

## **Dr Reuben Teaches Us the Value of Medical Science**

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You could be forgiven for not knowing who Dr Scott Reuben is. Even though the highly-repected anesthesiologist is implicated in the largest medical fraud yet known, he has not made any headlines. Even though he has been described as the 'Medical Madoff', not a single mainstream newspaper has covered the story in the UK. Even so, Dr Reuben has proved how much science there is behind a bulk of published scientific research; none whatsoever.

It was revealed this week that at least 21 papers authored by the 50-year-old doctor, which were credited as revolutionising the way post-operative pain management was administered, were totally fabricated. When I say totally fabricated, I really mean it – all of the patients, data and findings in his studies were imaginary. Dr Reuben was based in Baystate Medical Centre in Massachusetts and listed it as the location for his research, but no patients were ever enrolled in the projects, here or elsewhere. Dr Reuben received research grants from drug companies for these fraudulent studies and, without exception, his faked conclusions found that a range of controversial drugs were both totally safe and very effective. All of the papers, published over 13 years, were peer-reviewed by eminent scientists in their respective fields and, incredibly, were given full approval each time. This continued abuse made Reuben a very rich man and cultivated billions of dollars worth of sales for his sponsor, Pfizer. The charade was only ended when another doctor, Dr Ekman, also working out of Baystate the time, noticed that Reuben had added his name as a co-author on one of the bogus documents and turned whistleblower.

Paul White, one of the editors that published 10 bogus studies in the journal *Anaesthesia & Analgesia*, estimates that Dr Reuben's studies led to the sale of billions of dollars worth of dangerous and controversial COX2 inhibitors such as Pfizer's Celebrex and Merck's Vioxx. Other drugs subject to imaginary data include Bextra, Lyrica and Neurontin, all Pfizer products. Reuben had received five separate grants from Pfizer believed to be worth \$420,000 and was a regular speaker for the drug manufacturer. But his work was pure fiction.

Is the drug industry feeling betrayed? Hardly. The reason the pharmaceutical giants paid Dr Reuben such large sums of money for more than a decade was nothing to do with the quality of his work, but the results he consistently produced. There were other, more pioneering scientists who had questioned the safety of many of the compounds tested – especially Celebrex – but this small group had their funding cut off. The drug companies who paid Dr Reuben almost half a million dollars were not after the truth; they were after results that would boost profitability. They were onto a sure thing with Dr Reuben.

The drug industry has issued token statements, publicly distancing themselves against the disgraced doctor: "The post-operative pain management of millions of patients worldwide... has been affected by the research findings of Dr Reuben," admitted Steven Shafer, the editor in chief of *Anaesthesia & Analgesia*, the journal that published 10 of the bogus studies. "Reuben violated the trust of Baystate, the community and science," said Hal

Jenson, an auditor at Baystate. The sad reality is that, despite a number of industry figures publicly expressing their disappointment, this is not an isolated incident. Dr Reuben is not the first to distort or invent research, and he will not be the last. He was simply the first to get caught. If it was not for the actions of Dr Ekman, this fraud would have been kept secret like countless others.

It is noteworthy that this research was not simply favouring one company's drug over another. The research in question is the basis upon which doctors prescribe COX2 inhibitors following orthopaedic surgery, and are used following all sorts of procedures, from sporting injuries to hip replacements. It is almost certain that you, or someone you know, has been provided with inferior treatment as a direct result of this research. Reuben's imaginary research changed the way doctors prescribe drugs post-surgery, but the exposure asks even bigger questions of the whole medical system, and the array of so-called scientific research used by drug companies to justify the use of their chemical wares.

If multiple scientists can be manipulated into approving works of fiction, again and again over more than a decade, then how can we be expected to believe any other conclusions? Blockbuster drug sales are repeatedly achieved on the back of research that, inconsistent with either the findings of independent scientists or the clinical findings of those in the field, conveniently arrives at a profitable conclusion for the company that funded it. This 'proof' is all that stands in the way of the public and the licensing of a dangerous new drug. How much of the 'proof' behind statin use is fabricated in the same way? Are the SSRI anti-depressants supported by any valid research at all? What about vaccines?

