Deregistered psychiatrist convicted of murder

Melissa Sweet *Sydney*

A deregistered Sydney psychiatrist, Jean Eric Gassy, faces possible life imprisonment after being found guilty of the murder of a former colleague and senior Australian health official, Dr Margaret Tobin, who was involved in his removal from the medical register.

Dr Tobin was director of mental health services in South Australia at the time of her murder, at the age of 51 years, in October 2002 (*BMJ* 2002;325:1056). She was shot four times after returning from lunch to her office in the South Australia Health Department building in central Adelaide. The judge who heard the case, Justice Ann Vanstone, described it as an "execution style" killing in her summing up to the jury.

Mr Gassy was deregistered in 1997 after a diagnosis of having

a delusional disorder and after refusing to comply with conditions placed on his registration. The prosecution proposed that Mr Gassy had harboured feelings of resentment and anger towards Dr Tobin for her part in his deregistration. In 1994, when director of mental health for the Southern Sydney Area Health Service, she wrote to the New South Wales Medical Board requesting an evaluation of Mr Gassy, who had been on sick leave for some months from the hospital where he was employed.

The prosecution argued that Mr Gassy's belief that he had a reduced life expectancy led him to act against Dr Tobin when he did. He hired a car in Sydney and made the two day drive to Adelaide under an assumed name.

It was alleged that Mr Gassy also held sinister intentions towards other prominent doctors involved in his deregistration. A list that had identifying details of several of these doctors, including photographs, personal characteristics, and addresses, was found at his home.

Mr Gassy, aged 48, represented himself because he wanted

DARREN SELLER/NEWSPIX

Australian psychiatrist Margaret Tobin was shot dead by Jean Eric Gassy, a former colleague who has now been convicted of her murder

to demonstrate his lucidity to the jury. He maintained that he had not, and did not, have a delusional disorder, citing his success in undertaking further studies since his arrest in November 2002.

In her summing up Justice Vanstone told the jury that Mr Gassy had, in many respects, represented himself with great skill. He had argued that he had been the victim of mistaken

identity and of "the political abuse of psychiatry." He said that he was such a good shot that he would have achieved a more accurate placement of the bullets if he had been the marksman.

Mr Gassy also accused prison and health authorities of denying him treatment for HIV infection. He maintained that he had AIDS, despite several negative results of HIV tests. □

US consumer body calls for review of cholesterol guidelines

Jeanne Lenzer *New York*

Cholesterol lowering guidelines issued in July by the US National Institutes of Health (NIH) are being challenged by a consumer organisation that is petitioning the NIH to appoint an independent panel to review them.

The petition, organised by the Center for Science in the Public Interest, a consumer advocacy organisation funded by subscribers to its newsletter and by individual donors, has asked the NIH to "create an independent review panel free of conflicts of interest to review all the data in the five studies that led to [the July] update... If warranted, [the NIH] should issue revised conclusions."

The request follows the revelation that eight of the nine authors of the guidelines had failed to disclose financial associations with the manufacturers of cholesterol lowering agents

(*BMJ* 2004;429:247, 31 Jul). The guidelines, devised by the national cholesterol education programme of the NIH's National Heart, Lung, and Blood Institute, were endorsed by the American Heart Association—which also receives funding from the makers of statins.

"This [petition] isn't just based on conflicts of interest," said Merrill Goozner, director of the Integrity in Science project at the Center for Science in the Public Interest. "It's based on anomalies in the science. The update went too far, and we want independent experts to do a systematic reanalysis of the data."

The new guidelines recommend lowering the threshold for treating low density lipoprotein cholesterol levels from 130 mg/dl (3.4 mmol/l) to 100 mg/dl for patients without heart disease and from

100 mg/dl to 70 mg/dl for patients with previously existing heart disease. But primary prevention is unproved even in patients with multiple risk factors—including diabetes, argued the consumer group.

The group's petition claims that the guidelines, which cited the heart protection study as showing that statins were beneficial for primary prevention for diabetics, "ignore the three other studies under review that found that statins did not provide significant benefit to people with diabetes."

The new guidelines will radically increase the number of people taking cholesterol lowering drugs, said Dr John Abramson, clinical instructor at Harvard Medical School, Boston, Massachusetts, author of *Overdosed America: The Broken Promise of American Medicine*, and one of the signatories to the petition. He told the *BMJ*: "In the one group that could benefit, men aged under 65 with multiple risk factors, you'd have to treat 238 men for one year to prevent one heart

attack, and to prevent one death you'd have to treat 526 patients for one year."

"While statins are clearly beneficial in certain high risk individuals," said Dr Abramson, "exercising, eating a healthy diet, and not smoking each individually appear to give more protection against heart disease, as well as the added benefit of preventing diabetes, osteoporosis, and multiple other diseases. One can't help wondering whether the ties between the authors and the statin makers contribute—consciously or unconsciously—to their focus on drugs."

Dr Barbara Alving, acting director of the National Heart, Lung, and Blood Institute, issued a statement in response to the petition, saying that the institute "stands behind" the guidelines and that "several clinical trials in high risk individuals are currently under way."

Dr Alving added that the National Heart, Lung, and Blood Institute was working on further "refining the process for management of potential conflict of interest." □