

## letter to Dr. Andres Martin

Dear Dr. Martin,

I am a retired Psychiatrist/Psychoanalyst on the Clinical faculty at Emory Medical School. I have recently reviewed the British Medical Journal article [The rules of retraction](#) by Melanie Newman concerning the Study 329 article [Efficacy of Paroxetine in the Treatment of Adolescent Major Depression: A Randomized, Controlled Trial, 2001] published in the Journal of the American Academy of Child and Adolescent Psychiatry which you edit. In Newman's article, she says:

In his response to the academics' call JACAAP editor-in-chief Andres Martin said the former editor's decision to publish the paper despite the reviewers' misgivings "conformed to best publication practices prevailing at the time." He added that he had given "serious consideration and due diligence" to the request that the paper be withdrawn but had found no evidence of scientific errors "nor any justification for retraction according to current editorial standards and scientific publication guidelines."

I would like to ask you to reconsider your decision, at least for the length of this letter. You make two arguments. First, that Dr. Dulcan was within her rights as editor to accept the article against the advice of the reviewers and, second, that the paper had no scientific errors. Of course Dr. Dulcan was operating within the envelope of her editorship. And while I might quibble with your second argument, I'll skip that. What I do want to say is that I don't think you engaged the magnitude of the complaint about this article.

As I'm sure you know, this was an industry funded study, with the first draft ghost-written by Sally Laden, a professional writer hired by the sponsoring pharmaceutical company. I'm sure you know that the company saw the study as negative when the data came in but decided to publish it anyway. I expect you know that the company participated in the editing of the paper. I would be surprised to hear that you weren't aware that the study failed on its two primary outcomes, and was only significant in four of the twenty-seven overall outcome measures. I expect that you recognize that there were a number of suicidal kids [8] coded as 'emotionally labile' – deliberately misleading the reader. And I guess you know that the FDA and its European counterpart rejected the findings and added warnings to the SSRIs about suicidality in adolescents on these drugs. Undoubtedly you've read the poignant editorial in the Brown Student paper [Accountable Academics](#) that ends:

It is a troubling reality for students to realize that the work of their professors, let alone their peers, may lack integrity. After all, we understandably want our academic experience at Brown to enrich us. So students reject the prospect of anything that might undermine that experience. And they demand the bona fides of the information shared in lectures, seminars and even day-to-day conversation.

Indeed, they recognize that the credibility of this information is the currency that underlies all the intellectual exchanges we make.

However, as we consider the broader implications of the Keller allegations, we do think it is important to remember that professors are accountable for the honesty of their intellectual work and discourse as well.

We suggest an edit to our academic code. The Academic Code as presented on the University's Web site, states that in the case of "Misrepresentations of facts, significant omissions, or falsifications in any connection with the academic process ... students are penalized accordingly." This code should be applied to both professors and students. For insofar as the Brown community is fostered by a direct dialogue between students and faculty, a demand for academic integrity should be imposed on all members of the University.

Perhaps you've even seen a copy of Alison Bass' book Side Effects: A Prosecutor, a Whistleblower, and a Bestselling Antidepressant on Trial. These are some of the many things that make us wonder about your decision and the stated reasons for making it.

Dr. Dulcan's reasons for publishing the study are not in question, nor is the request to retract the study an attack on her editorship. Perhaps the Authors "pulled the wool over her eyes." Who knows? It could happen to any of us. While I personally think of coding suicidal kids as emotionally labile as a scientific error, I said I wouldn't quibble. But GSK knowingly masterminding the publication of an article recommending depressed teenagers take a medicine that is not effective and can cause suicidal thinking strikes me as "justification for retraction according to current editorial standards and scientific publication guidelines." That was a conscious, premeditated lie – and a dangerous one at that. The study concludes:

Paroxetine is generally well tolerated and effective for major depression in adolescents.

That is simply not true, based on the study itself the day it was published, and certainly by the volumes unearthed later. If the study were retracted as it should be, Dr. Dulcan might feel a little embarrassed at a meeting or two, but that would pass. You might feel a little embarrassed because you've already denied the retraction. But those are small things. A much bigger thing would be asserting the integrity of your Journal and yourself. And bigger than that, you would be setting a firm limit on the excesses of the pharmaceutical industry that have plagued psychiatry for a quarter century. If necessary, you could even turn the decision over to an external impartial group, recusing yourself as being too close for objectivity.

But don't kid yourself – this is not going to go away. Study 329 represents everything that's been wrong with the psychiatry for decades. Your Journal could be one of the leaders in reestablishing the integrity of our literature, or it could dawdle until there is no other choice but to retract this article that has become such a negative paradigm.

Sincerely,