

**Written testimony to Maryland Senate Health Committee
On Bill HB 1133**

Submitted by Sharon Batt, PhD
Department of Bioethics,
Dalhousie University, Halifax, Canada
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To the Committee:

I strongly support this important bill.

I conduct research on conflicts of interest; I publish and advocate for stronger policies in Canada and internationally to protect the interests of patients. Model bills in one country or jurisdiction strengthens efforts elsewhere.

The ethics of Industry partnerships with patient advocacy groups is my main area of research and the subject of my book, [*Health Advocacy Inc.: How Pharmaceutical Funding Changed the Breast Cancer Movement*](#) (UBC Press, 2017). I documented the pharmaceutical industry's funding of patient groups, which began in the 1990s and has become the norm in all high-income countries where studies have been conducted (USA, Canada, UK, Europe, Australia).

I also co-authored, with colleagues at Georgetown University, the report [*What Needs to Change at the FDA?*](#) Case summaries in the report include multiple examples of industry-funded patient advocates intervening at the FDA to have drugs approved in the absence of compelling evidence of effectiveness, and when evidence showed potential harm to patients.

Lack of transparency about these patient group/industry partnerships undermines public awareness of the ways patient groups (which can perform useful services) can also act as Trojan horses for industry-friendly policies by silencing needed critique and encouraging support that is not warranted. HB133 addresses this policy gap.

Over 20 years of research has shown that industry funding of patient advocacy undermines policies in the public interest. In all countries where studies have been conducted, patient advocates with industry funding consistently oppose legislation to control prices on expensive new drugs, oppose switching to less expensive generics, and urge rapid drug approvals based on limited evidence (surrogate endpoints rather than improved quality of life or extended life). The result has been to undermine the viability and purpose of the very health systems on which patients depend.

I congratulate and thank delegate Deni Taveras for putting forward this bill.

Sharon Batt, PhD.