

# Medical expert testimony as conflict of interest regarding the onset of rheumatoid arthritis following trauma

David D Sherry

Division of Rheumatology,  
Department of Pediatrics, The  
Children's Hospital of Philadelphia  
Perelman School of Medicine at  
the University of Pennsylvania,  
Philadelphia, PA, USA

## Dear editor

I read with interest the article by Brawer and Goel in the August 2016 issue of journal *Open Access Rheumatology: Research and Reviews* on the onset of rheumatoid arthritis following trauma.<sup>1</sup> However, I was troubled by the lack of transparency in, at least, the lead author's case regarding conflict of interest. They acknowledged that the relationship between trauma and rheumatoid arthritis is the "subject of considerable controversy." However, the lead author has given medical legal expert testimony arguing for such a relationship. A third of the subjects were attorney referred, and presumably involved in cause and effect litigation, and the incidence of litigation in the other 40 subjects is not reported. The inherent bias needs to be revealed to the reader.

Conflict of interest is defined as "prejudice or bias that may occur when one's impartiality is compromised by opportunities for personal gain or occupational advancement, or by the chance that one's work may support a favored point of view or social agenda."<sup>2</sup> Conflict of interest has become a very important topic in medicine to guard against bias, usually from industry, that is, pharmaceutical and device manufacturers. There is a substantial amount of literature indicating that studies and their outcomes can be influenced by conflicts of interest.<sup>3</sup> In 2009, Blum et al reported that only 42% of medical journals included paid expert testimony as part of their conflict of interest policy.<sup>4</sup> *Open Access Rheumatology: Research and Reviews* requests, in an open ended fashion, that all possible conflicts of interest be declared.

Medical expert testimony is usually not a part of traditional drug and device studies. However, because the study by Brawer and Goel very directly addresses the lead author's bias in his expert witness testimony from which there is generally direct monetary gain, it behooves him to report such a conflict of interest so that the reader can determine the validity of data by himself or herself. No one is invulnerable to such monetary influences.<sup>5</sup>

## Disclosure

The author supplies medical expert opinion and testimony in cases involving juvenile idiopathic arthritis and trauma. The author reports no other conflicts of interest in this communication.

## References

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Correspondence: David D Sherry  
The Children's Hospital of Philadelphia,  
3501 Civic Center Blvd, Philadelphia, PA  
19104, USA  
Tel +1 215 590 2547  
Fax +1 215 590 4750  
Email sherry@email.chop.edu

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## Authors' reply

Arthur E Brawer

Noopur Goel

Department of Medicine, Monmouth Medical Center, Long Branch, NJ, USA

Correspondence: Arthur E Brawer

Division of Rheumatology, Department of Medicine, Monmouth Medical Center, 300 Second Avenue, Long Branch, NJ 07740, USA

Tel +1 732 870 3133

Fax +1 732 222 0824

Email [arthurbrawer@optimum.net](mailto:arthurbrawer@optimum.net)

## Dear editor

The initiation of this study was completely devoid of any contact or association with any aspect of the legal profession. The first thirty patients were self-referred or physician referred, and any routine office fees were remitted directly by the patients themselves. Since most of these thirty patients were involved in some type of personal injury litigation because of their severe trauma, the contents of their office records were eventually requested by both defense and plaintiff attorneys. Several of these cases could not be settled via conferencing and eventually resulted in a trial by jury, whereby my testimony and preliminary research data were mandated. The verdicts rendered in these cases were written up in legal analysis reviews, which in turn began to generate interest by other personal injury attorneys as well as insurance carriers. Subsequently, the addition of thirty more patients to this study encompassed twenty individuals

who were attorney referred, some by plaintiff lawyers and some by defense lawyers. Most of the advance payments rendered to secure adequate initial visit evaluation time did not emanate from these attorneys, and any of my opinions and conclusions were neither influenced by personal gain nor monies owed. The data tabulated from both sets of thirty patients were exactly the same, and under no circumstances was there any bias or conflict of interest involved during all of these impartial evaluations. Stated another way, each case was evaluated on its own merits without any favored point of view. Regarding the eventual diagnoses and analyses of these sixty patients, culminating in this manuscript submitted for publication, it is absurd to insinuate that I should withhold my observations (and rely solely on other prior publications) when placed in the unenviable position of having to formally testify on a patient's behalf.

Dr. Sherry implies that his letter was prompted solely for the interest of intellectual discussion. In his role as a defense expert in a personal injury matter, a public record exists attesting that Dr. Sherry has clearly stated rheumatoid arthritis in any form is not initiated by physical injuries. Readers can analyze all the information presented and draw their own conclusions.

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