

Introduction
CBC News and Current Affairs
Tue 12 Jun 2001

PETER MANSBRIDGE: Tonight. The race is on. The unofficial launch of the Canadian Alliance leadership campaign. Too close to home. Children and pregnant women in Sydney, Nova Scotia, get tested for toxins. And gopher broke. Why Saskatchewan farmers are taking drastic action against these critters. Plus "Hard to Swallow."

UNIDENTIFIED MAN (1): I'm in the business of using these drugs to treat people.

MANSBRIDGE: He's a leading expert on anti-depressant drugs such as Prozac. So why did one of Canada's top research centres suddenly leave him high and dry?

UNIDENTIFIED MAN (2): We feel that a number of his views could affect the quality of patient care.

MANSBRIDGE: A feature documentary.

ANNOUNCER: The National. From the Canadian Broadcasting Centre, here is Peter Mansbridge.

Dr. David Healy
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PETER MANSBRIDGE: The Centre for Addiction and Mental Health is one of the country's top research centers. It's affiliated with the University of Toronto. And recently it was rocked by a bitter controversy surrounding this man, Dr. David Healy. He's an expert on anti-depressant drugs such as Prozac and the center offered him a prestigious job. But then suddenly it changed its mind. The decision the critics say was influenced by the center's relationship with powerful drug companies. Darrow MacIntyre has this feature documentary.

DARROW MACINTYRE: A quiet, small town in North Wales. It seems an unlikely place to find a man like David Healy, university professor and psychiatrist, renowned in medical circles from New York to Paris to London as one of Europe's eminent scientist. This time last year, Healy was about to leave Wales. Lured to Toronto by this university teaching hospital, the Centre for Addiction and Mental Health and the promise of his own research clinic there. Then one day last November, something strange happened. After almost two years of courting Dr. Healy and finally offering him the big job, senior staff at the centre abruptly decided to dump him. They say they found out just in a nick of time that Healy held certain unscientific views about a number of psychiatric drugs, views they say could harm patient care. But many in the academic community think their decision had less to do with science and more to do with money. What this is really about, they say, is the role drug companies play in influencing scientific debate. When it comes to anti-depressants there are few people who know more than Dr. Healy. Especially about a group of drugs called S.S.R.I. or Selective Serotonin Re-uptake Inhibitors. The best known of these is Prozac, the most widely prescribed anti-depressant in the world. But for a decade now, research has suggested that drugs like Prozac may actually cause some people to have suicidal urges. Nobody really knows how often, but Healy thinks often enough to be concerned.

DAVID HEALY: Let's say in the case of Prozac that it causes the problem, it will cause people to commit suicide at a rate of one in 1,000 people who actually go on the drug. To most people here a figure like that, that sounds like a fairly low figure. It sounds like a reasonable trade-off almost. But if 50 million people go on the drug, then that becomes 50,000 suicides which is maybe higher than there has been, but it becomes an awfully big figure. It's what the FDA call the public health multiplier which is a small hazard distributed among millions of people becomes a big problem.

MACINTYRE: Recently David Healy conducted studies aimed at trying to figure out just who is at risk and who isn't. Are you opposed to the use of S.S.R.I.'s?

HEALY: Absolutely not. No. My Ph.D. thesis was on the serotonin re-uptake system and I've been, I was one of the people when the S.S.R.I.'s came out first who would have been much quicker than most of the rest of my colleagues to use this new group of drugs. I continue to put a very large number of people that I see on the drugs. And I believe

as the research that we've done indicates that if you're really going to use the drugs properly and I'm in the business of using these drugs to treat people, is you're really going to find out who does well on these drugs, what you find out at the same time is who does poorly.

MACINTYRE: Dr. Healy's not the first one to document this problem. Doctors at Harvard University raised concerns about S.S.R.I.'s and suicide years ago. Harvard lecturer and psychiatrist Joseph Glen Mullen wrote about it in his book "Prozac Backlash". He says more doctors should listen to Healy.

JOSEPH GLEN MULLEN: Dr. Healy for many, many years has been widely regarded as one of the leading psychiatrist in Europe and really in the world. His research is outstanding. And he's one of the few people who has continued to do research on the suicidality issue in particular and been a strong proponent of patients needing to get this kind of information.

