

My dismissal is scientific judicial murder

(Translation of: Kronik: Min firing er et videnskabeligt justitsmord, Politiken 11 Dec 2018)

It is a full-blown scandal that Rigshospitalet will dismiss me. It is a clear attack on both independent research and freedom of expression.

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You would not believe that this could happen in a country like Denmark. That Rigshospitalet fires an official without prior service warning who co-founded the Cochrane Collaboration 25 years ago, created the Nordic Cochrane Centre out of nothing and made it a world-class research centre.

Deputy director of Rigshospitalet, Per Jørgensen's official reason for firing me is that he has lost confidence in my ability to lead the centre. This is not an objective reason and it is contradicted by my results.

The firing was brutal. It took place on October 29, during my first official call ever. I was suspended and treated as if I had committed serious crime. I was not even allowed to go back to my office and my staff were banned from contacting me, which in particular my 5 PhD students cannot understand the reasoning behind, and they have written to the hospital and the minister and pointed out that they cannot do their work without me as supervisor. Jørgensen and Personnel Manager Mette Risak preferred to avoid a firing and therefore invited me to enter into a "mutual agreement on resignation", as it is misleadingly called, with a few months extra salary beyond the three months I would receive in any case.

My union was proud that they had negotiated 10 months' extra pay, which had never happened before, while I took it as an indication that the hospital had an immensely bad case that would not withstand public spotlight. The agreement mentioned that:

"There is agreement between the parties that the content of the agreement is not communicated to third parties. Announcement to employees and relevant internal and external partners will be agreed with the Executive Board. The agreement is the complete and final decision about any claim between the parties without prejudice. "

Total gagging. I reported back a week later, copying the Ministry, that my freedom of speech is not for sale and that what was going on should come to light. In my letter, I wrote that politicians and patients are very happy about my efforts; that in 2015, psychiatric patients voted for me to become Dane of the Year and I ended up in top 10; that in 2016 I became Protector of the Hearing Voices Network; that everyone has attached great importance to the independence of the Centre; and that I have saved the community billions of Danish kroner by just three of my reviews.

I also wrote that I thought my impending firing was about silencing an important voice in the debate, just like my expulsion from the Cochrane Collaboration on September 13th. Cochrane's leadership was very annoyed that I had published a well-founded criticism of the Cochrane review of the HPV vaccines, and I was told that it is bad behavior to criticize colleagues' science when you are a Governing Board member or a Cochrane Director. Obviously, this is scientific censorship.

By reviewing the randomized trials we received from the European Medicines Agency, we have shown that the HPV vaccines may cause serious neurological harms, which the authorities otherwise claim do not exist.

We are publishing this, also in a PhD thesis, and we presented the results at our 25th anniversary symposium at Rigshospitalet on October 12th.

Instead of silencing an important voice, Rigshospitalet and the Ministry should protect me. Firing me sends the unfortunate signal that if your research results are inconvenient and cause public turmoil, or threaten the pharmaceutical industry's earnings, which we are very concerned about in Denmark, we will fire you. Strikingly many of the documents my lawyer has obtained from the Ministry through the Freedom of Information Act are articles where healthcare stakeholders – e.g. psychiatrists, doctors with conflicts of interest, the Health and Medicines Agencies, and editors of journals financed by the pharmaceutical industry - try to depict me as untrustworthy to promote their own interests.

It led to massive resentment, with several articles in, for example, Science, Nature, BMJ and Lancet, that I was expelled from the Cochrane Collaboration after a process where new accusations were invented on the spot after Cochrane's own lawyer's investigation had exonerated me from all charges. I believe I have unequivocal evidence that the process is invalid. The next day, four members resigned from the board in protest.

The case is not about my person, but about important principles that the leadership of Cochrane trampled underfoot. Cochrane's credibility plummeted because I am known for high quality research, integrity and incorruptibility.

The 31 Centre Directors in Spain and Latin America demanded an independent investigation of the Cochrane process against me, which the Board rejected because such an investigation would lead to its demise. I have complained to the Charity Commission in England about serious mismanagement committed by Cochrane's CEO Mark Wilson and the Governing Board who have violated all the key rules for charities and for Cochrane.

Why does Rigshospitalet want to fire me? It is extremely rare that Rigshospitalet fires a chief physician. I have taken care of the interests of the Nordic Cochrane Centre, the Cochrane Collaboration, the patients and Denmark, and believe I have served my country in an exemplary manner during my 25-years senior role as an official.

Others share my view. More than 8000 signatures have been sent to the minister with a request to overturn my sacking, with such prominent names as Cochrane co-founder, Sir Iain Chalmers, BMJ's editor-in-chief, Fiona Godlee, Member of the European Parliament Margrete Auken who has done a lot to make data available to researchers, psychiatrist David Healy, highly respected as one of the world's leading experts on psychiatric drugs, and the world's most cited health researcher, John Ioannidis from Stanford University.

It is apparent from the correspondence that we have got access to that the Ministry and Rigshospitalet have worked closely together and with Wilson, whereas I have not been heard, although it is well documented that Wilson does not always provide a complete and correct picture, which I had warned Rigshospitalet about, and provided examples of in my hearing letter to the hospital. Wilson has required that I shall no longer be allowed to work at the Cochrane Centre, and the Ministry and Rigshospitalet have pleased him, although, according to Cochrane rules, I can continue working as head of department or as chief physician. It is outrageous that a person in this way interferes with internal affairs in another country, on top of this contrary to the rules.

The Ministry is, to a considerable extent, jointly responsible for the fact that it has come this far because the Ministry announced to Rigshospitalet on 12 October that the payment of the fiscal grant to the five

Danish Cochrane groups was detained until Rigshospitalet complied with the prerequisites in the Finance Act, including ensuring that the Centre is part of the international Cochrane Collaboration.

