

AMERICAN THORACIC SOCIETY
POLICY ON ASSOCIATION WITH THE CANNABIS INDUSTRY
BY ATS MEMBERS AND OTHERS PARTICIPATING IN ATS ACTIVITIES

I. Underlying Principles about Cannabis Use, Related Research, and the Emerging Cannabis Industry

- A. The American Thoracic Society (ATS) is committed to the prevention and treatment of respiratory or systemic disease caused by the use of inhaled substances, including both combustible and non-combusted products (for example, smoked or vaped cannabis, respectively).
- B. Inhaled cannabis use has been associated with symptoms of chronic bronchitis, worse lung function and airway abnormalities. Alarming data has highlighted the growing public health concerns over the use of vaped cannabis and acute lung injury, resulting in e-cigarette or vaping product use-associated lung injury (EVALI).
- C. Data regarding relative harms and relative benefits of cannabis use remain inconclusive. The ATS is committed to developing a comprehensive understanding, through well-designed scientific investigations, of the effects of cannabis use on human health.
- D. Understanding the effects of cannabis on lung health is particularly needed given that most cannabis use occurs by inhalation (>90%), causing a greater priority in understanding the effects of inhaled cannabis products (combusted and non-combusted) on lung health across the adult and pediatric population.
- E. The ATS is receptive to having investigator-initiated research into the effects of cannabis that is free of support by entities that promote recreational use and/or non-evidence-based uses of inhaled cannabis products, not associated with the tobacco industry, and whose authors are free of professional relationships or personal investment with the same, presented at the ATS International Conference or published in ATS journals.
- F. The ATS is also receptive to having investigator-initiated research into potential therapeutic applications of non-inhaled cannabis delivery formulations that is free of support by entities that promote recreational use and/or non-evidence-based uses of inhaled cannabis products, not associated with the tobacco industry, and whose authors are free of professional relationships or personal investment with the same, presented at the ATS International Conference or published in ATS journals.
- G. The ATS encourages use of cannabis formulations in research that can be quantified as to strength, quality and purity so that meaningful conclusions and comparisons can be made.
- H. This policy and its implications for ATS activities are based in part on prior evidence of efforts by some industries, such as the tobacco industry, to manipulate and alter evidence to conceal the dangers of harmful, inhaled substances.

II. Definitions

- A. At the time of enactment of this policy, all cannabis products consumable by inhalation (e.g., smoking or vaping) are assumed by ATS to cause and/or aggravate disease, based on available literature.

- B. ATS members and non-members that participate in the official ATS roles defined below have a real or potential conflict of interest, to be managed by ATS in accordance with this policy (see section III), whenever they have a relationship with a cannabis entity and that relationship benefits either the individual or the cannabis entity, financially or non-financially, as a result of the use of cannabis products that have been shown to cause or aggravate disease.
- C. Cannabis entities are defined by the ATS as:
1. Any company engaged in the manufacture, promotion and sales of a cannabis product consumable by inhalation (i.e., engaged in the promotion and sales of an inhaled formulation of cannabis).
 2. Any affiliate or subsidiary of such a company for which it may be reasonably concluded, as a result of publicly available information, that the affiliate or subsidiary's activities or image benefits the cannabis entity's sales of cannabis products that cause or aggravate disease. Included are companies involved in the manufacture or sale of non-tobacco cannabis delivery devices, such as e-cigarettes, when owned in whole or part by a tobacco or cannabis entity.
 3. Any foundation/nonprofit organization for medical research or medical education that is funded by one or more cannabis entities (with exception of foundations that have been established as a result of court-supervised settlements with cannabis entities, if such occasions arise).
 4. Any advocacy group that receives cannabis industry support to either (a) promote the use of an inhaled cannabis product that has been shown to cause or aggravate a disease, or (b) impede policies to prevent cannabis-related disease.
- D. Involvement with cannabis entities that exist for the sole purpose of therapeutic use will be judged on a case-by-case basis to determine the appropriate level of engagement for ATS members and ATS activities. Determination will be made by the ATS Ethics and Conflict of Interest Committee and its staff in consultation with the Tobacco Action Committee and with oversight by the Executive Committee.
- E. Activities that constitute a relationship with a cannabis entity include but are not limited to:
1. Employment by a cannabis entity;
 2. Serving as a consultant or spokesperson for a cannabis entity;
 3. Serving on a Board of Directors, advisory board, or advisory committee of a cannabis entity;
 4. Receipt or pending receipt of lecture fees and other honoraria from a cannabis entity or its agent (e.g., a medical communications firm contracted by the cannabis entity);
 5. Expert testimony on behalf of a cannabis entity or its agent (e.g., a law firm representing a cannabis entity);
 6. Receipt or pending receipt of a cannabis entity-sponsored grant including contracted research;
 7. Receipt or pending receipt of patents from a cannabis entity;
 8. Receipt or pending receipt of royalties from a cannabis entity;
 9. Ownership of stocks, options, or other equities of a cannabis entity (excluding mutual funds unless a cannabis industry sector fund or tobacco industry sector fund).
- F. Official ATS roles subject to this policy include:
1. Nomination or election as a Key Society Leader (i.e., the President, other members of the Executive Committee including the Executive Director, and the Editors-in-chief of ATS Journals);

