

## Timeline

- 20<sup>th</sup> January 2014: Letter received by MGW from Søren Dalsgaard, Child and adolescent psychiatrist, Senior Researcher, associate professor, Aarhus University and University of Southern Denmark. **(A)**
- 22<sup>nd</sup> January: Discussed at CCC call
- 23<sup>rd</sup> January: Forwarded by MGW to the Co-Chairs
- 23<sup>rd</sup>-24<sup>th</sup> January: Co-Chairs agree that this should be raised at the next Centre Directors' meeting in Panama and the need for the formation of a policy for Cochrane guiding public pronouncements. **(B)**
- 27<sup>th</sup> January: Peter writes to LB, JG, MGW & DT saying: "Today, Gerd Antes informed me that an interview I gave at the first world conference on overdiagnosis in Dartmouth in September was up on a German website. It first came up on the "Mad in America" website created by the famous science journalist Robert Whitaker whose latest book "Anatomy of an epidemic" is a devastating evidence-based criticism of psychiatry. The interview, recorded by Whitaker's photographer, Kermit Cole, is here: [www.madinamerica.com/2013/11/peter-gotzsche-2/](http://www.madinamerica.com/2013/11/peter-gotzsche-2/) I thought you might be interested in this. My radical view of throwing all antipsychiatric drugs out is actually backed by some prominent psychiatrists. We all know they can be useful as acute treatment, but doctors cannot handle them and far too many patients die or end up being chronic medicine users with devastating consequences for their lives. **(C)**
- February: Correspondence between Clive Adams (CA) and Rachel Churchill (RC) with JG and DT on Peter's comments and the video.
- 11<sup>th</sup> March: Message sent from Professor Thomas Middelboe, to the Cochrane Schizophrenia Group and Cochrane Depression Group saying: 'We would be very pleased to have your opinion on the matter raised in the enclosed letter' Letter attached separately with supporting paper. **(D) & (E)**
- 12<sup>th</sup> March: Forwarded by Clive Adams (CA) to JG, and also then copied to MGW. JG replies to CA saying 'we are working out our response'.
- 13<sup>th</sup> March: JG & LB confirm with CA a response that is sent to Professor Middleboe **(F)**  
Draft Letter is approved by LB, JG (& CA on 14<sup>th</sup>)
- 15<sup>th</sup> March: Letter from the Cochrane Leadership is sent to Peter G **(G)**
- 18<sup>th</sup> March: Letter to Thomas Middelboe is agreed by LB, JG, DT, CA
- 19<sup>th</sup> March: Letter to Thomas Middelboe is agreed by Rachel Churchill (RC)
- 20<sup>th</sup> March: Peter G replies to the letter from the Cochrane Leadership **(H)** accepting the points raised in the letter and saying he has taken down the book references from the NCC website.
- 20<sup>th</sup> March: MGW sends letter to Thomas Middelboe **(I)** copied to LB, JG, DT, CA & RC **(I)**
- 20<sup>th</sup> March: MGW replies to Søren Dalsgaard, copied to DT (see 20<sup>th</sup> January & A) **(J)**
- 24<sup>th</sup> March: Thomas Middelboe replies to MGW, copied, LB, JG, DT **(K)** saying: 'I was pleased to receive your clear answer to our questions, and I have circulated the letter amongst the Danish professors in psychiatry and child and adolescent psychiatry. Your letter arrived in the midst of the Danish Psychiatric Association Annual Meeting, and therefore I read it aloud at the general assembly ... In the board of Danish Psychiatric Association, we have decided to share the statements and decisions outlined in your letter with a journalist working close to the Danish government, in order to hopefully make politicians hopefully also patient organisations and patients aware how these statements are not an expression of views hold by the Cochrane Collaboration.
- 24<sup>th</sup> March: Danish journalist approaches Cochrane for a further response. Supportive statement of Peter is agreed and issued to the journalist. "As Director of the Nordic Cochrane Centre, Peter Gøtzsche is a highly respected and experienced researcher. Cochrane has no issue with Peter's expertise in interpreting the evidence as he sees it. However, we all need to understand the importance of clarity when distinguishing between speaking on one's own behalf and speaking to represent the Collaboration, a network of 31,000. On the issue of Peter's book, his interpretation of the evidence does not reflect a Cochrane perspective, and indeed the Collaboration would not normally make clinical recommendations, being primarily a research organisation. There are a wide range of views within the Cochrane Collaboration, of which Peter's is one."
- 24<sup>th</sup> March: MGW, copied LB, JG, DT writes to Peter attaching Cochrane's letter to Thomas Middelboe, Middelboe's response of 24<sup>th</sup> March, and the statement issued to the Danish journalist by Cochrane. **(L)**
- 26<sup>th</sup> March: Peter replies to MGW: 'Dear mark ☐Thanks, please. Send also middelboes letter to you ☐BWF



