



Identifying and Managing Conflicts of Interest

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COLLABORATION BETWEEN members of the Academy of Nutrition and Dietetics (Academy) and the food and nutrition industry, as well as members of academia, can result in innovative research that fills the gaps in the science of food and nutrition. These relationships—when established under the standards outlined in the Code of Ethics for the Nutrition and Dietetics Profession and in the Academy's six scientific integrity principles—can safeguard against potential conflicts of interest (COIs) and ensure that all decisions are made in the best interest of the patient or client.^{1,2}

This article provides guidance for recognizing COIs and offers strategies for mastering these ethical conundrums.

COIs: DEFINITION AND RELEVANCE

In May 2017, *The Journal of the American Medical Association (JAMA)* published an entire issue centered on the topic of conflicts of interest.³ According to one of the 23 articles, titled “The Complex and Multifaceted Aspects of Conflicts of Interest,” essentially every profession has the potential for COIs in the form of

internal conflicts related to, for example, reputation or career advancement, and external conflicts, as related to possible financial interest in a for-profit entity.⁴ Similarly, the Code of Ethics for the Nutrition and Dietetics Profession defines COIs as “a personal or financial interest, or a duty to another party, which may prevent a person from acting in the best interests of the intended beneficiary, including simultaneous membership on boards with potentially conflicting interests related to the profession, members or the public.”¹

“I think that bias can creep into a decision, especially if it's a step-by-step process where the first step doesn't seem like it is problematic, and then the second step takes you a little deeper into the potential for a conflict of interest, and then all of a sudden you've got yourself into a position where you are making decisions that no longer may be in the best benefit of your organization or the patient,” says Jody L. Vogelzang, PhD, RDN, FAND. “COIs” and “bias” are sometimes used interchangeably in the discussion of professional ethics. According to Vogelzang, the 2019-2020 Chair of the Academy's Ethics Committee, a COI is typically the potential that exists for not acting objectively, and a bias occurs when an individual has a specific interest in one result over another.

“If you're paid to do something, and to make a decision in a certain direction, then that is a very blatant conflict of interest,” explains Vogelzang. “But I think there's other ways that dietitians may also be lured into a breach . . . it could be prestige—it could be entree to social circles that are coveted.”

“Few professionals are intentionally dishonest,” note the authors of the *JAMA* article describing the complex nature of COIs. Recognition that each physician has COIs and that COIs and dishonesty are at different ends of the spectrum is the first step in a thoughtful conversation about how to protect professional judgment and integrity.”⁴

According to Constantina Papoutsakis, PhD, RD, senior director of the Academy's Nutrition and Dietetics Data Science Center, it is important to remember that the presence of a conflict of interest does not necessarily equate inappropriate behavior, especially if the COI is revealed and managed before actual corruption occurs.

MAINTAINING SCIENTIFIC INTEGRITY

The revised Code of Ethics for the Nutrition and Dietetics Profession, recently adopted by the Academy and the Commission on Dietetic Registration, “establishes the principles and ethical standards that underlie the nutrition and dietetics practitioner's roles and conduct.”¹ These principles apply not only to Academy members but to all nutrition and dietetics practitioners who maintain Commission on Dietetic Registration credentials.

“Principle 1 of The Code of Ethics addresses competence and professional development in practice, specifically noting that ‘nutrition and dietetics practitioners shall practice using an evidence-based approach within areas of competence, continuously develop and enhance expertise, and recognize limitations,’” notes Karen Lacey, MS, RDN, a member of the Academy's Ethics Committee. Principle 1 also requires nutrition and dietetics practitioners to “assess the validity and applicability of scientific evidence without personal bias.”

“What I see specifically under Principle 2: Integrity in personal and organizational behaviors and practices (Autonomy) is ‘nutrition and dietetics practitioners shall disclose any conflicts of interest, including any financial interests in products or services that are recommended. Refrain from accepting gifts or services which potentially influence, or that may give the appearance of influencing professional judgment,’” adds Papoutsakis.

