Summary of issues related to the Governing Board of The Cochrane Collaboration (Registered Charity number: 1045921)

Current position 24th April 2018

The two Co-Chairs of Cochrane (Professor Martin Burton & Professor Cindy Farquhar) wrote an e-mail (Document A) with an attachment (Document B) outlining a proposal to resolve the current situation. Document B describes three issues that face the Charity (paras 1-3) and a proposal for a review process.

Mark Wilson CEO of Cochrane, has agreed to this ("I'm happy with this plan – and have no questions.") Peter Gøtzsche replied: "I am busy right now but a quick reply:
I disagree with your plan. The whole Governing Board will need to deal with this and it is my right to require this according to the Collaboration Agreement¹ Mark and I have entered a year ago.

I will come back with more comments when I have had time to think about this."

As at 24th April 2018, no further comments have been received.

Immediately preceding events

The Cochrane Governing Board² last met on 22nd and 23rd March 2018 in Lisbon.

Shortly before the meeting (on 15th March 2018) Mark Wilson sent an e-mail (Document C; refers also to E-mail number 1 and PDF number 1) to Peter Gøtzsche relating to two issues (complaints) which had been brought to his attention.

On 19th March a third issue arose as Mark Wilson received an e-mail from Professor Anton Loonen from the Netherlands attaching "a confidential letter concerning my unfortunate experiences with the director of the Nordic Cochrane Centre". The letter is PDF number 2. This is also a complaint about Peter Gøtzsche.

The Board meeting in Lisbon took place in the context of a longer five-day meeting of the organisation at which all the players were present. Mark Wilson sought a face-to-face meeting with Peter Gøtzsche to discuss the above issues, and took with him Sarah Watson Cochranes Head of Finance & Core Services to take minutes. Peter brought with him Joerg Meerpohl (Director of Cochrane Germany, and also a Trustee) and Karsten Juhl Jørgensen, Deputy Director of the Nordic Cochrane Centre. Mark reported back to Professor Cindy Farquhar (my fellow Co-Chair and I) that the meeting had gone well and that Peter Gøtzsche had accepted that he had breached the Spokesperson policy. Minutes were taken of this meeting; I do not know if they are yet agreed by all present.

¹ This is attached as Appendix A

² Formerly called (and referred to in some documents as the Steering Group, but always the Board of Trustees of the Charity)

Peter Gøtzsche had around this time expressed a wish to discuss the Spokesperson policy in "Board only time" at the end of the formal Board Meeting scheduled for a few days later. There was no appetite to do so amongst some of the trustees and Professor Farquhar and I thought it unwise to do so, as we were not certain that all the issue related to Peter's alleged breach had been resolved. We had had no formal communication to that effect.

I therefore spoke to Peter Gøtzsche and asked him not to raise this in the "Board only" time. During this conversation I indicated that I understood he had acknowledged a recent breach of the Spokesperson policy. He vehemently denied having agreed this.

This new information suggested that there was a disagreement – at least between Peter Gøtzsche and Mark Wilson – about what had been said and agreed in their face-to-face meeting. This led to a confrontation between Mark Wilson and Peter Gøtzsche to which Joerg Meerpohl was also privy.

To recap; at this point the only trustees who knew that Peter Gøtzsche was the subject of an enquiry into several complaints being undertaken (appropriately) by the CEO as his "line manager" were Professor Farquhar, Joerg Meerpohl and myself. Professor Farquhar and I very strongly wished <u>not</u> to involve anybody else, as we knew that the Board may at some future point need to consider the matter. Indeed we expected that Mark Wilson was likely to have to bring the matters to the Co-Chairs and thence to the Board for resolution.

Events in Board only time at the end of the Board meeting on 28th March 2018

During this time, Joerg Meerpohl brought up the fact that (a) he had witnessed the strong words and disagreement between Peter Gøtzsche and Mark Wilson described above, and (b) that Peter was the subject of several complaints. He was very critical of Mark Wilson's behaviour and this drew comments from other Trustees. He eventually said he was not making a formal complaint but by that point all the Trustees had heard his version of events.

At this point Peter Gøtzsche started to relate his story also.

As you might expect, as Chair, I sought immediately to stop any and all discussion about all of these matters. Other Trustees with significant and relevant governance experience supported this, but it was difficult to stop Peter Gøtzsche speaking. We felt it was critical for as little to be said as possible.

Nonetheless, we did manage to end the "Board only" time but only after the Trustees had heard about the existence of the complaints about Peter Gøtzsche, perhaps a few details of them (but not many) and a serious allegation about the behaviour of Mark Wilson as CEO.

Events after the Lisbon meeting

Minutes of the face-to-face meeting described above were produced (Document D). Mark Wilson then wrote to Professor Farquhar and I (Document E) on 28th March 2018. This e-mail refers to several things which can be provided to you in due course. These relate to

³ It is a Board convention to have some "Board only" (that is, Trustees only) time at the end and/or beginning of Board meetings. This is not considered as part of the formal Board meeting. Private (to the Trustees) notes are taken but no formal minutes. These notes tend to be brief.

previous instances when issues were raised about Peter Gøtzsche's actions (his first Board Meeting as a Trustee was in Geneva, 5^{th} to 7^{th} April 2017, so at the time of these other events he was not a Trustee).

Two key documents are PDF number 3 and PDF number 4. These are letters written to Peter Gøtzsche on 14^{th} March 2014 and 9^{th} June 2015 jointly by the Co-Chairs at the time, the CEO and the Editor-in-Chief relating to things that Peter had said and done that they felt might be problematic for the Charity. They are self-explanatory.

There is I believe an e-mail trail in which Peter agrees to act in accordance with the last of these letters. However, he has stated that he was "released" from the obligations therein, by agreement with the Board following a discussion in "Board only" time in Geneva. Neither Professor Farquhar or I believe that that is true. Indeed, most (perhaps all) trustees would not have been aware of the letter or agreement so it is hard to see how they could agree to his being released from any such obligations.

Mark Wilson's e-mail to Peter Gøtzsche om 11th April 2018

The e-mail from Mark Wilson to Peter Gøtzsche of $11^{\rm th}$ April 2018 is Document F. It includes a number of attachments which are available but the contents of the key ones (Mark Wilson's draft replies to two complainants) are included as Documents I & J.

Peter Gøtzsche's e-mail to all the Trustees on 11th April 2018

Peter Gøtzsche wrote an e-mail (Document G) to all Trustees and Mark Wilson on 11th April with the subject line: "Mark Wilson has sent a very unpleasant email today threatening to close my centre". Professor Farquhar and I tried to encourage Trustees not to read or respond. Mark Wilson said "In my view this is an outrageous e-mail. I addressed the e-mail only to Peter as his line manager, so his response (without copying the Board) is unacceptable. It is also full of factual inaccuracies. Do you want me to forward you the e-mail (something I deliberately did not do in order to honour the process)?"

Another trustee (David Hammerstein) replied to all Trustees expressing a view sympathetic to Peter and including *inter alia* the statement "I am worried that the social perception of the independence of Cochrane could be tarnished by this action by its CEO".

Peter Gøtzsche's e-mail to all the Trustees on 16th April 2018

Peter Gøtzsche wrote another e-mail (Document H) to all Trustees and Mark Wilson on 16th April with the subject line: "Two complaints, from Torrey and Pottegård, to Mark Wilson". Several trustees replied asking Peter Gøtzsche not to send anything further and pointing out that it was not appropriate for them to see this material at this stage.

Peter Gøtzsche's e-mail to Mark Wilson 18th April 2018

Peter Gøtzsche replied to Mark Wilson's e-mail of 11th April and this is attached as Document K.

Mark Wilson's e-mail to *Peter Gøtzsche on 20th April 2018* This is Document L This concludes the events up to the point outlined in the opening paragraphs of this document.

Background information

 Cochrane (the Charity) employees the CEO, Senior Management team and staff based largely in London.

The brand "Cochrane" is associated with the Charity and the main output The Cochrane

Library (https://betacochranelibrary.com/)

• There are many "entities" around the world that carry the Cochrane name. For example "Cochrane UK" – the centre supporting Cochrane activities in the UK, the "Nordic Cochrane Centre" supporting Cochrane activities in Nordic countries, Cochrane Brazil, Cochrane Australia, etc.. There are also Cochrane Review Groups that oversee work in certain disease areas; for example "Cochrane Heart", "Cochrane Lung Cancer".

 These entities are funded locally and <u>not</u> by the Charity, and employ there own staff via host institutions. For example: Cochrane UK is funded by the UK's National Institute for Health research (NIHR) and hosted by the Oxford University Hospitals NHS Trust.

Details of the funding of the Nordic Cochrane Centre can be found here:

http://nordic.cochrane.org/funding

- Until recently, there were no written agreements or memoranda of understanding between the various groups using the Cochrane name, and the Charity. This is slowly being rectified and some "Collaboration Agreements" have already been signed.
- In the past, Cochrane entities have behaved as if they were members of a loose federation of autonomous bodies.
- Strong control by the Board, CEO and his staff, designed to optimize governance and protect the Charity and its reputation, is seen as unnecessary, heavy-handed interference by some in the organisation. Not least because the entities do not get any direct funding from the Charity. They do however consume the charities resources.
- Of the 35,000+ people involved in Cochrane, a proportion are volunteers. Many others receive some payment, from someone, to do Cochrane work, be that work directly for an entity, or grant funding to do Cochrane work.
- The Cochrane Collaboration (now referred to as Cochrane) started in 1993
- Initially there was no CEO and the first CEO stepped down in 2012 after 9 years
- Mark Wilson is the organisation's second CEO and started in November 2012
- Peter Gøtzsche is a founder member of Cochrane. He established the Nordic Cochrane
 Centre in 1993 and has led it since then
- Peter Gøtzsche became a professor of Clinical Research Design and Analysis at the University of Copenhagen in 2010

Document A: E-mail to Mark Wilson and Peter Gøtzsche, 20th April 2018

Please treat the contents of this letter and the attachment as Confidential

Dear Peter and Mark,

I write on behalf of Cindy and myself as Co-Chairs of Cochrane.

Over the last few years there have been a number of discussions involving Mark, Peter, the Co-Chairs, the Governing Board, members of the Senior Management Team and others in leadership positions in Cochrane. There has been (and continues to be) disagreement about what was said, what was meant, what was understood and what was agreed, on several occasions. As you both know, there is currently a disagreement relating to a number of formal complaints.

In the best interests of the Charity, the situation needs to be resolved and we need to learn from it.

There was a need to identify a process that is fair to both of you. We believe it should be one that allows fresh, independent eyes to look at the facts, identify differences of opinion, and make recommendations. As a result, we intend to proceed as outlined in the attached document. This document outlines the plan that we will adopt. At the heart of this is the fact that the review will not be undertaken by any of the Board members, but rather by an independent person who will provide a confidential report to the Board. We are sending it to you now to give you the opportunity to ask questions about it.

We felt it was important that you both had sight of this plan before anybody else, in order that you could raise any questions that you might have. We will be writing to the other Board members today simply to tell them that we have written to you with a plan, so that they are reassured that we are making progress. We would like to be able to write to them again, with a copy of the plan, next week. As a result, it would be helpful to receive any questions you may have as soon as possible.

