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The Editorial Executive Committee welcomes letters. which should be less than 250 words. Before a decision to publish is made, letters which refer to a published article may be sent to the author for a response. Any letter may be sent to an expert for comment. When letters are published, they are usually accompanied in the same issue by any responses or comments. The Committee screens out discourteous inaccurate or libellous statements. The letters are sub-edited before publication. Authors are required to declare any conflicts of interest. The Committee's decision on publication is final.

# Letters to the Editor

# Pharmaceuticals, pharmacists and profits

I am writing in response to the editorials on Pharmaceuticals, pharmacists and profits (Aust Prescr 2014;37:146-7 and 148-9). I enjoyed reading the Pharmacy Guild's perspective on troubles facing the industry. However, the editorial failed to mention the financial troubles facing community pharmacists who are not pharmacy owners.

Few people, including those studying to become pharmacists, are aware that the award rate for a fulltime pharmacist in charge is \$27.16/hour (equivalent to \$53 674 annual salary).<sup>1</sup> Note that pharmacist interns, pharmacists and experienced pharmacists are all paid less than this. To compare, an unqualified experienced retail employee may earn up to \$44 787.<sup>2</sup> Pharmacists' wages are significantly below the average Australian wage of \$76 804 before tax.<sup>3</sup> From this wage, a pharmacist must pay to be registered for insurance and course fees for 40 hours of continuing professional development per year. Debt from university fees must also be paid. There is a current oversupply of pharmacists, and jobs for salaried pharmacists are not easy to obtain.

I understand that some pharmacies are currently experiencing a period of hardship. But should salaried pharmacists be the ones to subsidise the industry by being forced to accept these low rates of pay?

# Michelle Edwards Pharmacist Narrabeen

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# Conflict of interest in medical journals

I would like to thank John Dowden for summarising this important issue so well in his editorial (Aust Prescr 2015;38:2-3). Simply reporting a conflict of interest is pointless because it does not seem to change the interpretation or impact of the information presented. Clinical practice is largely determined by opinion leaders. With respect to publishing restrictions, this is the group we need to target, particularly because of their financial conflicts which are the most concerning.

These people write the most influential literature such as reviews, editorials, meta-analyses, guidelines and position statements. A contemporary example is the literature around the efficacy of stroke thrombolysis, which has polarised clinicians worldwide. This controversy is complicated by the fact that virtually all the interpretative literature supporting the therapy has been written by people with financial conflicts.

What we need is a policy that prohibits the involvement of authors with financial conflicts in these interpretative types of articles. This is achievable, and in the long run will discourage clinicians from accepting money from industry for fear of limiting their academic careers.

Chris Johnstone Director, Emergency Medicine Caboolture Hospital, Qld

Yes, readers are informed when a conflict of interest is declared. But no reader knows how to adjust the take-home messages from such articles to compensate for possible bias.<sup>1</sup> Declaring a conflict of interest shifts the responsibility of dealing with potential bias from the writer, through the editor, to the reader. Is this fair?

The author asks how hard will it be to find nonconflicted authors in Australia. Do we need someone who has done the primary research when any cardiologist with information-literacy skills could evaluate new antihypertensive drugs? In the age of evidence-based medicine, writing these articles is mostly literature reviewing. For opinion-based parts of an article, why is the opinion of someone less deeply involved less valuable than one likely to be influenced inappropriately?

You don't need to refuse to deal with people with a conflict of interest. Could you get a nonconflicted author to write the article, then ask your conflicted reviewer to edit it and give the final say to the writer? Or you could get the conflicted author to write the complicated physiology part, and another author to write the diagnostic or therapeutic sections?

No, we shouldn't be concerned about authors funded by the National Health and Medical Research Council (NHMRC) because the aim of NHMRC aligns with doctors' duty of care to their patients. In contrast, profit-seeking drug makers' primary obligations are to their shareholders. If those don't align with patients' interests we have a problem.

Lastly, is *Australian Prescriber* complicit if doctors are flouting the medical board requirement to not accept gifts of more than trivial value,<sup>2</sup> when authors report funding from drug makers for conference attendances?

Peter Grant Retired health professional

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We read a very good editorial on conflict of interest by John Dowden, but we find that it deserves comment. We think that all authors who submit a manuscript of any type should disclose their financial and personal relationships that might bias or be perceived to bias an article's content. Therefore, when the editor of a journal writes an editorial, he also should report the conflict of interest, like some used to do.<sup>1</sup> The editorial board should vote to approve the editorial without participation of the editor.

However, if an editorial focuses on therapeutics, other treatments or potential advice for medical practice, the editorial should be reviewed by external referees who report no conflict of interest. This is in addition to the author declaring any conflict of interests.<sup>2</sup> Thus, when the editor is the author, they should also disclose their conflict of interest, as all other authors,<sup>3</sup> for editorials that will be published in the journal.

Editors should not publish other types of articles such as research or review papers in their own