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☆☆☆☆ **Response from the Global Alliance of Publication Professionals**, 8 Nov 2012

By **Dr. Adam Jacobs** (London United Kingdom) - [See all my reviews](#)
(REAL NAME)

This review is from: **Bad Pharma: How drug companies mislead doctors and harm patients (Paperback)**

Ben Goldacre's recent book 'Bad Pharma' makes some important points, but also seriously misrepresents the work of professional medical writers. We (the Global Alliance of Publication Professionals [GAPP]) wish first to set the record straight about what professional medical writers do, but also to indicate where we are in agreement about some of the sensible and important points that Goldacre makes.

Goldacre appears to use the terms 'medical writers' and 'ghostwriters' interchangeably. This is unfortunate, as he thereby misses a crucially important distinction. Ghostwriters are individuals who contribute to the writing of papers that are published in the peer-reviewed biomedical literature, and whose name does not appear on the paper. They hide their involvement and funding source. This is widely agreed to be unethical, and Goldacre is right to condemn it. We condemn it.

Customer Reviews

Bad Pharma: How drug companies mislead doctors and harm patients

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However, Goldacre then creates a thoroughly misleading impression by implying that ghostwriting is the norm among professional medical writers. Many professional medical writers make ethical and necessary contributions to published papers, with full and

transparent disclosure of their role and funding source. The reality of the working life of many professional medical writers, who work in close collaboration with named authors and have full access to all the data they need to ensure that papers are written in an unbiased manner, is very different to the caricatures of unethical ghostwriting that Goldacre describes. He supports his caricatures with cherry-picked examples of papers that were written, often long in the past, with scant regard for ethical standards. Those examples are indeed deplorable, but based on our experience (and we have over 120 years of experience in the medical writing profession between us) we believe those examples were probably rare even at the time when those abuses took place, before today's proliferation of anti-ghostwriting guidelines were in existence.

We recognise that ghostwriting is a problem, and that it still exists. However, professional medical writers' associations, such as EMWA, AMWA, and ISMPP (which are certainly not, as Goldacre describes them, "ghostwriters' associations") have been making strenuous efforts to reduce the incidence of ghostwriting, and those efforts have been bearing fruit. Research from these associations [1] and medical journal editors [2] indicates that ghostwriting has indeed become less common in recent years.

It is important to recognise the valuable contribution that ethical medical writers can bring to publications. Research shows that papers written with the assistance of professional medical writers are less likely to be retracted for misconduct [3] and are more likely to be compliant with reporting guidelines [4]. Professional medical writers also provide a valuable resource which can help ensure that papers get published, rather than languish in file drawers.

Where we do agree with Goldacre is that we share his desire to see all clinical research published. GAPP supports all efforts to ensure that all clinical research, from both pharma and academia, is published in peer-reviewed journals in a timely manner. Non-publication remains a problem and we have outlined how this problem could be solved in a recent editorial [5]. We were pleased to see Goldacre's recent tweet in support of our editorial, noting that we were ethical professionals! We also agree with Goldacre that historic problems of publication bias must be addressed. Many studies were completed long in the past, were never published at the time, and are still relevant to today's medical practice. We agree that it would be highly desirable if journals could organise an amnesty for old trials so that those historic, but still relevant, trials could be published.

We would suggest, however, that without the assistance of professional medical writers, such a huge scale of publication is most unlikely ever to happen.

Adam Jacobs, on behalf of fellow GAPP members Karen Woolley, Cindy Hamilton, Art Gertel, and Gene Snyder.

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4. Jacobs A. Adherence to the CONSORT guideline in papers written by professional medical writers. Write Stuff. 2010;19(3):196-200

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