With kind regards

Martin

Professor Martin Burton MA DM FRCS | Director

Document B: Proposal for Review

Introduction

- 1. Mark Wilson, the CEO, states that he believes Peter Gøtzsche, as Director, Nordic Cochrane Centre:
 - a. has failed to follow the Collaboration's Spokesperson policy on more than one occasion
 - b. has behaved incorrectly by involving the Board in matters that should normally be dealt with initially by him, as CEO and the individual to whom Centre Directors are accountable, before being escalated to the Board.
- 2. Peter Gøtzsche has complained directly to the Board about the actions of Mark Wilson in his role as CEO.
- 3. The Co-Chairs, Cindy Farquar and Martin Burton, note that public statements made by Peter Gøtzsche have sometimes resulted in discussions involving Peter, the Co-Chairs, the Governing Board, the CEO and others in leadership positions in Cochrane. These relate to whether or not the statements (a) express Peter's own views, or (b) represent the views of Cochrane. They believe it is in the best interest of Cochrane fully to understand the nature of these discussions, why they have arisen and what might be done to prevent the need for these in the future.

Proposal

- 4. In order to be fair to all parties involved in this issue, Cochrane will engage an appropriately qualified, independent individual, from outside the Charity, to undertake a review and to prepare a confidential report for the Board.
- 5. The remit of the review will be to:
 - consider the matters outlined in paragraphs 1 to 3 above, including a determination of the facts and identifying differences of opinion,
 - b. address any immediate issues related to these matters and
 - c. consider how issues of organisational governance and policy may have impacted upon events
- 6. The reviewer will make recommendations to the Board as they see fit, including (but not necessarily limited to) recommendations
 - a. for resolving any issues identified, and
 - b. for avoiding or minimising any future problems,
 - c. for guarding the reputation and optimizing the governance of the Charity.
- 7. The report will be confidential to the Board and will be considered by the Board in a formal (minuted) but closed (in camera) session.

Document C: E-mail to Peter Gøtzsche from Mark Wilson, 15th March 2018

Subject line: Responding to a formal complaint and continuing use of Cochrane branding

Attachments: E-Mail number 1, PDF number 1

Dear Peter,

I need to raise two issues with you that have cropped up in the last two weeks.

- 1. We have received what is now a formal complaint (see the string below) from Dr Fuller Torrey about a letter you sent to him dated 16th February (find attached)⁴ on Cochrane-headed notepaper and signed by you as Director of the Nordic Cochrane Centre, which appears to conflate your views with those of Cochrane in relation to a request for data on the subject of a schizophrenia study; and you highlighting your involvement in the 'Hearing Voices Network'. As you know, we don't have the formal complaint process completed yet, but I would like to ask you for your response to Dr Torrey's complaint as part of my management of it. Although Dr Torrey does not refer to it, I do want to discuss with you my concerns that the letter is not compliant with Cochrane's Spokesperson Policy (http://community.cochrane.org/organizational-info/resources/policies/spokesperson-policy), and the additional requirements you are obliged to follow as set out in my message to you of 6th January 2017 (attached again, for your ease of reference)⁵.
- 2. The second issue is the tweet from Anton Pottegard of 8th March (https://twitter.com/Pottegard/status/971859440310812674). As you know, we responded to it in order to neutralize the situation as quickly as possible, which was successful. We are not addressing this question as anything other than that: a question posed to us that we need to answer in some form. I am the 'senior leadership' that is referred to and I would like to discuss this with you. Again, I have concerns given that you are referred to as 'from the Cochrane Centre' and that registration for the seminar is to a Cochrane address.

I was travelling last week in Asia and Europe but wanted to send you the details of the complaint so that you have time to consider it; and I think it would be more fruitful to meet and discuss this next week in Lisbon. Are you free over lunch on either Tuesday (during the Centre Directors Board meeting) or Wednesday (just before the strategic session)? Let me know which would work best for you; and I look forward to seeing you in Lisbon on Monday afternoon when I will join the Board for the second half of its development day.

Safe travels and best wishes,

Mark

Mark G. Wilson Chief Executive Officer

⁴ PDF number 1

⁵ E-mail number 1



E <u>mwilson@cochrane.org</u> T +44 (0)207 183 7503 S markg.wilson Cochrane, St Albans House, 57-59 Haymarket, London SW1Y 4QX, UK www.cochrane.org

Trusted evidence. Informed decisions. Better health.

From: Fuller Torrey [mailto:torreyf@stanleyresearch.org]

Sent: 02 March 2018 13:21

To: Mark Wilson < MWilson@cochrane.org>

Subject: RE: Cochrane credibility

Dear Mr. Wilson, Thank you for your reply. You are correct and you may share my complaint with anyone. Professor Gotzsche is representing himself as both representing Cochrane and also as the "defender" of the Hearing Voices Network (HVN). The latter insists that auditory hallucinations are merely part of a normal spectrum, are caused by childhood trauma and parental neglect, and according to its own published studies encourages individuals who are taking antipsychotics for their schizophrenia to stop taking their medication. It is very difficult to imagine how anyone with these views could possibly be objective regarding a Cochrane study of antipsychotics, thus impugning your credibility which is your most important asset. Sincerely, E. Fuller Torrey MD

From: Mark Wilson [mailto:MWilson@cochrane.org]

Sent: Friday, March 02, 2018 4:01 AM

To: Fuller Torrey

Subject: Re: Cochrane credibility

Dear Dr. Torrey,

Thank you for your message. Professor Gøtzsche is an experienced researcher and he is the Director of the Nordic Cochrane Centre. In the light of similar confusion about whether his personal views represented those of Cochrane, the organization's senior leadership issued a statement in September 2015 (http://www.cochrane.org/news/statement-cochrane) which continues to apply. As an organization we stand by the evidence we publish in the Cochrane Library and Cochrane.org, and by the policy positions and statements we make. We accept there is always a danger that researchers and clinicians, policymakers, the media or the general public could conflate the views of individual Cochrane collaborators or the different parts of what is a global and dispersed organization as those of Cochrane itself. We therefore insist that Professor Gøtzsche and all Cochrane office holders must abide by Cochrane's Spokesperson Policy (http://community.cochrane.org/organizational-info/resources/policies/spokesperson-policy), which specifically allows Cochrane collaborators freedom to engage in scientific debate whilst protecting Cochrane's reputation and avoiding the type of conflation that you point to. As we made clear in the

statement, Professor Gøtzsche "is free to interpret the evidence as he sees fit. He has an obligation, however, to distinguish sufficiently in public between his own research and that of Cochrane – the organization to which he belongs. There is a wide range of views within Cochrane on the benefits and harms of psychiatric drugs, of which Professor Gøtzsche's is one."

I am interpreting your message of yesterday as a formal complaint that Professor Gøtzsche has not made this distinction clear in this case. If that is correct, I will need to share it with Professor Gøtzsche in order for him to have the opportunity to respond to it. Can you please confirm, therefore, that you have no objections to me doing this.

Yours sincerely,

Mark G. Wilson Chief Executive Officer



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Trusted evidence. Informed decisions. Better health. From: Fuller Torrey <torreyf@stanleyresearch.org>

Date: Thursday, 1 March 2018 16:23

To: Mark Wilson < MWilson@cochrane.org>

Subject: Cochrane credibility

Subject. Cocmane credibinty

Mark G. Wilson CEO, Cochrane Collaboration

Dear Mr. Wilson,

The Cochrane Collaboration has made important contributions to improving medical research and treatment trials. Its credibility rests upon the assumption of objectivity among those who are evaluating the research. Such objectivity appears to be very much in doubt for Dr. Peter C. Gotzsche who identifies himself as the Director of the Nordic Cochrane Center (attached). He also identifies himself as the "Protector of the Hearing Voices Network in Denmark". This organization promotes the belief that (1) auditory hallucinations are merely one end of a normal behavioral spectrum, thus casting doubt on whether schizophrenia actually exists as a disease, (2) hearing voices are caused by trauma in childhood, for which there is no solid evidence. Given such clear lack of objectivity, I personally would not find any Cochrane publication on mental illness to be credible. I thought it important to make you aware of the problem.

With best wishes, E. Fuller Torrey, M.D. Associate Director for Research Stanley Medical Research Institute

Document D: Minutes of face-to-face Meeting held between Mark Wilson & Peter Gotzsche, Lisbon, 21st March 2018

Attendees: Mark Wilson (MGW), Peter Gotzsche (PG), Joerg Meerpohl (MP), Karsten Juhl (KJ) & Sarah Watson (Minutes)

(MGW) There are three issues to discuss – two flagged last week and a third relating to a letter received yesterday. The purpose of the meeting is to listen to allow information gathering and ensure we have both sides of the story, I have some concerns relating to spokesperson policy and to commitments made before by you relating to this.

(PG) — I have many enemies and they have now learnt that they can create trouble by contacting MGW and complaining. I have sent a draft reply to MGW this week outlining why I see no problem at all with the first two cases and with the third case I can't see a problem either.

MGW confirmed no draft replies seen – PG confirmed he had sent this three days ago and agreed to resend.

Action: PG to resend his reply [Note: This was not done but MGW found PG's original message]

(PG) The easy one relates to the seminar – registration is through an email to Cochrane DK – as the work is being done from the Cochrane Centre. We don't have another email address to send this from, a troublemaker in Denmark is making it into a problem. It isn't.

On the second issue I wrote to funders in various countries, saying people were dying very young and the researchers didn't want to say how many died or how. This was after I wrote to authors who wouldn't reply. One guy was related to a funder, he is known as the bastard. Everyone in USA knows he is a bastard, he complains to the institute of mental health, he complains to everyone. My request was asking to get information on deaths out of authors; and they have an ethical commitment to share this data.

On the third issue a clinical pharma person in Holland acted as an expert witness for the prosecution in a murder case involving medical malpractice. The defendant had conditions that would indicate a serious mental condition and the psychiatrist did nothing. The other guy asked for distribution to the court in Dutch and asked for PG to be examined as mentally unstable. This person is now in further trouble, and his Dean plans to discipline him. I complained to the Dutch medical association who wouldn't deal with this as I am Danish and not Dutch. A lawyer in Holland has been so outraged by this treatment that he works pro bono to assist in disciplining this person.

The expert assessment was written on Cochrane letterhead, signed by me as Cochrane Director, and the court approved it as expert testimony. This was needed to demonstrate my credentials. Everyone knows the assessment in this murder case is personal not Cochrane's.

In using Cochrane's letterhead, Lisa Bero said to Karsten and Peter that the Board may decide they can't use Nordic Cochrane Centre letterhead.

PG then asked if this proposal was discussed with MGW, and MGW confirmed the position he communicated to PG on 6/1/17 has not changed.

(PG) Explained in Geneva he was sent outside the door as the issue about him was discussed. The Board unanimously rejected Lisa Bero's proposal, she didn't do well from this. What was decided, and it was written down, that PG could use Cochrane letterheads and Karsten can use this also as long as they abide by the Spokesperson Policy: so this is

what he does and has done asking for missing number of deaths and as an expert witness. This is personal and not part of Cochrane.

(PG) We need to stop this you and I so that this doesn't continue with complaints to MGW. Writing a response to the three people would stop the avenue for taking PG down by complaining to MGW. Please can you take down the message of 2015 that refers to the article in the Daily Mail. The journalist wanted to have this in, it is three years ago so could be taken down as this is referred to when people try to explain how Cochrane distances themselves from PG which means that when excellent research is published, it appears his own organisation doesn't agree with him.

(KJ) The statement doesn't refer to the clarification sent out later on.

(PG) No that was 2014 and still they only refer to the original one in 2014, no one refers to the clarification: that is how people behave, they cite selectively. I fully understand your (MGW) position, you need to not deal with issues like this and not waste time on this so we need to find a way through this.

