EBM: unmasking the ugly truth

Clinicians for the Restoration of Autonomous Practice (CRAP) Writing Group

One morning we found a strange notice nailed to the door of the *BMJ*. On checking their email, all *BMJ* staff found the full, illustrated version of this report

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Clinicians for the Restoration of Autonomous Practice (CRAP) has written this report and nailed it to the door of the *BMJ*. We have done this anonymously and under cover of darkness to protect ourselves from retaliation from grand inquisitors in the new religion of Evidence Based Medicine (EBM). Our report is based on documents liberated by undercover agents who have successfully infiltrated the EBM movement to uncover the truth about EBM, its hidden agenda, and the shadowy forces behind it. Despite repeated denials by the high priests of EBM that they have not founded a new religion, our report provides irrefutable proof that EBM is, indeed, a full-blown religious movement, complete with a priesthood, catechisms, a liturgy, religious symbols, and sacraments. We can confirm that proselytisation is now occurring on a global scale and threatens the very existence of for profit, doctor centred, authoritarian medicine as we know it. CRAP has issued this rallying call to all who wish to conserve our traditional values.

10 commandments

CRAP has long suspected that EBM secretly espouses cookbook medicine, based on a blind faith in "methodology," the alchemistic philosophical basis for this religion. We can now confirm the existence of an EBM bible and catechisms, which were discovered by chance when one of our members removed the mini CD Rom from a recently published EBM textbook and played it backwards. The 10 commandments of EBM, which were reportedly delivered as a printout to a prophet on Mount Hamilton, were presented against a musical background ("All you need is trials"):

- Thou shalt treat all patients according to the EBM cookbook, without concern for local circumstances, patients' preferences, or clinical judgment
- Thou shalt honour thy computerised evidence based decision support software, humbly entering the information that it requires and faithfully adhering to its commands
- Thou shalt put heathen basic scientists to the rack until they repent and promise henceforth to randomise all mice, materials, and molecules in their experiments
- Thou shalt neither publish nor read any case reports, and punish those who blaspheme by uttering personal experiences
- Thou shalt banish the unbelievers who partake in qualitative research, and force them to live among basic scientists and other heathens
- Thou shalt defrock any clinician found treating a patient without reference to all research published more than 45 minutes before a consultation
- Thou shalt reward with a bounty any medical student who denounces specialists who use expressions such as "in my experience"

- Thou shalt ensure that all patients are seen by research librarians, and that physicians are assigned to handsearching ancient medical journals
- Thou shalt force to take mandatory retirement all clinical experts within a maximum of 10 days of their being declared experts
- Thou shalt outlaw contraception to ensure that there are adequate numbers of patients to randomise.

Much of what is written in the EBM religious tracts can also be found as catechetical instruction in seemingly innocuous sources, such as the Cochrane Handbook and the CONSORT statement.

Religious symbols of EBM

Symbolism within the EBM religion has developed rapidly. This may be due to the fact that the religion is actually all "old hat," as some brave critics have pointed out. Many symbols have been stolen shamelessly from other religions. The EBM cube, for example, was stolen from the Rubricons, and the Cochrane logo that appears not only in print but also as "crop circles" across the countryside seems likely to have been based on an ancient pharaonic pictograph (see fig 1).

One of the most frightening discoveries by CRAP agents is a modern form of trepanation, in which EBM cubes are inserted in the heads of medical students (fig 2).

Fig 1 The Cochrane symbol, seen here in plans for the façade of the Cochrane Vatican that is to be built in Summertown

Fig 2 Skulls of medical students showing circular incisions of trepanation used to insert EBM cubes

Proselytisation and excommunication

EBM shares with many other religions an aggressive proselytisation. New members are recruited to the religion through workshops, colloquiums, religious tracts, and other publications. Although EBM does not yet have its own television channels, the internet is gradually being taken over by EBM sites. A recent Google search (10 December 2002) revealed 1 240 000 EBM sites.