This seems to explain the inconsistencies with aspartame studies. Seen by many as the most toxic compound ever introduced into the food chain, it has been found to be seriously damaging of human health in a staggering 100% of studies that were not funded by the manufacturer or by the FSA (Walton, 1998). Yet all the studies submitted by the manufacturer give it a clean bill of health. Just how many food and drug products have been licensed on the back of falsified and fabricated research?

These are very serious questions and ones that need to be asked but, in all reality, will be ignored. Those inside the establishment, those with the power to change the system, are making far too much money the way things stand. Of course, there are many that would say that this should not have been allowed to happen. These are the very people that, up until this week, would have sworn this would never happen. But it has. Many, many times. And, by taking a look at the financial mechanics behind the medical industry, it becomes obvious as to how this occurred, and why it will continue to happen.

The problem with these prestigious peer-reviewed academic journals – the journals that publish these fraudulent works – is that they are funded by sponsorship. These sponsorship comes from the big food companies and the big drug companies. In fact, the American Journal of Clinical Nutrition lists 28 corporate sponsors and the Journal of the American Medical Association made \$20bn from sponsorship last year (Shell, 1998; Nestle, 2002).

The scientists that do the research and the peer-reviewing are no more independent. If they want to work in science, they need grants. And, as most of these grants come from the drug companies, it pays to keep them happy; is it therefore any wonder that 21 separate studies were peer-reviewed by teams of independent scientists and approved, despite there being no actual data? Is it any wonder that 77 percent of scientists have

distorted results (Fanelli, 2009)?

Don't think that your GP will protect you from this distortion. The depressing reality is that drug companies pour money into our university system and, in return, get to set the agenda. What results is a seven-year indoctrination of how to pigeonhole disease syndromes, give the syndrome a name, and follow the prescription guidelines. Doctors spend just 20 hours learning about nutrition. The end result is that they don't know enough to realise how much there is to know, and their primary source of further education comes from the drug company reps. Until the system is changed, none of this will change.

The public are hardly leading a battlecry for medical revolution, mainly because they don't know what is going on. Most of the public will never get to hear about the activities of Dr Reuben and the ongoing distortion of medical science. This is because 90 percent of the world's media are owned by just nine companies (Herman and McChesney, 1997) and the financial success of each rests on continued sponsorship from the pharmaceutical giants. Money buys influence, and the newspapers refuse to bite the hand that feeds them so generously. It is now a week since the scandal broke and only the Wall Street Journal has acknowledged it. Compare this to the case of Dr Wakefield earlier this month. The General Medical Council – strongly allied to the pharmaceutical industry – released the results of their investigation having appointed itself as judge, jury and executioner in an attempt to discredit the doctor, whose 1998 research outraged the drug companies by showing a link between the MMR vaccine and autism. Although research ethics were criticised, but no complaints were made as to the validity of Wakefield's result – but did the press report this, or sensationalise the fact that the *Lancet's* token retraction of the article? Did they mention that the decision of the kangaroo court was made entirely by individuals with ties to the drug industry? Or that, during the two-year hearing, the GMC did not call a single witness? No. because they do not get paid on the accuracy of their reporting. They get paid by big business. Meanwhile, the truth suffers. Patients that rely on mainstream medicine suffer.

The whole saga, and the workings of the medical industry that have now been fully revealed, make a total mockery of modern medicine and the so-called 'evidence-based' approach. The function of doctors in our medical model has been reduced to prescription writers, and we now know that the basis of these prescriptions is based on lies paid for by the pharmaceutical giants. It has previously been said that science is only as good as the society that produces it. I say science is only as good as the intentions of those who pay for it.

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