



A response from

Dr. Nancy Olivieri

I write to correct the errors and misrepresentations in the review by Hoey and Todkill¹ (“The Olivieri story, take three”; Oct. 11, 2005) of Miriam Shuchman’s book.² Many physicians may wish to appreciate more completely the significance of the extensive list of inaccuracies and omissions in Shuchman’s story, which I provided to the *CMAJ* five months before this review appeared.

Contrary to the claims of the book review, the University of Toronto did not commission the 1998 “Naimark report.” This was funded by the Board of Trustees of the Hospital for Sick Children (Sick Kids’), a body distinct from the University. The first effective involvement by the University came only after it was pressed to defend my academic freedom by international experts, the University of Toronto Faculty Association, and the Canadian Association of University Teachers (CAUT).

By their title (“The Olivieri story, take three”), Hoey and Todkill imply that Shuchman’s book was the third legitimate “take” on the long-running saga involving me, the University, a drug company and Sick Kids’. Positioning Shuchman’s “take” as authoritative does not acknowledge that her account relies on anonymous quotes, unnamed sources, and allegations long since discredited.

Presumably (according to Hoey and Todkill) “take one” was the Naimark report, and “take two” was the report of the independent inquiry commis-

sioned by the CAUT (2001; which referenced not only all the information accepted by Naimark but several hundred additional documents). On Hoey’s and Todkill’s own reasoning, “take three” should be the Report of the College of Physicians and Surgeons of Ontario (CPSO; 2001) — confirming the CAUT Report’s findings and concluding that my conduct had been “commendable.” “Take four” should be the University of Toronto’s dismissal (2002) of the allegations made against me by Sick Kids’ and based on Naimark’s report. Because Hoey and Todkill omitted to mention these later reports, the reader may forget that they fully exonerated me. No reasonable person could imagine that any “legal settlements” could have been “brokered” if the Naimark’s “findings” against me had retained credibility. These later reports have been followed by numerous other “takes” authored by scholars and medical researchers upholding my research methods and integrity. Why were the “takes” that exonerated me — all a matter of public record — not noted by the *CMAJ* editors?

It should be a matter of concern to *CMAJ* readers that, long after a series of independent inquiries dismissed Naimark’s “findings” against me as baseless, Hoey and Todkill attempt to rehabilitate Naimark’s report. Even Shuchman’s book, while reporting that Naimark relied heavily on allegations by a physician whose “... claims were damaging to Olivieri ... persuasive ... and led directly to Naimark’s conclusion ...”, acknowledges that this physician was disciplined by the University and the CPSO for “professional misconduct” in connection with attacks against me.³ In this respect, Hoey and Todkill show even more bias against me than the book they reviewed.

CMAJ readers might also be interested to know that, 12 days prior to publication of the review, an expert panel convened by the FDA unanimously recommended that Exjade (deferasirox), an oral iron chelator manufactured by Novartis, be licensed for prescription sale

in the USA.⁴ The date of this FDA panel hearing had been publicly announced on August 30, 2005, shortly before the *CMAJ* editors hurriedly undertook to produce their review — of a book they had ignored for months. In her book, Shuchman implies that a different orally active iron chelator, deferiprone, should be licensed by the FDA — while presenting a comparison (from an anonymous source) of certain qualities of Novartis’ defasirox to “Metamucil.” The FDA nonetheless accepted the advice of its expert panel, and licensed Novartis’ defasirox.⁵

This is not the first time these *CMAJ* editors have commented derisively on those who understand the significance of this controversy differently from themselves (and Shuchman). For instance, in 2002 they issued this statement: “We thought we’d heard enough, and written enough, about Nancy Olivieri’s dispute ... We entertained the idea of using [*The Olivieri Report*]⁶ as a doorstep.”⁷ Their bias becomes more apparent in light of the fact that these editors published this comment after the “doorstop”’s findings — exonerating me and refuting Naimark’s report — were independently confirmed by the CPSO and the University of Toronto.

Finally, respected medical journals now observe guidelines with respect to conflicts of interest — including immediate family connections — during submission, review and publication of data. Hoey and Todkill apparently do not hold themselves to this minimum standard: in their flattering review of Shuchman’s book, they omitted to disclose that Shuchman’s husband, Dr. Donald Redelmeier, is a member of the *CMAJ*’s editorial board. They also do not disclose that Dr. Redelmeier has been a co-author with a physician whose allegations against me were relied upon in the Naimark report.⁸

