

PE1493/FF

22nd January 2016

To: Michael McMahon MSP
Convener, Public Petitions Committee

By email: petitions@scottish.parliament.uk

Dear Mr McMahon

Petition PE01493: A Sunshine Act for Scotland

As petitioner I wish to respond to Professor Kinsella's letter, as Chair of SIGN, of the 19th January 2016 to the Committee.

I realise that the Committee are meeting on the 26th January 2016 so this reply may not have had sufficient time to be considered by the committee on this occasion.

Firstly it is important to point out that Professor Kinsella misquotes from my letter of the 20th November 2015. I stated "*at least 40 separate SIGN guidelines*" and not "fifty".

I welcome the clarification that 35 operational and national guidelines remain in the "category" of having evidence of potential financial conflicts of interest no longer available for public scrutiny. This does not seem to me to be consistent with an evidence-based approach to drawing up guidelines and means that these guidelines are in effect incomplete. I am certainly not aware of any other National Guideline body that has taken this approach. It is not my argument that SIGN has not been following its own policies nor that its current policies are not improving, rather that as a result of previous (to my mind misguided) policies there is significant information missing from guidelines **which still form the basis of healthcare across Scotland**. The relevance of this to my petition is that it is now impossible to retrieve this information pertinent to these 35 guidelines and that, rather than have each and every individual organisation have to hold this kind of information, a single searchable database of all potential financial conflicts of interest, as provided for in a "Sunshine Act", would be a much more open and reliable approach.

I can furnish the Committee with an important example involving a Chair of one of the extant Guidelines whose links to the pharmaceutical industry are not evident in the guideline (in line with the SIGN policy of the time). I have previously not shared this as I did not feel that I would be safe to do so given my personal experience of raising concerns in NHS Scotland. I have fairly consistently come across professional deference being put ahead of raising concerns.

Professor Kinsella concludes on behalf of SIGN "*We are therefore in a position to reassure the Committee and the public that we have an active, transparent, up to date, and evolving Declaration of Competing Interests policy.*" This does not reassure me because it fails to acknowledge explicitly the issues with 35 extant

guidelines. The petition committee could do no better than compare SIGN's current approach on transparency to that of NICE, across the border in England.

Yours sincerely,

Dr Peter J Gordon