

Where the Sun Shines: Industry's Payments to Plastic Surgeons

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Disclosures: James W. May Jr is a consultant for TEI Biosciences and an educational consultant for Johnson-Johnson – Mentor. Justin M. Sacks was previously a consultant for LifeCell Corporation. Dorry L. Segev is a consultant for Sanofi, Novartis and Astellas Pharma US. All the other authors have no conflicts of interest to disclose.

Introduction: The Physician Payments Sunshine Act (PSSA) is a government initiative that requires all biomedical companies to publicly disclose payments to physicians through the Open Payments Program (OPP). The goal of this study was to utilize the OPP database and evaluate all non-research related financial transactions between plastic surgeons and biomedical companies.

Methods: Using the first wave of OPP data published on September 30, 2014, we studied the national distribution of industry payments made to plastic surgeons during a five month period. We explored whether a plastic surgeon's scientific productivity, (as determined by their h-index), practice setting (private versus academic), geographic location, and subspecialty were associated with payment amount.

Results: Plastic surgeons (N=4,195) received a total of \$5,278,613. The median (IQR) payment to a plastic surgeon was \$115(\$35-298); mean \$1,258. The largest payment to an individual was \$341,384. The largest payment category was non-CEP speaker fees (\$1,709,930) followed by consulting fees (\$1,403,770). Plastic surgeons in private practice received higher payments per surgeon compared to surgeons in academic practice (median [IQR] \$165[\$81 - \$441] vs. median [IQR] \$112 [\$33-\$291], rank-sum $p < 0.001$). Among academic plastic surgeons, a higher h-index was associated with 77% greater chance of receiving at least \$1000 in total payments (RR/10 unit h-index increase = 1.47 1.77 2.11, $p < 0.001$). This association was not seen among plastic surgeons in private practice (RR = 0.89 1.09 1.32, $p < 0.4$).

Conclusion: Plastic surgeons in private practice receive higher payments from industry. Among academic plastic surgeons, higher payments were associated with higher h-indices.