

*The convergence of Science and Governance: Research, Health Policy, and American States.* By Daniel M Fox, Berkeley University of California Press, 2010. \$29.95 ISBN 978-0-520-26238-6.

This book is an attempt to reconcile policy, politics, health services, scientific advancements, and other societal events as related to health care in the US. The author is President Emeritus of Milbank Memorial Fund, an organization involved in supporting health policy.

The first chapter described the justification of the book. The second and third chapters contain an historical overview on the evolution of health services in the US and in various US states. As the author has been involved in several aspects of the evolution of health services in the US, he provides the reader not only with facts, but also with an overview of the influence of various political factors that led to specific decisions.

The last two chapters contain the true reason for writing the book and describe the Drug Effectiveness Review Project (DERP). Again, here as the author has been involved in this project, he describes it with an in-depth knowledge. The objective of DERP is to evaluate the effectiveness of drugs and other medical activities. Initially established in Oregon, DERP in cooperation with the Center for Evidence-Based Policy, an organization located in the Oregon Health and Science University manages the program. Meanwhile several other jurisdictions have joined DERP.

The DERP process generally begins by developing and implementing policy through the cooperation with representatives from each participating jurisdiction (the governing body, referred to as “the governance” in the book). Typically, the governance solicits key questions from health professionals in each jurisdiction, and then works with researchers to select questions and word them precisely. The process of question selection was expanded in 2007, by establishing Clinical Advisory Groups, consisting of three experts selected by the governance, and three “template key questions” evolved to aid members and researchers, which Fox discusses in the fourth chapter. Subsequently DERP commissions reviews to be performed by a variety of organizations. A major concern for DERP was the perception of advocacy or bias. As such, it refuses to make economic evaluations or policy recommendations in its reports, which permits flexibility in the use of the DERP reports. To further insulate its review process, the DERP informs pharmaceutical manufacturers of the questions, and asks the manufacturers to provide evidence of the effectiveness of their drug, provided this evidence can be disclosed to the public. Once the commissioned reviews are complete, they are made available to the public on the web and periodically updated when it becomes necessary.

Although the author has asked several people to review the manuscript, the book contains information that is not necessarily consistent with facts. Here are some examples:

1. The author’s definition of science technology assessment and peer review are peculiar. In contrast to the author’s view, research is a vehicle to knowledge and is not necessarily knowledge.
2. The author has a bias against drug companies. The author repeatedly alleges that drug companies prevented advancements that would have led to better healthcare.
3. The author correctly identifies the causes for increases of healthcare cost considerably above the inflation rate. However, he disregards the economic impact of malpractice suits including the prevalence of performing tests and other actions that are entirely done to

avoid adverse court actions. The estimated for these costs range from 5% to 20% with the likely range to be about 10-15%.

4. Although the author addresses practices in some countries, he is either unaware of or has chosen to disregard the practices of leading healthcare countries notably Switzerland, France, and Germany.
5. The author claims that authors of the reviews be 100% free of potential conflict of interest. It is possible to avoid financial and personal (participation of the immediate members of the family), but more difficult to avoid institutional (being affiliated with a relevant organization) and intellectual (having a predetermined view of a subject) conflict of interest.

The introduction of DERP provides a vehicle for supplementing activities of Food and Drug Administration (FDA). The task of the FDA is to evaluate the safety and effectiveness of a drug. In contrast DERP goes far beyond the decisions of FDA by providing a scientific assessment (the author calls them a systematic review) of usefulness, economics and other scientific aspects of application of a drug.

The project correctly assigns the prioritization of the drug to be evaluated by a group consisting of representatives of the participation jurisdictions or organizations. The DERP process, correctly, avoids making policy or other recommendations. That decision is left to the jurisdictions or organizations that are involved in DERP and indirectly to others.

The DERP process properly identifies “template key questions” otherwise known as assessment criteria. The author indicates that the resulting reports are subjected to external review. However, the description that follows indicates that the external review is more like comments by those interested in the subject. In order for the scientific assessments (the book calls them reviews) to be acceptable, they must be subjected to independent peer review. There are numerous models for such an effort including the process described by Office of Management and Budget and the one used by the National Academies.

The introduction of DERP provides useful information to health professionals and others in the US and in other nations. It correctly separates science from policy and politics. Once a credible independent peer review is added to the scientific assessment prepared by DERP, the resulting reports can be published as a credible scientific resource.

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