Johns Hopkins scales down its deal with cosmetics firm after criticism

David Brown *Baltimore*

The value of the name of Johns Hopkins, the 19th century Quaker philanthropist who endowed one of the great medical institutions of the United States, is at the centre of a public debate that is forcing US academic medicine to think hard about what happens when science meets branding.

In late February a New York cosmetics company, Klinger Advanced Aesthetics, announced the release of a line of products called "Cosmedicine." The 15 skin products, whose prices range from \$28 (£16; €23) to \$85, included hydrators, exfoliators, pore shrinkers, sun blockers, and shine suppressors.

The marketing pitch of the new products was that their

biological performance was scientifically verified, unlike that of nearly all their competitors. The data appearing on Cosmedicine labels attesting to skin change after application of the creams and "serums" aren't the opinion of users; instead they are the results of tests performed by contract laboratories and overseen by scientists at Johns Hopkins Medicine, the collective name for the medical school, hospital, and health system at Johns Hopkins University, Baltimore.

Klinger's chairman, Richard Rakowski, viewed the arrangement with Hopkins as a long overdue injection of truth telling in his industry. In recent years the US Food and Drug Administration established protocols for testing manufacturers' claims concerning the sun protection factor in sunscreen lotions. Mr Rakowski said that his company's "intention was to apply the same approach, which is objective standards and measurements based on science, to all the other skin claims. That is an incredibly lofty public interest goal."

Johns Hopkins helped design

the tests and analyse the results, although it seems it didn't supervise the gathering of data or verify their accuracy. It got consulting fees and was also scheduled to gain an equity interest in Klinger and a seat on the company's board of directors.

Early this month William Brody, president of the Johns Hopkins University (and also a doctor) was in New York. Walking along Fifth Avenue he passed Sephora, a cosmetics retailer whose stores are one of two outlets for Cosmedicine products. In the window was a display with the words "Johns Hopkins Medicine" and a statement describing how Dr Brody's institution had "consulted on the design and data analysis of clinical studies" for the products.

"I was stunned," said Dr Brody, who knew of the arrangement, although not all the details. "I think there was more language being allowed by someone at Hopkins than was ever intended by [the] university administration—certainly bigger language."

Within a day or two the *Wall Street Journal* reported the

Klinger-Hopkins deal. Within a week the university decided to forgo the equity position and board seat, which Dr Brody saw as a potential conflict of interest for his institution.

"Let's say an individual [at the university] wants to blow the whistle and say this skin cream is causing some particular problem," Dr Brody speculated. "Conceivably the dean could say, 'I'm not going to allow you to publish that information.' It's a little bit far fetched, but conceivably the university could have something to gain by suppressing information."

As part of the revised arrangement Klinger will also change its references to Johns Hopkins Medicine, although exactly how hasn't been announced.

All parties are quick to say that at no time did Johns Hopkins endorse Cosmedicine; nor did Klinger assert that it did. The actual product packaging mentioned only "a major medical institution" and had no reference to Johns Hopkins. Few people doubt, however, that the Hopkins name was the chief attraction. □

Dutch doctors suspended for use of complementary medicine

Tony Sheldon *Utrecht*

The Amsterdam Medical Disciplinary Tribunal has struck off one doctor and suspended two others for their exclusive use of complementary treatments—including "vegatests," homeopathic medicine, and food supplements—to treat Sylvia Millecam, the Dutch actor and comedian who died from breast cancer in 2001 at the age of 45 (*BMJ* 2004;328:485).

In the high profile test case for use of complementary medicine the doctors, who were not identified by the tribunal, were judged to have ignored existing standards for treating breast cancer, used unsatisfactory methods, and withheld information during their treatment of Ms Millecam. She opposed conventional medicine and sought help from a doctor who also practised complementary medicine after she was given a diagnosis of breast cancer in May 2000.

The stiff measures are seen as a strong warning that doctors must urge seriously ill patients to seek conventional care. The tribunal found two of the doctors to have denied Ms Millecam "a reasonable chance of recovery," in particular by failing to refer her to a breast cancer specialist. The third doctor was judged to have caused her "unnecessary suffering" by withholding conventional palliative care as her condition deteriorated. However, the tribunal concluded that the doctors were not responsible for her death.

After the diagnosis Ms Millecam was recommended to have chemotherapy and surgery, but instead she sought treatment from an internist and practitioner of complementary medicine, identified by the tribunal as "D," who "let it slip" that she did not have cancer and treated her with various complementary treatments.

Later she turned to a GP, identified as "B," who carried out a vegatest, which measures the electrical resistance of connective tissue under the skin. This doctor diagnosed a bacterial infection, which he treated using non-registered medicines, thus leaving the cancer untreated for months.

With the tumour now advancing and spreading, causing Ms Millecam increasing pain and breathlessness, she turned to a family friend, a GP identified as "K," who instead of administering conventional drugs for pain relief used a magnetic field apparatus called "Lotje"—so called dark field microscopy—to try to identify blood disorders. He also used homeopathic treatments and food supplements.

Ms Millecam was admitted to hospital in August 2001, where she died four days later.

B, who had previously been suspended for six months for using similar complementary treatments, has been banned from practising as a doctor. The tribunal suspended K for one year and D for six months. They

concluded that despite Ms Millecam's known resistance to conventional treatment a registered doctor should have made it clear that such treatment offered the only chance of recovery.

Johan Legemaate, professor in health law at Amsterdam's Free University, said, "Alternative medicine can be combined with, but never replace, regular evidence based care." □

Sylvia Millecam died after receiving complementary treatment for breast cancer