

and has the capability and expertise to address substantive and procedural issues, and it will respond to questions coming from research ethics boards and from organizations such as granting councils or professional organizations.

I am surprised that the ethics director of the Medical Research Council of Canada (MRC), Dr. Francis Rolleston, did not point out that the National Council on Ethics in Human Research is the natural place to refer all issues, contentious or otherwise, that have to do with human participation in research. Canada does have the ability to conduct independent, competent reviews of controversial ethical issues involving human research.

## Gordon Crelinsten, MD Montreal, Que.

#### Reference

Shuchman M. Independent review adds to controversy at Sick Kids. CMA7 1999;160(3):386-8.

am quite disturbed by Dr. Francis Rolleston's statement, quoted in Miriam Shuchman's article,1 in which he comments on the ethical responsibilities of the MRC: "These [issues] are institutional responsibilities. If you have big brother in Ottawa looking after these things, that's not healthy." I think it is generally accepted that activities under the liberal laissez-faire theory in business must be supervised and to varying degrees regulated by governments and their agencies. I think also that the MRC has unjustifiably abdicated its responsibility to the public to regulate medical research in abandoning individual researchers such as Dr. Olivieri to potentially unscrupulous industrial supporters of their research. The pharmaceutical industry has an obvious vested interest in outcomes to its liking. Somebody, if not the MRC, must set up national rules spelling out appropriate freedoms of enquiry and publication for research supported by industry that are not at the mercy of self-interest or of the "intellectual property" bugbear.

J.V. Frei, MD, PhD Toronto, Ont.

### Reference

Shuchman M. Independent review adds to controversy at Sick Kids. CMAJ 1999;160(3):386-8.

### [Dr. Rolleston responds:]

The quotation in Miriam Shuch-▲ man's article¹ was accurate but incomplete. My view is that conflicts between researchers, institutions and companies should be resolved by the protagonists, not by national organizations such as the MRC or the National Council on Ethics in Human Research (NCEHR). However, as Gordon Crelinsten and J.V. Frei point out, the MRC and the NCEHR can, should and do help to set standards. Further, the NCEHR, which was founded and is mainly funded by the MRC, is playing a vital role in supporting research ethics boards and institutions in implementing the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans.

Frei's antipathy to industry disturbs me. Industry is essential to health and health care. Effective collaboration between industry and academe is of great advantage to both and to the health of Canadians. Should we not work together so that, despite different subobjectives, we achieve our common long-term goals of helping patients while maintaining our principles?

Since the publication of the Tri-Council policy statement I have visited all 16 Canadian medical schools to discuss issues and concerns surrounding processes for research ethics. Interactions with industry were frequently raised. I also established a task force on research ethics boards and clinical trials to address issues that inhibit collaboration between industry and academe.

At a recent workshop entitled "Research Ethics: Maximizing Effectiveness," the almost 100 participants from industry and academe strongly supported the already initiated Working Group on Best Practices in Industry—Academe Interactions. This working group will help to develop principles and approaches with respect to such issues as consent forms, the submission of protocols for ethics review, fees, incentives, compensation, liability and

publication. In this way, and through the active, collaborative implementation of the Tri-Council policy statement, the MRC will continue to promote the highest standards of ethics by all involved.

# Francis Rolleston, DPhil

Director, Ethics and International Relations Medical Research Council of Canada

### Reference

Shuchman M. Independent review adds to controversy at Sick Kids. CMA7 1999;160(3):386-8.

# **Chiropractic and orthodoxy**

The article by Terry Johnson concerning the affiliation of the Canadian Memorial Chiropractic College (CMCC) with York University was particularly biased. The "academic nuptials" of these 2 institutions would not make York University a "laughingstock within the world's science community," as Michael De Robertis is reported to have said, but rather would enhance York's reputation in the scientific and health fields.

Johnson writes that the article by Balon et al<sup>2</sup> "marked the first time a leading journal has published a study by chiropractic researchers." In 1985 Canadian Family Physician published an article coauthored by J.D. Cassidy,3 a chiropractor. The British Medical Journal, Spine and other "leading" journals have also published articles by chiropractors. Johnson could have also reviewed the Journal of Manipulative and Physiological Therapeutics, a peerreviewed, not "unrecognized," journal where scientists, physicians and chiropractors have written quality articles through the years.

De Robertis is reported as having said that chiropractic "metaphysical doctrines" and "unorthodox practices" are not well known. After reviewing the literature and the profession's guidelines<sup>4</sup> he would probably not call chiropractic a "metaphysical doctrine" (a list of references is available from cagkiro@infonet.ca). The effectiveness of spinal manipulation therapy, the