2. Nomination or election as an ATS Board Member, including as the Chair or Chair-elect of an ATS Assembly;
3. Nomination or appointment by the President to an ATS Committee or Task Force;
4. Nomination or appointment as a Deputy Editor, Associate Editor, Guest Editor or other member of an ATS Journal's editorial board;
5. Submission or acceptance as an author of a manuscript for publication in an ATS journal;
6. Serving on Assembly planning, nominating and program committees;
7. Serving as a planner, chair, vice-chair, moderator, or presenter for ATS scientific and educational programs including the ATS conference;
8. Serving on a writing committee of an ATS statement or guideline;
9. Serving as an ATS reviewer, including but not limited to ATS grant proposals, documents, journals, websites, and abstracts;
10. Receiving ATS recognition awards;
11. Serving as an official spokesperson or official representative of the ATS.

G. Ongoing review of these definitions will be necessary as evidence of the impact of inhaled cannabis products on human health and the nature and practices of the cannabis industry evolves.

III. Consequences for ATS Activities and Official Roles

A. The ATS will:

1. not invest in or collaborate with any cannabis entity that is affiliated with or supported by the tobacco industry. Tobacco industry support includes any of the following: the cannabis entity is fully owned by a tobacco entity; a subsidiary of; partially owned or financially backed in any amount; has shared executive leadership including board members; has shared marketing activities or entities.
2. not invest in or collaborate with cannabis entities that promote recreational use and/or non-evidence-based uses of inhaled cannabis products for any purpose. This includes but is not limited to ATS acceptance of funding or other payments from, conducting programs or other activities with, and sanctioning activities of such entities.
3. not accept for its journals any research funded by cannabis entities that are affiliated with or supported by a tobacco entity.
4. only accept for its journals research funded by cannabis entities that do not promote recreational use and/or non-evidence based uses of inhaled cannabis products, and where all the following is true: the research is investigator-initiated; funding is provided to the investigator's institution rather than paid directly by the cannabis entity to the investigator; the research is subject to institutional oversight and standards to ensure independence from corporate influence. Research funded by foundations established as a result of court-supervised settlements with cannabis entities, if such occasions arise, is acceptable.
5. not accept for its journals research submitted by an author that has had a professional relationship or personal investment, financial or non-financial, with any cannabis entity that is affiliated with or supported by a tobacco entity, and the relationship existed within the 12 months prior to submission, or is expected to exist prior to final approval and publication of the manuscript.
6. not accept for its journals research submitted by an author that has had a professional relationship or personal investment, financial or non-financial, with any cannabis entity

that promotes recreational use and/or non-evidence-based uses of inhaled cannabis products, and the relationship existed within the 12 months prior to submission, or is expected to exist prior to final approval and publication of the manuscript.