The Code of Ethics, in conjunction with the Academy's scientific integrity

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principles, are intended to guide scientific decision making and promote transparency to diffuse potential COIs. Developed by the Academy's Council on Research, these scientific integrity principles are intended to provide a "unifying vision" for relevant policies and other related guides.²

In an article published in the *Journal of the Academy of Nutrition Dietetics (JAND)*, these principles of scientific integrity are described as a "framework for the Academy to ensure that research and education are conducted in a transparent manner, while not limiting opportunities for funding and partnerships."² The article also asserts that "to maintain the trust of the public and the profession in the science of nutrition and dietetics, care must be taken to ensure that scientific activities are funded, conducted, and disseminated in an ethical, credible, and transparent way."²

"These six scientific integrity principles specifically relate to the Code of Ethics in that throughout each of them is the theme of disclosure and the need to identify any and all possible relationships that might result in a COI," says Lacey. "It is important for all Academy committees and organizational units to abide by our policies and participate in the training that is provided and perhaps discuss it through the lens of their specific work. They need to take it seriously and keep it in the forefront at every meeting/all of their work."

The scientific integrity principles are organized into the following six categories:

- I. Ethical Conduct of Research and Protection of Human Subjects
- II. Publication of Research
- III. Funder's Influence on Research Question/Education Content
- IV. Funding of Professional/Practice Education
- V. Funding of Public Education
- VI. Disclosure of Funding Source and Conflicts of Interest

These principles were approved by the Council on Research in January 2015 and approved by the Academy's Board of Directors in March 2015.

ETHICS IN ACTION

As part of *JAMA's* themed issue on COIs, an article titled "Conflict of Interest and

the Role of the Food Industry in Nutrition Research" reveals that direct and indirect costs of diet-related chronic diseases in the United States are estimated to total \$1 trillion annually.⁵ With these financial challenges and potential monetary gains at play in the food and nutrition industry, the authors assert the following: "Recognizing substantial heterogeneity within and across food companies, the suitability of the industry partner for the specific project of interest must be assessed. The public good and mission alignment must also be evaluated and compared with potential benefit for the industry partner; projects that could be exploited against the public good or the organizational mission should be avoided."⁵

"There are many employment opportunities for dietetic professionals and it's quite easy to have multiple part-time activities," explains Lacey. "You could be working for a food company and at the same time be working part-time for a health care organization. The challenge is to separate those two roles so that you don't let the interest of one of your employers inappropriately influence the responsibilities of your other job. You have to make it very clear to your patients and clients that you are also working for a specific food company or industry, so that if you're recommending that food or nutrient your clients are aware of your unique perspective and that you know a lot about that product, but you also might be doing it from the standpoint that you're getting paid by them. It is important to understand the choices our clients have, and we must offer unbiased evidence-based information to guide them in their decision making."

Other real-life scenarios that could present a potential for a COI include a registered dietitian nutritionist (RDN) who has her own consulting business working primarily with clients on weight management and receiving a salary from a company that produced weight loss products that she was promoting to clients. A perhaps less obvious COI scenario could involve an academic instructor who is receiving supplies used in the classroom to teach students about glucose monitors for management of diabetes. Because the products are used for academic purposes, it might not

appear to be a COI, but if the instructor is not using supplies or a comparable device from another company, it could appear to students—and future practitioners—that the instructor is favoring a certain product or manufacturer even if the RDN is not being financially compensated for using it.

"The best thing that any of us can do is to disclose potential COIs to our patients, clients, and students," says Lacey. "Offer them the opportunity to evaluate the information that we're providing through the lens of 'Is this legitimate?' Or 'Is this recommendation resulting in someone gaining something for their own purpose or benefit?'"

Publishing in scientific journals such as *JAND*, accepting speaking engagements, and participating in board or committee appointments also present real-world potential for COIs. "Being 'at the table' where decisions are made is salient for advancing the profession and promoting the impact of nutrition care," says Papoutsakis. "RDNs should pursue external leadership opportunities . . . while relying on professional integrity [to ensure] disclosures are comprehensive. Consulting with a more senior colleague or group of colleagues on matters of COI and bias is encouraged as well."