MACINTYRE: Last summer, the centre made it official. They wanted Healy as the top scientist in their mood and anxiety disorders clinic. They offered him the director's job and he accepted.

HEALY: I felt very good about it. And I also brought over my family and certainly they all seemed reasonably open to the move as well. So we all began to get fairly excited.

MACINTYRE: At the time the centre had no problem with Healy's research. But someone else did.

CHARLES NEMEROFF: Hello. My name is Charles Nemeroff.

MACINTYRE: Chair of the Department of Psychiatry at Atlanta's prestigious Emory University, Dr. Charles Nemeroff is a highly respected and influential scientist. And a paid consultant to a dozen drug companies. A leading psychiatric magazine recently profiled him under the headline Boss of Bosses. Is the brash and controversial Charles Nemeroff, the most powerful man in psychiatry. Inside the authors wrote, Nemeroff is among the most coveted advisors to the pharmaceutical industry. And he fully expects to lead the corporate strategies of those he advises. Those who do not heed his advice are often the recipients of his wrath. Last summer at Cambridge University in England, Healy had a brush with the boss of bosses.

HEALY: Dr. Nemeroff came up to me in the course of the meeting in what was a very scary meeting between him and me and told me that my career would be destroyed if I kept on showing results like the ones that I'd just shown, that I had no right to bring out hazards of the pills like these.

MACINTYRE: In a written statement, a doctor who witnessed the confrontation told us, when it became clear that David Healy would not back down from his points of view, Nemeroff said that what Healy was publishing might harm the drug industry, specifically Eli Lilly. He, Charles Nemeroff, said that these people were ruthless and would go to great lengths to make life hard for academics who published articles associating suicide with Prozac.

HEALY: It was a fairly short encounter. It lasted about two or three minutes but a very scary one.

MACINTYRE: James Turk is with the Canadian Association of University Teachers. He says to a drug company concerned about profits, researchers like Healy could be seen as dangerous.

JAMES TURK: I mean he's one of the world's leading scholars on anti-depressants. He's done clinical trials for some of the drug companies. But what he isn't is not in the drug companies' pockets. And Healy's argument is that S.S.R.I.'s are suitable for some patients but in fact can be very harmful for others. And the impression I get is that the drug companies want 100 percent of the market whereas if you do that research and Healy's right, that there are 40 percent or 50 percent of the people who currently get S.S.R.I.'s for whom it's not appropriate, then the market is cut in half.

MACINTYRE: Just a few months after the Nemeroff incident, David Healy flew into Toronto on what should have been his last trip to the city as a visitor. He planned to give a lecture at his future place of employment, hire some staff, pick out some furniture for his office and meet with his new boss, David Goldblum.

HEALY: He was keen for me to move from the U.K. much than I was keen to move. He hoped that I would move within weeks whereas I had hoped I'd move for April first.

MACINTYRE: So it was a very positive day?

HEALY: Absolutely. Absolutely. Couldn't have been more positive.

MACINTYRE: And no hint for you that there was any trouble at all?

HEALY: Not the remotest of hints.

MACINTYRE: But that was about to change completely. Two days later, Dr. Healy delivered his lecture at the

symposium. It was a sweeping review of the history of psychiatric drugs. He covered all the old ground about S.S.R.I.'s and suicide and raised concerns about some new anti-psychotic drugs. But one of the main themes concerned conflict of interest with drug companies and the increase challenge doctors face in avoiding it. Members of the audience who filled out evaluations forms rated Healy's lecture the best of the lot. But it seems his new boss didn't agree.

HEALY: When my, I met Dr. Goldblum that evening after the lecture, my guts told me that there was a much more serious problem than my head said that there could be. I saw a man who was more worked up than I've seen almost anyone else before ever. He seemed to me to be at risk of a stroke he was so worked up. It's an extraordinary switch to have happened just during the course of a few hours.

MACINTYRE: The centre wouldn't allow us to interview Dr. Goldblum. Instead we were referred to the President and C.E.O. Paul Garfinkle. He says Healy's lecture was to blame.