26<sup>th</sup> March: Peter'

26<sup>th</sup> March: MGW sends Peter Middelboe's original letter

26<sup>th</sup> March: MGW writes to Thomas Middelboe, asking for the original letter to Cochrane and Cochrane's reply to be taken off the Altinget newspaper website. (M)

26<sup>th</sup> March: MGW writes to LB, JG, DT, CA & RC copying request to Middelboe and informing that original letter was sent to Peter. Later sends Middelboe's response.

26<sup>th</sup> March: Thomas Middelboe replies agreeing to ask to have the letters removed from the Altinget website. Later that evening he confirms letters have been removed: 'Dear Mark, Now your letter has been removed from the site. It is my impression that your answer has contributed to emphasize the credibility of the Cochrane Collaboration in the view of Danish Scientific societies. For your information, I had two emails from professor Peter Schwarz, president of the joined Danish scientific societies (LVS), and he was very, very thankful and satisfied with both the initiative from Danish Psychiatric Association and your response.'

26<sup>th</sup> March: Peter writes to MGW, asking: 'Thanks Mark, could you also send your full reply, as a journalist quoted you for something I have not seen and which I doubt you Said, and also the attachment the psych sent to you? BWF Peter'

28<sup>th</sup> March: MGW writes to Peter, saying: 'Peter, I've not said anything or had any communication with any journalist nor approved any message beyond the text included in the letter. Attached is the attachment Professor Middelboe sent, as requested. See you soon in Panama. I think it would be useful for Lisa, Jeremy, David and me to meet with you briefly on this whilst we are all together at the mid-year meetings.'

## A.

**From:** Søren Dalsgaard [<mailto:sdalsgaard@ncrr.dk>] **Sent:** 20 January 2014 09:44 **To:** Admin **Subject:** Debate in Denmark involving the Nordic Cochrane Center

Dear Cochrane Central Executive.

Over the last couple of weeks an interesting public debate here in Denmark was initiated by an article (in Danish) in the newspaper Politiken on Monday the 6th of January, written by the leader of the Nordic Cochrane Center, professor Peter Gøtzsche.

I write to you to draw your attention to this debate, as professor Gøtzsche speaks in public as a representative of the Cochrane Center. His public statements are very critical to the use of pharmacological treatments within psychiatry and are now heavily criticised by all Danish clinical professors with psychiatry and child and adolescent psychiatry, by patient organizations, by the director of The Danish Health and Medicines Authority and the Danish Minister of Health.

A number of his statements are in fact in direct opposition to conclusions in several Systematic Cochrane Reviews. For instance, in his article he states that psychiatric patients would have better overall functioning if the use of psychopharmacological agents was discontinued all together.

In addition to having controversial opinions regarding psychiatry professor Gøtzsche is also in general concerned by the possible conflict of interest leading Danish psychiatrist may have as they may have too close relationships with the pharmaceutical industry.

I *fully* agree with the importance of financial disclosure and disclosure of conflicts of interests. I do want to mention that the Danish Ministry of Health enforces quite strict rules when it comes to doctors involvement and require doctors to apply for approval at the ministry in advance and that doctors always disclose any financial relationships they may have with pharmaceutical companies. However, financial disclosures does not merely involve involvement with the pharmaceutical industry but in fact any conflict of interest. If a doctor speaks in public and has any possible personal financial benefit involved, this *should* be disclosed by the doctor.

