Concern about physicians being unduly influenced by drug and device manufacturers is an active topic within medical organizations and in the lay and professional news media. The fear is that company gifts, sponsored seminars and getaways, and paid consultancies seduce, obligate, or brainwash physicians to prescribe certain drugs, to select certain instruments or devices in their practice, or to make recommendations through lectures and publications based on their personal allegiance to the gracious companies rather than based on their clinical, scientific, and evidence-based information. The recipients may become biased toward the generous companies, compromising their personal integrity and presenting to the public an image of corporate allegiance trumping patient care. A panoply of safeguards has included prohibitions of companies’ contributions to physicians and their practices and organizations; constraints on sales personnel; elimination of seemingly small gifts (see page 621 of this issue); requirements for disclosure of industry relations by speakers and authors; and university regulation of income from research grants, consultation fees, and academic honoraria.

Recently, the Council of Medical Specialty Societies—of which the American Academy of Ophthalmology (and by association the International Society of Refractive Surgery) is a member—promulgated a “Code for Interaction with Companies,” recommending that individuals in a society’s presidential succession and editors-in-chief of society journals (such as the Journal of Refractive Surgery) be free of direct financial relationships with medical industries during their tenure (www.cmss.org/codeofconduct). To include journal editors seems appropriate because the editor-in-chief makes the final selection of manuscripts to publish after peer review. These published articles are the gold standard for information in the profession, enshrined in digital databases indefinitely.

**Industry**

This ruling created a personal conundrum: I serve both as the Editor-in-Chief of the Journal of Refractive Surgery and as a paid member of commercial scientific advisory boards, a paid consultant to ophthalmic companies, a paid medical monitor for industry-sponsored research, and am a stock holder in some eye-related companies. Such relationships may bias me—consciously or unconsciously—to publish articles favorable to the companies that fund me, or more nefariously—to interfere with publications from competing companies. Thus, I resolved to relinquish my financial relationships with industry while Editor-in-Chief.

As I considered how to absolve myself of conflicting business relationships, seeking to avoid even the appearance of undue influence, I became aware of other possible sources of bias.

**Practice**

As a practicing clinician, I know that the drugs and treatments I prescribe and the instruments I select contribute indirectly to my personal income. Although I use them because I think they are best for my patient care, these personal preferences create a bias that could influence my acceptance or rejection of articles about the same or similar drugs or devices. To free myself of such temptation, I decided to leave the practice of ophthalmology during my tenure as Editor-in-Chief.

**University**

I also realize that, as a professor in the department of ophthalmology at my university, I have a propensity to view articles submitted by my department colleagues in a most favorable light; after all, these are my academic partners; other authors are not. Further, authors of manuscripts with results at odds with my own research or my publications and those of my university colleagues may find me biased against their publication. Of course, having

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more publications from my department enhances its reputation and can improve its finances. My personal income derives from the department and the university. So I intend to resign my professorship during my tenure as Editor-in-Chief, explaining to both my chairman and dean the necessity of avoiding these possible conflict of interest.

**RESEARCH**

While mulling over these difficult personal choices, I faced the residual problem of my commitments to clinical research, both US Food and Drug Administration–related trials and investigations outside the United States, because as an investigator, I personally receive funds from sponsoring companies. Indeed, it is this nearly 100% dependence of refractive surgery itself on products from industry research that is the basis for removing an editor-in-chief as far from industry conflicts as possible—including research. I thus chose to resign from these projects.

A painful realization haunted this choice: I was exiting the activities from which I gained the most knowledge and understanding of refractive surgery, because the research and development process allowed me to delve into (and sometimes solve) so many fundamental and applied problems; in addition, this work associated me with many extraordinarily talented people. Industry-sponsored research was my unique source of new information that was not available in meetings, from publications, on the Internet, or through networking with colleagues.

**FRIENDS**

In discussing these choices with close colleagues, another very real conflict of interest emerged—my friendships. During my practice of ophthalmology for over 35 years and my participation in over 600 ophthalmology meetings in over 60 countries on 6 continents, I have made many personal and professional friends and have been paid honoraria and travel stipends, often through the invitation of these colleagues. Many of these individuals send manuscripts to the Journal, competing with authors whom I do not know personally. Would I give more favorable consideration to submissions by my friends? Goodness—how will I treat those authors I do not like? This possible bias seemed insolvable, because no amount of public disclosure (How can I disclose “friendship?”) would suffice to insure my objectivity. Thus, I resolved to compose a blast e-mail to a few hundred individuals asking them to put our friendship on hold during my tenure as Editor-in-Chief of the Journal. Fortunately, I have not joined MySpace or Facebook, so I do not have to deal with friends of whom I am unaware.

**COUNTRY**

With sudden clarity, I recalled that the Journal is indeed international. (More than half of the articles published come from outside the United States.) And yet, I am a US citizen and—to be honest—have a certain weak spot for US authors, which could lead to preferential treatment. Furthermore, the vast majority of my income—some influenced by my position as Editor-in-Chief—is generated within the United States. After a few sleepless nights, I could see no way out of this personal conflict other than to renounce my US citizenship and relocate myself outside the country.

**ISLAND**

Fortunately, I have been able to identify an unaligned, industry-free island, on which neither ophthalmology nor refractive surgery is practiced, so there are no industry or university or collegial conflicts. I would derive no income from the island, so no conflict. The island’s broadband, high-speed Internet connections would allow rapid completion of editorial responsibilities. Still, I must figure out how many ways I can prepare coconuts in a tasty fashion.

As I absorb the full impact of these renunciations, I realize: it is more appropriate for me to resign as Editor-in-Chief.