7. not permit individuals to assume an official ATS role (including but not limited to serving as a planner or presenter for ATS conference) if they have had a professional relationship or personal investment, financial or non-financial, with any cannabis entity that is affiliated with or supported by a tobacco entity, and the relationship has existed within the past 12 months, or is expected to exist while in the official ATS role.
 8. not permit individuals to assume an official ATS role (including but not limited to serving as a planner or presenter for ATS conferences) if they have had a professional relationship or personal investment, financial or non-financial, with any cannabis entity that promotes recreational use and/or non-evidence-based uses of inhaled cannabis products, and the relationship has existed within the past 12 months, or is expected to exist while in the official ATS role.
 9. reserve the right to determine that an individual's relationship with a cannabis entity could compromise a specific ATS activity if the person participates in it (for example, if the person was to author an ATS clinical practice guideline related to cannabis use), and as a result require that person to recuse or be excused from specific aspects of the activity or be disqualified from participation in the activity as a whole.
 10. include all relationships with cannabis entities disclosed to ATS as having occurred within the past three years or expected to occur before the end of an official ATS role, within the summaries of participant commercial interests issued for specific activities, such as for clinical practice guidelines and accredited continuing medical education. Disclosed spouse/life partner relationships may also be included.
- B. ATS members, staff, and non-members who participate in official ATS roles, are called upon to:
1. not enter into professional relationships or personal investments, financial or non-financial, with cannabis entities that are affiliated with or supported by the tobacco industry or promote recreational use or non-evidence-based uses of inhaled cannabis products.
 2. recognize that the ATS's knowledge and management of conflicts of interest relies on the self-disclosure of ATS members and other participants in ATS activities. This disclosure is achieved through ATS procedures for disclosure and the efforts of Key Society Leaders, Board Members; the Chairs of ATS Assemblies, committees, task forces, and scientific and educational programs, and ATS staff, to ensure disclosure and review of such relationships according to established ATS procedures.
 3. recognize that wherever ATS requires disclosure, review, and resolution of conflicts of interest prior to assuming an official ATS role, the person disclosing must report all relationships with cannabis entities held previously, presently, or expected to be held by the end of the official ATS role, either by herself or himself or their spouse/life partner, according to the instructions provided as part of the official ATS disclosure process.
 4. The ATS strongly encourages that members and others be as inclusive and forthcoming as possible in disclosing competing interests and conflicting interests, with the goal of maximal transparency. (For more information on ATS conflict of interest policies see <https://www.thoracic.org/about/governance/ethics-and-coi/>.)

- C. The ATS will inform its members, its staff, all non-members participating in ATS activities, partnering societies, and the public at large of this position.
- D. The ATS will work with partnering societies and organizations that do not have a comparable policy to resolve any differences as they affect co-sponsorship of specific ATS projects and activities. If any differences regarding the involvement of individuals on these projects or activities who have relationships with the cannabis industry cannot be resolved to the satisfaction of the ATS, the ATS will not co-sponsor the specific project or activity.

IV. Procedure for Implementation

- A. Implementation of this policy is expected to be in effect as of June 1, 2020. The following activities can be exempted from the restrictions required by this policy if they occurred prior to then: appointment or election to an official ATS role prior to then; manuscripts submitted to ATS Journals prior to then; commitments already made for the 2021 ATS International Conference prior to then. This policy assumes that submission of proposals and abstracts and formal planning of sessions for the 2021 conference will occur after June 1, 2020, and therefore held to the requirements of this policy.
- B. Interpretation, implementation, and adjudication of this policy, including consideration of any appeal of decisions, are the responsibility of the:
 - i. ATS Ethics and Conflict of Interest Committee and its staff, in consultation with the Tobacco Action Committee when relevant;
 - ii. when involving the ATS Journals, the Journal Editors and staff in consultation with the ATS Publications Policy Committee and the Ethics and Conflict of Interest Committee and its staff;
 - iii. when involving the International Conference, the Ethics and Conflict of Interest Committee and its staff in consultation with the International Conference Committee and its staff.
- C. All implementation, interpretation, and adjudication of this policy, including consideration of any appeals of decisions, are subject to review and approval by the ATS Executive Committee whenever it deems necessary.