(MGW) Thanks for those points. The issue is I am an Executive Officer: I apply rules and positions that the Board institute. I am still applying them as I have not been given any indication from the Board or Co-Chairs of a change to the situation I set out to you on 6/1/17 that you are bound to follow two separate things.

First Cochrane's Spokesperson policy, which like everyone else in the organization, you are obliged to follow. It states: "If you are expressing a view about Cochrane-related issues you should state clearly that you are speaking in a personal (or other professional) capacity unless you have been expressly authorized to represent Cochrane"; and "If you have multiple affiliations or positions, you may choose not to use your Cochrane affiliation if this may cause confusion. If you do use your Cochrane affiliation along with another title, or if Cochrane is the only title or affiliation you have, then it is incumbent upon you to state unequivocally and clearly that the views are your own and not those of Cochrane". It is my view that in two instances: first, the complaint [from Dr. Fuller Torrey]; and second, the letter with instructions to the lawyer [regarding Professor Loonen] that you have not explicitly done this. You have not said 'these are my personal views', nor that you are representing only yourself personally — but you have framed it as correspondence from the Nordic Cochrane Centre with the Centre's address, asking a lawyer to represent you in this way.

Second: as a result of the issues we thrashed out at the time of the problems in 2014 you were subsequently instructed by the Co-Chairs in a letter to you of 9th June 2015 that "you no longer use your title of 'Director, Nordic Cochrane Centre' when you are writing and speaking on projects that are not Cochrane reviews or methodology. Instead, we ask that you use your alternate title of 'Professor of Clinical Research Design and Analysis, University of Copenhagen." In an exercise of good faith, and at Peter's request in a meeting with David and me in London on 7th July that year, we agreed to amend that requirement: "that Peter could, when presenting scholarly methods research papers, use his 'Director, Nordic Cochrane Centre' title; but because of the continued controversy in relation to his views on this particular issue, when he writes or speaks about psychiatric drugs [or about the treatment of schizophrenia] in other ways or in other fora he should use his University of Copenhagen title." It was also agreed at that meeting that: "on other issues and cases that might cause confusion about whether his views are official Cochrane views, Peter's use of the 'Director, Nordic Cochrane Centre' affiliation would still be OK *if* [stress in the original] there is a clear disclaimer about these being his own views."

You will recall it took three-and-a-half months to agree the minutes from this July 2015 meeting which were signed off by all parties. Since then, in relation to you I have been working to the Spokesperson Policy and the subsequent agreements made. Nobody since then, no Board member, Co-Chair or anyone else has told me this has changed or is different and should be applied differently in any respect.

My immediate reaction is that in two of the three instances you have breached both the Spokesperson Policy and the additional commitments you made.

(PG) I was told at the Centre Directors meeting that there can't be separate rules for me and not everyone else. In Geneva, the Board agreed that I could use the letterhead and Cochrane affiliation as long as I make it clear these are my personal views. This means the additional agreements have been annulled and MGW has not been informed. The Minutes from the 'Board only' time say this.

(JM) We didn't explicitly discuss the case, but the Board discussed and agreed it doesn't make sense to prevent people using the letterhead but they should abide by the Spokesperson Policy and make it clear explicitly when it is not a Cochrane view. There are Minutes from the 'Board only' time to confirm. Maybe we can find a way to resolve the three concrete cases which would make me happy. I can fully understand Mark's position: it is his job to protect the brand.

(MGW) I don't doubt that there are people out to get you Peter. What I would say is the one thing that concerns me is you are failing to help Cochrane by not distancing your personal views and work in this area and instead allowing them to be presented as the views and position of Cochrane. That is damaging, and continues to be potentially damaging, and we can't allow this to continue. So, I need you to help me by not sending letters on Cochrane Nordic letterhead; by signing in your capacity as Professor of University of Copenhagen and not sending documents in legal processes - albeit as part of a professional complaints process - in the name of the Nordic Cochrane Centre putting Cochrane in a perilous situation.

You are right this is a distraction which is irritating. There are many different views held across Cochrane by different people on this issue. You know that, but that is irrelevant. Others don't act in this way. We require everyone to make their position known as a personal view when speaking as an individual. We are not picking on you, this is not a campaign against you. We absolutely need to have you honour these undertakings and make the distinction clear.

(PG) I have written many times as PG with no affiliation. I advised on a concrete issue, and I felt I did all I could. Nothing has Nordic Cochrane Centre on the seminar invitation: what should we write other than send an email to the Nordic Cochrane centre.

(MGW) I agree – but if there is an alternate email address that you can use that would make life easier for anyone after you to say clearly there is a distinction and it has nothing to do officially with Cochrane so someone can't claim it does. I'm ok with this.

(PG) This is to do with Cochrane. It's very relevant to give a seminar on this subject and relevant for Cochrane's work.

(MGW) This is an area you are well known for campaigning about and getting involved with others, and as a result you are a target. It's a reality that we know and therefore have to manage. The key part of this is that you have to manage the potential conflict and I have to ensure the organisation is not damaged in any form by personal views or involvement in campaigns. The tweet about the seminar was a question, and I'm dealing with it as such. We

replied as soon as possible to the tweet in order to kill the issue and stop it getting any traction. I'm fine about that question and don't think there's any case to answer. However, I do think you have broken both the Spokesperson Policy and additional undertakings that I am still applying in relation to the other two issues. How we deal with that in terms of what we do and how we move forward is the next thing to be done. (PG) The Spokesperson Policy says it applies only if it is a Cochrane issue – it is not breaking the Spokesperson Policy, it is my genuine conviction that I did not break any policy I asked could we get information. Should we not ask the question?

(MGW) I agree you can ask the question: but you are making a personal request for information like any other researcher - as a University researcher not representing Cochrane. There is a requirement in the Spokesperson Policy if you use your Cochrane affiliation alone or with others then you must state that the views are your own and not those of Cochrane. In your letter you wrote, and I quote: "I write to you to ask for your help in getting very important data out in the open ..." but then follow with, "We believe that the research community and the patients have a right to know how many people died in this study and why ... we expect your organisation to obtain this information ... Anything short of this would be unethical in our view, and we are convinced that patients with psychotic disorders agree with us (I am Protector for the Hearing Voices Network in Denmark)" [emphasis added] and signed by you as Director of the Nordic Cochrane Centre. I think any fair reading of this letter on Nordic Cochrane Centre letterhead is that this is not just a request, or a statement about fair dealing, or a view held by you as an individual, but instead of the Nordic Cochrane Centre. You have signed it as that and this implies it is the organisation's view.

(PG) - Karsten can't use anything else as it wouldn't impress anyone, he has no other affiliation to use.

(MGW) An application can be made by any individual as a request for personal research that I am conducting. Just make it clear it is not Cochrane requiring a response.

(PG) I am sorry I am slow, I understand.

(JM) Requesting data is what we do within Cochrane. It is often unclear at any point in time if that will lead to a Cochrane review or not. This is borderline: we shouldn't seek to blame this as being unethical. There is a policy and it is fair to say data should be available from a trial.

(MGW) In that case you could state the request for information and offer no view, then you could stay within bounds. I don't disagree with what you were requesting, only the lack of an explicit statement that these are your personal views. This is a continuation of past examples, which we have discussed, and through this you are not upholding your commitment given to state it was your personal view.

(PG) I fully admit I have difficulty understanding deep in my heart, but I will try and see what I can do. Could you help me by taking down the 2015 message, that would help me? (MGW) I will take that and speak to the Co-Chairs about this, to be honest you have not made it easy in relation to this situation right now. The statement was made because of your continued refusal to honour the commitments you had made in relation to the issue, which were agreed in order to avoid further sanctions and results which it is not appropriate to go into right now. As we move forward we would need to have firm confidence that you accept the Policy; you will apply the Policy; and you will go the extra mile knowing the background in relation to you personally. That, then, helps us to be in a position to say PG is

making every possible attempt, in all forums, all media, to make the distinction between his personal views and Cochrane.

(PG) I sent my responses to you three days ago.

(MGW) I have not seen it.

(PG) I also sent it to Jo Anthony and spoke to her yesterday. I have so much different thinking to these people I can't believe how low these funders have acted and they have responded completely differently, the Norwegian Research Council responded to let you know they will ask the first author to respond. You understand this is very difficult as I write a lot of letters.

(MGW) Peter, the default position for communications on this issue must be: I don't go anywhere near using the Nordic Cochrane Centre affiliation; I sign myself as PG, a private citizen, or Professor, University of Copenhagen. We do not want to give anyone out there the opportunity to misinterpret something that you send or say as being Cochrane's view. To be honest, many people, including myself and David, enormously value your intellect, contribution to Cochrane and research record. We don't want a situation where you are disavowed by the organisation. That is not good for the organisation or for you. The statement on the website was not the first port of call, as you know, and this is not a situation where we are out to get you.

(PG) Should I send you a draft on how to respond?

(MGW) No. I need to go away and have a think in relation to Dr Torrey's complaint. I can reiterate that this was a request for information which was not made on behalf of Cochrane but was made by you personally. I am happy to send you a draft of what the reply would be, and if at that point you would like any edits you can propose something, but we may not agree on the content of any final message I send.

(JM) We should state that researchers working within Cochrane as individuals often request data. This is a matter of fact statement as it is a standard process within systematic reviews. (MGW) OK. But the views expressed were not those of Cochrane and should not have been included.

(PG) I accept that, but we have to be careful the bastards can't come back and need to close the message to prevent a repeat.

(MGW) On the other issue, the linking of a Cochrane Centre to a legal process that you did not inform me about is hugely problematic, signing yourself and the Nordic Cochrane Centre as parties to a legal process in the Netherlands is not acceptable.

(PG) If I had not used the letterhead I would still have to explain my expertise, which means that people could still have complained because I used the name Cochrane.

(MW) No, I don't think so.

(PG) The expert report is mine: it can't be anyone else's.

(MGW) But by using your affiliation it is obvious that the expertise that you are asked for, and paid for if letter is right, is in part because of your links to or association with Cochrane.

(PG) It's my professional background.

(MGW) You must use your title as Professor at the University of Copenhagen.

(PG) - I get it now, professional Doctor of Science and that is it.

(MGW) Yes, thank you.

(JM) – Are other people aware of this. I think Gerd is also being an expert witness in a legal case, so he may be using his Cochrane affiliation to do this.

(MGW) If he is then he shouldn't – but that is a separate issue. The Spokesperson Policy is critical to apply in such a case and it is easy to do. In the first question when a lawyer asks

PG or anyone else to explain what qualifies you to be in court as an expert witness you explain you have a long relevant experience including being director of the Nordic Cochrane Centre but you want to stress all your views are personal. That's it, that is all that is needed then everything flows from this point. Any possibility of misperception is dealt with. We are all responsible for doing this. For example, I don't blog because I am CEO of Cochrane and people could misunderstand and think that my opinions are those of Cochrane. The Spokesperson Policy says that the higher up the hierarchy you go the more important your responsibility becomes. Centre Directors have a pre-eminent responsibility in this regard, so I will take away all your comments and the shared emails and have a think. I will draft a response to the last letter [from Professor Loonen] as my answers to all of the questions in his letter are 'No', which I will share with you, again for your comment but I will be responsible for what I send.

(PG) OK.

(MGW) Peter we can't go through this again. You have to promise me you will behave in this way. We are in the last chance saloon, now.

(PG) I could make my own logo for a Nordic Centre for Evidence, set up a foundation for myself - it is easy.