PAUL GARFINKLE: Essentially, it was the extreme nature of his views with extraordinary extrapolations based on inadequate science, that really are scientifically irresponsible. For example, the view that anti-psychotics cause more harm than good.

MACINTYRE: Did Dr. Healy actually say that anti-psychotics do more harm than good? I believe that he claims he didn't actually say that.

GARFINKLE: I have to tell you, I wasn't at the lecture. But I've been told by a number of people that he essentially said that.

MACINTYRE: Dr. Garfinkle may not have heard the lecture but someone else did. Charles Nemeroff. He was also scheduled to speak that day and it seems he didn't restrict his comments to the podium. Although he refuses to interviewed, Dr. Nemeroff said through his lawyer, the centre asked for his opinion of Dr. Healy that day and he gave it. What he said then, we don't know, but later that day he flew to New York where we do know he told a meeting of the American Foundation for Suicide Prevention exactly what he thought about Healy. One scientist who was there said Nemeroff's attack was furious, angry, exorcised, that the thrust was Healy was a nut.

GARFINKLE: I don't know anything about it. I do know that he has the right to say whatever he wants. I'm not, I don't stifle debate.

MACINTYRE: A few days later, the centre dumped Dr. Healy. Before the job offer was rescinded, were you aware of the confrontational nature of Dr. Nemeroff and Dr. Healy's relationship?

GARFINKLE: Um, I can't recall, I learned about it some time after the lecture, probably around the same time as the job was rescinded.

MACINTYRE: Garfinkle says Nemeroff's opinion played a minor role, if any, that Healy's unscientific lecture was his undoing.

GARFINKLE: If he says that these medications cause suicide, our view of this is that this isn't about Prozac. This is about sweeping statements based on inadequate science. Frankly we'd be as concerned about aspirin as about Prozac. But there is no causal scientific link. There's no valid scientific evidence saying these drugs cause suicide.

MACINTYRE: That's certainly the position of Prozac maker Eli Lilly. Even though the company recently bought the rights to a new generation of Prozac, patented on the grounds that it's less likely than the current Prozac to cause severe anxiety leading to intense and violent suicidal thoughts and self-mutilation. Still Garfinkle insists the speech was so bad, it even raised questions about Healy's ability as a doctor.

GARFINKLE: We feel that a number of his views could affect the quality of patient care.

MACINTYRE: So you are suggesting that his view on S.S.R.I.'s, for example, might lead him to not prescribe S.S.R.I.'s? Is that what you mean?

GARFINKLE: It could, if you took an extreme view, if you said 30,000 people had killed themselves on S.S.R.I.'s, that could frighten people away from treatment for depression.

MACINTYRE: But Dr. Healy is shocked at the suggestion.

HEALY: Well my reaction is considerable surprise. My hunch is that I've treated very many more people who were actually depressed than any other clinical person in there, but they seem to have acted without asking me anything at all. They're going around making claims about concerns that they have without really having the evidence that there's any, any real basis to the claims that they're making.

MACINTYRE: Besides, Healy says there was nothing in his lecture that day that he hadn't already published in his

book "The Anti-Depressant Era" or said in previous speeches. Your lecture that you gave on the 30th, what in that lecture do you think could've possibly caused the people at the Centre for Addiction and Mental Health to be concerned enough to withdraw a job offer?

HEALY: Well I can't see that there's anything in the actual lecture per se that would cause them to bite the contract. They had heard all of the stuff before. Other audiences have heard exactly the same lecture and the response has been extremely enthusiastic. It has not been hostile in any way at all.

MACINTYRE: James Turk says Canada's university teachers are demanding an explanation.

TURK: The suggestion that these folks heard something in his talk when his talk was really a distillation of what was in his highly regarded book on the same subject, it just can't be true. At least I don't think it can be true. But even if the were concerns raised in the talk, the thought that you'd take a job away from a world renowned expert in a field who you've hired because of some remarks in the course of a 30 minute lecture is astounding. I mean it's just unprecedented in Canadian universities or in any respectable teaching hospital.

MACINTYRE: When we come back, was it his science or something else?

NANCY ZETTLER: Does he have a right to feel like he's being conspired against? He sure does.

