MEDIA WATCH Ben Goldacre

Given the choice, I'd have the miracle pill story

Complex problems have depressingly complex causes, and the solutions are often unsatisfactory

Looking at popular culture, it seems there's something very attractive about simple biomedical explanations—and solutions—for complex social and psychological problems.

Four weeks ago the *BMJ* published a large randomised controlled trial, with a positive result: it showed that one treatment for children at high risk of developing conduct disorder could significantly improve antisocial behaviour (*BMJ* 2007;334:678-82). It was a well conducted trial, at multiple sites, with a novel result, on a subject specifically called for by NICE, and it even had a compelling cost effectiveness analysis.

Was this miracle pill reported as front page news in the *Daily Mail*, natural home of miracle cures and sinister hidden scares? Was it followed up on the health pages, with an accompanying photo feature, describing one child's miraculous recovery, and an interview with a relieved mum with whom we could all identify?

No. In fact, this story was completely ignored by the entire British news media, despite their preoccupation with both antisocial behaviour and miracle cures, for one simple reason: this was not a story about a pill. It was a cheap, practical parenting programme.

At the same time, for over two years now, the newspapers and television stations have gushed praise on an endless stream of largely unpublished and increasingly melodramatic claims made for fish oil pills in schoolchildren.

This represents an interesting disparity. These fish oil "miracle pill" claims are generally made on the basis of unpublished "studies," with clear involvement of the multimillion pound pharmaceutical companies manufacturing the supplements, which are presented directly to the media with minimal corroborating evidence—no published paper, no statistics, and in essence no science at all. My attempts to get further information about the data

behind various of these stories for my *Guardian* newspaper column have routinely been met with polite but firm obstructiveness.

This is in stark contravention of not just every published guideline on communicating research findings to the public, but also a clear challenge to common sense, since there is no meaningful opinion whatsoever, with the best will in the world, that anybody could sensibly hold about unpublished scientific research, reported only in the form of a press release and a tabloid news story.

Now there may yet turn out to be good evidence for significant benefits for children from fish oil tablets (although, in context, fish oil pills cost more per day than many councils spend on the entire school meal). That's not my concern right here. What is interesting is where the attention of the media is drawn: weak and unpublished "scientific proof" for a miracle pill receives blanket coverage, while strong evidence for a parenting programme, from a rather prestigious academic journal, is deemed irrelevant.

Explanations abound. Firstly, of course, "pill solves complex social problem" feels more like a news story than a parenting programme does. And there is also the question of how stories are pushed: I've not met Hutchings et al, the authors of the parenting study, and if they want to persuade me, I'm perfectly prepared to believe that they are in Soho House until 2 am every night, schmoozing broadcast media journalists with champagne and nibbles, but in reality, I suspect they are modest academics.

Private companies, meanwhile, have top dollar public relations firepower, one single issue to promote, time to foster relationships with interested journalists, and a wily understanding of the desires of the public and the media. It is these wider cultural desires that are the key to exploiting our collective hopes and consumer dreams. Pharmaceutical

“Pill solves complex social problem” feels more like a news story than a parenting programme does

companies have worked hard, let's remember, in their direct to consumer advertisements and their lobbying, to push the serotonin hypothesis for depression, even though the scientific evidence for this theory is growing thinner every quarter, and the nutrition supplements industry, for its part, promotes dietary deficiencies as a treatable cause for low mood.

These crude biomedical mechanisms may well enhance the placebo benefits from medication. But I wonder if we also risk disempowering patients, and robbing ourselves of a deeper understanding, when we reframe complex social problems in such mechanistic terms.

The biomedical explanations may be so seductive precisely because of what they edit out. In the media coverage around the launch of pills for "female sexual dysfunction," it wasn't just the tablets that were being sold: stories on couples with relationship problems focused on biomedical interventions, and more than that, on hormone tests, or esoteric imaging studies of clitoral blood flow. We don't want to talk about her feeling tired from over work, or him being exhausted by a new baby, any more than we want to talk about social inequality, the disintegration of local communities, the breakdown of the family, the impact of employment uncertainty, changing expectations and notions of personhood, or any of the other complex, difficult factors that play into the apparent rise of antisocial behaviour and depression.

In the past, medicalisation has been portrayed as something that doctors inflict on an unsuspecting world, and as an expansion of the medical empire: but in reality, biomedical narratives can appeal to us all, because complex problems have depressingly complex causes, and the solutions are often taxing and unsatisfactory. Given the choice, I'd have a miracle pill story, any day.

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MEDICINE AND THE MEDIA

Thalidomide: the true story?