Professor Gøtzsche published a book in September 2013, in Danish and it has been translated into several languages

including English under the title "*Deadly Medicines and Organised Crime: How Big Pharma Has Corrupted Healthcare*". Professor Gøtzsche has a personal financial gain from the sale of this book and has failed to disclose this information in the debate, which to me is problematic under any circumstances and especially when he himself is accusing others of not giving full disclosure.

I wonder if the information mentioned above has come to the attention of the Cochrane Center in Oxford?

Sincerely yours

Søren Dalsgaard, MD, PhD  
Child and adolescent psychiatrist  
Senior Researcher, associate professor  
Aarhus University and University of Southern Denmark.

**B.**

Agree with Jeremy. I do note the letter says Peter states he represents the Cochrane Center (and not the Cochane Collaboration). As Center director, it would be hard to say that he cannot represent the Center... so this does get tricky. Would a policy also suggest that group representatives not say anything that reflects badly on the Cochrane Collaboration? But, all grounds for discussion. (Also, I am dying to know how much Peter is actually making off of his book – I can't imagine it is much, but I could be wrong!)

Lisa

Lisa A. Bero, Ph.D.

**From:** Grimshaw, Jeremy [<mailto:jgrimshaw@ohri.ca>] **Sent:** Thursday, January 23, 2014 9:06 PM **To:** Mark Wilson; Bero, Lisa **Cc:** David Tovey; [jgrimshaw@ohri.ca](mailto:jgrimshaw@ohri.ca) **Subject:** RE: Debate in Denmark involving the Nordic Cochrane Center

Thanks. I had a chat with Steve about the Centres meeting in Panama and wondered whether we could encourage an initial discussion about ground rules and accountability for Centre Directors (and other entity leaders) when they are representing Cochrane which could naturally lead to the suggestion that we need to develop a formal policy on this. Perhaps you might want to discuss this with Steve if you think it would be helpful.

Also I think we should probably let Peter know that you received this and potentially offer to have a chat if it would be helpful.

Fun!

**C.**

Dear all,

Helen Morton and I had a talk on the phone the other day about communication. Today, Gerd Antes informed me that an interview I gave at the first world conference on overdiagnosis in Dartmouth in September was up on a German website. It first came up on the "Mad in America" website created by the famous science journalist Robert Whitaker whose latest book "Anatomy of an epidemic" is a devastating evidence-based criticism of psychiatry. The interview, recorded by Whitaker's photographer, Kermit Cole, is here: [www.madinamerica.com/2013/11/peter-gotzsche-2/](http://www.madinamerica.com/2013/11/peter-gotzsche-2/) I thought you might be interested in this. My radical view of throwing all antipsychiatric drugs out is actually backed by some prominent psychiatrists. We all know they can be useful as acute treatment, but doctors cannot handle them and far too many patients die or end up being chronic medicine users with devastating consequences for their lives.

bw

Peter

**D.**



Copenhagen, March 5, 2014

Dear Cochrane Schizophrenia Group / Depression-Anxiety Group

We are writing to you in order to draw your attention to an article published January 6, 2014 in a major Danish newspaper, Politiken, by professor Peter Gøtzsche, director of the Nordic Cochrane Center, based in Copenhagen. An English translation of Peter Gøtzsche's article can be found at these two home pages:

<http://www.madinamerica.com/2014/01/psychiatry-gone-astray/>

<http://davidhealy.org/psychiatry-gone-astray/>

The article describes 10 'myths' about Danish psychiatry and psychiatry in general, and contains a severe critique of all physicians who prescribe and administer psychotropic drugs.

The article provoked a major debate in Danish media during the months of January and February. In particular professor Gøtzsche's statement, that "the citizens of Denmark would be better off, if all psychotropic drugs were withdrawn from the market" has led to a massive response from authorities and organisations, correcting what we consider a provocative and potentially dangerous statement, which puts patients at risk by tempting them to avoid necessary medical treatment or give up the prescribed medication.

The authorities who have joined in the critique of professor Gøtzsche involves the minister of Health and Prevention, the director of the Danish Health and Medicines Authority, the director of the Danish Patients Association, the president of the Cancer Society, the president of the Danish Psychiatric Association and the president of LVS (Organization of Danish Medical Societies). Last year, the president of the Organization of Danish Medical Societies wrote a critical comment to Professor Peter Gøtzsche's tone of debate in another Danish newspaper, Berlingske Tidende.

