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Leading Doctors Call For A Full Independent Public Enquiry Into Safety of Medicines

Leading doctors call on the UK parliament public accounts committee to conduct an independent enquiry into the safety of medicines in response to an article written by respected NHS Cardiologist, Dr Aseem Malhotra. He highlights a complete healthcare "system failure" that it resulting in the unnecessary deaths of tens of thousands of people globally every year, the unnecessary suffering of millions of people costing billions to our national economies.

The support for his calls for greater transparency in the prescription of medicines come from the immediate past president of the Royal College of Physicians, Sir Richard Thompson, the Chair of the BMA General Practitioners committee Dr Chaand Nagpaul, the President of the faculty of public health Professor John Ashton, the Chairman of the British Association of Physicians of Indian origin, Consultant Psychiatrist Dr JS Bamrah and the editor in chief of JAMA Internal Medicine and Professor of Cardiology Rita Redberg.

In the article published in the Mail online Dr Malhotra writes that- biased funding of research (funded because it is likely to be profitable, not beneficial for patients), biased reporting in medical journals, commercial conflicts of interests is contributing to an "epidemic of misinformed doctors and misinformed patients in the UK and beyond."

Citing recent research, he states that prescription drugs are the third most common cause of death after heart disease and cancer, with side effects of antidepressants and dementia drugs responsible for more than half a million deaths per year in the United States and Europe.

The elderly are particularly vulnerable to polypharmacy with 1 in 3 hospital admissions in the over 75s a result of an adverse drug reaction.

In addition to a "more medicine is better culture "exacerbated by financial incentives to prescribe more drugs and carry out more operations Malhotra reveals a more sinister side that is corrupting the information that is being given to doctors and patients when medical decisions are being made.

Citing recent examples from Australia and the UK he writes that "medical journals and the media can also be manipulated to serve not only as marketing vehicles for the industry but be unwittingly complicit in silencing those who call for greater transparency and more independent scrutiny of scientific data"

In relation to cholesterol lowering statin drugs he calls for a full reassessment of all the statin studies and that "physicians should be aware that present claims about the efficacy and safety of statins is not evidence based" demanding that the Clinical Trials Service Unit at Oxford University release the raw data for independent scrutiny.

He gives recent examples that the National Institute of Clinical Excellence (NICE) and the drug regulator (the MHRA) have failed to manage lack of transparency and conflicts of interest over the prescription of several drugs including Tamiflu, Statins and Stroke drug alteplase.

Gaming the system, manipulation of data and in some cases prolific scientific fraud is contributing to the unnecessary deaths of tens of thousands of people and the suffering of millions costing billions to our national economies every year.

"Without full transparency and accountability no doctor can provide what we slogged through medical school and devote our heart and souls to;- providing the best quality care for our patients"

He concludes for the sake of our future health and the sustainability of the NHS it's time for real collective action against "too much medicine" starting with the public accounts committee launching a full independent inquiry into the efficacy and safety of medicines. The underlying scandal that may ensue is likely to dwarf that of Mid Staffs. Medical science has taken a turn towards darkness. Sunlight will be it'-s only disinfectant.

Dr Aseem Malhotra is an NHS Consultant Cardiologist based in London. He writes in a personal capacity but has a number of roles including being recently appointed to the board of trustees of UK Health Think Tank, The King's Fund and is a member of the Academy of Medical Royal Colleges Choosing Wisely Steering group.

Leading figures in healthcare in the UK and beyond supported Dr Malhotra's calls.

Sir Richard Thompson, Immediate past president of the Royal College of Physicians said,

Dr Malhotra again draws the attention of doctors and the public to the too often weak and sometimes murky basis on which the efficacy and use of drugs, particularly in the elderly, are judged. There needs to be closer scrutiny of the evidence underpinning drugs, and devices, and then better promotion of the evidence, together with more education of the public, doctors and medical students in how to assess the value of prescribing drugs to different groups of patients. The time has come for a full and open public enquiry into the way evidence of the efficacy of drugs is obtained and revealed. There is real danger that some current drug treatments are much less effective than had previously been thought.

Dr Chaand Nagpaul, Chairman of the BMA's General Practitioners committee said

"GPs prescribe and take responsibility for the bulk of ongoing prescriptions for patients whose care is increasingly managed in the community. Trust between GP and patient is central to the discipline of general practice, and patients need to trust that any treatment offered by their GP is entirely in their best interests. GPs equally need to have confidence that authoritative treatment advice that they rely on is based on transparency, robust evidence and free from conflicts of interest. An independent enquiry would enable openness with a view to doctors and patients having confidence in the safety and efficacy of medicines

Professor John Ashton, President of the faculty of public health said

'Public health relies on a comprehensive, accurate and cost effective evidence base to ensure we make decisions based on the best available research that improve and protect people's health, as well as prioritise care in the best way for patients. A public enquiry could be a useful tool in ensuring that research is published in a transparent and independent way."

Dr J S Bamrah, FRCPsych
Chairman, BAPIO & Consultant Psychiatrist
There has been an alarming increase in prescriptions in the modern world which cannot be simply explained in terms of increasing disease. The context of this in regards to the dangers of over-prescribing cannot be overstated and as Dr Aseem Malhotra rightly points out, there are a number of areas where there are incentives and conflicts that doctors and researchers have either been complicit or complacent, or plainly they have failed to declare their conflicts of interest; in some cases this will have led others to believe in theri authoritative assertions. In my own field of psychiatry there are been much abuse and overuse of a number of drugs, and this pattern is destined to repeat unless someone like Dr Malhotra stands up to the establishment. His expose deserves a high level independent enquiry by the government as otherwise patients will continue to rely on medications they need not have been prescribed by trusted doctors.

Rita Redberg, Professor of Cardiology at the University of California, San Francisco and editor of JAMA Internal Medicine said,

As a practicing cardiologist for 30 years as well as a journal editor for 7 years, I know how important it is to have reliable high quality data in peer-reviewed medical journals. It is crucial for clinicians to be able to trust what they read. WE need this trust and transparency to be able to accurately advise our patients on risks and benefits of medical treatments. In addition, all conflicts should be disclosed, such as relationships with industry and any other potential biases. Clinical trial registration before trial initiation on publicly available sites such as clinicaltrials.gov and publishing of all results is essential, even if results are negative or show harms of a treatment. We need to know that we have full access to all relevant information. Our current system needs more work and efforts towards achieving these goals."

James McCormack, Professor of Pharmacy at the Faculty of Pharmaceutical science, UBC Vancouver, Canada

"Let's for sake of the argument assume all the data is legitimate and that study results are reported completely and fairly. Even then, when one uses this "optimistic data" to provide patients with the risk, benefit and harm results, in my experience most patients are very much underwhelmed with the reported benefits and have important concerns about the reported harms, costs, and inconveniences of taking medications. Now throw in the fact the data may not be exactly as it seems and we overall have a very important health issue."