Through our access to documents, we have recently learned that the Ministry and Rigshospitalet, since October 1 via Wilson's emails have been fully aware that the Centre has always been part of Cochrane. However, the Ministry and the hospital have kept this knowledge to themselves. At a meeting with my staff on November 5, when Jørgensen tried to explain why I would be fired, reasons of which the staff did not understand, he continued to give the impression that the Centre was not part of Cochrane.

On September 28, I tried to withdraw the Centre from the Cochrane Collaboration because I discovered via a journalist that Wilson's staff had changed our website behind our backs; had deprived us of our administrative rights without informing us; had deleted me among the employees, even though I was still employed; and had uploaded an incorrect and deeply defamatory statement from the board about me on the front page.

I acted in good faith when I tried to withdraw the Centre because the hospital has always emphasized that it was only our host and would not interfere with my dispositions, and I could not see in the remarks to the Finance Act that it was a requirement that we should participate in the Cochrane Collaboration. Later, it dawned on me that the withdrawal was never enforced because Wilson did not approve of it.

My staff has been very afraid of losing their jobs and still are because the Finance grant is being withheld. The Ministry and Rigshospitalet has caused great and unnecessary insecurity among about 50 employees through two months by giving, contrary to the facts, the outside world the impression that the conditions for payment of the grant were not met. This has nothing to do with whether I'm still working at the Centre because its Deputy Director will handle Cochrane related tasks if I cannot or must not do it. It seems that the Ministry and the hospital have used all means at their disposal needed to accommodate Wilson's unusual requirement that I must be fired, even though 50 employees suffered as a result.

My situation is the result of a power struggle between two wings. One wing is led by Wilson who advocates that everyone in Cochrane should speak with the same voice; he opposes open scientific debates about the quality and reliability of concrete Cochrane reviews; he puts more emphasis on "brand", "our product" and "business" than getting the science right; and he allows economic conflicts of interest in relation to the pharmaceutical industry.

The other wing wants to bring Cochrane back to its original values: Free scientific debates; no financial conflicts of interest for the researchers making Cochrane reviews in relation to the companies whose products they evaluate; and openness, transparency, democracy and cooperation.

As a member of the Cochrane Governing Board (with the largest number of personal votes of all 11 candidates, despite the fact that I was the only one who criticized Cochrane's management in my election statement), I did my best to change the situation.

Despite great support, I lost the power struggle. If that's why the health service wants to fire me, then Denmark supports Cochrane's new line of "one voice", lack of scientific debates and relationships that are too close to the pharmaceutical industry, which basically will make Cochrane superfluous.

I have suggested that the Centre changes status to a Centre for Evidence-Based Medicine, as well as several other Cochrane Centres are currently doing, because it would be of greater benefit to Denmark than to be a member of a Cochrane organization that does not live up to its declared values.

It takes many years to build a successful research centre, but only a moment to destroy it by an unwise administrative decision. Every researcher's nightmare is lack of understanding and appreciation from those who have the formal power. It has hit me totally in Cochrane and is now also hitting me in Denmark.

The case is one of principles because it is about one of the heaviest areas in healthcare: beneficial and harmful effects of medicines and other medical technologies. If you can easily get rid of inconvenient people and thus their research and participation in the academic debate, it can have serious consequences both for community health and economics. If Denmark supports Cochrane's fundamental principles of free scientific debate and independence of the pharmaceutical industry, then Denmark should provide me with all possible support instead of firing me.

Denmark should also consider if it is acceptable that someone in London, to an increasing degree, has the ability to decide what the Danish Ministry's appropriation is to be used for, and even wants to decide whether people employed with someone else's money, who have done nothing wrong, should be fired. All Cochrane Centres in the world, except the British one, are opposed to the strong central control of the freedom of action over the funds the centres themselves have acquired.

If Rigshospitalet fires me, it will result in the following:

1. Everyone loses, incl. Rigshospitalet, the Ministry, Denmark and Cochrane. Psychiatrist David Healy told in a lecture in 2000 at the University of Toronto that the world's best-selling drug, a depression pill from Eli Lilly, could lead to suicide. Eli Lilly was a major donor for the department, and Healy was fired. This scandal is still being talked about even though it is 18 years ago. Rigshospitalet should think about this.
2. The turmoil that already exists is going to increase considerably. Many are angry with the treatment Cochrane exposed me to and they know it comes from Wilson who controls everything, including the Cochrane Board, which I have experienced myself. If Wilson also succeeds in getting me fired, it will have unimaginable consequences. People in Cochrane are already nervous about what they may be exposed to, and many will withdraw their centres or groups when they see that Wilson's power is virtually unlimited.
3. My lawyer and I will carefully assess the basis for my sacking with the purpose of filing lawsuits for damages against Rigshospitalet for my unjustified firing, and against Cochrane for the propagation of seriously defamatory statements, with financial consequences for me. This would further harm Cochrane.
4. The Ministry, Denmark and Rigshospitalet will get an unattractive key role in the documentaries and books on scientific freedom and the fate of whistleblowers, which are being prepared. It has gained attention abroad that Denmark will not re-employ a person if he wins a case of unjustified firing.

Since the matter is of paramount importance, I have today sent a copy of my hearing to Rigshospitalet to the Minister and to the Association of Specialist Doctors. I have also sent a copy of a letter from my lawyer, which is included in my response.

This is not just a case between Rigshospitalet and me. The Ministry has a significant co-responsibility for the situation. The world's most cited health researcher has written to the Minister saying that he is confident that she does not want to be on the wrong side of history.