The promise—and the peril—of medical research are under public scrutiny as never before. The 1999 death of an 18-year-old youth in Philadelphia in a gene therapy trial, and the 2001 death of a 24-year-old laboratory technician in Baltimore in an asthma trial, are the most dramatic recent examples of what is potentially at stake when research volunteers subject themselves to experimental procedures in the name of science.

The death of research volunteers is extremely rare, but in Philadelphia, the human loss was compounded by the allegation of a financial conflict of interest on the part of scientists conducting the experiment. Fair or unfair as that may have been, in the glass house that we research institutions inhabit, appearances are as indelible as reality.

The Bayh-Dole Act of 1980, in a departure from long tradition, encouraged universities to help speed medical discoveries from the laboratory to everyday use through a variety of means, including the commercialization of our faculties’ intellectual property. Society has benefited from accelerated R&D in the biomedical sector, just as Congress intended. However, the thought of academic scientists testing drugs or medical devices that might stand to enrich them underductions is being made for the highest good—under the safest conditions and in accordance with the most scrupulous ethical standards, or something like them. Every day medical science and human health are advanced by the altruism and courage of thousands of persons who undertake risk for the good of others. That is why we owe each of those quiet heroes the certain knowledge that their contributions will be refined by professionals with expertise in the complexities and nuances of venture and corporate financing. But the escrow period would be designed to prevent the researchers or the institution from exercising or realizing their interests before the product was proven in the marketplace.

These proposals are under consideration. Although they have not taken final form, I believe that the current research environment requires these mechanisms, or something like them.

The promise of medical research will always entail some peril. Every day medical science and human health are advanced by the altruism and courage of thousands of persons who undertake risk for the good of others. Yet, on any given day, we have no guarantee that a research volunteer at Emory or any other academic medical center may not experience serious illness, or worse. That is why we owe each of these quiet heroes the certain knowledge that their contributions are being made for the highest good—under the safest conditions and in accordance with the most scrupulous ethical standards that we can devise.