We enclose an translation of that article, responding to other accusations against Danish doctors.

As professors and clinicians in psychiatry we are of course interested in providing the safest and most efficient treatment possible to our patients. We are also open to critique and regularly discuss in both media, patients fora and scientific fora, to share the challenges of psychiatric treatment and try to improve treatment results.

However, we are very surprised with the critique from professor Gøtzsche. We find some of his points to be irrelevant, since it is common knowledge to all psychiatrists that psychotropic medication should be used with caution /and a stern focus on the balance between effect and side effects. Other points we find to be incorrect and misleading.

Our question is now: How do you, with the specific knowledge you have on antipsychotics and antidepressants respectively, evaluate Peter Gøtzsche's statements as presented in his article.

We would be very pleased if you would take up the task of making such an evaluation.

Sincerely

Thomas Middelboe, MD, PhD, president, Danish Psychiatric Association  
Merete Nordentoft, MD, PhD, Dr Med Sci, professor in psychiatry at University of Copenhagen  
Poul Videbech, MD, Dr Med Sci, professor in psychiatry at University of Aarhus  
Lars Vedel Kessing, MD, Dr Med Sci, professor in psychiatry at University of Copenhagen

E.

**Peter Gøtzsche on the fringe**

BERLINGSKE

04.09.2013 Page 26

By Peter Schwarz

Chairman of the Organization of Danish Medical Societies (LVS)

Evidence is one of the most prominent concepts of the medical profession. It means that you have the grounds to support, to prove, the claims that you make.

In his book »Deadly Medicines and Organised Crime«, Professor Peter C. Gøtzsche thoroughly offends this principle by claiming that doctors are criminals and comparing the pharmaceutical industry to the mob to the extent that it borders on dishonesty.

Firstly, the evidence that Peter Gøtzsche uses to tarnish the Danish medical profession is outdated. Secondly, it largely comes from sources outside Denmark. It is bizarre how someone who calls himself an expert in the area apparently has failed to keep track of how the area has developed in the past two decades, which have seen



fundamental changes in relation to openness and collaborative relations between physician researchers and the pharmaceutical industry.

As with any other profession, we can never get rid of all black sheep, but the scenery has changed completely, which also explains the figures showing that more doctors are cooperating with the industry. This is because practically any form of contact between the parties, for safety's sake, is recorded to promote the greatest possible transparency of collaborative relationships. Certainly, it is a beneficial and positive development that has been driven by collaboration agreements between the medical profession and the industry, which is soon to be followed by rules established by the Danish Government.

Like Professor Peter Gøtzsche, you would need a peculiar mentality to see this as proof that Danish doctors are increasingly becoming the industry's henchmen.

DESPITE the unsubstantiated allegations of dishonesty that once again cloud over doctors and the industry, it is a fact that the collaborative relationship is honest, beneficial and essential. It is difficult to imagine what other group would be capable of taking over research and development activities as well as regulatory control of new pharmaceuticals. It is integrated in the medical profession. It is also a fact that this collaborative relationship has helped position the Danish pharmaceutical industry among the most successful in the world and generates many of the new jobs that we so desperately need.

But we must obviously safeguard ethical aspects. At the Organization of Danish Medical Societies, our ethical code provides that whenever a patient consults a doctor, whether in general practice, in hospital settings or in a private clinic, the patient must feel confident that the choice of treatment is made only out of concern for him or her, i.e. not influenced by collaborative ties to manufacturers or sales representatives of certain pharmaceuticals or medical devices, public or private organisations or interest groups.

At the Organization of Danish Medical Societies, we believe that working with third-party collaborators in a wide sense is a natural and integral part of medical practice. It is both essential and natural that there is a collaborative relationship between the industry which develops and manufactures our medicine and medical devices and the medical profession which tests and ensures the quality and economic rationale of new treatments.

**F.**

Dear Professor Middelboe

Kind regards from Nottingham, UK.

I am sorry in the delay in reply – I did not see the e-mail for a while as the 'cszg' email is one we use as a repository for the Group and do not check it daily.

