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Cover image design by Claudia Bentley



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Published weekly. US periodicals class postage paid at Rahway, NJ. Postmaster: send address changes to BMJ, c/o Mercury Airfreight International Ltd Inc, 365 Blair Road, Avenel, NJ 07001, USA. \$796. Weekly Printed by Precision Colour Printing Limited



REUTERS/PHIL NOBLE

PICTURE OF THE WEEK

Empty sample tubes waiting to be filled at UK Biobank near Manchester, which should be able to reach its goal of getting 500 000 volunteers to donate DNA samples. It is the world's largest blood and urine sample freezer, and currently stores 450 000 samples from people aged 40 to 69.

THE WEEK IN NUMBERS

3.5 per 1000 people years

Incidence of rib fracture in a cohort of nearly 6000 community dwelling men in the US aged 65 or above (Research, p 798)

2.5m Number of people in the UK who have used cannabis in the past year

(Clinical Review, p 800)

70% Proportion of patients with dilated cardiomyopathy who are dead within five years

(Practice, p 808)

QUOTE OF THE WEEK

“It is extraordinary this action has cost £200 000 to establish the meaning of a few words”

Simon Singh on winning a legal appeal to use the defence of fair comment in the action brought against him by the British Chiropractic Association

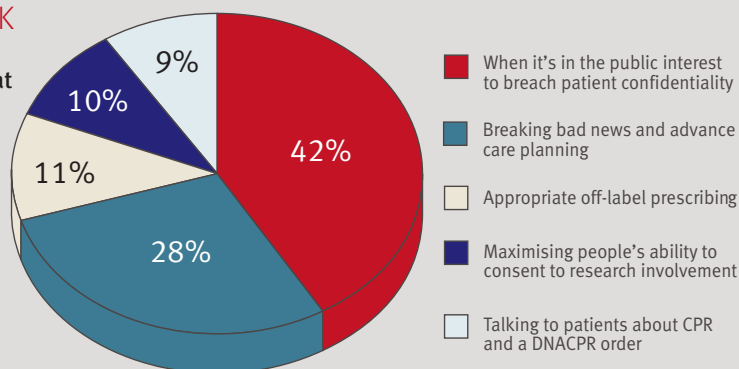
(See News, p 777, and Personal View, p 813)

GRAPHIC OF THE WEEK

Results of a bmj.com poll that asked:

“Which of these situations worry you most in your career?”

(Total votes: 326)



EDITOR'S CHOICE

Vested interests

People are now suggesting that the decision on whether to remove a drug from the market should not be made by the same people who approved the drug in the first place. I agree

Controversy over the safety of a widely used drug is fertile ground for exploring conflicts of interest. Back in 1998 the controversy was over calcium channel antagonists. A paper in the *New England Journal of Medicine* reported that journal articles and letters were much more likely to support use of these drugs for treating cardiovascular disorders if their authors had financial ties to the drugs' manufacturers (*NEJM* 1998;338:101-5). As Richard Smith, then editor of the *BMJ*, said at the time, the safety of calcium channel antagonists was a good subject to investigate "because it is intensely controversial and the market for the drugs is huge and lucrative" (*BMJ* 1998;317:291-2).

Perhaps for similar reasons Amy Wang and colleagues chose to look at the diabetes drug rosiglitazone (Avandia). Published in this week's *BMJ*, their systematic review found just over 200 articles commenting on rosiglitazone and the risk of myocardial infarction (p 799). Articles that gave a favourable view on the risks were significantly more likely to have authors with financial ties to the manufacturers of antihyperglycaemic agents in general, and rosiglitazone in particular, than those with unfavourable views. The significant association persisted across a range of different methods of analysis.

One of the more important findings of the 1998 paper was that although two thirds of authors had financial links to the manufacturers, only two of the 70 articles disclosed them. In this week's paper the rates of disclosure are better but still disappointing. Ninety of the 202 articles had authors with financial links to the manufacturers; 21 of these articles did not disclose the links, and three of the 21 said there were none. We've got to do better than this.

Rosiglitazone's manufacturer, GlaxoSmithKline, strongly denies an increased risk of myocardial infarction, and the controversy has gained sufficient heat to reach the US congress. As Ray Moynihan reports (p 785), GSK stands accused of suppressing internal evidence of an increased risk, undermining the steering committee overseeing one of its trials, and other "strategies to minimise or misrepresent findings that Avandia may increase cardiovascular risk." The Food and Drug Administration (FDA) hopes to resolve the matter at a further meeting of its advisory committee in July.

But drug regulators are prey to conflicts of interest of a different kind. The FDA and the European Medicines Agency have consistently argued to keep rosiglitazone on the market despite the safety concerns and despite the fact that there's an alternative, pioglitazone, with a better safety profile. People are now suggesting that the decision on whether to remove a drug from the market should not be made by the same people who approved the drug in the first place. I agree. What we urgently need is independent post-marketing surveillance.

What we also need is reform of England's libel laws. Simon Singh's successful appeal allowing him to defend himself against the British Chiropractic Association's libel action is good news (p 777), but it's only the first step in what A C Grayling argues must be a complete overhaul (p 813). This time it's the lawyers who have most to lose. The UK's three main political parties will publish their manifestos in the next few weeks. Tell us what you'd like them to say on this and other issues.

Fiona Godlee, editor, *BMJ* fgodlee@bmj.com

Cite this as: *BMJ* 2010;340:c1922

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Career Focus, jobs, and courses appear after p 816

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