

## **The views of the Medical Research Council on ME/CFS peer-reviewed publications**

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In today's Times Jerome Burne refers to the Medical Research Council's report (meaning the MRC's Research Strategy on "CFS/ME" published on 1<sup>st</sup> May 2003) and he quotes the MRC's view by saying the MRC considers that "findings in the biological area of ME/CFS are generally 'not published in the peer-reviewed literature' (they do not appear in properly regulated scientific journals), nor are they 'well-described' " (Chronic fatigue syndrome: Tired or emotional? The Times, 27<sup>th</sup> September 2003).

Burne has highlighted a significant matter of great importance to ME/CFS sufferers (CFS being one of the terms listed in the ICD-10 as synonymous with ME, hence the use of the term "ME/ICD-CFS" to distinguish the condition from the syndrome of chronic fatigue, which is referred to by certain psychiatrists as "chronic fatigue and chronic fatigue syndrome --- may be referred to as ME" which they believe is a somatoform disorder, so they erroneously included ME in their Guide to Mental Health in Primary Care compiled by the WHO UK Collaborating Centre at the Institute of Psychiatry and published by the Royal Society of Medicine).

In medicine and in medical science, journals are allocated an "impact factor": this may change from time to time and there is debate about the validity of this rating, since it has much to do with self-quoting by authors engaged in the same area of work and is based on citation frequency (ie. on how often an article is quoted in other papers). In some disciplines, especially in psychiatry, certain groups of authors repeatedly self-cite, a practice which has increasingly been permitted by some apparently less discerning editors with seemingly less rigorous standards than those which prevailed in the past, where only two self-references by a submitting author used to be allowed. Frequent mention of an article implies that the article is influential within its discipline (ref: Impact Factors of Journals in Sport and Exercise Science. Will G Hopkins. Sportsmedicine 2000;4(3)). As a general rule, the journals with high impact factors are among the most prestigious and are relied upon by funding bodies and policy-makers. The list of impact ratings used to be a closely-guarded secret and was not available to the general public.

Journals such as Nature and Nature Medicine publish major scientific discoveries in science and medicine; they are the undisputed leaders, having a huge impact factor, but approximately 90% of medical journals have an impact factor of less than 2 and the MRC would have difficulty in claiming that a journal with an impact factor above 2 is insignificant. Some examples of impact factors include the following (but as stated above, ratings do change):

Nature 29

New England Journal of Medicine 29

Nature Medicine 27

Lancet 11.7

JAMA 11  
 Annals of Internal Medicine 10.9  
 Journal of Biological Chemistry 7.7  
 Archives of Internal Medicine 5.3  
 American Journal of Medicine 4.4  
 American Journal of Cardiology 2.4  
 Clinical Science 2.3  
 Life Sciences 1.93  
 Annals of Medicine 1.9  
 Annals of the New York Academy of Sciences 1.0  
 Scandinavian Journal of Clinical Laboratory Investigation 0.99  
 Irish Journal of Medicine 0.3  
 Scottish Medical Journal 0.28

**Mindful that the MRC was excoriatingly criticised by the House of Commons Select Committee on Science and Technology in their Report on the Work of the Medical Research Council ( HC132, March 2003), it is perhaps timely once again to draw attention to the erroneous assertion by the MRC that findings in the biological area of ME/CFS are “not published in the peer-reviewed literature”.**

The following is from a 26 page document dated 27<sup>th</sup> December 2002 by Professor Malcolm Hooper et al entitled Response to the MRC Research Advisory Group (RAG) Draft Document for Public Consideration on “CFS/ME” Research Strategy dated 17<sup>th</sup> December 2002 which was submitted to but ignored by the MRC.

