

From the Editor

Lack of integrity in medicine: fraud in research

Knowledge without integrity is dangerous and dreadful.
(Samuel Johnson)

Lack of integrity leading to dishonesty, lying and fraud is a serious and destructive influence on professional life. It represents a human frailty, sometimes lifelong, and the recent discovery that medical students not infrequently accept a range of very doubtful practices is, at the very least, disturbing¹. Yet if courtesy and probity were universal qualities, even clinical governance might occur quite naturally². It is encouraging that exposure of dishonesty and fraud is at last seen to be important, that more emphasis is given to the need for integrity and honesty in professional life, and that appropriate disciplinary steps are taken when breaches occur.

Sadly, examples of dishonesty in professional life abound, and fraudulent research is increasingly exposed. One hundred and thirty-seven cases have been submitted to the Committee on Publication Ethics (COPE) since its inception in 1997^{3,4}. They include descriptions of falsified or fabricated data, duplicate publication, unethical research and many other areas of dishonesty. Distortion of research results is also well known, either by failure to publish negative results, or the selective presentation of results of sometimes inappropriate trials, for either individual or commercial gain. Unethical research on patients in developing countries is regularly described⁵, and has been highlighted in the recent Le Carré novel, *The Constant Gardener*⁶. The iniquity of clinical trials in poorer countries which leave patients without treatment after completion of the trial represents another failure⁷. Even among the upper echelons of our administration, integrity is sometimes lacking:

the recent reports of the dishonest presentation of waiting list initiatives by some chief executives set a sorry example.

The introduction of a wide range of initiatives, such as COPE, to expose and combat dishonesty and fraud is therefore a sad necessity. Conferences on fraud in research have recently been sponsored by both COPE and the Royal College of Physicians, and the latter is reported in this issue⁸. Guidelines regarding the conduct of research already exist and have been prepared by many bodies such as the Wellcome Trust, MRC, Royal Colleges of Physicians of Edinburgh and London (new guidance in preparation), although they are uncoordinated. Furthermore, new standards have recently been set for publication of trials supported by the pharmaceutical industry⁹. Problems resulting from conflicts of interest are now addressed by most journals, and measures to protect whistleblowers are gradually being established. The need for an independent review body to deal with biomedical research misconduct has been proposed by COPE and received almost unanimous acceptance at their recent conference on fraud. In the USA, the Office of Research Integrity has already removed the drama of excessive publicity of fraudulent cases by creating the apparatus for dealing with these issues as a matter of routine.

Most encouraging of all is the renewed emphasis on the need for integrity which is increasingly and actively promoted as an essential quality for those working in our profession. Sir Donald Irvine, describing the 'new professionalism', wrote recently that the systems and institutions which govern medicine will work properly only if doctors are clinically competent *and* 'honest'¹⁰. Core values for the profession have been described as 'the good things which, we hope, would be associated with any upright citizen'¹¹, and the General Medical

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Council, in its publication on *Good Medical Practice*, puts the requirement that doctors should be 'honest and trustworthy' at the top of its list¹². In this issue of *Clinical Medicine* an editorial from the President (p91) and the charter from the Medical Professionalism Project (p116) further emphasise the importance of trust. Moreover, in acknowledging the central importance of these qualities, the new statutory annual appraisal of doctors will include an assessment of probity. Would that it were all so simple!

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Education at the Royal College of Physicians

The educational needs of physicians across their whole careers are increasingly recognised by the RCP, and a range of highly innovative measures to provide for them have been introduced. Imaginative new courses have been set up to help physicians meet their requirements in a changing medical world; for example: the 'physicians as educators' programme including courses to assist with establishing consultant appraisal; career advice workshops; Specialist Registrar research skills workshops; and also the now well-established Advanced Medicine Conference which is accompanied by publication of its proceedings in the admirable *Horizons in Medicine*¹ series. Support for educational initiatives has traditionally come from a variety of departments within the RCP including Continuing Professional Development (CPD), Conferences, and the Publications Department. It has recently been further enhanced by the establishment of the Education Section in 1998, which culminates with the opening of the new Jerwood Medical Education Centre by Prince Charles in March 2002.

A new approach by the RCP to studying for the MRCP(UK) is to be welcomed, and the *Medical Masterclass*² indeed represents a 'most innovative and important educational development' (Sir George Alberti). This approach comprises an

entirely novel concept by combining the printed word with a website which provides up-to-date literature reviews as well as reviews of reports, technology appraisals, guidelines and standards, and an excellent interactive CD-ROM of case presentations. Self-assessment questionnaires are available as paper, CD-ROM and web-based versions. Reviews of *Medical Masterclass* by a senior educator and an aspiring academic doctor are published in the book review section of this issue of *Clinical Medicine*. The concept represents a marvellously imaginative combination of the best techniques of the twentieth and twenty-first centuries, and the RCP, together with the editor-in-chief, Dr John D Firth, are to be congratulated.

References

- 1 Royal College of Physicians. *Horizons in Medicine*, Vols 1–13. London: RCP, 1989–2002.
- 2 *Medical Masterclass*. JD Firth (ed), 2200pp, 2 CD-ROMS. London/Oxford: RCP/Blackwell Science, 2001. Companion website: www.medical-masterclass.com

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