

the IAP's recommended Immunisation Schedule 2016 being removed from the website of its journal *Indian Pediatrics* after being approved by the advisory committee, the IAP office-bearers, its executive board and the editorial board of the journal. Following this incident, Dr Vashishtha, a former Convener of the Advisory Committee on Vaccines and Immunization Practices of the IAP, raised questions about the role of vaccine manufacturers in sponsoring continuing medical education and possibly influencing the immunization recommendations by the IAP.³

This incident brought to the fore the need for more transparency in relations between pharmaceutical companies and doctors' organizations in India and specifically about funding of professional associations that formulate guidelines for immunization practice. The process of formulating these guidelines, including the evidence base, should be made public. India has only a voluntary code of conduct for pharmaceutical companies, but since the experience of voluntary code elsewhere is not encouraging, civil society groups have been demanding a mandatory code as in developed countries. The 'Professional Conduct, Etiquette and Ethics Regulations, 2002'⁴ (amended in 2009) of the Medical Council of India (MCI) put a clear embargo on gifts and favour to doctors from pharmaceutical companies. However, in February 2016, the MCI declared that doctors' associations are not covered by this code! This decision needs to be reversed.

Independent of this decision by the MCI, it is necessary that doctors' associations including the IAP need to strictly follow some ethical norms. They have to be transparent and accountable to their members, and for their relations with pharmaceutical companies, they have to be accountable to the public at large too. The IAP office-bearers have to explain why the above-mentioned immunization guidelines were removed from the IAP's website. The office-bearers and committee members need to make public their conflicts of interest. We expect the IAP to respond with facts to Dr Vashishtha's contention that the IAP's action plans and continuing medical education programmes are being funded by vaccine manufacturers. Dr Vashishtha must be reinstated. We also demand an unbiased system that encourages doctors and the public to ask pertinent questions and not be penalized for seeking information. Let this instance serve not as a deterrent but a beginning to improve the processes and structures of an esteemed professional body such as the IAP and enable greater participation from the medical community and beyond.

REFERENCES

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- 2 Vaccine nexus: Whistleblower Bengaluru paediatrician seeks police help. Available at www.timesofindia.indiatimes.com/city/bengaluru/whistleblower-doctor-seeks-police-help/articleshow/56711498.cms (accessed on 20 Feb 2017).
- 3 Nagarajan R. Are vaccine makers influencing India's immunisation plan? Available at www.economictimes.indiatimes.com/industry/healthcare/biotech/pharmaceuticals/are-vaccine-makers-influencing-indias-immunisation-plan/articleshow/56164860.cms (accessed on 20 Feb 2017).
- 4 Medical Council of India, Code of Ethics Regulations, 2002. Available at www.mciindia.org/CMS/rules-regulations/code-of-medical-ethics-regulations-2002 (accessed on 20 Feb 2017).

Vaccine recommendation requires more transparency in India

The suspension of an eminent paediatrician, Dr Vipin Vashishtha, by the Indian Academy of Pediatrics (IAP) drew flak from sections of the medical community in India.^{1,2} The controversy was sparked off by

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