Part of our delay – we think this is a situation where joint response is indicated – is to work out how best to respond to statements such as these. Speaking for myself – there seem to be distinct issues. One is the issue of Prof Gøtzsche's opinion and interpretation of the evidence about drugs in psychiatry – depression and schizophrenia in particular. Another is his opinion and interpretation of the evidence about the influence of industry in our sub-speciality. Yet another is his clinical advice to people on these drugs.....and then there is the issue of his position of authority in the Cochrane organisation and how he is using this position.

I feel – and have been saying this for a long time – that Prof Gøtzsche's opinions/interpretations are his own and he is entitled to hold them. I do not feel that he is entitled to proselytise using his – or letting others use his – affiliation with the Cochrane Collaboration. It would seem important that the Cochrane Collaboration distances itself from such opinions and that it is Prof Gøtzsche and Prof Gøtzsche alone who is personally liable for the consequences of his opinions/interpretations and his subsequent advice.

Please do not feel we are ignoring your e-mail – quite the opposite. We are working to produce the clearest and most effective response – this should follow shortly.

Yours sincerely

Clive Adams

**G.**

Friday 14 March 2014



Dear Peter,

The recent publicity around your book, 'Deadly Medicines and Organised Crime: How big pharma has corrupted healthcare', has highlighted important issues that we consider are important in relation to the reputation and good governance of Cochrane.

In your book and in a video based on the book ([www.madinamerica.com/2013/11/peter-gotzsche-2/](http://www.madinamerica.com/2013/11/peter-gotzsche-2/)) you appear to be advocating that everyone taking psychotropic medication should stop taking their medication: that they would be healthier if they ceased to take the medicine. You are aware that this is a highly charged and sensitive issue. We have had representations from individuals and organisations asking whether Cochrane supports your views on this matter. Both the Co-ordinating Editors of the Cochrane Schizophrenia Group and the Depression, Anxiety and Neurosis group have expressed concerns that individuals acting on your apparent recommendation would potentially be putting themselves and others at risk.

Obviously you are entitled to interpret the evidence as you see fit, but this episode indicates the responsibility on us all to be completely transparent about when we are presenting our own personal opinions (whether based on evidence or not), and when we are speaking on behalf of the Collaboration. It might have been clear to you that you were representing your own views but a casual viewer of the video, seeing the caption "co-founder of the Cochrane Collaboration" would be entitled to think that you were speaking on our behalf. They may find further justification for this conclusion when they visit the website of the Nordic Cochrane Centre and see 'Deadly Medicines and Organised Crime', and other books that you have written in your personal capacity, highlighted on the website with links to further information and how to purchase it.

In your message to Mark and Lisa of 18<sup>th</sup> February you recognised that: 'As a Cochrane director, I am an ambassador for the Collaboration'. This is indeed the case and therefore there is a duty on all those in senior positions within the Collaboration to ensure that a clear distinction is made at all times between those views and positions of Cochrane as an organisation, and those held individually by each of us. We consider that in this episode you have not been sufficiently explicit that this book, and the views expressed within it, are your own and do not in any way represent the views of Cochrane – which by its nature would seek only to present evidence and would not in any circumstance present such a didactic recommendation. In so doing you have exposed Cochrane to real reputational risk and, indeed, potentially litigation should any patient or individual come to harm as a consequence of acting on your statements.

Cochrane's Steering Group has recognised the need to establish a more formalised policy and position-making process within the organisation that would result both in a small set of explicit advocacy and policy positions the organisation holds and campaigns for; and a set of guidelines to ensure Collaborators have clear guidance on when and how to differentiate between speaking on and representing these positions, and any other personal views they may hold. We expect this process to be completed and in place this year; and that this will help us build our profile, protect our reputation, manage organisational risk and assist Cochrane collaborators in their external advocacy and communications work. This policy will apply to everyone in the Collaboration.

In the meantime, we would ask that in future you will ensure that when you are presenting your personal views it is clear to any reader or listener that they are your own and cannot be considered to represent the views of the Collaboration; and that you remove from the Nordic Cochrane Centre website references and links to the book. We will also reply to those who have approached us to make clear that the views expressed in 'Deadly Medicine and Organised Crime' are not those of Cochrane.

With our grateful thanks and best wishes,

**H.**

Dear Mark,

I understand your concerns and have removed the link to the book on our website. I also agree that we should be clear about when we are presenting our own personal opinions (whether based on evidence or not), and when we are speaking on behalf of the Collaboration.