(MGW) That would be a good thing to do because it makes the distinction. I don't know the situation with the University if you were to do that - whether they would be happy - but there is no question the deeper and further the blue water between your views on this issue and Cochrane the better.

(PG) As a private person I can create charity I don't need to ask anyone. (MGW) Good – thank you.

Document E: E-mail from Mark Wilson to Martin Burton and Cindy Farquhar 28th March 2018

Dear Cindy and Martin,

I'm continuing the process of dealing with the three issues around Peter's potential breach of the Spokesperson Policy. I wanted to update you and check with you two important issues that cropped up in our meeting in Lisbon a week ago (find attached if you would like to see them)⁶:

The first is Peter's statement that the Governing Board in Geneva in April 2017 during its 'Board only' session the Board agreed that Peter was no longer subject to the special and additional requirements the Cochrane leadership (Lisa, Cindy, David and me) had required in addition to the responsibilities of the Spokesperson Policy. These additional requirements he is subject to (and that he had accepted) were part of the agreements made with him in relation to previous public statements on the benefits and harms of psychiatric drugs, including his attack on David as Editor in Chief and Cochrane Co-Eds in the BMJ in 2015. He claimed last Wednesday that these were no longer in place and that this had been recorded as a decision of the 'Board only' session. However, I've never been informed of this, nor seen any record of it. Can you please confirm to me whether this was agreed by the Board last April; whether there is a record of it in place; and - if not – can you confirm that these additional requirements were in place at the time covered by the three complaints (2016 until now), including since last April. I appreciate it may be difficult to remember and complicated to get your head around the details and - just in case - please find attached the message in January 2017 that I wrote to Peter (with attachments) stating clearly the expectations that I was holding him to account for (and why). As far as I am concerned, this is what I am continuing to enforce, unless you confirm something different as a result of the Board meeting last April.

The second is for your response (and David's) to the request from Peter in the meeting last week to take down the formal statement Cochrane leadership issued in September 2015 about Peter's views: http://www.cochrane.org/news/statement-cochrane. I said that I would do this. My own view is that – regardless of the findings and any action taken in relation to the latest complaints – this statement should remain in place archived on the Cochrane.org website as a matter of public record.

I have asked Rob and Lotty to investigate and provide more details about the status and nature of the complaint in the Regional Disciplinary Court for Healthcare in the Netherlands. Yesterday he confirmed that neither he nor Lotty had been informed by Peter that he was intervening in a Dutch criminal trial, nor that he was making a complaint in the Netherlands about a Dutch doctor. This afternoon he has provided an update (see attached). David, this morning, wrote that: "I'm intrigued to know what the nature of Peter's complaint against Professor Loonen is. If the complaint is based on shallow ground, the reputation risk to Cochrane is high. However, if he has reported on some malpractice, and he is correct that does change things. In the UK doctors are expected to report on malpractice in others – to the extent that not doing so may be used as evidence of their own malpractice. In this case, the question of whether Peter is acting reasonably seems important irrespective of whether or not he has breached the spokesperson issue." I could ask Peter to provide documentation related to the complaint that he has raised. Do you want me to do that? It seems to me that we need to see this before we write to Professor Loonen or to the professional Court in the Netherlands.

⁶ Document D above

Finally, I have also asked the Central Executive Team's in-house lawyer, Beth Collins, for her view. I have attached it if you want to see it. Her conclusion is unequivocal: "Clearly, Professor Gotzsche is responsible for stimulating debate in his field, encouraging academic rigour which Cochrane would never seek to discourage. However, conscious of the controversial nature of his contribution, I consider his breach of the Cochrane Spokesperson policy to be flagrant, exposing Cochrane to needless reputational risk, whether it be a perceived prejudice against the body of research purporting the benefits of psychiatric drugs, and the numerous leading academics who expound it, or the perception that Cochrane supports Professor Gotzsche action against Anton Loonen, by the academic community. I will not attempt to address the risk posed by Cochrane taking any action against Professor Gotzsche as I feel this is outside my remit."

Thanks for getting back to me with your responses. Just a reminder that from Thursday evening I'm away on vacation until Monday 9th April.

Best wishes,

Mark

Mark G. Wilson Chief Executive Officer



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Document F: E-mail from Mark Wilson to Peter Gøtzsche 11th April 2018

Dear Peter,

As you know, following my e-mails to you of 15^{th} and 20^{th} March (attached) and our meeting of 21^{st} March in Lisbon (Minutes attached), I have been considering three issues:

- 1. A formal complaint by E. Fuller Torrey from the Stanley Medical Research Institute (of 1st and 2nd March) that you failed to make the necessary distinction between your personal academic views and those of Cochrane as an organisation related to a request on 16th February for unpublished data on the TIPS clinical study relating to the benefits and harms of psychiatric drugs.
- 2. A Tweet from Anton Pottergard (8th March) accusing you of illegitimately using your "Cochrane affiliation when inviting for deprescribing symposium, alongside [the International Institute for Psychiatric Drug Withdrawal]... and cochrane-email for signup." In our immediate response to Mr. Pottergard we tweeted: "Cochrane takes seriously all feedback from our community, and we have shared your comments with senior leadership for further action. If you would like to submit a formal statement directly, please use our website: http://cochrane.org/contact." No further response has been received.
- 3. A letter from Professor Anton Loonen (19th March) asking a series of questions related to your involvement in a 2016 criminal case in the Netherlands, a subsequent media report in a Dutch newspaper, and your filing of a complaint against him in the Regional Disciplinary Court for Healthcare at Eindhoven in January 2018.

I've carefully considered the documentation related to these complaints, your explanations and responses during our meeting in Lisbon, and concluded that you have breached both Cochrane's Spokesperson Policy (and the additional requirements and undertakings you made in July 2015) in the letter to the Stanley Medical Research Institute (1), and your mandating of a Dutch attorney to submit a complaint against Professor Loonen with the Regional Disciplinary Court for Healthcare (3), but not in the flyer relating to the seminar held at the Hotel Nyborg Strand which was the subject of the tweet (2).

In case 1, through the use of Cochrane headed paper, the use of your name and title in the signature description at the bottom of the letter as Director of the Nordic Cochrane Centre, and the language used in the request for data (where consistent use of the words 'we' and 'our' would reasonably lead any reader to assume that the request is from the Nordic Cochrane Centre and the views expressed in the request are those of the NCC) you have failed to abide by the Cochrane Spokesperson Policy, which requires you to "state clearly that you are speaking in a personal or other professional capacity unless you have been expressly authorized to represent Cochrane ..."; and that: "If you do use your Cochrane affiliation along with another title ... then it is incumbent upon you to state unequivocally and clearly that the views are your own and not those of Cochrane. This cannot be implied, but must be stated explicitly."

In case 3, through the use of the Nordic Cochrane Centre's address (and not your own personal address) in the signed power of attorney to Dr Bijl to act on your behalf in the formal complaint to the Regional Disciplinary Court for Healthcare in Eindhoven you failed to abide by the same requirements of the Spokesperson Policy.

In case 2, though it would be preferred and helpful to use a non-Cochrane address in future for registration of seminars and meetings you organize relating to the use of psychiatric drugs, you did not use your Cochrane title, Cochrane logo or otherwise sufficiently associate Cochrane with the

event. However, the complaint highlights the need in such cases for you to make clear in future that the seminar/discussion is not an official Nordic Cochrane Centre event.

In cases 1 and 3 you also failed to adhere to the undertakings you made – and the additional requirements made of you – in July 2015 which were set out at that time and again on 6th January 2017 (you have my e-mail and attachments already). These required you: "... because of the continued controversy in relation to his views on this particular issue, when he writes or speaks about psychiatric drugs in other ways or in other fora he should use his University of Copenhagen title ["Professor of Clinical Research Design and Analysis, University of Copenhagen"]" Both cases concern that issue, and you therefore had a clear and unambiguous obligation to use this title and make clear the distinction between your academic research in this area and your role as Director of the Cochrane Nordic Cochrane Centre. This you did not do. In our meeting in Lisbon you said that the Cochrane Governing Board in Geneva in April 2017 explicitly rescinded these requirements and agreements made by the Cochrane leadership in 2015 during a 'Board only' session that I was not attending. I have checked with the Board Co-Chairs to clarify this and they say that such a decision was not taken by the Board at that time; the Minute of the Board-only session does not record such a decision; and I have not been instructed by the Co-Chairs or the Board no longer to apply these requirements to you. They are, therefore, still in force.

Having consulted Rob Scholten and Lotty Hooft, Co-Directors of Cochrane Netherlands, I am also concerned that though you became involved in a Dutch criminal case and then a medical practitioner dispute using your Nordic Cochrane Centre affiliation, you did not inform them or warn them of your actions, and possible publicity or impact on Cochrane in the Netherlands. Whilst this is not a requirement of the Spokesperson (or any other existing) Cochrane Policy, I would have expected that you would have abided by the guidance in that policy related to involvements with the media of other countries, given that this was such a more serious intervention in the Netherlands than a simple interview with a Dutch journalist. The Policy points out that: "it is common courtesy and best practice, if you are speaking in a country or have been interviewed by media within a country with a Cochrane presence — and are referring to Cochrane — to inform the Director responsible for Cochrane activities in that country at the earliest convenience".

As we discussed in Lisbon (see the attached Minutes), my conclusion is that in future you must abide at all times by the original requirement established by Cochrane's leadership in its letter of 9th June 2015, namely, that you "no longer use your title of 'Director, Nordic Cochrane Centre' when you are writing and speaking on projects that are not Cochrane reviews or methodology. Instead, we ask that you use your alternate title of 'Professor of Clinical Research Design and Analysis, University of Copenhagen'"; and that you ensure you abide at all times in the future with the obligations in Cochrane's Spokesperson Policy (and specifically those set out above). Failure to do so will result in disciplinary action, which may include – as the June 2015 letter signaled – the de-registration of the Nordic Cochrane Centre. We discussed at the close of our meeting in Lisbon that setting up your own separate, personal organization (be it a foundation, Institute or other legal body) from which to research and campaign on these issues may help you to clarify your roles, research and activities far more easily.

I have attached my intended responses to Dr Torrey and to Mr Pottergard, as promised in Lisbon. If you have any comments you would like to make about them before I send them later this week then you are welcome to send those comments to me. I have already considered the points made in your draft responses you sent me on 18thMarch in formulating these replies.

However, I am not able to finalize a response to Professor Loonen because I am not yet in a position to answer all of the questions in his letter. In relation to that dispute, therefore, can you please let me know the answers to the following questions:

- a. Did you submit your expert opinion in the Dutch criminal trial "on the company stationary of the Nordic Cochrane Centre ... signed ... as follows: 'Peter C Gotzsche, Professor, DrMedSci, MSc, Director of the Nordic Cochrane Centre, Rigshospitalet'? (https://emea01.safelinks.protection.outlook.com/?url=https%3A%2F%2Ftranslate.google.co.uk%2Ftranslate%3Fhl%3Den%26sl%3Dnl%26u%3Dhttps%3A%2F%2Fuitspraken.rechtspraak.nl%2Finziendocument%253Fid%253DECLl%3ANL%3ARBGEL%3A2016%3A1715%26prev%3Dsearch&data=02%7C01%7CMWilson%40cochrane.org%7C9324e4049748439e67b308d594bd1602%7Cb6c2e21e4db74533916398c1451c1caa%7C0%7C0%7C636578462211145502&sdata=wd1DWMIQMi1hVINsiKZELpU4oatZ5z9ytblKDqbJ8tl%3D&reserved=0)
- b. Did you receive payment for the expert medical legal report you gave in the criminal case; and if you did, was it received by you personally or did you pass it to your employer, the University of Copenhagen?
- c. Did you share Professor Loonen's confidential expert opinion with the *De Volkskrant* newspaper?