These external opportunities often directly or indirectly relate to scientific research and its application, and because of this, the Academy clearly outlines what is acceptable for "outside activities" in its Conflict of Interest Policy, including disclosure of all relevant information related to the potential COI.⁶ Indeed, conferences, committee meetings, and other policy forums generally require participants to list their potential COIs, particularly financial relationships and affiliations, although the participants themselves decide what information to list. *JAND*, and other scholarly journals such as *JAMA*, require authors to complete a standard authorship agreement form that includes potential financial and personal COIs.^{7,8}

IDENTIFYING COIs

The existence of a COI does not suggest an RDN is necessarily motivated by secondary interests.⁹ If a potential COI surfaces, there are strategies to determine appropriate next steps.

“Discussing the situation with a colleague is often a very good approach,” says Papoutsakis. “Speaking with other people in my field to see how others perceive the situation has always been very helpful to me.”

Researchers in the field of health care ethics suggest reaching out to a mentor or a member of your dietetic practice group to get additional perspectives on the potential COI, as well as approaching leadership in your facility or organization to get an administrative, policy-based view of the situation. Once a COI has been identified, a range of actions may be appropriate depending on the degree of the conflict, including a formal cessation of the relationship with one of the conflicting interests.

The Academy's Conflict of Interest Policy mandates that the board, committee, or task force take action on a contract or transaction involving a potential COI by having the “Responsible Person” (any person serving as director, officer, or member of the Academy board committee or task force) disclose all facts germane to the COI, which are to be included in the minutes of the meeting. The decision as to whether a COI exists is determined by the body as a whole with the conflicted individual recusing him- or herself from the discussion and vote.⁶

“At the Academy, we have an annual commitment with all our committee members to complete a renewed COI,” says Papoutsakis. “And at the beginning of every committee meeting, COI is brought up by the chair so that everyone can disclose their potential COIs. Transparency is of the utmost importance to the Academy. When people know what COIs exist around the table, they can react to it. If they don't know it, they can't.”

According to a *JAMA* Viewpoint titled “Conflict of Interest: Why Does It Matter?” COI policies “should be public, readily understood, and applied evenhandedly. The basis for any exceptions should be spelled out. The aim,

throughout, is to preserve and protect public trust in the independence and objectivity of physicians involved in the exercise in question.”¹⁰

The Academy's COI policy of documenting the disclosure, recusal, and voting process are aligned with the Code of Ethics, the scientific integrity principles, and the policies of other health care organizations.¹¹

“Conflicts of interest can detract from some of the really good and noble things that are done by that organization,” said Vogelzang. “As far as the Academy is concerned, it is a huge responsibility to act in the best interest of a hundred thousand or so credentialed practitioners that depend on the reputation and the recognition of the validity of our credential. The fact that an association might be bought in certain ways or things funded for certain exchanges is very harmful for the reputation of nutrition and dietetics practitioners in general.”

CONCLUSION

All health and nutrition practitioners, especially those involved in setting standards, developing policy, and research-related activities, are subject to COIs. The Academy's Code of Ethics and scientific integrity principles provide a framework for nutrition and dietetics practitioners to conduct these and other professional activities in a transparent manner. The reality is that even with the guidance offered by these principles, COIs are not always clear, especially considering that COIs are based, in part, on perception. When in doubt, ethics experts suggest seeking counsel from colleagues, mentors, and administrative leadership to manage potential COIs, keeping in mind that the existence of a potential COI does not suggest wrongdoing by the RDN.

Despite the potential for COIs, relationships with for-profit industry, academia, and other health care providers can result in innovative benefits for patients and clients. Instead of

curbing these relationships, adopting a meticulous and transparent approach to all professional activities appears to be the contemporary model for managing potential COIs.¹²

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