I would like to clarify a few issues.



You write that in my book and the video I appear to be advocating that "everyone taking psychotropic medication should stop taking their medication; that they would be healthier if they ceased to take the medicine." This is a misunderstanding. I haven't advocated this anywhere. I am therefore surprised that the Co-ordinating Editors of the Cochrane Schizophrenia Group and the Depression, Anxiety and Neurosis group have expressed concerns that individuals acting on my apparent recommendation would potentially be putting themselves and others at risk. I note that your wording is cautious, "apparent recommendation". What I do write in my book is that it is important to taper off drugs slowly. In the video I say that the drugs should be given in as short periods as possible, without specifying how the drugs should be stopped, as my advice was of a general nature, obviously directed towards health professionals, as patients cannot prescribe drugs for themselves.

Concerning the video, I didn't know that the film-maker would also say something about the Cochrane Collaboration, as I just gave the interview and wasn't involved with the production of the video. Even so, I consider it self-evident that I spoke on behalf of myself. I don't think I have exposed Cochrane to potential litigation, as the responsibility for the book is clearly mine alone, and as the video was about the book, any potential litigation should be directed to me.

best wishes

Peter

I.

Dear Professor Middelboe,

Further to Professor Adams' note to you of 13th March, on behalf of the Co-Chairs of Cochrane, Professors Jeremy Grimshaw and Lisa Bero, our Editor-in-Chief, Dr David Tovey, and myself, I'm pleased to attach a letter from us in response to the issues you raised concerning views expressed by Professor Gøtzsche. You are at liberty to share this letter with colleagues and anybody seeking clarification about whether Professor Gøtzsche's views on psychotropic medication represent those held by Cochrane.

Please do not hesitate to contact me if you require any further information.

Letter:

Thursday 20<sup>th</sup> March 2014

Dear Professors Middelboe, Nordentoft, Videbech & Kessing,

Thank you for your letter of March 5<sup>th</sup> that was sent to the Co-ordinating Editors of the Cochrane Schizophrenia and Depression-Anxiety Review Groups. We are writing to you as the leaders of The Cochrane Collaboration and on behalf of both Professor Adams and Dr Churchill.

Cochrane is treating very seriously the points you raise concerning comments made by Professor Gøtzsche on the use of psychotropic medication. I want to state explicitly that these are not the views of The Cochrane Collaboration on this issue and we do not endorse them.

Professor Gøtzsche was therefore speaking only for himself in the articles and video featured on the websites you highlighted - part of the promotional work he conducted surrounding publication of his book, 'Deadly Medicines and Organised Crime: How big pharma has corrupted healthcare'. The views contained in this book are also not the views of Cochrane. We have therefore written to Professor Gøtzsche asking him to make clear in all future communications to any reader or listener that these views on psychotropic medication are his own and cannot be considered to represent the views of the Collaboration.

This incident has highlighted to us that Cochrane needs to establish a more formalised policy and position-making process that would result both in a small set of explicit advocacy and policy positions the organisation holds and campaigns for; and a set of guidelines to ensure the 31,000 Cochrane Collaborators around the world have clear



guidance on how to differentiate when they are representing these positions, and when they speak on any other personal views they may hold. We expect this process to be completed and in place this year.

We are as committed as you are to 'providing the safest and most efficient treatment possible' to patients around the world; and we welcome your openness to critique and to 'share the challenges of psychiatric treatment and try to improve patient results'. We will be asking Professor Gøtzsche to share with Cochrane colleagues any unpublished data that is not yet publicly available, so that it can be incorporated objectively into new or existing Cochrane Systematic Reviews as appropriate; and then be seen and evaluated by you and other specialists in the field.

Once again, our grateful thanks for drawing our attention to this issue.

Yours sincerely,

**J.**

Dr. Dalsgaard,

My apologies that it has taken me so long to reply to your message of 20th January. Let me assure you that this delay is not an indication of the seriousness with which we treated your letter. After internal discussions I am writing back to you on behalf of the Co-Chairs of Cochrane, Professors Jeremy Grimshaw and Lisa Bero, and our Editor-in-Chief, Dr David Tovey, as well as myself.