Like other religions, EBM is quick to excommunicate those who do not adhere to its tenets or who challenge the authority of the chief druids. Because of the fear of losing its following to the drug industry, EBMers who take jobs in industry are excommunicated. They may also be banished to live with unbelievers and those who adhere to other religious creeds in New Haven or at the *New England Journal of Medicine*, which are being transformed into modern day EBM Lubyankas. Other punishable offences include failure to publish the results of a trial and failure to report the results of a new trial in the context of an up to date systematic review.

The priesthood and EBM signs and symbols

We are able to publish a photo of three EBM druids dressed in their vestments (fig 4). Note the socks, the shirts, and the sign they are making with their hands. EBMers are easily recognised by their white socks. The shirts seen in the photograph are worn at all times and

Fig 3 An EBM priest anointing a patient with evidence at the bedside

EBM liturgy and sacraments

The many forms of liturgy and sacrament that we have discovered include:

- EBM workshops, where the catechisms of EBM are chanted and novices are taught the tenets of EBM
- An annual pilgrimage to the Cochrane Colloquium, during which EBM devotees go without sleep for four days, speak in tongues, and participate in ritual ceremonies
- A bizarre ritual in which structured abstracts are placed in the gaping mouths of EBM devotees
- The bestowment of holy orders upon those who go on to become Tutors, Convenors, and Coordinators
- Anointment of the sick with evidence at the bedside (fig 3)
- A pilgrimage by truly devoted adherents to the religion, who travel thousands of miles to be initiated using total immersion in Coote's Paradise, at the western extreme of Lake Ontario
- A finger that is believed to be a holy relic. Adherents are divided as to the origin of the finger. One faction believes it came from Gordon Guyatt, and another believes that it came from Drummond Rennie.

never washed, but are normally hidden underneath other clothing. The secret sign they are making with their hands is used to identify themselves to each other, the three fingers forming an "E" for evidence. EBMers are known to provide mutual assistance and promotion within their secret order, sometimes using a specific EBM vocabulary, including words such as "trohoc," and passwords such as "allocation concealment" and "RCT," the last of which is used as a title of reverence in place of the ineffable (randomised controlled trial).

Fig 4 Three EBM druids dressed in their vestments

Governments around the world are rejoicing in the growth of the EBM religion because it makes it easier to withhold or withdraw support from all forms of care for which there is deemed to be insufficient evidence. Meanwhile, the drug industry is secretly assembling a massive fighting fund to protect endangered drugs from the inroads being made by EBM. As a consequence of the unbridled success of EBM, it is anticipated that nearly all surgical units, public health departments, and paediatricians will be forced to close shop because of a lack of randomised evidence supporting their activities.

Dire consequences of EBM

In addition to uncovering EBM religious tracts we have discovered top secret plans that confirm and go beyond our deepest fears about EBM's intentions to take over the world:

- The *BMJ*, already in the thrall of EBMers, will take over all other medical journals, using a combination of spamming and viruses to attack their websites
- The National Health Service will become the National Evidence Service, with 80% of the time of all employees devoted to generating, meta-analysing, and critically appraising evidence
- An upper limit will be placed on the IQ of all students admitted to medical school
- Drug companies will be required by law to reveal all of their evidence. As a result of this it is expected that by the year 2020 the last of the 10 drug firms still in existence, following multiple mergers, will close its doors due to the loss of the right to hold proprietary secrets
- NICE (the National Institute for Clinical Effectiveness) will take its gloves off and change its name to NASTY (National Academy of Stingy, Therapoclastic, Nihilistic Yobs)
- The Nobel Prize for medicine will be subverted. In the future it will be awarded to large collaborative endeavours, rather than to individuals. It will be given solely for methodological research into the intricacies of randomised trials and systematic reviews
- In future among doctors, only EBMers will be awarded knighthoods, at one of three levels (Level 1, Level 2, and Level 3).

