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Sir Graeme Catto  
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Dear Dr Catto,

I have just received a response to the letter I wrote to you on March 3<sup>rd</sup>. I can understand that protocol may have dictated that someone other than you should have responded to me, although my request was to you – you will note that letter did not come under the heading of the reference number you have for my case. Having discussed the matter with colleagues, I can also see that the decision to have the GMC write to me in the first instance might be viewed as proper and even helpful.

However, although I will also be replying to Dr Cox-Brown, I think things have moved to point where you might need to consider responding in person to the points raised in this letter, and you will note that this letter also does not bear the GMC reference number for your ongoing investigation of my case. This letter does not respond to already current issues, it raises new ones.

Enclosed are materials obtained following Freedom of Information requests to Oxford and Bristol Universities. Notwithstanding the fact that Oxford have not responded to an FOI request, and Bristol has singularly failed to provide a raft of correspondence they clearly have, the material that has been provided supports the following case.

You will see from the Oxford material that Dr Phil Cowen is also involved in this loop. Dr Cowen wrote a review of a Harvard University Press book of mine, *The Creation of Psychopharmacology*. Many would regard this review as, at the very least, mean spirited. I enclose it. It stands in marked contrast to most other reviews of this book. The review came as a surprise to me in that I had regarded Dr Cowen, along with Drs Goodwin and Nutt as friends.

The Cowen review has been used as an exhibit by at least one of the SSRI producing companies in legal actions, aimed it would seem at representing Dr Cowen's review as a general British or general academic view of Healy and, as such, grounds for the Courts to exclude Healy as an expert witness.

I first attempted to draw Dr Cowen's attention to this use of his review through a back channel – with no success. I subsequently emailed him, as the correspondence makes clear, and the response from Dr Cowen, which you do not have here, was dismissive – even though it is worth noting that his published views on SSRIs and their links to suicide indicate that he believes these drugs may cause the problems that I also think they cause.

This point needs to be set against the background of contact between Dr Goodwin and Pfizer following a lecture I gave in Oxford in 2000 – outlined in my last letter, along with a further contribution by Dr Cowen in the BMJ following the first Panorama programme on Seroxat referred to in this set of Oxford documents.

Correspondence between Drs Nutt, Goodwin, and Cowen revealed here indicates that the question of taking Healy to the GMC had been under active consideration for years. This coincides with reports I have had from third parties. The material also suggests you have had a previous letter.

The materials enclosed here and in particular the earlier draft letter appear to give the lie to Dr Nutt's statements to your colleagues in the GMC that he had no intention of making a complaint. You will have to make your own judgement as to the motivation behind the series of draft letters and the final letter and perhaps also have to make a judgement as to how things will play in the public domain as they almost inevitably will.

There may be technical definitions of conspiracy and of witting and unwitting involvement in a conspiracy. As things stand, it would seem from these documents that you might be at least perceived to be an unwitting party to a conspiracy.

I would like to extend to you the courtesy the GMC may have extended me and invite you to offer your view on this matter. I think this would be better coming from you than from someone else in GMC.

While I would prefer things to be informal, given the gravity of the situation – of which more below - I feel I have little option but to make a more formal request for a response, the details of which are in the letter to Dr Cox-Brown.

For the record, my hunch is that your recent letter from Dr Nutt is linked to a further lawsuit filed in the United States alleging fraud against GlaxoSmithKline, a company with which Dr Nutt has ties. A key part of this action involves ghostwritten articles claiming efficacy and safety for GSK's drug paroxetine. This has meant that a number of academics who may have links with Drs Nutt or Goodwin are under notice of deposition. At present, it

appears that some of these academics on whom deposition notices have been filed are on sabbatical, out of the country, or otherwise indisposed.

I find the references to Dr Meadows and Wakefield in the materials from Oxford and Bristol extraordinary. I have never been involved in giving testimony that has put anyone in prison or convicted them of anything. In fact I have only testified in one case in the United Kingdom and that led to someone getting a lesser sentence than they might otherwise have had. All other testimony in Britain has been to inquests and has been done almost entirely on a *pro bono* basis. As regards the hazard of treatment I raised, you will note that regulatory bodies worldwide have moved to endorse my concerns, in complete contrast to what happened with Dr Wakefield.

Dr Goodwin however has appeared as an expert witness at an inquest for Pfizer, the remuneration for which might bear exploring, at which the company had lined up a QC and other lawyers against a widow who was simply seeking to have the inquest return an open verdict rather than a verdict of suicide. The widow in question was legally unrepresented, as she was unaware that Pfizer would be at the inquest and would seek to attack her in the way the company did. Their lawyers reduced her to tears on several occasions. This must have been close to unprecedented behaviour at an inquest of this sort. I expect even Dr Goodwin was embarrassed.

Drs Nutt and Goodwin are unhappy that Panorama dealt with these matters. But it was hardly anything to do with my moody magnificence, as Dr Goodwin puts it, that led them to revisit this issue on two further occasions when Panorama had never before made more than one programme on any issue. The issues were, and are, real, as evidenced by the fact that the Attorney General of New York, Eliot Spitzer, sued GlaxoSmithKline for fraud on the basis of the same issues and the company settled. As part of the settlement, the company agreed to post clinical trial details on the Internet, a move that other companies have since followed, and that I am sure you would applaud.

Dr Nutt's letter also suggests that one motive for writing to you was that he was aggrieved that the media had raised questions relating to conflicts of interest among members of the first SSRI panel convened by MHRA. I suggested in my first letter to you that he might have believed that I had played some part in this. I also made it clear that I had no part in it.

It also clear that from earlier correspondence Drs Nutt and Goodwin appear to have thought they might be able to get the GMC to investigate my "dodgy statistics" in the way that has happened in other high profile cases. I assume that given that this point does not feature in the most recent letter that they have since taken statistical advice themselves. The alternative explanation would appear to be that they have had specific advice from someone cognizant of GMC procedures that GMC does not ordinarily deal with issues at this level of generality – leading to the very focussed nature of Dr Nutt's recent letter.

More generally I find the tone of Dr Nutt and Goodwin's correspondence that indicates their belief the GMC might endorse their views on conflict of interest and media involvement in medical controversies quite extraordinary.

While their posture seems laughably arrogant to me, the issues raised in this letter I am sure you will agree are serious for all individuals now embroiled in this issue as well as for both Oxford and Bristol Universities and for the GMC.

I apologise if the tone of this letter appears unduly robust. But consider the matter from my point of view. Even if the GMC exonerates me, PR companies with interests in this area will disseminate the fact that a complaint was filed, and that the GMC investigated my fitness to practice, with industrial efficiency and without any mention of exoneration. This matter will in all probability be used legally also – unless I tackle the issues head on.

Dragging Beachcomber into this may seem inappropriate, but the situation reminds me of his quip about cricket offering the best example of English ideas about fair play – eleven against one.

I bear no ill will toward any of the individuals involved and indeed regret that our former collegiality may not be possible in future. I also would not wish to injure any of the institutions involved. But, against a background of unwillingness on the part of these individuals to engage publicly on the substantive issue of treatment hazards, I have to suggest the indications from these materials point to a possible conspiracy to defame a colleague. Is this not something that falls within the purview of the GMC?

Clearly the GMC is a body to appeal to in the case of unprofessional conduct on the part of colleagues, but I am advised that if I suspect the GMC to be part of the problem that the only option is a Judicial Review of the GMC. This is something I am actively considering.

If you have a protocol for dealing with unprecedented situations this might be the time to reach for it. I think a meeting in person would help, but clearly this is up to you.

Yours sincerely

David Healy