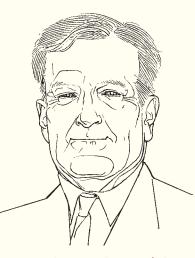
## A Talk with Former NEJM Editor Arnold Relman'46

Arnold Relman'46 became a game-changer in the ethics and politics of health care and medicine as editor-in-chief of The New England Journal of Medicine from 1977 to 1991. He founded the International Committee of Medical Journal Editors to address complex issues of ethics in medical publishing, such as publication of negative studies and protection of human and animal subjects in research. Dr. Relman was the first editor to require conflict of interest disclosure, a policy soon implemented by nearly every major medical journal worldwide. He also

strengthened the enforcement of embargoes to balance public health concerns with the needs of medical professionals, patients, and the mass media.

Dr. Relman is perhaps best known for fighting the increasing commercialization of health care. Since 1980, when he first wrote about the "medical industrial complex," commercial interests in health care have only expanded. Today he continues to be a prominent voice for patients over profits. *Columbia Medicine* asked Dr. Relman to reflect on his career.



Arnold Relman'46

#### How did your time at P&S influence you?

I am grateful to P&S for a first-rate, rigorous medical education. That got me started in the right direction. Because I came from P&S and was recommended by my teachers there, I was able to get internship at Yale, my first-choice institution. That started my career as an academic physician. I have maintained a relationship with P&S throughout the years and have been back many times to give talks and lectures. I served on Columbia's Board of Trustees as the elected alumnus from P&S from 1989 to 1995.

I recently had the wonderful opportunity to attend my 60th reunion. About 20 members of my class were there, and it was a great pleasure to renew old acquaintances.

## Tell us how you became editor-in-chief of what the New York Times called "perhaps the most influential medical publication in the world."

After my residency at Yale I joined the faculty at Boston University, where I rose through the ranks to become full professor and chief of medicine of BU's section of Boston City Hospital. In 1968 I left BU to become chair and professor at the University of Pennsylvania and physician-in-chief at the hospital. In 1976, I was in Oxford, England, on sabbatical when I got a call from the journal asking me if I would be interested in becoming the editor-in-chief. The offer was irresistible to me because the NEJM is, without question, the world's preeminent general medical journal.

It was an exhausting but exhilarating job. I loved it. But after 14 years I simply had to put it down.

## How do you respond to remarks about print journals becoming increasingly marginalized as online publishing becomes more mainstream?

I don't believe that the hard copy of the best journals will ever disappear. Online publishing compromises the peer review process. Unbiased expert peer-review is essential in weeding out the vast amount of useless, trivial, duplicative, and sometimes frankly incompetent or grossly fraudulent material that's submitted. A good, critical medical journal like The New England Journal of Medicine will always be fundamentally important because it speaks to the broad interests that hold the medical profession together.

### How did editing the journal affect your perspective on the health care industry?

When I graduated P&S in 1946 nobody – nobody! – referred to health care as an "industry" and there were practically no investor-owned hospitals. As chief of medicine at Penn, I was like a general commanding an

army in a battle that was raging around me. When I became editor of the journal it was like rising above it in an observation balloon. Now I had the opportunity to take a broader view of the total health care system and began to see problems and issues that I incompletely understood before. Suddenly I became aware of all kind of issues – economic, ethical, and political – that I didn't have to face before.

# Your 1980 article about what you termed the "medical industrial complex" voiced concern about the increase in profit-driven businesses in the medical world. What are your thoughts on that today?

Health care has become a business. Somebody's health care income in the medical industrial complex is somebody else's cost, and U.S. taxpayers are feeling it acutely.

In my original article, I explained that the new medical industrial complex was beginning to change health care policy and influence what doctors did and that it was increasing the cost of health care to the point of unsustainability.

Fee-for-service health care, which is most medicine in this country today, drives up the cost of health care by giving a financial incentive for physicians and hospitals to provide elective diagnostic and therapeutic services, while neither the doctor nor the patient feels the cost of that care acutely. We need to establish a single payer system supported by a tax, and health care workers need to work in groups to provide comprehensive care while being paid on a per-capita basis.

#### What did you do after your left NEJM, and what are you working on now?

While I was editor of NEJM from 1977-1991, I was also a part-time, unpaid teacher at Harvard. When I stepped down from NEJM, Harvard asked me to come on as a full-time professor of medicine. I remained there until I retired in 2000. But even then I stayed on as professor emeritus, a title I still hold today.

A year ago last April I decided it was time to move out of my office space at Harvard. I learned how to use my own computer rather than depend on assistance and I continue to do my work from home. I am still writing articles right now on how the U.S. can get itself out of this impossible and unaffordable escalation of health care costs and how it can provide decent health care to everybody at a price the country can afford. I hope to keep advocating for major health care reform, and urging physicians to become involved, for as long as possible. What else can a committed believer in the social responsibility of the medical profession do? **\***