EDITOR'S CHOICE

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The lobby problem: it's in your own hands

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Last month the Paley Center for Media ran a meeting at which a panel of doctors and high profile journalists debated how the media could better inform the public about healthcare. Among the topics discussed by the panel were pharmaceutical research and development, the high costs of drugs, and the need to make pharmaceutical research transparent (<http://www.paleycenter.org/brightcove/videos/screening-room-2013a.html?bcpid=1679254821001&bckey=AQ~~,AAAADpP62yk~,CYkGoUDqnqWmJHL5SetwJ75jDx87buG6&bctid=2923841887001>).

Across all parts of the ensuing debate there was a recurrent regret that commercial interests rule, and repeatedly the panellists referred to the power of lobbyists in Washington, DC. Speaking about the difficulty of decreasing national healthcare costs, Leonard Saltz, chief of the gastrointestinal oncology service at the Memorial Sloan-Kettering Cancer Center, bemoaned the sway that big pharma held over government: "The drug lobby is the most aggressively funded lobby on Capitol Hill—it dwarfs the defence industry."

His concerns were echoed by a second panellist who claimed that one firm was employing 72 lobbyists to sway the decisions of the federal government.

Both claims are true and the impact demands serious consideration. But in the ensuing days the *BMJ* published this data briefing looking at federal lobbying costs (doi:10.1136/bmj.f7366), and it portrays a scene in which doctors are far from absent.

The single biggest spend on lobbying by a drug company in 2012 was Eli Lilly and Co's \$11.1m (€8.1m, £6.8m). This was closely followed by Pfizer Inc at \$10.2m and Merck and Co at \$9.5m.

But none even comes close to the \$16.5m spent by the American Medical Association on influencing government to the benefit, often financial, of its members. And although it is by far the biggest spender of the professional representative organizations, the American Colleges of Radiology, Emergency Physicians, and Cardiology all counted their lobbying spends in millions of dollars in 2012, and are far from alone in doing so.

There's no doubt that self-interested lobbying represents a challenge in the battle against rising costs in US healthcare. What is less clear is whether doctors are part of the problem or the solution, and what they are willing to do to change the status quo.

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