GARFINKLE: Let me set the record straight about Dr. Healy's so-called conspiracy theories.

(COMMERCIAL BREAK)

Dr. David Healy - Part II **CBC News and Current Affairs** **Tue 12 Jun 2001**

DARROW MACINTYRE: These days drug companies are an essential part of academic research. In fact one doctor recently described them as the mortar in the walls of the medical establishment. There's no question their input is necessary but at what point does input become influence. It's a question scholars everywhere are asking themselves these days and since the Healy affair, many think the Centre for Addiction and Mental Health has crossed the line.

TURK: I think they took away the job because they didn't want someone asking probing questions about the role of pharmaceutical companies in shaping medical research.

GARFINKLE: We're extremely careful about conflict of interest with the pharmaceutical industry but in general, we're vigilant and we're proactive.

MACINTYRE: The centre's President Paul Garfinkle says most of his funding comes from sources other than drug companies.

GARFINKLE: Well over 80 percent of our research funding is in these non-industry related areas -- 18 percent is industry related and this 18 percent has been constant over the last few years. It's not growing. I mean, if I saw 18 become 22, become 30, I think I might be quite concerned.

MACINTYRE: While it's true the centre's overall portion of research funds from drug companies is around 18 percent, the figures for the mood and anxiety disorders clinic that Dr. Healy was supposed to head up are dramatically higher. Last year, 52 percent of the research dollars in that department came from drug companies, almost three times the centre's overall rate. Then there are corporate donations, including a \$1.5 million gift Eli Lilly pledged to the centre's fundraising campaign last year. Such a close financial relationship inevitably comes with a close working relationship and lots of meetings between scientists including one on the very day David Healy delivered his lecture. On the day that he gave the lecture, there were a group of people from the centre at Lilly's headquarters in the States.

GARFINKLE: I understand that. I've learned that. Yeah.

MACINTYRE: What's, what there any kind of communication back and forth?

GARFINKLE: Actually zero. None.

MACINTYRE: Not a phone call?

GARFINKLE: Not a phone call.

MACINTYRE: As far as you know, did the subject of Dr. Healy come up at all at those meetings?

GARFINKLE: In Indianapolis?

MACINTYRE: Yeah.

GARFINKLE: I won't say 100 percent certainty, no.

MACINTYRE: How often do scientists from the centre meet with people from Eli Lilly? Is that a fairly regular...? I know they have their own staff of scientists.

GARFINKLE: I don't know. I couldn't answer you. I can tell you I encourage our people to meet with the very best people all over the world. If we're going to advance care, if we had people who are ill today and we're going to advance care, it's because we've mixed with the very best minds internationally.

MACINTYRE: There's no evidence anyone at Eli Lilly or any other drug company played a direct role in getting Healy dumped. But then Healy says they didn't have to. You don't think that they picked up the telephone and called somebody at the University of Toronto and said don't hire that guy, do you?

HEALY: The way the system is set up, I don't think that has to happen, but the outcome will be still the same.

MACINTYRE: James Turk thinks that outcome is clear.

TURK: I think what happened is there were people at C.A.M.H. and University of Toronto who were concerned about having a widely recognized critic, having a person who raises questions about corporate connections and the impact of that might get in the way of fundraising. So, there's enough evidence that the drug companies do intervene and try to put strings on that people can get worried. So they don't have to phone.

MACINTYRE: It happened to the folks who publish this journal on medical ethics recently after they printed an article by David Healy suggesting Prozac may be over-prescribed, their largest donor Eli Lilly pulled its funding. But it may be Healy's work elsewhere that's really put him at odds with the S.S.R.I. makers. As an authority on the drug's side effects, he's been asked to give expert testimony in a handful of court cases against the drug company.

HEALY: It's one thing for people to hear lectures on the hazards. It's a completely different thing for one of the companies to lose a legal case to some plaintiff who may have lost a wife, daughter, mother, father-in-law, whatever. And if that were to happen, the companies stand to lose a vast amount of money.

UNIDENTIFIED MAN (1): Elated. We feel elated. Justice has been done.

