

Geoff Kirwood

From: Andrew Moore <andrew.moore@ndcn.ox.ac.uk>
Sent: Tuesday, May 12, 2015 8:52 PM
To: Geoff Kirwood
Cc: Anna Hobson
Subject: Re: Darkness
Attachments: Fraud.pdf

Geoff

Research misconduct is indeed a problem.

Thought you might like a paper we published a few years ago, that gives an alternative picture as well.

FYI the example of the Japanese anaesthetist in this article led to various journal editors investigating the issue, and the retraction of rather a lot of papers.

Best wishes

Andrew

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© Anaesthesia 2010, 'Fraud or flawed: adverse impact of fabricated or poor quality research', Moore, Derry & McQuay

From: Geoff Kirwood <kirwoods@tpg.com.au>
Date: Monday, 11 May 2015 23:03
To: Andrew Moore <andrew.moore@ndcn.ox.ac.uk>
Subject: Darkness

Dear Prof Moore,

Again, I am sincerely appreciative of the consideration given the issues I've raised. I should preface my complaints with notice that troublemaking is not of my volition. Under our researcher visa system granting foreign post-docs limited tenure, in order to experience our health'care' (for a recompense the same as a McDonalds burger flipper earns), I have 6000 contenders between myself and work. Consensus among candidates is 150 to 140 average numbers of applicants at post-doc or Masters level opportunities.

I notify Prof Gotzsche some of the reasons for the 'darkness' that you queried. Prof Buchbinder's dept of Public Health and Preventative Medicine has three examples alone of misconduct, that I know of. First, Dr Wluka falsified a conclusion associating chronic pain and mental health but her public funding body is uninterested. They are also disinterested in assessing cognitive AE in the pregabalin for sciatica trial that they've funded. A major trial of atorvastatin as preventative for dementia is built upon falsified references and omitted conflicts-of-interest in proposal articles.

EBM advocate Prof Glasziou claims that investigating all problems in drug research is 100 times his workload. Prof Barnett agrees that our NHMRC sweep complaints of research misconduct under the carpet. We are a nation true to our convict heritage.

Regards, Geoff

PS Buskila's study will be published soon. Not that the rheumatologists provided any accountability, it came from the hyperbaric expert.

From: Geoff Kirwood [<mailto:kirwoods@tpg.com.au>]

Sent: Tuesday, April 14, 2015 9:59 AM

To: rachelle.buchbinder@monash.edu

Cc: 'Tugwell.BB'; kobby.ablin@gmail.com; dbuskila@bgu.ac.il'

Subject: FW: Rheumatology

Prof Buchbinder, thank you for acknowledging my complaint against Cochrane MusculoSkeletalGroup. It is regrettable that any response was reliant upon continued escalation right up to the co-founder Gotzsche, whose exasperated response to allegations of industry allegiance by Cochrane's Pain & Palliative Support Group: "I share your concerns about these issues and have complained about them myself earlier" only serves to highlight the abject failure of governance within the supposedly independent collaboration.

The Israeli rheumatologists copied are violating the patient rights conferred after Nuremberg – that fibromites' participation in a clinical trial would lead to beneficent outcomes, other than a presentation enhancing the researcher's careers.

Do you really have no contacts within American College of Rheumatology – despite regularly presenting at their conferences?

Regards, Geoff

From: Geoff Kirwood [<mailto:kirwoods@tpg.com.au>]

Sent: Monday, March 16, 2015 11:34 AM

To: acr@rheumatology.org

Cc: f Wolfe@arthritis-research.org'

Subject: FW: Rheumatology

I request that you take down the self-promoting trial result from

<https://ww2.rheumatology.org/apps/MyAnnualMeeting/Abstract/35158>

It perpetuates the intolerable broach of contract between researchers and participants, who'd believed that their contribution would justly inform therapy options.

Your profession is shameful. That's according to Gotzsche.

Registering of trials is governance tokenism when the example of NCT01827683 is considered. An RCT of hyperbaric oxygen therapy for fibromyalgia completed over two years ago, and a positive outcome was presented at ACR 2013. Unpublished, and no report available despite several memos to Buskila, Ablin et al. The problem appears to be the serving of two masters – both have declared (somewhat inconsistently – see attachment) consultancy fees paid by Pfizer and Eli-Lilly. They're now committed to pharmacotherapy as an intervention, running sponsored trial NCT01268631 of Cymbalta vs Lyrica for fibromyalgia.

Regards, Geoff

From: "Peter C. Gøtzsche" [<mailto:pcg@cochrane.dk>]

Sent: Friday, February 06, 2015 10:14 PM

To: Geoff Kirwood

Cc: kerry.breen@bigpond.com; "Geoffrey Alan Kirwood"

Subject: Re: my lectures in Australia on drug crimes, psychiatry and...

your are right about Tugwell, same man as the famous one
in my last chapter I allude to how corrupt rheumatologists are

bw

Peter

At 09:55 06-02-2015, Geoff Kirwood wrote:

...hypocrisy & the Hippocratic oath. A question on notice Peter, regarding the following unanswered challenges to the integrity of Cochrane editors and accuracy of your claims raised in previous emails to yourself: 'Have you been played for a patsy?'

Your Monash Uni contact for the speaking engagement on 11th is Dr Wluka, whose dept of Public Health & Preventative Medicine is headed by Prof McNeil. Who was whistleblower to our Chancellor for failing to declare the school as being a Pfizer sub-branch. On the other hand, I've highlighted to you that the Royal Aust NZ College of Psychiatrists submission to the ACCC against Medicine Australia's voluntary self-regulated Code of misconduct v18 was unique, in focusing on inappropriate industry influence within research.

Nov 5th Subject – 'What are facts' - ... Chapt17 of Deadly Medicines opening paragraph sets the tone for Feb's public lectures announced at <http://mentalaz.wordpress.com/> "*Psychiatrists are also 'educated' with industry's hospitality more often than any other specialty*" . Citation given is Ray Moynihan, who in turn cites a report co-written with Lisa Bero and submitted to BMJ but was unpublished, apart from in PLoS. These facts show that in this country alone, indeed in 2008 there happened to be more psychiatrist events offered by industry – however the truer picture is painted by the four other specialties with a more generous expenditure per head than psychiatry.

You've been emailed the link for Medicine Australia's Education Event reporting, Peter. And I saved you the trouble of extracting the facts by totting up the \$2mil for the most gifted specialty in the last reporting year – rheumatology.

Nov 6th Subject - 'pg 84 of Deadly Medicines' - ..." A rare admission that doctors' opinions are for sale to the highest bidder was provided by Canadian rheumatologist Peter Tugwell, who wrote a letter to several major companies soliciting funds for CME conferences on behalf of an organisation called OMERACT: *We think that support for such a meeting would be very profitable for a company with a worldwide interest in drugs targeted in these field. The impact of sponsorship will be high...*" . Would this be the very same Cochrane's Prof P.Tugwell, co-authoring with your staff Prof Buchbinder & Dr Bombardier on OMERACTs progress? After the 12th biennial conference we're still to discover how rheumies intend to measure outcome improvement – a major impediment to investigations! This year's junket has yet to report: http://omeract.org/conference_proceedings.html

Regards, Geoff Kirwood
Patient Advocate, GradDip Clinical Research