

Case Studies – for discussion in relation to the CMF Briefing Paper on Conflict of Interest and Corruption in Healthcare – September 2019 (www.cmf.org.uk)

1. You are a national senior doctor (surgeon) working in a government hospital in a resource-poor Central Asian country. You have responsibility for advising on which company should be contracted to supply your hospital with surgical equipment and supplies. Several companies have approached you, offering to run, or pay for, professional training courses for your junior staff who are very keen to learn; there is very little Continuing Medical Education provided by the government. The companies offer high levels of training, hospitality and consultancy fees to yourself. Your colleagues advise you to accept an offer. What would you do?
2. You are a national senior doctor (physician) in a teaching hospital in SE Asia. You have, in collaboration with expert clinical trial statisticians and colleagues, designed a research project comparing a new treatment for filariasis with conventional treatment. The pharmaceutical company which has developed the new treatment has funded the trial, the design of which was reviewed externally, with ethical approval obtained. The trial has been conducted according to the agreed protocol, but the results show no benefit from the novel treatment. The pharmaceutical company writes to the investigators saying that they have had an 'internal review' and the study design was 'unfortunately flawed' and is not worth publishing. Some of your colleagues receive regular honoraria from the company and they do not wish to publish, other colleagues and you do. What would you do?
3. You are a national junior doctor (paediatrician) working in a government hospital in West Africa. You have received, since qualifying, very little CME and are keen to learn about new developments by attending a National Paediatric Conference on infectious diseases. You have been unable to obtain funding for attending or accommodation at this meeting. An infant formula company representative offers to pay your fees, travel and accommodation as part of the company's support for the meeting. What would you do?
4. You are a national doctor (obstetrician) in a government hospital in SE Asia where there are disappointing outcomes from 'emergency LSCS'. It has been suggested that the diagnosis of fetal distress by midwives is often made too late. A medical technology company offers to fund an evaluation of their new, relatively cheap, piece of equipment which is worn continuously by 'high risk' mothers and sends a fetal pulse signal to a receiver held by the midwives. The company suggests a 'pilot study' and is willing to pay for staff salaries and honoraria to collaborating doctors and midwives. What would you do?
5. You are a senior doctor (physician) in a church hospital in SE Asia. You have considerable expertise in the management of hypertension. A pharmaceutical company offers to pay you to give lectures at CME events at various hospitals throughout your country. Furthermore, the company offers you a regular payment for occasional advice to the company. What would you do?

6. You are a national doctor (haematologist) working in a government hospital in East Africa, where all treatment is supposed to be given 'free'. However, 'stock-outs' are common and the only way that you can obtain IV cannulas is if the relatives buy them from a local pharmacy. Many patients are just too poor to buy them. You have a patient who will likely only need two or three cannulas, but you know that they are relatively well off. Your colleagues tell you to advise the relatives of your better off patient that they should buy a pack of ten and give them all to you – in case they are needed for your patient. In practice, this will help build up your store of IV cannulas. What would you do?
7. You are a national junior doctor (surgeon) working in a church hospital in central Africa which is mostly funded by the government. The hospital is closely supported by local clergy who make pastoral visits and are important as a means of attracting patients to your hospital. You are aware that clergy and their relatives are coming to see you in increasing numbers because of your good reputation. You become aware that 'ordinary' patients are being turned away by nursing staff. They are told that you are 'too busy' and should come back 'next week sometime'. Senior colleagues advise that it is very important to support 'church leaders' as a high priority. What would you do?
8. You are a junior expatriate doctor (public health physician) working in a church-based community health project in a Central Asian country. The project is mostly paid for by the government but an important contribution comes from money collected by churches and individuals in the UK. You become aware that some of the money from the UK is being 'diverted to uses that it was not raised for'. You meet with a senior manager to express your concerns but are told 'not to rock the boat' otherwise your contract might not be renewed. What would you do?
9. You are a national junior doctor (outpatient duties) in a government hospital in Central Asia where treatment is supposed to be given 'free'. You have become aware that the nurses have a tradition of telling patients that a 'gift for the poorly paid doctor' is normal practice 'as a sign of gratitude'. Patients are advised that 'cash in an envelope' is the best way of showing their appreciation. The nurses are used to receiving monetary 'bribes' from the junior doctors as a reward for asking patients for bribes. You have discussed this with a respected senior national doctor who advises that you should 'support the system' because 'that is the only way that we can make enough money'. What would you do?
10. You are an expatriate junior doctor (general duties) working in a church hospital in West Africa. You already have a work permit and now need to apply for an extension. Both you and the senior hospital staff team are very keen that you continue. You are told that, normally, such an application 'takes many months' and 'may well not be approved'. However, if you pay a 'fee' to the officer in the government department responsible for issuing work permits – your permit will be provided quickly. You are very busy and have been to the work permit office many times, over many months, without success. Senior doctors in the hospital advise you to 'pay up'. What would you do?
11. You are an expatriate junior doctor (general duties) working in a church-based community health programme in West Africa. You have arranged for extra luggage

(medical equipment and some books for your children) to be sent out on a freight flight. You have visited the Customs Dept. at the airport several times over a number of weeks and have actually seen the freight which has arrived safely. You are repeatedly told that that the freight 'has not been inspected yet'. You are told that a 'fee for early inspection' would ensure that the luggage is released to you immediately. What would you do?

12. You are a medical student in a Central European country. It has been made clear to you, by your clinical tutor, that a bribe is a necessary if you are to pass your final exams to become a junior doctor. Your predecessors have had the same experience. You and a group of medical students have protested to the university authorities. However, nothing has been done about it and those students who did not pay a bribe were often 'failed'. What would you do?
13. You are a national senior doctor (physician) in a research team, working with colleagues in a teaching hospital in Central Africa. You have, on behalf of the team, submitted an application to the Ethics Committee for a piece of research and have been told that this will take 'many months to process'. You are under pressure because there is a limited period of funding for the project. You are informed that if you pay extra for a 'fast track' application, it is very likely to be approved and quickly. What would you do?
14. You are a national junior doctor (surgeon) returning to an Eastern European country after working overseas to increase your clinical experience. Over the years you have been heavily supported by family and friends in your own country, as you train. You have received many gifts of money in order to travel and work overseas. The hospital you now work in has a strong ethos of taking bribes – in order to enhance the very meagre salaries from the government. You discuss this with your supporters who are very keen to receive back their financial investment in you. They all encourage you to 'go with the flow'. What would you do?
15. You are a national junior doctor (physician) working in a government hospital in an Eastern European country where the officers in the administration routinely delay payment of your salary until they receive a bribe from you. You protest to the senior management and are told that that you should either 'work with the system' or leave. Your enquiries reveal that nearly all government hospitals in your country have the same system and you are too junior to set up your own private practice without corruption. Other employment opportunities are very limited. What would you do?