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REFERENCES

1. Hoey J, Todkill AM. The Olivieri story, take three [book review]. *CMAJ* 2005;173(8):914-5.
2. Shuchman M. *The drug trial*. Toronto: Random House; 2005.
3. Shuchman M. *The drug trial*, at pages 332, 333 and 347.
4. Cooley's Anemia Foundation. Cooley's Anemia Foundation applauds decision on Exjade; Oral chelator could reduce patient mortality" [press release]. 30 Sept 2005.
5. FDA approves Novartis iron-removal drug. PharmacyOneSource.com. 2 Nov 2005
6. Thompson J, Baird P, Downie J. *The Olivieri Report: the complete text of the report of the independent committee of inquiry commissioned by the Canadian Association of University Teachers*. Toronto: Lorimer; 2001.
7. Questions of interest [editorial]. *CMAJ* 2002;166(4):413.
8. Juurlink DN, Tenenbein M, Koren G, Redelmeier DA. Iron poisoning in young children: association with the birth of a sibling. *CMAJ* 2003;168:1539-42.

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What about hunter-gatherers?

Did the authors of a recent report on "refrigerator blindness"¹ consider that men, as hunters, are programmed to spot moving game, whereas women, as gatherers, are programmed to spot stationary edible plants and fruit?

Just a thought.

John Fisher

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REFERENCE

1. Macnab AJ, Bennett M. Refrigerator blindness: selective loss of visual acuity in association with a common foraging behaviour. *CMAJ* 2005;173(12):1494-5.

DOI:10.1503/cmaj.1060007

Doubts about lutein

I found it amusing that in the same issue in which one of *CMAJ's* editors educated Steve Arshinoff about the journal's new conflict of interest policy,^{1,2} there is a rambling opinion piece by Sylvia Santosa and Peter Jones on the possible benefits of lutein in the eye.³ I know the journal's policy had not taken effect at the time of submission, but I feel I must respond to the article.

To date, there has been no convincing research to show lutein supplementation to be of any real use in age-re-

lated macular degeneration. The evidence that lutein can slow the progression of cataracts is spotty at best, as demonstrated by the articles that are cited in this piece. The first reference is a review article,⁵ albeit of the data mined from the Beaver Dam Eye Study. Although the scope and size of the Beaver Dam Eye Study are laudable, it was not really a prospective study from which causality could be established. The nutritional information in the study was gathered using questionnaires, which are always subject to recall and compliance biases. The Beaver Dam Eye Study also suffered from "multiple looks": relationships were investigated for any and all possible population factors. The bottom line is that even though a role for lutein in treating age-related macular degeneration and cataracts was suggested in these two references, the studies don't demonstrate a cause-and-effect relationship. Plausibility is an important criterion for causality but it is not a sufficient one.

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REFERENCES

1. Arshinoff S. Excluding the experts? [letter]. *CMAJ* 2005;173(8):849.
2. Choi S. Excluding the experts? [letter]. *CMAJ* 2005;173(8):849.
3. Santosa S, Jones PJH. Oxidative stress in ocular disease: Does lutein play a protective role? *CMAJ* 2005; 173(8):861-2.
4. Krinsky NI, Landrum JT, Bone RA. Biologic mechanisms of the protective role of lutein and zeaxanthin in the eye. *Ann Rev Nutr* 2003;23:171-201.
5. Lyle BJ, Mares-Perleman JA, Klein BE, et al. Antioxidant intake and risk of incident age-related nuclear cataracts in the Beaver Dam Eye Study. *Am J Epidemiol* 1999;149:801-9.

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[The authors respond:]

We agree that there is no strong research that directly examines the protective role of lutein in ocular disease. Although we recognize the limitations of epidemiologic evidence, we realize that such evidence may provide some insight into the potential role of

lutein in ocular disease. In addition to the article citing epidemiologic evidence that shows a potential protective effect of lutein, evidence from the NHANES (National Health and Nutrition Examination Survey) study that found no relationship was also cited. Although only randomized clinical trials would show causality, in our article we acknowledge the limitations of conducting such tightly controlled research, such as the difficulty in measuring oxidative stress in the retina. Thus, whether lutein may prevent oxidative stress in the retina remains unclear. Accordingly, we feel that our article weighs the merits and disadvantages of lutein fairly and is not strongly supportive of its role as a nutraceutical. As such, we are completely in agreement with Ari Giligson that randomized clinical trials are required to establish a more definitive position for use of the lutein as a prophylactic to ocular disease, a position that is entirely in keeping with the spirit of our article.

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Competing interests: None declared for Sylvia Santosa. Peter Jones is part owner of Nutritional Fundamentals for Health, a company that sells lutein as one of its products.

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News and independence

In their latest protest about editorial autonomy¹ the editors note that the CMA declined their invitation to present the association's views. Perhaps as a long-time member I might be allowed to compensate for this reticence.

The editors' opinion, as I understand it, is that they should be independent, i.e., free to "select content without interference" and not "subject to censure." In other words, they should be allowed to edit, censor and delete at their pleasure, and answer to no one.

I think it was Stanley Baldwin who