Doctors urged to present views in an objective way to the media

Susan Mayor *London*

Doctors should discuss scientific arguments in an objective way when talking to the media, the Council for Medical Ethics of the Norwegian Medical Association ruled this week.

The council was responding to a complaint that a professor of cardiology had claimed in a newspaper interview that government regulations requiring the first line use of thiazides for hypertension meant that doctors might risk "killing" their patients with a "rat poison drug."

The news report that provoked the case was a front page news story in a Norwegian national newspaper, *Dagbladet*, published on 11 February 2004. In the report Sverre Kjeldsen, professor of cardiology at the University of Oslo, was quoted as saying that "the authorities urge us to kill the patients with pure rat poison," in an article that suggested that high doses of cheap thiazides worked in a similar way to rat poison.

The news story came after a change in drug regulations made by the Norwegian parliament in 2004, making low dosage thiazides the treatment of first choice for the management of hypertension. Doctors have to prescribe them unless they can give an explicit medical reason for making another choice.

Jørund Straand, professor of

general practice at the University of Oslo, and one of the three general practitioners working in academic medicine who brought the complaint, said that he wanted the ethics committee to review whether the statement made by Professor Kjeldsen went against the Norwegian code of medical ethics.

The Norwegian Medical Association's Code of Ethics for Doctors states: "A doctor should according to his or her ability contribute to objective information to the public and the authorities on medical matters. A doctor who pronounces on medical matters to the media should ensure that he or she will be able to check the form in which the pronouncements are made public."

Professor Straand explained: "Our main concern was the statement about doctors killing patients, not that we supported the government in its recommendation on treatment—that is another issue." He added: "We were concerned that the statement [from Professor Kjeldsen] could make it very difficult for doctor-patient relationships, if patients were anxious that their doctors might be killing them."

In its ruling on the case published in the latest issue of the *Journal of the Norwegian Medical Association*, the Norwegian Medi-

cal Association's Council for Medical Ethics said that doctors should be cautious when interacting with the media and should try to check the accuracy of articles for which they have been interviewed before they are printed (*Tidsskr Nor Lægeforen* 2005;125:3151). The statement noted that in meetings with the ethics council Professor Kjeldsen had explained that the journalist who had interviewed him had misunderstood some of the information and had mixed up warfarin and thiazides.

The statement said that doctors have a duty to voice disagreements with decisions that they considered might be a threat to their patients, but they should do this in an acceptable way. The council noted that although Professor Kjeldsen regretted the way the newspaper had presented the story, he did not withdraw his statement that "the authorities urge us to kill patients."

Commentators have previously expressed concern about negative reactions in the medical media to a trial—the antihypertensive and lipid lowering treatment to prevent heart attack trial (ALLHAT)—that supported the first line use of thiazide-type diuretics after showing similar rates of fatal coronary heart disease or non-fatal myocardial infarction with chlortalidone as with the calcium channel blocker amlodipine and the angiotensin converting enzyme inhibitor lisinopril (*JAMA* 2002;288:2981-97).

Writing in the *BMJ*, Alessandro Liberati, associate professor

The headline reads: Doctors forced to give "rat poison" for blood pressure

at the University of Modena, Italy, and Nicola Magrini, director of the Centre for Evaluation of the Effectiveness of Health Care, Modena, questioned whether drug companies and the researchers acting as opinion leaders for them behaved fairly and consistently when writing in peer reviewed journals and talking to practitioners (*BMJ* 2003;326:1156-7). They argued that full scale attacks directed at the design, analysis, and interpretation of ALLHAT were published in the journal of the Italian Society of Hypertension and in an Italian weekly medical magazine at the same time as commentaries in the *Journal of Hypertension* praised the study's strengths and identified only minor weaknesses. □

GMC suspends doctor for false research claims

Owen Dyer *London*

A consultant who forged the signatures of two colleagues and falsely claimed authorship of research in which he had played no part was suspended for three months by the General Medical Council last week.

Ranjit Sinharay was an associate specialist and locum consultant at the Royal Glamorgan Hospital, Llantrisant, Mid Glamorgan, when he learnt of research carried out by a nurse practitioner, Diane Bird, into the diagnosis

of deep vein thrombosis. Ms Bird presented her research, which was supervised by George Strang, at the trust's annual research day in November 2001.

In February 2003, seven months after leaving the Royal Glamorgan for a post at the Royal Gwent Hospital, Dr Sinharay submitted a research letter for publication in the *Postgraduate Medical Journal*.

The letter was published in June 2003 under the title: "Sinharay R, Strang G, Bird D, Cost effective strategy for a safe diagnosis of DVT at a district general hospital. *Postgraduate Medical Journal*, 2003, 19: 363."

The licence for publication that Dr Sinharay forwarded to the *Postgraduate Medical Journal* purported to bear the signa-

tures of Diane Bird and Dr Strang. But Dr Sinharay admitted to the GMC's fitness to practise panel that he had signed their names himself without informing them.

He also acknowledged that he had played no part in the original research, which was entirely the work of Ms Bird.

The false claims came to light after hospital staff noticed the research letter. The hospital's clinical director of medicine, Mike Page, asked Dr Sinharay to write to the editor of the *Postgraduate Medical Journal*, John Mayberry, explaining that the research had not been his own work.

Dr Sinharay admitted the factual charges at the outset of his two day hearing in Manchester, accepting that his conduct had

been "unprofessional and dishonest." He was found to have been dishonest both in forging his colleagues' signatures and in claiming partial responsibility for the research in his first letter to the *Postgraduate Medical Journal*, which included the words "We carried out a trial."

Paddy Conway, lay chairman of the fitness to practise panel, told Dr Sinharay: "It is clear that you intended readers to assume that you took a leading part in the research when you knew that this was not the case."

But Mr Conway noted that character witnesses had agreed that Dr Sinharay was held in high regard by colleagues and patients and was a valued member of the medical team at the Royal Gwent Hospital. □