Thank you for providing answers to these questions. Can I ask you to send me your replies within seven days (by 18th April), and I'll then be able to revert back to you with any final conclusions, then finalize a reply to Professor Loonen and close these issues off. I will then raise with the Co-Chairs and David your request to remove the statement by the Cochrane leadership of 18th September 2015 from the Cochrane website (http://www.cochrane.org/news/statement-cochrane).

Please do not hesitate to call me if you would like to discuss any of these points in more detail.

Best wishes,

Mark.

Mark G. Wilson Chief Executive Officer



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Document G: E-mail from Peter Gøtzsche to all Trustees and Mark Wilson 11th April 2018

Subject line: Mark Wilson has sent a very unpleasant email today threatening to close my centre

Our CEO Mark Wilson sent an email to me today, on 11 April, of 13,504 words that takes up 42 pages when transferred into a Word document, with 10 attachments. In it, he claims that I have broken the Spokesperson policy. A psychiatrist complained about me to Mark on 1 March. After having had six weeks to think about it, Mark sent me this email, which I received at 2.22 p.m. today while I was very busy working on something else, with a deadline.

Mark wants me to respond to his allegations during the next two days because he wants to reply to the complainant during this time. This is not due process. I am totally occupied the next two days and cannot meet Mark's extremely short deadline. Danish TV is filming us at the centre all day tomorrow, a bit ironically, considering the complaint, because they are very impressed with our work related to helping psychiatric patients, and Friday I shall be in Stockholm and lecture.

Most importantly, it was decided at the Governing Board only time on 23 March in Lisboa where we discussed the Spokesperson policy and issues related to it, that Mark's allegations and my reply would need to be considered by the Board before Mark takes action, if any is required.

I therefore remind the Board about this decision and at the same time ask Mark to respect the Board's decision. I shall respond as quickly as I can, which means next week.

Mark, in his long email, threatens to deregister my centre, if I fail to comply with the Spokesperson policy (and many other requirements, which are specific for me and do not apply to anyone else in Cochrane). I find this very disturbing. I firmly believe I comply with the policy in relation to this psychiatrist's complaint and there cannot be separate rules for me that do not apply to others in Cochrane. Finally, it is totally out of proportion to threaten me with closing my centre, which you will see when you see my reply to Mark's allegations.

I copy Mark on this boardprivate email.

Document H: E-mail from Peter Gøtzsche to all Trustees and Mark Wilson 16th April 2018

Subject line: Two complaints, from Torrey and Pottegård, to Mark Wilson

Attachments: Document I, Document J [both below]

To the Governing Board of the Cochrane Collaboration cc CEO Mark Wilson

Please see my mail from 11 April below. I attach Mark Wilson's two draft replies, with my comments inserted (and also the drafts without my comments for reference). I also attach the letter I wrote to the Stanley Institute and the ad for our seminar on withdrawal of psychiatric drugs.

I look forward to hearing the Board's views on these matters.

bw

Peter

Document I: Document created by Peter Gøtzsche adding comments to Mark Wilson's draft reply to Torrey's complaint

Peter's comments to Mark's draft reply to Torrey are in italics

Marks's draft from 11 April 2018:

Response to Dr. Torrey:

Dear Dr. Torrey,

I am responding to your message of 1st March, my reply of 2nd March, and your confirmation on the same date that you wanted Cochrane to consider your grievance as a formal complaint against Professor Peter Gøtzsche, which is that in his request for the Stanley Medical Research Institute to provide unpublished data on the TIPS clinical study relating to the benefits and harms of psychiatric drugs he failed to make the necessary distinction clear between his personal academic views and those of Cochrane as an organisation.

I have investigated the issues surrounding your complaint, including sharing our correspondence with Professor Gøtzsche and discussing it with him. My conclusions are as follows:

Cochrane believes unequivocally in the need for open and transparent data from clinical trials in order to promote best science and ensure the highest possible standards of synthesized evidence are generated from the trials. The request from Professor Gøtzsche was therefore a legitimate one. Even though he was not making this request as part of the research for a Cochrane Systematic Review, Cochrane authors often have to request unpublished data from clinical trials and we would encourage you to publish all the clinical trial data you have in a register that is available preferably publicly but at least on demand to legitimate researchers.

Professor Gøtzsche did not make sufficiently clear in this case that his request for data from the TIPS trial was for his personal research projects as the Professor of Clinical Research Design and Analysis at the University of Copenhagen.

Peter's comment: None of this is correct. The research projects we carry out at the Nordic Cochrane Centre are not personal research projects. And the project is not related to my professorship at the University of Copenhagen; it is part of our research portfolio in psychiatry at our centre, which consists of Cochrane reviews in psychiatry as well as other research in psychiatry. These activities have nothing to do with my professorship, which, ironically, is in reality a Cochrane professorship, which I have earned through my many years of working as a Cochrane director.

His use of official Nordic Cochrane Centre stationary and the signature using his affiliation as Director of the Nordic Cochrane Centre in the request was an error.

Peter's comment: It was certainly not an error. We always use our official Nordic Cochrane Centre stationary when we write letters, and I am also entitled to describe myself as Director of the Nordic Cochrane Centre. This was confirmed at the Governing Board only time in Genève, and if I didn't do this, people would raise questions and would even think I was no longer the Director of the Nordic Cochrane Centre.

The data request was not an official Cochrane one; it was not specifically related to Cochrane business or editorial matters;

Peter's comment: Most people I know of who work in Cochrane centres do other research than just writing Cochrane reviews, so our work cannot be divided up in this way; in fact, we believe that everything we do is relevant for the Cochrane objectives.

and the views expressed and the association with the 'Hearing Voices Network in Denmark' in the request are not those of Cochrane, but the personal views and associations of Professor Gøtzsche alone.

Peter's comment: There are no views expressed in my letter to the Stanley Institute that would not be shared by most people in Cochrane and they are certainly shared by everyone who works at the Nordic Cochrane Centre. In Mark's 11 April email to me, of 13,504 words that takes up 42 pages when transferred into a Word document, with 9 attachments, he demonstrates himself that I did not break the Spokesperson policy with my letter to the Stanley Institute. Mark wrote to me:

"In case 1, through the use of Cochrane headed paper, the use of your name and title in the signature description at the bottom of the letter as Director of the Nordic Cochrane Centre, and the language used in the request for data (where consistent use of the words 'we' and 'our' would reasonably lead any reader to assume that the request is from the Nordic Cochrane Centre and the views expressed in the request are those of the NCC) you have failed to abide by the Cochrane Spokesperson Policy, which requires you to "state clearly that you are speaking in a personal or other professional capacity unless you have been expressly authorized to represent Cochrane ; and that: "If you do use your Cochrane affiliation along with another title then it is incumbent upon you to state unequivocally and clearly that the views are your own and not those of Cochrane. This cannot be implied, but must be stated explicitly.""

There cannot be any problem, as Mark himself acknowledges that it is clear that the request comes from the Nordic Cochrane Centre, of which I am the director. I am of course entitled to authorize myself to speak on behalf of my centre. In fact, the Spokesperson policy states: "In a specific country or region, the spokesperson will be the Director of the Cochrane Centre." Furthermore, any views I expressed in my letter are shared by my researchers. Apart from this, I am convinced that any views expressed in this letter are shared by Cochrane researchers in general, as the letter is about getting access to data about number of deaths and causes of deaths.

I cannot see either that it can be a problem that I write in my letter that I am the protector of the Hearing Voices Network in Denmark. Cochrane is about helping patients and I am proud

that this network wanted to have me as their protector. Further, there are no personal views involved in my being the protector. I am not obliged to agree with everyone in the network, and I do not agree with everyone.

Back to the text in Mark's draft letter to Torrey:

I apologize for any confusion in this regard.

Peter's comment: There is absolutely no need to apologize and Cochrane should not apologize. Reading Torrey's emails to Mark, it is clear that he is the one who should apologize. His comments about the people he as a psychiatrist is supposed to take care of are disdainful and arrogant, see below.

As we have made clear many times – and as I reiterated in my message to you of 2nd March - there are a wide range of views within Cochrane on the benefits and harms of psychiatric drugs, of which Professor Gøtzsche's is one. He has undertaken to use his affiliation as Professor of Clinical Research Design and Analysis at the University of Copenhagen in his work on this subject in future;

Peter's comment: I have stated clearly, e.g. at the Centre Directors' meeting in Seoul, that there cannot be separate rules for me and other rules for everyone else in Cochrane. Furthermore, the Board did not require this of me when it discussed the Spokesperson policy during the Board only time in Genève. In fact, the Board accepted that I use my letterhead also for non-Cochrane related matters. I have kept very detailed notes of what came out of this meeting and talked to several board members after the meeting who confirmed this.

and to ensure that he does not allow possible confusion to occur by adhering to Cochrane's Spokesperson Policy.

Peter's comment: There is no confusion. I did not violate this policy in relation to my letter to the Stanley Medical Research Institute, and it was addressed to this institute, not to Torrey. Torrey is not its Director. Ironically, in his email to me, Torrey undersigns himself as Associate Director of Research, the Stanley Medical Research Institute. I wonder whether his views in his emails are his own or whether they are also shared by the institute, particularly its director.

Torrey's remarks are outrageous. He wrote to Wilson on 1 March:

"The Cochrane Collaboration has made important contributions to improving medical research and treatment trials. Its credibility rests upon the assumption of objectivity among those who are evaluating the research. Such objectivity appears to be very much in doubt for Dr. Peter C. Gotzsche who identifies himself as the Director of the Nordic Cochrane Center (attached). He also identifies himself as the "Protector of the Hearing Voices Network in Denmark". This organization promotes the belief that (1) auditory hallucinations are merely one end of a normal behavioral spectrum, thus casting doubt on whether schizophrenia actually exists as a disease, (2) hearing voices are caused by trauma in childhood, for which there is no solid evidence. Given such clear lack of objectivity, I personally would not find any

Cochrane publication on mental illness to be credible. I thought it important to make you aware of the problem."

As Torrey knows absolutely nothing about my views on these issues, his remarks are non-sensical. And how can my objectivity be "very much in doubt" when Torrey does not know what my views are? Torrey gives no evidence for this. My letter to the Stanley Institute is a simple request for missing data. I merely ask for the number of deaths and details about the causes of death, which many other Cochrane researchers do. It has nothing to do with a lack of objectivity. And what should be wrong when I identify myself as the director of the Nordic Cochrane Centre? I am the director! What is particularly outrageous is Torrey's inappropriate, unfounded and insulting remarks about people who hear voices; those people Torrey, being a psychiatrist, is supposed to take care of and respect. And there IS solid evidence that psychosis is related to childhood traumas, with a clear dose-response relationship. Torrey draws the inappropriate conclusion that because I am protector of the Hearing Voices Network in Denmark, this means that he does not find "any Cochrane publication on mental illness to be credible". This is about as absurd as it can get. A complete non-sequitur.

The Hearing Voices Network in Denmark has this comment to Torrey's views:

"The Danish Hearing Voices Network would like to issue a statement with regards to E. Fuller Torrey's complaints against Professor Peter Gøtzsche. Furthermore we take issue with Torrey's attempts to discredit the Hearing Voices Movement so as to add leverage in his attempt to discredit Professor Peter Gøtzsche.

