

BMJ statins debate about scientific independence, not rigour

by TIM REED

Last October, an analysis of statins was published in the *BMJ*: 'Should people at low risk of cardiovascular disease take a statin?' (Abramson, J. et al., *BMJ* 2013; 347: f6123). Subsequent examination of the paper revealed that there were errors in the reporting of a study concerning the occurrence of side-effects experienced by patients taking statins and a correction was issued (*BMJ* 2014; 348: g3329). So far, so good; a minor reporting error was corrected according to normal practice.

Significantly, though, the error did not alter the conclusion of Abramson et al.'s original paper that "data fails to show that statins reduced the overall risk of mortality among people with less than 20 per cent risk of cardiovascular disease over the next ten years" (*BMJ* 2014; 348: g3329).

Media reports, however, have now compared this minor error to Wakefield et al.'s 1998 paper in *The Lancet* that linked the measles, mumps and rubella (MMR) vaccine to autism (*The Lancet* 1998; 351: 637-41). Demands have been made that the *BMJ* withdraw the paper completely, which it has now refused to do.

The two cases cannot be compared. Not only was the MMR paper in *The Lancet* a misrepresentation; it has been found to contain elements of deliberate fraud (*BMJ* 2011; 342: c7452). In the statin paper, a corrected error does not affect the conclusion. In the case of the MMR paper, the public scare that it created (which, even now, continues) may have set back the MMR vaccine programme many years and, indeed, could be responsible for child deaths as a result.

The *BMJ* and its editor, Fiona Godlee, recently came under attack by powerful interests who are saying the *BMJ* is discredited as a journal. In addition, there appears to be an effort to end the tenure of Dr Godlee, who has actually overseen much-needed calls for data transparency.

So, this debate is not about scientific rigour; it is about scientific independence. The statins argument itself is not the central issue; it is merely one example of the issues at stake.

Several medical journals have already lost similar battles when editors like Fiona Godlee were replaced by individuals friendly to commercial interests.

Concerned individuals and organisations should immediately respond to the article in the *BMJ* (<http://www.bmj.com/content/348/bmj.g3306>) and click through on rapid response.