A legal battle in Germany over a TV drama about thalidomide has put the 50 year old tragedy back in the headlines.

Annette Tuffs reports

One of the worst tragedies in the history of drug therapy began almost 50 years ago, on 1 October 1957, when thalidomide was introduced as a sleeping pill by the firm Grünenthal onto the West German market. The drug, known as Contergan in West Germany, was launched in almost 50 other countries, including the United Kingdom and Canada, mostly under licence. It had sedating effects and seemed to be well tolerated and without toxic side effects, even in pregnancy. Two years later the link between the pill and serious malformations in newborn babies was discovered. Worldwide, about 12 000 children with limb deformations were born.

This anniversary should have been accompanied by the broadcasting of the television drama "Eine einzige Tablette" ("Just one pill") in two 90 minute episodes on the German state television Westdeutscher Rundfunk, which had commissioned the programme from the award winning producer Michael Souvignier and his production firm Zeitsprung. However, legal battles are threatening the launch, and a fierce debate in the German media between Grünenthal, Westdeutscher Rundfunk, and Zeitsprung has recalled the events of the Contergan tragedy 50 years ago.

At the core of the legal dispute are two questions: how accurately should a fictional television drama based on real events report details of the events and the people involved, and, how far can artistic freedom go without hurting personal rights and feelings?

The film is the story of a young lawyer and his wife whose child is born with malformations after the wife took just one Contergan pill. With a doctor in Hamburg the lawyer uncovers the cause of the malformations and acts as a representative for the victims in the court case against Grünenthal. In the film as in reality, the firm withdrew the drug after experts' suspicions were raised in Germany

How accurately should a fictional drama based on real events report details of the circumstances involved?

and Australia and published in the German press. Despite being found guilty, representatives of Grünenthal were not convicted of negligence, and the case was dropped when the firm established a DM100m compensation fund for the victims. The German government doubled this, and the fund now stands at €204m (£140m, \$279m). It provides a monthly income of about €500 to about 2500 people in Germany who were severely affected by Contergan and have no other income.

The names of the protagonists in the television drama were invented and their personal details were changed considerably, but the pharmaceutical firm appears in the film as Grünenthal. After Grünenthal read the script, it instigated a court action against the film production company Zeitsprung to alter 15 key scenes. For example, Grünenthal challenged the statement in the script that the drug was not withdrawn until more than a year after the first suspicions were raised, stating that in reality this happened after just 12 days.

"We tried to convince Zeitsprung to alter these scenes. When they did not agree we had to take swift legal action to stop the broadcasting in the interest of our staff," said Sebastian Wirtz, chief executive officer of Grünenthal. The firm's press officer, Annette Fusenig, pointed out that Grünenthal acknowledges this part of its history in internal and external communication, for instance on its homepage and in publications, but insists on accurate documentation, even in fictionalised forms.

Zeitsprung insists that the film is based on historical facts. "The film mixes up historical facts with freely invented scenes in crucial points. The spectator will not be able to distinguish between fiction and fact and will therefore get a completely wrong picture of what happened. That we cannot accept," countered Annette Fusenig.

Rather surprisingly, Grünenthal's claim

was supported by one of the firm's former opponents, the lawyer Karl-Hermann Schulte-Hillen, on whom the lawyer in the film was modelled. He alleged that his personal rights were infringed, claiming that real events and personal details were tampered with, and reality and fiction mixed.

On the basis of the 2005 screenplay, the court decision by the Landgericht Hamburg in July 2006 was in favour of both these claims. Zeitsprung was not to release the film unless changes were made in 32 instances. But a higher court in Hamburg, the Oberlandesgericht, decided on 10 April that a version of the original film revised in just one of the 32 instances could be broadcast and that the other 31 should be dismissed. The Landgericht Hamburg will decide on 11 May whether changes should be made in two critical scenes involving Grünenthal.

Zeitsprung and Westdeutscher Rundfunk welcomed the court's principal decision on broadcasting. "We are happy that almost all obstacles have been removed by this trend setting decision which allows us in the future to handle recent historical topics in an artistic way," said WDR-TV director Ulrich Deppendorf. Mirek Nitsch, legal adviser at Zeitsprung, pointed out that the film had not been altered or recut, as Grünenthal states; revising is a natural process in filmmaking and the final version is never entirely true to the original script. He is hopeful that the final court decision will also be in favour of the film producers.

Grünenthal sees its original claims confirmed by the Oberlandesgericht's decision, saying that many key scenes have now been changed. The firm points out that it is still considering an appeal to the German constitutional court and has warned international television companies about buying the film.

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