The Hearing Voices Movement exists in 33 countries and the Danish Hearing Voices Network has existed since 2005. This year Intervoice (the international HVN) will be holding its 10th World Hearing Voices congress attended by people from all over the world. In 2016 the Danish HVN invited professor Peter Gøtzsche to be protector because of his pioneering work regarding psychiatric research. We are honored to have him as our protector.

The Danish HVN regards hearing voices and other unusual experiences as arising from adverse life events, typically trauma, such as sexual abuse, violence, poverty, neglect etc. The link between trauma and psychosis is supported by solid evidence and is dose related. Furthermore we view 'schizophrenia' as being a construction rather than an illness and the diagnosing of the 'illness' as an opinion. There are no biological markers corroborating its existence; something we regard as highly problematic.

Finally we believe that E. Fuller Torrey's comments to Mr. Wilson regarding Peter Gøtzsche being our protector to be bordering on the ridiculous when he attempts to discredit the whole of the Cochrane Institute by stating 'Given such clear lack of objectivity, I personally would not find any Cochrane publication on mental illness to be credible.'

The Danish HVN would ask that E. Fuller Torrey stops using the HVN as a platform to insult a respected professor along with the Cochrane Institute. We would also suggest that E. Fuller Torrey considers apologizing to the Danish HVN for his disrespectful remarks about voice hearers."

On 2 March, Torrey wrote to Mark that the Hearing Voices Network, according to its own published studies, "encourages individuals who are taking antipsychotics for their schizophrenia to stop taking their medication. It is very difficult to imagine how anyone with these views could possibly be objective regarding a Cochrane study of antipsychotics, thus impugning your credibility which is your most important asset."

This is another non-sequitur. Furthermore, it has been abundantly documented that many people improve when they come off their antipsychotic drug and that the risk of permanent and serious brain damage is dose related, which is another reason why people should not be

treated for many years with antipsychotics. These facts are well-known and have been documented by the psychiatrists themselves.

My additional comments

Mark Wilson has not respected the Governing Board's clearly expressed views in Genève that the person complained about should become involved before any action is taken; otherwise, it is not due process. Mark did not respect it in Genève and the minutes from the Board meeting were misleading, e.g. there was a statement that all material sent by the complainant did not necessarily have to be shared with the person complained about. Two Board members, Gerald Gartlehner and myself, therefore had their own comments inserted into the minutes:

Post-hoc notes on this item:

Co Chairs. When the droft minutes were circulated to the Board for comment, members contributed to a lengthy discussion by email about item 13.2. The Co Chairs revised item 13.2 based on the email discussion of the Board. The final circuites, with the revised item 13.2, were then sent to the Board for a vote for approval. Aithough the version of 13.2 minuted above received majority approval by the Board members, and is therefore the official record, the following two Board members asked for their disagreement with item 13.2 to be recorded in the minutes.

Peter C. Gatzsche Several Board members have pointed out that the minutes are misleading in relation to item 13.2 Edid not raise a question about myself but about how complaints about seniar people in Cochrone should be addressed by the CEO and the co-chairs, it was not agreed that the complaint should not to be disseminated to the media, posted on blogs, social media, etc. In my view, irrelevant complaints that have not been submitted in good laith should sometimes be exposed when the case has been dealt with, just like we expose cases of scientific froud. Several Board members have objected to this sentence. "The manager does not have to disclose all the material from the complainant with the individual." This was not discussed and not agreed to at the Board meeting, and it would not constitute a fair process. The sentence. "For example, emails between individuals of Cochrone who are investigating the complaint," was not discussed or agreed to either. The minutes say that we must follow the principles of the Cochrone's Charter of Good Management Practice. Several Board members have noticed that this was not discussed and not agreed to and that the Charter furthermore does not cover what we discussed at the Board meeting. We discussed the New Zealand Principles of Natural Justice and the Board was sympathetic to these

Gerold Gartlehner. GG states that he does not agree with the sentence. "The manager does not have to disclose all the material from the complainant with the individual", (think that this statement should be more nuanced and needs further clarify atton so that it cannot be used in a misleading way against Cachrone.

Mark did not respect the Board's view this time either. He sent a message to Torrey already on 2 March, and he did not inform me about the complaint before 15 March. In addition, Mark's reply was inappropriate. Mark should have protected me against Torrey's utter nonsense, but instead he chose to attack me:

"thank you for your message. Professor Gøtzsche is an experienced researcher and he is the Director of the Nordic Cochrane Centre. In the light of similar confusion about whether his personal views represented those of Cochrane, the organization's senior leadership issued a statement in September 2015 (http://www.cochrane.org/news/statement-cochrane) which continues to apply. As an organization we stand by the evidence we publish in the Cochrane Library and Cochrane.org, and by the policy positions and statements we make. We accept there is always a danger that researchers and clinicians, policymakers, the media or the general public could conflate the views of individual Cochrane collaborators or the different parts of what is a global and dispersed organization as those of Cochrane itself. We therefore insist that Professor Gøtzsche and all Cochrane office holders must abide by

Cochrane's Spokesperson Policy (http://community.cochrane.org/organizational-info/resources/policies/spokesperson-policy), which specifically allows Cochrane collaborators freedom to engage in scientific debate whilst protecting Cochrane's reputation and avoiding the type of conflation that you point to. As we made clear in the statement, Professor Gøtzsche "is free to interpret the evidence as he sees fit. He has an obligation, however, to distinguish sufficiently in public between his own research and that of Cochrane the organization to which he belongs. There is a wide range of views within Cochrane on the benefits and harms of psychiatric drugs, of which Professor Gøtzsche's is one.

I am interpreting your message of yesterday as a formal complaint that Professor Gøtzsche has not made this distinction clear in this case. If that is correct, I will need to share it with Professor Gøtzsche in order for him to have the opportunity to respond to it. Can you please confirm, therefore, that you have no objections to me doing this."

Torrey confirmed on 2 March that it was an official complaint but as just noted, I did not hear from Mark before 15 March and then the damage had already been done. On 18 March, I sent a draft to Mark that he could use for Cochrane's response to Torrey. This draft made, it clear that Torrey's response to me was inadequate and that I have not broken the Spokesperson policy.

Finally, I believe it is a huge problem for due process in the Cochrane Collaboration that the same person, the CEO, is responsible for writing the policy; for investigating possible cases of violation of this policy; and for punishing people for alleged violations. In all our societies, we have separated these three functions in order to prevent injustice. But Mark Wilson handles all three, and he made it clear at our Board meeting in Genève that he didn't even find it necessary to involve the person complained about before he came up with his verdict. This must be changed. Furthermore, in contrast to criminal verdicts, there appears to be no expiry date for Mark's punishments.

As an example, a letter from 2015 is still up on the Cochrane website, although it is related to a newspaper article that year. In Lisboa, at a private meeting between Mark, me, Joerg and Karsten from my centre (whom I had invited as my bystanders), I asked Mark to take this letter down, which he did not promise to do, but said he needed to consult with the other three signatories (the co-chairs and David Tovey). This letter, and similar initiatives by Mark, is very damaging for our activities at the Nordic Cochrane Centre. About six weeks ago, professor in psychiatry, David Nutt from the UK, was on a lecture tour in New Zealand where he said that I had been kicked out of Cochrane. Many people say and write that the Cochrane leadership has denounced my views on psychiatric drugs and the drug industry, although the Cochrane leadership cannot have any "views" on these issues that carry more weight than those of a researcher who has studied these issues in great detail.

I hope this is clear.

Yours sincerely,

Mark Wilson

Document J: Document created by Peter Gøtzsche adding comments to Mark Wilson's draft reply to Anton Pottegård complaint

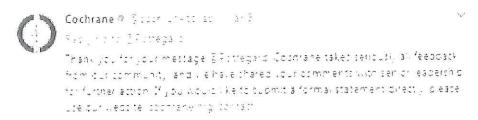
The complaint by Anton Pottegård, Denmark

This is what Pottegård tweeted on 8 March:

Amon Pottegåid

All You have asked Gotzsche to distinguish his personal views from that of Cochrane regarding psychotropics. Yet he uses Cochrane affiliation when inviting for deprescribing symposium, alongside E. W. ant (t) and cochrane-email for signup. Comments?

The next day, Jo Anthony from Mark Wilson's office responded, without consulting me, which I believe she should have done according to what the Board agreed on in Genève about our upcoming complaints procedure. I could have told Jo that Pottegård is a well-known troublemaker, as evidence by his earlier tweets, whom we should ignore. Twitter, Facebook and other social media have a tendency to be a forum where people write before they think. Such Twitter messages are used to defame people and the drug industry is known to use trolls for exactly this purpose. Furthermore, for many messages like the one above, the sender will quickly forget about it and will not even expect a reply. It is rather surprising that Mark Wilson devotes so much attention to one tweet and that Cochrane even suggests a formal complaint procedure based on a few lines, see Jo's response to Pottegård:



As far as I know, Pottegård has not submitted a formal complaint.

Mark's proposed response to Anton Pottegård

Message to his account (Twitter):

"There are a wide range of views within Cochrane on the benefits and harms of psychiatric drugs, of which Professor Gøtzsche's is one. The seminar was not an official Cochrane event, nor was it publicised as such. Professor Gøtzsche has agreed to use his affiliation as Professor of Clinical Research Design and Analysis at the University of Copenhagen in his work on this subject in future to avoid any potential confusion."

Peter's comment:

On 18 March, I sent this proposal for how Mark Wilson could respond to Pottegård:

"You wrote a tweet on 8 March about a seminar on psychiatric drug withdrawal professor Peter C Gøtzsche had arranged for psychiatrists after several of them had encouraged him to do so. In your tweet you wrote that Gøtzsche has been asked to distinguish his personal views from those of the Cochrane Collaboration regarding psychotropics.

There are no personal views in Gøtzsche's advertisement for the seminar.

You also wrote that Gøtzsche used his "Cochrane affiliation" when he invited people for the symposium and a Cochrane email for signup.

We cannot see any problems with this. The announcement for the seminar notes that the two lecturers work at the Nordic Cochrane Centre, which is correct, and that they work on a Cochrane review on withdrawal of psychiatric drugs, which is also correct. People were asked to register for the seminar on general@cochrane.dk, and we see no problems with this either. This email address is the one that is commonly used for all activities undertaken by the Nordic Cochrane Centre."

My comments on Mark Wilson's draft:

This text is irrelevant for the issue Pottegård raised: "There are a wide range of views within Cochrane on the benefits and harms of psychiatric drugs, of which Professor Gøtzsche's is one." This response by Mark Wilson can be used to discredit my viewpoint as a kind of disavowal by the Cochrane CEO while other points of view have never received this kind of authoritative comment.

This text is also irrelevant and furthermore not correct (see my reply to Mark related to the complaint from Torrey): "Professor Gøtzsche has agreed to use his affiliation as Professor of Clinical Research Design and Analysis at the University of Copenhagen in his work on this subject in future to avoid any potential confusion." I must be able to use my professional affiliation to the Nordic Cochrane Centre as its director because it is nominal and factually correct. Any prohibition of using this title would be an overt disassociation of Cochrane from my work within the context of a pluralistic, scientific debate. At no time do I infer that the whole Cochrane organization supports the results of my studies or views. This is very clear. Inversely, by his actions, the Cochrane CEO would then be indirectly taking a position by default in the debate on psychiatric drugs by publicly giving credit to individual complaints. This could be perceived by public opinion as giving in to pressure exerted by allies of the pharmaceutical industry concerning the overprescription of psyciatric medicines, also in relation to the complaint by Torrey.

