

Conflict of Interest Disclosure

Updated 02-06-2009

As someone who works in medicine and in public health, and also writes about ideas from medicine, public health, and elsewhere, there can be legitimate concerns about conflict of interest. So in the interests of disclosure: I am a surgeon and public health researcher for the Brigham and Women's Hospital (BWH - member of Partners HealthCare), Dana Farber Cancer Institute, Harvard Medical School (HMS) and the Harvard School of Public Health (HSPH). I follow the HMS, HSPH, and Partners HealthCare conflict-of-interest policies.

As part of my work, I receive grants for my public health research, currently focused on reducing unnecessary deaths and complications from health care around the world. I am a leader of a public health program under a grant from the World Health Organization, and the WHO, Harvard, and the BWH Center for Surgery and Public Health have received support for this work from multiple private philanthropists and foundations. In the past, I have also conducted research funded by Patient Safety Technologies, a start-up company in which I have no ownership, to test safety measures I helped develop using bar-coded surgical sponges.

I receive income from writing and lecturing on my ideas and observations across a wide range of topics as a staff writer for the New Yorker and an author of books published by Metropolitan/Henry Holt in the United States and many publishers around the world. I have received lecture fees from many different audiences, including professional associations, conventions and conferences of many sorts, hospitals, insurers, and others.

However, I take several steps to insure that for-profit companies or industries do not pay to influence my writing: (1) No one, other than the publications where my work appears, pays me to write and express my thoughts. (2) I don't do consulting or serve as an advisor to industry. (3) I don't benefit financially from speaking to for-profit medical businesses (whether they are drug companies, device companies, or insurance companies); either I'm not paid or I arrange for the fee to be donated to charity (including my family's church, our WHO work in patient safety, and a rural college my father started in India).

But I hope the most salient point is not missed, which is that I am a paid surgeon with deep commitments to health care, as my readers will recognize. I'd like to think I am as fair as I can be in my opinions and analyses. But I rely on you, the readers of my work, to be the final judge.

Atul Gawande