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Conflicts of Interest

I TAKE EXCEPTION TO ELIOT MARSHALL'S characterization of both the recent action by the Office for Human Research Protection (OHRP) in circulating its "draft interim guidance on financial relationships in clinical research" and the response of the academic community (News of the Week, "Universities puncture modest regulatory trial balloon," 16 Mar., p. 2060). Notwithstanding its appellation, and whether "mildly worded" or not, the document was equivalent to a notice of proposed rulemaking, and the academic community reacted with appropriate gravitas to express its concerns, as it would with any other proposed federal rule. For its part, the Association of American Medical Colleges' (AAMC's) response to OHRP focused on the matter of institutional financial relationships—which represent totally unexplored terrain—where we believe the guidance was, in fact, premature.

Despite a seeming rush to judgment by political leaders and the media based on a few anecdotal reports, convincing empirical evidence that investigators' (or institutions') related financial interests in their research pose a significant threat to the integrity of that research is lacking. So the academic community, as well as federal research sponsors, must deal largely with perception, rather than a well-defined problem. Complicating the matter further, universities and their academic medical centers are caught up in a conflict of public expectations: these institutions are increasingly valued as "engines of economic growth," but at the same time are expected to maintain a flawless public posture as independent creators and arbiters of knowledge.

> "...academic medical centers are caught up in a conflict of public expectations..."

AAMC recognizes its responsibility for guiding its member institutions in these matters. We and the Association of American Universities, individually and in tandem, are acting to clarify the issues and develop consensus that can inform academic policy as well as federal rule-making. The new AAMC Task Force on Financial Conflicts of Interest in Clinical Research (www.aamc.org/newsroom/pressrel/010329.htm) has been constituted to ensure that all stakeholders are at the table, not only medical school and teaching hospital leadership and prominent clinical investigators, but also industry executives, ethicists, attorneys, media representatives, and patient advocates. In conducting this exercise, the safety of our patients and research volunteers will remain our highest priority.

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Human Cloning—Not If, but When

THE QUESTION OF WHETHER to clone human beings is one that does not need an answer. Now that the technology exists, it will be done. The better question may be, will human cloning be done with the support of the public in professional research facilities or in the confines of secret basement laboratories?

R. Jaenisch and I. Wilmut, in their Policy Forum "Don't clone humans!" (*Science*'s Compass, 30 Mar., p. 2552), raise many concerns about the imperfections in the technology of cloning humans. As long as there is a demand for the product and the possibility exists for success in this technology, it will be explored.

The ethical questions that arise concerning cloning will have to be addressed, just as ethical questions are dealt with for any controversial issue. For example, once the technology required to manufacture high-speed automobiles was available, the question of whether to produce these automobiles became irrelevant. It was done. The automobile became a useful convenience, but with its usefulness also came the possibility of misuse, creating hazards that previously did not exist. Questions of the ethics of putting such a powerful tool as an automobile in the hands of human beings gave rise to more issues, such as new safety concerns and regulations for its use on the road.

New technology is always followed by controversial issues, bringing forth new concerns requiring new solutions. Questions of how best to use the technology of human cloning while minimizing the risk of misuse should be faced now.

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I APPLAUD JAENISCH AND WILMUT'S STRONG argument against human reproductive cloning; however, I wish they would have elaborated on the "many social and ethical reasons why [they] would never be in favor of copying a person," to which they allude. The issues of experimental safety to which they devote the bulk of their argument may become moot in the not-so-distant future. For instance, researchers seeking to transform adult cells into an embryonic-stem-cell-like state, for therapeutic transplantation, might uncover the secret to genomic reprogramming that currently bedevils efforts at animal cloning. In the meantime, the danger for opponents of human cloning is that the ethical argument might focus exclusively on the safety of the procedure: once it becomes safe, it will therefore appear permissible.

The reputation of physics suffered because of the apparently unreflective involvement of so many physicists in the Manhattan Project. In the case of the atomic bomb, however, researchers could plausibly claim that the urgency of war swept aside their moral qualms. Where is the urgent need for human clones? Whether human cloning becomes a reality, future generations will judge scientists more kindly if we make a stand against it on grounds of universal morals, rather than leave such concerns to flak-catching bioethicists.

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CORRECTIONS AND CLARIFICATIONS

THIS WEEK IN SCIENCE: (30 Mar., p. 2511). The image erroneously printed with the item "Mapping out bond formation" should have appeared with "Bosons help cool Fermi gases."

REPORTS: "A sperm cytoskeletal protein that signals oocyte meiotic maturation and ovulation" by M. A. Miller *et al.* (16 Mar., p. 2144). In the second line from the bottom of the caption for Figure 1, the number "14,1475" should have been printed as "14,147.5."

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