The only bit that is relevant in Mark's draft is this one: "The seminar was not an official Cochrane event, nor was it publicised as such."

Document K: Peter Gøtzsche's reponses inserted into original 11th April 2018 e-mail from Mark Wilson

Peter Gøtzsche's comments in italics inserted 18 April 2014

Dear Peter,

As you know, following my e-mails to you of 15th and 20th March (attached) and our meeting of 21st March in Lisbon (Minutes attached), I have been considering three issues:

1. A formal complaint by E. Fuller Torrey from the Stanley Medical Research Institute (of 1st and 2nd March) that you failed to make the necessary distinction between your personal academic views and those of Cochrane as an organisation related to a request on 16th February for unpublished data on the TIPS clinical study relating to the benefits and harms of psychiatric drugs.

2. A Tweet from Anton Pottergard (8th March) accusing you of illegitimately using your "Cochrane affiliation when inviting for deprescribing symposium, alongside [the International Institute for Psychiatric Drug Withdrawal] and cochrane-email for signup. In our immediate response to Mr. Pottergard we tweeted: "Cochrane takes seriously all feedback from our community, and we have shared your comments with senior leadership for further action. If you would like to submit a formal statement directly, please use our website: http://cochrane.org/contact." No further response has been received.

3. A letter from Professor Anton Loonen (19th March) asking a series of questions related to your involvement in a 2016 criminal case in the Netherlands, a subsequent media report in a Dutch newspaper, and your filing of a complaint against him in the Regional Disciplinary Court for Healthcare at Eindhoven in January 2018.

I've carefully considered the documentation related to these complaints, your explanations and responses during our meeting in Lisbon, and concluded that you have breached both Cochrane's Spokesperson Policy (and the additional requirements and undertakings you made in July 2015) in the letter to the Stanley Medical Research Institute (1), and your mandating of a Dutch attorney to submit a complaint against Professor Loonen with the Regional Disciplinary Court for Healthcare (3), but not in the flyer relating to the seminar held at the Hotel Nyborg Strand which was the subject of the tweet (2).

In case 1, through the use of Cochrane headed paper, the use of your name and title in the signature description at the bottom of the letter as Director of the Nordic Cochrane Centre, and the language used in the request for data (where consistent use of the words 'we' and 'our' would reasonably lead any reader to assume that the request is from the Nordic Cochrane Centre and the views expressed in the request are those of the NCC) you have failed to abide by the Cochrane Spokesperson Policy, which requires you to "state clearly that you are speaking in a personal or other professional capacity unless you have been expressly authorized to represent Cochrane ;; and that: "If you do use your Cochrane affiliation along with another title then it is incumbent upon you to state unequivocally and clearly that the views are your own and not those of Cochrane. This cannot be implied, but must be stated explicitly."

I have not broken the Spokesperson policy and I am not obliged to adhere to any additional requirements. See my detailed reply about this in relation to Torrey sent to the Governing Board and you on 16 April. You acknowledge that it is clear that the request comes from the Nordic Cochrane Centre, of which I am the director, and I can of course authorize myself to speak on behalf of my centre. Apart from this, any views I expressed in my letter are shared by my researchers at the Centre. So there cannot be any problem.

In case 3, through the use of the Nordic Cochrane Centre's address (and not your own personal address) in the signed power of attorney to Dr Bijl to act on your behalf in the formal complaint to the Regional Disciplinary Court for Healthcare in Eindhoven you failed to abide by the same requirements of the Spokesperson Policy.

The Spokesperson policy is about ensuring that what individual people say or write is not misinterpreted as if it were official Cochrane policy. There can be no doubt in this case that I am addressing a lawyer on behalf of myself. I have therefore not broken the Spokesperson policy.

In case 2, though it would be preferred and helpful to use a non-Cochrane address in future for registration of seminars and meetings you organize relating to the use of psychiatric drugs, you did not use your Cochrane title, Cochrane logo or otherwise sufficiently associate Cochrane with the event. However, the complaint highlights the need in such cases for you to make clear in future that the seminar/discussion is not an official Nordic Cochrane Centre event.

I do not agree. As our advertisement clearly says, we do a Cochrane review on withdrawal of depression pills and the seminar was about this. It was therefore relevant for our Cochrane activities, among other things because we learn from our interactions with psychiatrists, which was the focus group for our seminar. Cochrane is also about advocacy and about helping patients, which is what we try to do.

In cases 1 and 3 you also failed to adhere to the undertakings you made and the addditional requirements made of you in July 2015 which were set out at that time and again on 6th January 2017 (you have my e-mail and attachments already). These required you: " because of the continued controversy inn relation to his views on this particular issue, when he writes or speaks about psychiatric drugs in other ways or in other fora he should use his University of Copenhagen title ["Professor of Clinical Research Design and Analysis, University of Copenhagen"]" Both cases concern that issue, and you therefore had a clear and unambiguous obligation to use this title and make clear the distinction between your academic research in this area and your role as Director of the Cochrane Nordic Cochrane Centre. This you did not do. In our meeting in Lisbon you said that the Cochrane Governing Board in Geneva in April 2017 explicitly rescinded these requirements and agreements made by the Cochrane leadership in 2015 during a 'Board only' session that I was not attending. I have checked with the Board Co-Chairs to clarify this and they say that such a decision was not taken by the Board at that time; the Minute of the Board-only session does not record such a decision; and I have not been instructed by the Co-Chairs or the Board no longer to apply these requirements to you. They are, therefore, still in force.

These provisions are clearly no longer in force. As I explained at the Centre directors' meeting in Seoul, there cannot be separate rules for me and other rules for everybody else in Cochrane. We should all abide by the same rules. This is what I told the Governing Board in Genève before I left the room and there was general agreement about this. Apart from this, my researchers, who also write articles about psychiatric drugs, cannot use any other affiliation than the Nordic Cochrane Centre, so also for this reason it would be inappropriate to have separate rules for me. It would look odd that the Nordic Cochrane Centre is their address, and I, as the only one, use another address, and readers would think that I no longer work at the centre. This would be misleading and we do not want our scientific articles to be misleading.

I made detailed minutes after the Board only session and it was very clear that I am allowed to use the Nordic Cochrane Centre's letterhead also for non-Cochrane issues, as long as I respect the Spokesperson policy, which I do. This was what I was told when I was allowed into the room again after this issue had been discussed. It is not my fault that the minutes from the Board only session are very short, only 16 words, related to this particular item. Since this was the Board's decision, it means that the special provisions for me are no longer in force. Whether or not you were instructed by the Board to stop making these requirements of me is immaterial. Furthermore, your comments above do not reflect what I said at the meeting between you, me, Joerg and Karsten on 21 March in Lisboa. The minutes you sent me say:

"(PG) I was told at the Centre Directors meeting that there can't be separate rules for me and not everyone else. In Geneva, the Board agreed that I could use the letterhead and Cochrane affiliation as long as I make it clear these are my personal views. This means the additional agreements have been annulled and MGW has not been informed. The Minutes from the 'Board only' time say this.

(JM) We didn't explicitly discuss the case, but the Board discussed and agreed it doesn't make sense to prevent people using the letterhead but they should abide by the Spokesperson Policy and make it clear explicitly when it is not a Cochrane view. There are Minutes from the 'Board only' time to confirm. Maybe we can find a way to resolve the three concrete cases which would make me happy. I can fully understand Mark's position: it is his job to protect the brand."

Thus, I said: "This means the additional agreements have been annulled", which is correct and which Joerg confirmed, both in Genève and again in Lisboa.

A key point in all of this, and in earlier complaints, which has been overlooked, is that affiliation is not representation. The nominal factual relationship with the Nordic Cochrane Centre does not at all mean that I, or any of my researchers, speak in the name of Cochrane as a spokesperson, nor have we ever given that impression. That impression is the result of the very partial interpretation by a number of our scientific and political opponents, but unfortunately you and your staff have followed the same line of reasoning when you have erroneously claimed, again and again, that I have broken the Spokesperson policy.

Having consulted Rob Scholten and Lotty Hooft, Co-Directors of Cochrane Netherlands, I am also concerned that though you became involved in a Dutch criminal case and then a medical practitioner dispute using your Nordic Cochrane Centre affiliation, you did not inform them or warn them of your actions, and possible publicity or impact on Cochrane in the Netherlands. Whilst this is not a requirement of the Spokesperson (or any other existing) Cochrane Policy, I would have expected that you would have abided by the guidance in that policy related to involvements with the media of other countries, given that this was such a more serious intervention in the Netherlands than a simple interview with a Dutch journalist. The Policy points out that: "it is common courtesy and best practice, if you are speaking in a country or have been interviewed by media within a country with a Cochrane presence and are referring to Cochrane to to inform the Director responsible for Cochrane activities in that country at the earliest convenience".

I talk to journalists virtually every day, from many countries, and cannot possibly inform my colleagues about all this. Often, I do not even know if and when they will go public. Some of the other Cochrane directors also often speak with the media, and they also do not inform colleagues in other countries. We do not think this is important. I was an expert witness in a double homicide case. The homicides would very likely not have happened, were it not for the use of a depression pill. My role for the defense was favourably described in Dutch media, and there were questions in Parliament. My interventions were very positive for the Cochrane brand, so there was no problem as seen from the Cochrane perspective.

As we discussed in Lisbon (see the attached Minutes), my conclusion is that in future you must abide at all times by the original requirement established by Cochrane's leadership in its letter of 9th June 2015, namely, that you "no longer use your title of 'Director, Nordic Cochrane Centre' when you are writing and speaking on projects that are not Cochrane reviews or methodology. Instead, we ask that you use your alternate title of 'Professor of Clinical Research Design and Analysis, University of Copenhagen'"; and that you ensure you abide at all times in the future with the obligations in Cochrane's Spokesperson Policy (and specifically those set out above). Failure to do so will result in disciplinary action, which may include as the JJune 2015 letter signaled the de-registration of the NNordic Cochrane Centre. We discussed at the close of our meeting in Lisbon that setting up your own separate, personal organization (be it a foundation, Institute or other legal body) from which to research and campaign on these issues may help you to clarify your roles, research and activities far more easily.

It was clearly agreed by the Board in Genève that I am entitled to use the Nordic Cochrane Centre's letterhead, which decision must be respected by you. I consider it totally out of proportion, appalling and highly disrespectful of my work that you threaten me with closing my centre.

I have attached my intended responses to Dr Torrey and to Mr Pottergard, as promised in Lisbon. If you have any comments you would like to make about them before I send them later this week then you are welcome to send those comments to me. I have already considered the points made in your draft responses you sent me on 18thMarch in formulating these replies.

In your email from Wednesday 11 April at 14.23, of 13,000 words with 9 attachments, you gave me a deadline of only two days after you had yourself had six weeks to think about the letter from Torrey. I consider that this is not due process and furthermore disrespectful of my work, and I asked you not to write to Torrey and Pottegård after such a short deadline. I explained, also to the Board, that during those two days I would be fully occupied with meetings and would not have time to respond before the weekend. Nonetheless, I responded to the Board and you early Monday morning on 16 April.