MACINTYRE: In fact, just last week, in a U.S. court a jury did decide this man killed his wife, his daughter, his granddaughter and himself because he was suffering from an adverse reaction to Paxil, an S.S.R.I. similar to Prozac but made by Glaxo SmithKline. An expert witness in the case, David Healy. From her law offices in downtown Chicago, lawyer Nancy Zettler has spent ten years battling drug companies in legal cases about S.S.R.I.'s and suicide. She's seen those companies dig up and air any dirt they can to discredit critics, including Healy.

NANCY ZETTLER: Does he have a right to feel like he's being conspired against? Sure does. He's one of the few people in this country, in these cases here in the country, in the States, that's willing to stand up and testify. And he's one of the, he has very, he has no baggage as far as I know. There's no skeletons. And if there's nothing that they can try to dig out to throw at him at trial, then what better way than try to manufacture something.

MACINTYRE: Paul Garfinkle scoffs at the idea his staff was influenced by anyone.

GARFINKLE: Let me set the record straight about Dr. Healy's so-called conspiracy theories. We have never ever made an offer or rescinded an offer based on the impact of an external donor. Neither Eli Lilly nor any other corporation, nor any individual has affected or influenced our human resources matters.

MACINTYRE: What's this whole debate over Dr. Healy getting hired and then having the offer withdrawn? What's it done to their reputation at the centre and the university?

GARFINKLE: The centre is about many things. The centre is about standards. It's about quality. It's possible that over the years in psychiatry, if you look back historically, people allowed almost anything to be said. That affected how patients were treated. We're not going to do that.

MACINTYRE: What do you mean by that?

GARFINKLE: Well, a common theory when I was a student was the theory of the schizophrenogenic mother and that is there was something about the mother that caused schizophrenia. If you don't think that hurt families, let me tell you that was very, very bad for clinical care. Standards count. If you're going to make up a theory like that, you've got to have evidence.

MACINTYRE: And you're suggesting that what Dr. Healy is doing is something like that?

GARFINKLE: Oh no, no, no, no. Come on.

MACINTYRE: Not even in saying well...

GARFINKLE: I'm saying standards count. And you cannot make sweeping statements without the adequate back-

up.

MACINTYRE: Healy says he's never done that but for him a big part of upholding standards is remaining vigilante about conflict of interest.

HEALY: But Dr. Garfinkle and I get money from the pharmaceutical industry. We speak for pharmaceutical companies, run trials for them, and it does bias you. We probably all hope that the bias is going to be a small little bias and it's a risk we just have to take. It's only not going to be an option as long as people don't feel that people like me and Paul Garfinkle haven't just become drug dealers. That we're like car salesman who sell you the car regardless of the hazards. They want people, want us to be people who will weigh the benefits and the risks and will let you know about the benefits and the risks, the pros and the cons and maybe even advise in some instances that you shouldn't have the pills at all.

MACINTYRE: The Centre for Addictions and Mental Health probably never dreamed that breaking David Healy's contract would spark the academic debate they're now embroiled in. A debate now about Healy's views on anti-depressants and suicide but about his right to express those views publicly. A fundamental principle that underpins all scientific research and debate.

TURK: Here we have one of the top, if not the top psychiatric research facility and teaching hospital in the country saying we don't want someone who raises a certain set of fundamental questions about one of the most prescribed, widely prescribed classes of medicine in Canada. We don't want that here. That would say to me as a member of the public, well wait a minute. Are these folks really prepared to look at all sides of the question. Can we trust what's coming out of here? That's the dark cloud that the actions of the administration at C.A.M.H. and the University of Toronto have put over their own institution.

MACINTYRE: David Healy says he's not really disappointed that he's staying in Wales. After all, the U.K. is home for him. And it's where he's built a distinguished career. He is disappointed in the way the whole affair was handled by an institution he expected more from.

HEALY: The University of Toronto is clearly still one of the major universities in the world. There are very, very important issues here and it's going to take a big university to raise these issues, but raising these issues are also something that will make a university great. So there is a challenge here, both for the university and for the C.A.M.H. to rise to. I still think they can rise to them.

MACINTYRE: Are you disappointed in the Centre for Addictions and Mental Health?

HEALY: Yes.

MACINTYRE: For The National, I'm Darrow MacIntyre.

end