Factions and a glimmer of hope for the future

As in most other religions, factions are beginning to emerge within EBM, and CRAP sees a glimmer of hope in these developments. EBM currently comprises four major denominations:

- Cochranites—members of a worldwide order that has Archie Cochrane as its patron saint. They worship systematic reviews
- Meta-anophiles—a heretical spin off of the Cochranites, who believe in combining the results of all the randomised controlled trials in the universe. Their current estimate of the ultimate summary statistic is 42 (95% confidence intervals 41.9999 to 42.0001)

- Pharmacoids—EBMers who work for the drug industry, sometimes secretly funded. This faction was started by industry, which initially believed that EBM would ensure continuation of their obscenely high profit margins, because most randomised evidence concerns drugs. Many in industry now regret this initiative due to the aggressiveness of the Cochranites and the Meta-anophiles, who now demand that industry divulges all of its secret evidence, instead of publishing only the evidence that favours its products

- Simplefolk—members of a much smaller order that worships large, simple randomised controlled trials. Adherents want to make large simple trials mandatory for all treatments, restrict the number of outcome measures to a maximum of two, and allow only priests with a license to do subgroup analyses.

In the end, EBM may destroy itself, just as many other religions seem to be doing. However, CRAP will not sit by idly. We have plans to take EBM to court in The Hague for crimes against humanity. Our case is based on challenging EBMers to provide proof, based on a mega-RCT or a meta-analysis of RCTs, that EBM does more good than harm. Where is the evidence?! It is time for unbelievers and those of other faiths to get tough and put a stop to the veneration of research evidence about the effects of health care. We must protect our unalienable right to exercise clinical autonomy, so that we can continue to do what we damn well please.

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Though they declined to be named as authors of this article, the members of the CRAP writing group have agreed to let their names be "hidden" elsewhere in the journal. For our Christmas competition, we offer the prize of a £50 book token to a reader who spots both names—entries via email to kabbasi@bmj.com, please. Winner will be drawn on Twelfth Night (6 January).

Collective terms for doctors

Why is it that you can see a pride of lions, a murder of crows, a parliament of owls, and other such delightful collective terms, but only a boring crowd of journalists, historians, and doctors? In fact, one uses the same collective term, "crowd," for all sorts of doctors.

I propose a new set of collective terms for doctors. This list is a rather subjective choice, but I have tried to use terms appropriate to each specialty.

I have borrowed some terms from the animal kingdom because they are appropriate or are alliterative. Thus, we have a pride of surgeons, for a group (there we go again) of doctors who are not known for their modesty, yet are aggressive, adventurous, and brave. Often, they are the kings of the hospital as well. Appropriate use of alliteration allows me to adopt the term gaggle of gynaecologists.

Some terms are based on words specific to that specialisation. In the laboratory you may find a culture of microbiologists—an appropriate term for a quiet, decent, cultured set of people. A rouleau of haematologists is the correct term for bloody minded physicians who study that wonderful fluid connective tissue, blood. A synapse of neurologists is fitting for mathematically minded medics who converge, say, at a conference to exchange new ideas.

Presenting symptoms provide some other collective terms. Hence, a howl of paediatricians, for doctors who make often brilliant diagnoses from the mere crying of a child. Likewise, your chest may be auscultated by someone from a consolidation of respiratory care physicians. A rash of dermatologists needs no explanation. Similarly, a stream of urologists is fitting, even though the chief complaint is often that there's no stream.

Other collective terms are a Gray of anatomists (not to be mistaken for the unit that radiotherapists use), a flap of plastic surgeons, a joint of orthopaedic surgeons, a g(l)ut of gastroenterologists, an apron of nurses, and an orbit of ophthalmologists.

Finally, the term parliament of pathologists is fitting for a profession who, like owls, have to be wise. Besides, the preference for "p" makes it poetic, something that Gregory F Hayden (Alliteration in medicine: a puzzling profusion of p's. *BMJ* 1999;319:1605-8) would appreciate. It is, of course, a mere coincidence that the author of this piece is also a pathologist.

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