The whole document may be viewed at [www.meactionuk.org.uk/Initial\\_Comments.htm](http://www.meactionuk.org.uk/Initial_Comments.htm)

**paragraph 49: “Many reported findings in the area of pathophysiology are not published in the peer-reviewed literature, or are not well described.....the lack of methodological rigour and independent replication mean that many of these claims find little support from the wider medical community, but may have strong currency among some patients and practitioners”**

It appears that the MRC “CFS/ME” Research Advisory Group members are unacquainted with what has been published on ME/ICD-CFS in international journals, (including peer-reviewed and high-impact factor journals), for example The New England Journal of Medicine; JAMA (Journal of the American Medical Association); Annals of Internal Medicine, Reviews of Infectious Diseases; Biological Psychiatry; Clinical Infectious Diseases; Archives of Internal Medicine; CRC Critical Reviews in Neurobiology; Journal of The Royal Society of Medicine; European Neurology, Biologist; Postgraduate Medical Journal, Quarterly Journal of Medicine; Journal of the Royal College of General Practitioners; Journal of Neurology, Neurosurgery and Psychiatry; Journal of Infection; Infectious Diseases in Clinical Practice; Journal of Psychiatric Research; Annual Reviews in Medicine; American Journal of Medical Science; Journal of Investigative Medicine; Journal of Clinical Pathology; Journal of Psychosomatic Research; Journal of Clinical

Endocrinology; Current Therapy in Endocrinology and Metabolism; Proceedings of the Royal College of Physicians of Edinburgh; Annals of the New York Academy of Sciences; Acta Neurol Scand: Psychoneuroendocrinology; Clinical Autonomic Research; Applied Neuropsychology; American Journal of Roentgenology; Psychiatric Annals; Journal of Virological Methods; Journal of General Virology; Journal of Medicine; Journal of Medical Virology; Immunopharmacology & Immunotoxicology; Journal of Clinical Virology; Journal of Immunology; International Archives of Allergy and Applied Immunology; Journal of Clinical Microbiology; Clinical Experimental Immunology; Journal of Clinical Investigation; Clinical Immunology and Immunopathology; Clinical and Diagnostic Laboratory Immunology; Annals of Allergy; Journal of Allergy and Clinical Immunology; European Journal of Medical Research; Toxicology; Clinical Physiology; Nuclear Medicine Communications; Journal of the Neurological Sciences; International Journal of Neuroscience; Journal of Virological Methods; Archives of Neurology; Journal of Clinical and Experimental Neuropsychology; International Journal of Molecular Medicine; British Journal of Clinical Psychology; Arthritis and Rheumatism; Seminars in Arthritis and Rheumatism; Journal of Rheumatology; European Journal of Medical Research; Advances in Neuroimmunology; Angiology. *(This list is not comprehensive but merely illustrative).*

In addition, there is the Journal of Chronic Fatigue Syndrome which, although denigrated by some UK “CFS” investigators, carries impeccably referenced papers, for example “Review: Immunology of Chronic Fatigue Syndrome” by Professors Roberto Patarca-Montero, Mary-Ann Fletcher and Nancy Klimas, a major review which lists 212 references.

Further, there are the published abstracts of countless international research and clinical conferences on ME/ICD-CFS.

It is hardly surprising that some of these prestigious journals **“may have strong currency among some patients and practitioners”**.

From the 1950s to the 1980s, both the Lancet and the BMJ used to carry articles of repute on ME but now seem to have an editorial policy of publishing only studies on “CFS” as part of a psychiatric “Functional Somatic Syndrome”, along with globus hystericus and pre-menstrual tension, (Functional somatic syndromes; one or many? S Wessely, M Sharpe et al *Lancet* 1999:354:936-939) and even of ridiculing patients’ suffering. Recently, the BMJ ran a poll (organised by Wessely) asking readers to submit a list of what they considered “non-diseases”: ME/ chronic fatigue syndrome was nominated, along with bags under the eyes, freckles and being overweight. Following intense media publicity, the poll was headline news, with banner headlines proclaiming “Obesity and ME are not diseases, say doctors” (*Daily Telegraph*, 11<sup>th</sup> April 2002).

Following the BMJ poll, unsurprisingly, yet more ME sufferers were struck off their GP’s list, being told that it was the practice’s policy not to treat “non-diseases”.