FDA bars own expert from evaluating risks of painkillers

Jeanne Lenzer *New York*

The US Food and Drug Administration has barred one of its own experts from serving on the panel considering the safety of cyclo-oxygenase-2 (COX 2) inhibitors after he made remarks indicating that valdecoxib (Bextra) may—like rofecoxib (Vioxx), which was recently withdrawn from the market by Merck—cause heart attacks and strokes.

Dr Curt Furberg, a member of the FDA's drug safety advisory committee and a prominent authority on drug safety, was told his invitation to participate in FDA hearings on the safety of COX 2 inhibitors had been rescinded. This followed his being quoted in the *New York Times* on 10 November as saying that a study that he and his colleague performed "showed that Bextra is no different than Vioxx, and Pfizer is trying to suppress that information."

Larry Sasich, research associate with the US consumer association Public Citizen in Washington, told the *BMJ* that "Dr Furberg has an unimpeachable record as a scientist" and that his experience as a cardiovascular researcher and the lead investigator of the largest clinical

trial on hypertension in the United States put him in a unique position to evaluate risks of drugs. "I don't understand the [FDA] claiming an intellectual conflict of interest in Dr Furberg's case when the reproductive drugs advisory committee has an adamant pro-life advocate, Dr [W David] Hagar."

Dr Hagar, known for his opposition to birth control for unmarried women and his writings suggesting that women with menstrual cramps should read the Bible, was appointed to the committee by President George W Bush.

Victoria Kao, spokesperson for the FDA, told the *BMJ* that Dr Furberg's removal was the result of a routine review of all panel members for "financial and intellectual conflicts of interest." When asked about the timing of Dr Furberg's removal, only days after his interview with the *New York Times* but months before the panel is to meet in February 2005, Ms Kao said that was because "it takes a long time" to do all the reviews.

According to a September 2001 report by *USA Today*, 55% of all FDA advisory panellists had

financial interests in the drugs they reviewed. A transcript of the most recent arthritis advisory panel meeting in June 2004 shows that seven of the 14 panellists, including the panel's chairperson, received waivers for financial conflicts of interest. Several of the arthritis panellists have written favourable reports on COX 2 inhibitors. When asked how the FDA reaches a decision to remove a panellist who has no financial conflicts while giving waivers to panellists who do have financial conflicts, Ms Kao said, "Each case is individual."

Dr Furberg's contention that Pfizer suppressed negative data has been publicly denied by Pfizer. Pfizer's spokeswoman, Susan Bro, told the *BMJ* that the company issued a news release on 15 October in which it warned about potential risks to patients having cardiac bypass surgery. When the *BMJ* first called Pfizer, on 14 October, however, Ms Bro denied that valdecoxib posed any cardiac risk. When asked about the negative outcomes seen in the two cardiac bypass studies, Ms Bro instead asked, "Who gave you that information?" and added, "We haven't talked about that."

Ms Bro said that other studies of valdecoxib, including a trial of over 8000 patients with osteoarthritis and rheumatoid arthritis, showed no increase in cardiovascular risk. □

UK government tightens rules for drug regulators

Kathryn Godfrey *London*

Drug regulators will be barred from having any links to the pharmaceutical industry under new measures announced last week. The proposals are designed to increase public confidence in the monitoring of the safety of medicines and to encourage drug companies to be more open.

Norman Warner, health minister for England, said that the government was aware of the criticism of the Medicines and Healthcare Products Regulatory Agency which suggested that the agency was "in the pockets of the industry."

Although refuting this position, Mr Warner said that, as the advisory committee structure for medicines regulation has remained unchanged since 1968, it was time for change.

A new commission will be formed to advise ministers on the safety and effectiveness of medicines combining the responsibilities of the Medicines Commission and the Committee on Safety of Medicines.

The 18 member strong commission will include two lay representatives and no industry member. Expert advisory groups will also include patient representation.

Mr Warner said, "We want to give patients and the public a greater role in advising on safety of medicines by including strong lay and patient representatives."

Members of the commission, likely to be named the Commission on the Safety and Efficacy of Medicines, and of the advisory groups, will have to prove impartiality. Mr Warner said, "It is time to respond to concerns that the arrangements concerning declaration of interests are not as wide ranging as they could be."

Members will have to prove that they have neither a direct nor an indirect financial interest in the pharmaceutical industry as well as declaring any other interests, including those of their immediate family. □

FDA will increase postmarketing surveillance of drugs

Janice Hopkins Tanne *New York*

After controversies about the possible increased risk of suicide in children taking antidepressants and the increase in heart attacks and strokes in patients taking rofecoxib (Vioxx, MSD), the US Food and Drug Administration has announced plans to strengthen its surveillance of drugs on the market.

The acting FDA commissioner, Lester Crawford, said, "The full magnitude of some potential risks [has] not always emerged during the mandatory clinical

trials conducted before approval that evaluate these products for safety and effectiveness. Occasionally, serious adverse effects are identified after approval either in postmarketing clinical trials or through spontaneous reporting of adverse effects."

The agency's Center for Drug Evaluation and Research will hire the Institute of Medicine to assemble a committee to review the effectiveness of the US drug safety system with emphasis on the FDA's postmarketing surveillance.

Steven Galson, acting director of the centre, said, "Our current drug approval system has demonstrated that we don't always understand the full magnitude of drug risks prior to approval of drug products."

The centre will also set up a programme to adjudicate differences of opinion within the agency. For the antidepressant

Dr Lester Crawford

and rofecoxib situations, the FDA suppressed the views of staff members who warned of risks with the drugs. In future, such internal disagreements will be referred to an ad hoc panel of outside experts and FDA members who were not directly involved in the decision. □