Cochrane is concerned by the points you raise concerning comments made by Professor Gøtzsche on the use of psychotropic medication. I want to state explicitly that these are not the views of The Cochrane Collaboration on this issue and we do not endorse them.

Professor Gøtzsche was therefore speaking only for himself in the article you highlighted – and many other articles, videos and interviews he took part in as part of the promotional work he conducted surrounding publication of his book, 'Deadly Medicines and Organised Crime: How big pharma has corrupted healthcare'. I think it is obvious in most of these media pieces that the comments made by Professor Gøtzsche relate to publication of his book, sales of which any reader or viewer would assume profit the author. Nevertheless, I would like to stress that the views contained in this book are also not the views of Cochrane. We have therefore written to Professor Gøtzsche asking him to make clear in all future communications to any reader or listener that these views on psychotropic medication are his own and cannot be considered to represent the views of the Collaboration. In addition, we have asked him to take down references to his book on the Nordic Cochrane Centre website, to ensure that there is no possible misinterpretation or misperception about Cochrane endorsing the book in any way.

This incident has highlighted to us that Cochrane needs to establish a more formalised policy and position-making process that would result both in a small set of explicit advocacy and policy positions the organisation holds and campaigns for; and a set of guidelines to ensure the 31,000 Cochrane Collaborators around the world have clear guidance on how to differentiate when they are representing these positions, and when they speak on any other personal views they may hold. We expect this process to be completed and in place this year.

Once again, our grateful thanks for drawing our attention to this issue.

**K.**

Dear Mark

Thank you for your letter of 20th March. I was pleased to receive your clear answer to our questions, and I have circulated the letter amongst the Danish professors in psychiatry and child and adolescent psychiatry.

Your letter arrived in the midst of the Danish Psychiatric Association Annual Meeting, and therefore I read it aloud at the general assembly. Obviously, the debate has been occupying Danish psychiatrists, and your answer was received with great appreciation.

In the board of Danish Psychiatric Association, we have decided to share the statements and decisions outlined in your letter with a journalist working close to the Danish government, in order to hopefully make politicians hopefully also patient organisations and patients aware how these statements are not an expression of views held by the



Cochrane Collaboration.

Best wishes

**Thomas Middelboe**

**L.**

Dear Peter,

Many thanks for your response to the letter; and your clarifications are well noted.

We wanted to share with you the letter that we sent last week to Professor Thomas Middelboe and others (see attached). Other people have also been sent similar letters in response to their requests for clarification. This morning Professor Middelboe wrote back to me as follows:

Dear Mark

Thank you for your letter of 20th March. I was pleased to receive your clear answer to our questions, and I have circulated the letter amongst the Danish professors in psychiatry and child and adolescent psychiatry.

Your letter arrived in the midst of the Danish Psychiatric Association Annual Meeting, and therefore I read it aloud at the general assembly. Obviously, the debate has been occupying Danish psychiatrists, and your answer was received with great appreciation.

In the board of Danish Psychiatric Association, we have decided to share the statements and decisions outlined in your letter with a journalist working close to the Danish government, in order to hopefully make politicians hopefully also patient organisations and patients aware how these statements are not an expression of views held by the Cochrane Collaboration.

Best wishes

**Thomas Middelboe**

Consultant in psychiatry, MD, ph.d.

President, Danish Psychiatric Association (DPA)

This journalist, Ole Toft, contacted us for a comment today, and I understand that Helen Morton communicated this to you so that we were transparent and you were not blindsided by any response we may give. Our comment to the journalist was:

"As Director of the Nordic Cochrane Centre, Peter Gøtzsche is a highly respected and experienced researcher. Cochrane has no issue with Peter's expertise in interpreting the evidence as he sees it. However, we all need to understand the importance of clarity when distinguishing between speaking on one's own behalf and speaking to represent the Collaboration, a network of 31,000. On the issue of Peter's book, his interpretation of the evidence does not reflect a Cochrane perspective, and indeed the Collaboration would not normally make clinical recommendations, being primarily a research organisation. There are a wide range of views within the Cochrane Collaboration, of which Peter's is one."

Best Wishes,

Mark

**M.**

Dear Professor Middelboe,

Thank you for this note, and we're pleased that our letter clarified the situation for you and your colleagues.