However, I am not able to finalize a response to Professor Loonen because I am not yet in a position to answer all of the questions in his letter. In relation to that dispute, therefore, can you please let me know the answers to the following questions:

There is no hurry, as the court case Loonen and I were involved with as expert witnesses took place two years ago. In his letter to you from 19 March, Loonen stated:

"I was very surprised about the content of his opinion, and also the level of his qualifications to be able to offer an expert opinion in this case; I expressed my serious concerns about both matters. Mr. Gotzsche's theoretical education and clinical expertise in Psychiatry, Neuropsychopharmacology, and Clinical Pharmacology mean that he is insufficiently qualified to write this report. Mr. Gotzsche had neither examined the suspect nor had he studied the criminal files himself. His report was exclusively based on a translation of my report and its addendum. It became evident to me later that, as could be expected, this translation showed imperfections. His report contained several incorrect statements and, in addition to these, numerous allegations against the treating physicians and myself."

Loonen gives himself an authority he does not have. It is up to the court – not Loonen - to decide whether I have qualifications for being an expert witness. The court ruled that I had. Indeed, I have strong qualifications. I have done research in this area since 2007 and currently have 5 PhD students and a psychiatrist in my staff. The issues I raised in my expert report were highly relevant for the court case.

Loonen notes that my expert opinion was presented using the letterhead of the Nordic Cochrane Centre and he asks whether the Centre endorsed my findings in my expert report, and whether my conduct is in line with Cochrane's policy on conflict of interest.

My expert report was written for the court and as far as I know, it has not been made public. Thus, this is not a matter of how the public perceives it, and there cannot be any confusion in relation to the Spokesperson policy. Further, Loonen's questions are irrelevant. The reason that I was approved as an expert witness is related to my work at the Nordic Cochrane Centre and it was therefore natural that I used this letterhead. This has nothing to do with whether or not my Centre endorsed my findings, and I am entitled to use my Centre's letterhead (see above). No one has or had any reason to doubt that what I stated in my expert report was my own opinion. This is what being an expert witness is all about; it is not about policies. Further, I cannot see how it could be a conflict of interest to defend a woman who was seriously harmed by the depression drug she was taking and developed symptoms that predispose to violence and homicide. Loonen did not acknowledge this in this expert report or in court.

Loonen states that his expert report was confidential. This is not correct and we were not asked by the court to sign any confidentiality agreements. There were plenty of journalists present and I do not know if or how they got access to Loonen's report.

Loonen states that, in January 2018, two years after the court session, I filed a complaint against him at the disciplinary court. A Dutch lawyer filed the complaint on my behalf, to the Regional Disciplinary Court for Healthcare at Eindhoven. The background for this complaint is that Loonen behaved so badly during the court proceedings that he was officially reprimanded several times.

In the middle of the court proceedings, Loonen was asked to leave the room and he asked if a journalist was present. Loonen contacted the press, and a newspaper printed an article where Loonen, among other things, called another expert witness, Selma Eikelenboom, for a "charlatan". Eikelenboom complained to the Regional Disciplinary Court for Healthcare at Eindhoven. The Court found Loonen's statements offensive, unfair and consciously directed towards Eikelenboom and reprimanded him. The Court furthermore found that Loonen, as a judicial expert, in an improper way had wanted to influence the criminal process, which involved particularly serious and punishable offenses. The Public Prosecution Service concluded that Loonen's offense was criminal according to criminal law.

Also in the middle of the court proceedings, Loonen asked the judges for permission to distribute a paper in Dutch he had written. Permission was granted. During the lunch break, before the proceedings were resumed, someone translated the paper for me orally. It started this way:

"Concerning the person Prof Dr Peter C Gotzsche. The court should be aware of the fact that Mister Gotzsche (recently) has become a controversial figure ... Of importance is also the official statement with which the Cochrane organization dissociated itself from the content of his book 'Deadly psychiatry and organized denial' (translated into Dutch as Dodelijke medicijnen en georganiseerde misdaad). It remains to be seen whether Mister Gotzsche is entitled to write this letter to defence counsel De Haas in the capacity of director of the Nordic Cochrane Centre and on the stationery of that organization. Furthermore, Mister Gotzsche is trained as an internist and by profession an epidemiologist (Clinical Research Design and Analysis) and he does not work as a physician/clinical pharmacologist in the individual psychiatric patient care. His great scientific merits are beyond all doubt. Therefore, it is all the more tragic to see that on occasion, as seen from a scientific perspective, his remarks in recent writing (as in this letter [which was my expert report]) are neither here nor there. This leads me to suspect the course of a disease, as a result of which he has seriously become disinhibited. Naturally doctors may fall ill much like anybody in which case the health system unfortunately proves to be more than little capable to protect these ill people against themselves. It should be noted that this is merely my opinion. I otherwise do not know Mister Gotzsche and I have never examined him, but in my professional opinion I feel he ought to be."

I am proud of my expert report, in which I provide serious criticism of Loonen's expert report. I complained to the court about his outrageous, unethical and unprofessional statements, saying it would be unfair to give his paper any importance in the proceedings. The judges

accepted my complaint and disregarded Loonen's defamatory paper. I later complained about Loonen's grossly inappropriate conduct to the University of Groningen with which he is affiliated, and the Rector arranged a meeting with Loonen where Loonen was told that his conduct was inappropriate. The University wrote to me:

"In the meeting which took place on 26 February 2018 the Rector and mr. S.R. van Dijk talked for more than one hour with professor Loonen. They have conveyed the concerns of the Rijksuniversiteit Groningen with regard to the conduct of professor Loonen and have brought to his attention that he, like every special appointed professor, must behave in a responsible manner and must prevent the university from suffering possible damage as a result of his behavior. Professor Loonen has indicated that he understood our concerns and would take into account the interests of the university in future statements."

a. Did you submit your expert opinion in the Dutch criminal trial "on the company stationary of the Nordic Cochrane Centre ... signed as follows: 'Peter C Gotzsche, Profeessor, DrMedSci, MSc, Director of the Nordic Cochrane Centre, Rigshospitalet'? (https://emea01.safelinks.protection.outlook.com/?url=https%3A%2F%2Ftranslate.google.co.uk%2Ftranslate%3Fhl%3Den%26sl%3Dnl%26u%3Dhttps%3A%2F%2Fuitspraken.rechtspraak.nl%2Finziendocument%253Fid%253DECLI%3ANL%3ARBGEL%3A2016%3A1715%26prev%3Dsearch&data=02%7C01%7CMWilson%40cochrane.org%7C9324e4049748439e67b308d594bd1602%7Cb6c2e21e4db74533916398c1451c1caa%7C0%7C0%7C636578462211145502&sdata=wd1DWMIQMi1hVlNsiKZELpU4oatZ5z9ytblKDqbJ8tl%3D&reserved=0)

See above.

(調)

b. Did you receive payment for the expert medical legal report you gave in the criminal case; and if you did, was it received by you personally or did you pass it to your employer, the University of Copenhagen?

I cannot see any relevance of this question.

c. Did you share Professor Loonen's confidential expert opinion with the *De Volkskrant* newspaper?

It was not confidential, see above. I do not know how the journalists became aware of the issues but there were plenty of journalists present during the proceedings and a lot of talking went on during the breaks, some of which Loonen initiated himself.

Thank you for providing answers to these questions. Can I ask you to send me your replies within seven days (by 18th April), and I'll then be able to revert back to you with any final conclusions, then finalize a reply to Professor Loonen and close these issues off. I will then raise with the Co-Chairs and David your request to remove the statement by the Cochrane leadership of 18th September 2015 from the Cochrane website (http://www.cochrane.org/news/statement-cochrane).

I very much hope you will remove this outdated message, as it is very harmful for our work and also causes yourself a lot of unnecessary work. People learn from each other and this message has been much abused to create pseudo-problems. I have protected you by only

informing you about a minority of all these abuses.

Please do not send any replies to Torrey, Pottegård or Loonen before I have agreed to them. In case you and I cannot agree, the Collaboration Agreement between you and me from February 2017 describes what should happen next.

This Collaboration Agreement contains the following:

Cochrane, its Chief Executive Officer (CEO) and its Central Executive will:
6. Recognize the NCC as the leader and co-ordinator of Cochrane activities and principal representative of Cochrane in Denmark, and consult with its Director(s) on any activities affecting Denmark and those countries where the NCC manages an Associate Centre/Affiliate.

It is clear from this that you must consult with me when people complain about me.

11. Upon the request of the Centre Director, engage with, advise and support the Director and his/her staff in their work, including addressing problems or complaints, and helping with conflict resolution.

I have not seen much in terms of supporting me so far in relation to people complaining about me. Your actions have often harmed not only me but the whole Nordic Cochrane Centre. A member of the Governing Board sees it this way in relation to the recent complaints:

The independence of Cochrane could be tarnished by this action by its CEO. We all know that the pharmaceutical industry and its lobbies, both visible and covert, are reacting aggressively to articles and books about the gross overmedication and overprescription of psychiatric drugs. Your [my] publications and public appearances have been particularly effective in sparking a very necessary public debate concerning this harmful practice not justified by most scientific evidence. If Cochrane is perceived as being influenced by these defensive campaigns by industry, even if they are carried out by people with no apparent direct financial interests, the reputation of Cochrane could be seriously harmed. I seriously hope this does not happen.

Dispute Resolution and Performance Management 22. In the event of a dispute between the CEO and the NCC Director on Cochrane-related business or issues, both will make every good faith effort to resolve it amicably within six weeks. The CEO and/or the Centre Director may call upon the Centre Directors' Executive to advise on the resolution of the dispute.

As you know, and as Joerg Meerpohl witnessed on two occations in Lisboa, I tried to resolve the current issues amicably and also asked you not to make too much out of the complaints.

23. If, following attempts at a resolution of the dispute, the Cochrane Director remains opposed to the

decision, he/she may appeal it to the Cochrane Governing Board. If the Centre Director's position is

supported by a majority of the Cochrane Centre Directors' Executive, then this will be made clear to

the Governing Board. The decision of the Governing Board will be final.

I have not contacted the Cochrane Centre Directors' Executive and it is not mandatory. I you and I cannot reach an agreement on the above and on my comments sent to the Board and you on 16 April, I will appeal your decisions to the Cochrane Governing Board.

Please do not hesitate to call me if you would like to discuss any of these points in more detail.

Best wishes,

Mark

Mark G. Wilson Chief Executive Officer

Document L: E-mail from Mark Wilson to Peter Gøtzsche's 20th April 2018

Dear Peter,

Thanks for your responses, as requested, on the questions I asked you in my message of 11th April in relation to Professor Loonen's letter; and to the draft replies to them which I invited you to comment on. I acknowledge, too, the complaints about me you set out in these replies. I would, however, have expected to have received this response before you wrote directly to the Governing Board last week.

It is clear to me that there is no possibility of agreement between us about your interpretation of and behaviour towards the Cochrane Spokesperson Policy in these cases or in general. Nor is there agreement on the additional requirements pertaining to you that I am applying related to your actions and the Cochrane leadership's responses to those actions since 2014. You refer to decisions by the Governing Board which have not been recorded, nor communicated to me as an executive officer, so I must seek further clarification from the Governing Board. I stand by the draft responses I have written to Dr Torrey and Mr Pottergard as appropriate, want to reiterate to you that you do not have the right to impose a veto on what communications I send to them or anybody else, but I confirm that given the seriousness of the differences between us I will not send these responses until the Governing Board has considered the matter.

I have therefore concluded that all of these issues should be referred to the Governing Board, and as a result copied the Co-Chairs into this response (and attached also my original message to you of 11th April). I have not written an additional reply to your comments and complaints, but would expect the opportunity to do this as part of any review by the Board.

Yours sincerely,

Mark

Mark G. Wilson Chief Executive Officer

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