

## Correspondence

EDITED BY MATTHEW HOTOPF

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### Conflict of interest and the *British Journal of Psychiatry*

There has been debate in medical journals over the potential for conflicts of interest to bias scientific judgements: "we should pay attention to conflict of interest not only when it is clear that a judgement has been influenced by conflict of interest but simply when it might have been" (Smith, 1994). The *BMJ* requires authors to complete a detailed questionnaire regarding competing interests. Editorial staff may also be vulnerable to conflicts of interest. The editor of the *New England Journal of Medicine* was criticised for links with the pharmaceutical industry (Gottlieb, 2000).

The drug company Wyeth sponsors the educational organisation Neurolink. Although Neurolink has educational components, it may also fulfil a marketing function. Its educational materials appear to give undue prominence to venlafaxine, manufactured by Wyeth. The Editor of the *British Journal of Psychiatry* is a member of the Neurolink Advisory Board as well as a member of the working party which produced the 'depression guide' (Neurolink Advisory Board, 2000).

The *British Journal of Psychiatry* has recently included a paper written by two Wyeth employees and a Wyeth consultant (Thase *et al*, 2001). This is a commercially valuable paper in which venlafaxine is described as having benefits compared with other antidepressants. It has already been cited in advertisements for Wyeth's venlafaxine preparations. I believe that the paper should have contained a declaration of interest by the Editor of the *British Journal of Psychiatry*, making clear his links with Wyeth. Perhaps the editor of a major medical journal should not have such a prominent link with any drug company.

I hope that the *Journal* will strengthen its policy on competing interests, including

a detailed register of interests for editorial staff, referees and authors (including authors of letters) on its website. This should include the magnitude of payments: there is a big difference between a drug company paying someone £10 travel expenses and £10 000 consultancy fees. Significant competing interests should be summarised in the published articles. At the very least, readers would learn a lot about the dependency between medical research and big business.

#### Declaration of interest

I am paid £2000 per year for editorial work for *Schizophrenia Monitor*, a review journal sponsored by the drug company Novartis.

**Gottlieb, S. (2000)** Controversy over new Editor at *New England Journal of Medicine*. *BMJ*, **320**, 1358.

**Neurolink Advisory Board (2000)** *Depression: A Guide to its Recognition and Management in General Practice*. London: Neurolink.

**Smith, R. (1994)** Conflict of interest and the *BMJ*. *BMJ*, **308**, 4.

**Thase, M. E., Entsuah, A. R. & Rudolph, R. L. (2001)** Remission rates during treatment with venlafaxine or selective serotonin reuptake inhibitors. *British Journal of Psychiatry*, **178**, 234-241.

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**Author's reply:** Dr Wright correctly notes that the potential impact of ties with the pharmaceutical industry may extend to editorial decisions about whether or not a manuscript is published. This topic was addressed in a recent article in the *Journal of the American Medical Association* (Wilkes *et al*, 2001) and the authors, a group of editors of general medical journals, recommended periodic publication of the editors' relationships with various companies. Should the Editor of the *British Journal of Psychiatry* choose to accept this suggestion, it would appear to address at least some of Dr Wright's concerns.

Most of us in academic medicine have some consulting, teaching, or research relationship with the corporations that manufacture medications. I do not know Professor Wilkinson, but I assume that, like me and most others, he works with more than one company.

It is neither reasonable nor necessary to assume that any fiscal relationship with a pharmaceutical company should necessitate that the editor exclude himself or herself from the decision-making process. I do not favour the use of a specific level of income to determine whether or not there is a conflict. Frankly, some of the most blatantly biased decisions (about the scientific merit of a manuscript) that I have observed over the past 25 years have involved no money whatsoever. A monetary threshold cannot replace personal integrity or judicious feedback when one's peers seem to be close to the edge of propriety.

With respect to our paper (Thase *et al*, 2001), we submitted to the *British Journal of Psychiatry* because of the journal's clear commitment to evidence-based medicine. No aspect of the submission, review, revision, resubmission or acceptance process seemed to be out of the ordinary. The manuscript received very positive 'blind' reviews and was praised for being even-handed. The studies incorporated in our pooled analysis were randomised, double-blind trials, the data sets were 'closed' (i.e. they had already been subjected to external regulatory review), and the studies were not selected or excluded because of the pattern of findings. In fact, two of the studies in the pooled analysis were 'rescued' from the file drawer of unpublishable results. The results were robust: the findings were consistent across multiple outcome definitions and various study characteristics. The findings also were reinforced by a sensitivity analysis, which indicated that the effect was not dependent on the results of any single study.

There are now a number of other studies comparing venlafaxine and selective serotonin reuptake inhibitors (SSRIs), and we tabulated the grouped data of nine such trials in our paper. Additional pooled analyses are underway. Working with an overlapping data set, Freemantle *et al* (2000) observed a similar magnitude of advantage favouring venlafaxine (*v.* SSRIs) using a meta-regression approach to meta-analysis. If venlafaxine is indeed a more effective antidepressant than the SSRI class, there will be ample documentation of this effect.