Our press office has been working hard to deal with calls surrounding Mr. Toft's piece but I was concerned that the actual correspondence between us was available on the newspaper's website (see:



<http://www.altinget.dk/artikel/goetzsches-organisation-tager-afstand-fra-hans-psykiatri-udtalelser>).

I'm aware I said in my e-mail to you that, 'You are at liberty to share this letter with colleagues and anybody seeking clarification about whether Professor Gøtzsche's views on psychotropic medication represent those held by Cochrane', but I did not envisage that your original letter and our response would be posted on a Danish newspaper's website. Cochrane as an organisation is committed to openness and transparency, but I think this is somewhat inappropriate. If you can ask Mr Toft to remove the letters I would appreciate it, though – of course – we stand by the statements made in our letter to you which have been fairly reported on.

With my grateful thanks and best wishes,





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Professor Peter C. Gøtzsche  
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Friday 14 March 2014

Dear Peter

The recent publicity around your book, 'Deadly Medicines and Organised Crime: How big pharma has corrupted healthcare', has highlighted important issues that we consider are important in relation to the reputation and good governance of Cochrane.

In your book and in a video based on the book ([www.madinamerica.com/2013/11/peter-gotzsche-2/](http://www.madinamerica.com/2013/11/peter-gotzsche-2/)) you appear to be advocating that everyone taking psychotropic medication should stop taking their medication: that they would be healthier if they ceased to take the medicine. You are aware that this is a highly charged and sensitive issue. We have had representations from individuals and organisations asking whether Cochrane supports your views on this matter. Both the Co-ordinating Editors of the Cochrane Schizophrenia Group and the Depression, Anxiety and Neurosis group have expressed concerns that individuals acting on your apparent recommendation would potentially be putting themselves and others at risk.

Obviously you are entitled to interpret the evidence as you see fit, but this episode indicates the responsibility on us all to be completely transparent about when we are presenting our own personal opinions (whether based on evidence or not), and when we are speaking on behalf of the Collaboration. It might have been clear to you that you were representing your own views but a casual viewer of the video, seeing the caption "co-founder of the Cochrane Collaboration" would be entitled to think that you were speaking on our behalf. They may find further justification for this conclusion when they visit the website of the Nordic Cochrane Centre and see 'Deadly Medicines and Organised Crime', and other books that you have written in your personal capacity, highlighted on the website with links to further information and how to purchase it.

In your message to Mark and Lisa of 18<sup>th</sup> February you recognised that: 'As a Cochrane director, I am an ambassador for the Collaboration'. This is indeed the case and therefore there is a duty on all those in senior positions within the Collaboration to ensure that a clear distinction is made at all times between those views and positions of Cochrane as an organisation, and those held individually by each



of us. We consider that in this episode you have not been sufficiently explicit that this book, and the views expressed within it, are your own and do not in any way represent the views of Cochrane – which by its nature would seek only to present evidence and would not in any circumstance present such a didactic recommendation. In so doing you have exposed Cochrane to real reputational risk and, indeed, potentially litigation should any patient or individual come to harm as a consequence of acting on your statements.

Cochrane's Steering Group has recognised the need to establish a more formalised policy and position-making process within the organisation that would result both in a small set of explicit advocacy and policy positions the organisation holds and campaigns for; and a set of guidelines to ensure Collaborators have clear guidance on when and how to differentiate between speaking on and representing these positions, and any other personal views they may hold. We expect this process to be completed and in place this year; and that this will help us build our profile, protect our reputation, manage organisational risk and assist Cochrane collaborators in their external advocacy and communications work. This policy will apply to everyone in the Collaboration.

In the meantime, we would ask that in future you will ensure that when you are presenting your personal views it is clear to any reader or listener that they are your own and cannot be considered to represent the views of the Collaboration; and that you remove from the Nordic Cochrane Centre website references and links to the book. We will also reply to those who have approached us to make clear that the views expressed in 'Deadly Medicine and Organised Crime' are not those of Cochrane.

With our grateful thanks and best wishes,



Jeremy Grimshaw  
Co-Chair



Mark Wilson  
CEO



Lisa Bero  
Co-Chair



David Tovey  
Editor-in-Chief