

## Deceit and fraud in medical research – Intermediary, commercially based research teams are to blame

Dear Editor

The review by Jaffer and Cameron<sup>1</sup> is timely. The essence of good research is not only inspiration but also adequate supervision. This extends in its most basic form in writing a grant application to day-to-day meetings with the researcher. With the stripping of academic units on cost grounds, there has been an increase in part-time academics drawn from the clinical ranks and even a migration of academics into “independent” clinical practice. The decreasing role of national bodies such as the Medical Research Council and the parallel increase in corporate sponsorship from multinational drug companies mitigate against effective research governance.

Intermediary commercially based research teams, in my view, can only increase risks of both ethical and scientific mishap and their use should be restricted. The recent tragedy at a North London drug research centre whilst investigating a monoclonal antibody based drug<sup>2</sup>, amply demonstrates how loopholes in both ethics and research process may occur. Statisticians remain the “cinderellas” of the research team and are frequently

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denied their rightful place as co-authors on the final paper. This could easily be remedied by editors with good effect. I am not as pessimistic as Jaffer and Cameron, but the welcome appearance of well-funded top quality papers from Europe and elsewhere will increase the spotlight on any perceived weaknesses here in the UK.

### References

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## The IVF-stem cell interface – Public opinion and religious views matter

Dear Editor

For a population of 140 million people in Pakistan there are 5 centres providing tertiary level facility of assisted conception to sub-

fertile couples. Although IVF/ICSI is acceptable to the couples, the financial burden associated with it limits the utilization of this service. The Pakistani population is predominantly Muslim and is less flexible to any proposition which

may be considered as a deviation from the principle doctrine of Islam.

It is well acknowledged by the stem cell researchers that public opinion matters, and to a significant extent people's opinion is influenced by their religious views. Currently, opinions of the religious groups are divided on the issue of embryonic stem cell research. In Singapore, which is a multi-racial, multi-religious and pluralistic society, a survey<sup>1</sup> conducted by Bioethics Advisory Committee (BAC) of Singapore reported that the religious groups of Muslims, Jews, Buddhists and Hindus are in favour, and religious groups of Catholic, Christian, Sikh and Taoist are against the embryonic stem cell research. Therapeutic cloning was favoured only by the Muslims and Buddhists.

As surrogate parenting or embryo adoption is not permissible in Islam, Muslim scholars are inclined towards supporting the stem cell research. In Pakistan there is a great need for recognizing the importance of a platform to examine the political, ethical, legal and social issues in light of Islamic principles arising from research on the IVF-stem cell interface. Furthermore, recommendations are needed for making policies which are acceptable to the masses.

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No matter how much accountability and transparency is projected for the processes of informed consent and good clinical practice, there always remains the possibility of abuse. The greatest danger is from the commercial agencies which may exploit the possibilities of its therapeutic use. A recent upsurge has also been seen in agencies advertising preservation of cord blood for future usage and for treating diseases.

## Reference

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