CORRESPONDENCE

Mental Disorders in People Affected by Thalidomide

A Cross-Sectional Study of Prevalence and Psychosocial Needs

by Alexander Niecke, Prof. Dr. med. Klaus Peters, Dipl.-Stat. Christina Samel, Dipl.-Psych. Kristin Forster, Prof. Dr. rer. pol. Markus Lungen, Prof. Dr. phil. Holger Pfaff, Prof. Dr. med. Christian Albus in issue 10/2017

Additional Points Need to Be Raised

The authors say that thalidomide (under the trade name Contergan) was first approved in Germany on 1 October 1957 and sold as an over-the-counter sedative.

As a matter of fact, it was approved only in the former German Federal Republic (West Germany). In the German Democratic Republic (East Germany), the import of thalidomide was banned for reasons of safety by the central committee of experts on medical drugs (*Zentraler Gutachterausschuss für Arzneimittel, ZGA*), chaired by pharmacologist Prof. Friedrich Jung (Humboldt University, Berlin). In spite of the ban, the GDR actually had some children affected by thalidomide—the result of tax-deductible gift parcels to the poor brothers and sisters in the East, which the customs officers presumably overlooked.

Furthermore, the article says that the first publications by McBride and Lenz appeared shortly thereafter [after the withdrawal of Contergan from the German market on 27 November 1961].

The Hamburg-based pediatrician Dr. Widukind Lenz, however, had already registered his suspicions on 18 November 1961 at a conference of the the association of pediatricians in the Rhein area and Westphalia (*Rheinisch-Westfälische Kinderärzte-Vereinigung*), of a possible association between the sedative and malformations, and he had contacted the manufacturers, Chemie Grünenthal, on 15 November 1961 by telephone in order to draw their attention to this.

It took 50 years until Grünenthal officially apologized to the victims of the thalidomide catastrophe. By then, only half of those affected were still alive.

DOI: 10.3238/arztebl.2017.0488a

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In Reply:

We completely agree with Prof. Meyer. „Thalidomide was initially licensed in West Germany“ would have been more precise. As in East Germany, license

approval was withheld in the United States. The US Food and Drug Administration (FDA) had safety concerns because the substance had not been tested in pregnant mice and rats. However, no teratogenic effect was shown in this setting later—this was successfully done only later, by extending the animal experiments to include a certain breed of rabbit (New Zealand White rabbits) (1).

To our knowledge, the first scientific article that explicitly described an association of thalidomide with malformations in children came from the Australian gynecologist William McBride and was published as a letter to the editor in the *Lancet* on 16 December 1961 (2).

We still welcome unreservedly the focus on the achievement of Dr. Widukind Lenz, who contributed a clarification to the discussion at the pediatric conference in Düsseldorf. Lenz warned against taking a “widely available drug” because he had noticed that 14 mothers of children with malformations had taken preparations containing thalidomide in early pregnancy. Although his colleagues accused him of unscientific behavior in publicizing his suspicion at such an early stage, his responsible conduct contributed crucially to the withdrawal of thalidomide from the market (3).

Lenz noted: “Nothing so far has confirmed an etiologic association between intake of the substance and the observed malformations. From a scientific perspective, it would therefore be premature to discuss this. However, an association is thinkable. As a human being and citizen, I therefore cannot justify keeping my observations to myself.” (4)

DOI: 10.3238/arztebl.2017.0488b

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Conflict of interest statement

The authors of both contributions declare that no conflict of interest exists.