm reduction seeks to undermine the idea of an endgame and assert instead that more "choice" of addictive products is the answer, nicotine is virtually benign, and addiction relatively harmless. For example, PMI markets its heated tobacco product IQOS as "smoke-free,"¹⁷ a controversial characterisation of an inhaled tobacco product that independent studies suggest is not, in fact, smoke-free and may actually be more harmful than claimed.¹⁸

Health professionals, health leaders, and their societies and professional organisations must demand that the bodies accrediting continuing medical education for clinicians enact policies banning content sponsored by tobacco affiliated organisations. The reasons for doing so will be obvious to most, and they are similar to the reasons why many reputable journals, including *The BMJ*, will no longer consider research papers funded by the tobacco industry.¹⁹ Tobacco companies should have no role in providing education for health professionals.

Further, health professional and patient organisations should caution their members to be aware that the tobacco industry is attempting to influence patient care in favour of its products. Medical education at

all levels should give learners a clear understanding of the commercial determinants of health so that all clinicians are prepared to critically examine sponsors, authors, and content of CME related to tobacco harms.

Although it is among the largest, Medscape is not the only company offering CME, and PMI may not be the only tobacco company working to influence health professionals through this channel. If other similar offerings are discovered, they should be widely publicised on professional networks and wider media, and the relevant educational providers notified that tobacco industry sponsorship is unacceptable. The tobacco industry cannot be allowed to influence medical education, health practitioners, or patient care in this way as it desperately seeks to secure its future profits.

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