



Brave New World of Zero Risk:
Covert Strategy
in British Science Policy

Martin J Walker

Slingshot Publications

October 2005

Brave New World of Zero Risk:
Covert Strategy in British Science Policy
Martin J. Walker
First published as an e-book, October 2005
© Slingshot Publications, October 2005
BM Box 8314, London WC1N 3XX, England

Type set by Viviana D. Guinarte
in Book Antiqua 11/12, Verdana
Edited by Rose Shepherd
Cover design by Andy Dark

In this downloadable Pdf form this book is free and can be distributed by anyone as long as neither the contents or the cover are changed or altered in any way and that this condition is imposed upon anyone who further receives or distributes the book. In the event of anyone wanting to print hard copies for distribution, rather than personal use, they should consult the author through Slingshot Publications. Selected parts of the book can be reproduced in any form, except that of articles under the author's name, for which he would in other circumstances receive payment; again these can be negotiated through Slingshot Publications.

More information about this book can be obtained at:

www.zero-risk.org

For Marxists and neo liberals alike it is technological advance that fuels economic development, and economic forces that shape society. Politics and culture are secondary phenomena, sometimes capable of retarding human progress; but in the last analysis they cannot prevail against advancing technology and growing productivity.

*John Gray*¹

The Bush government is certainly not the first to abuse science, but they have raised the stakes and injected ideology like no previous administration. The result is scientific advisory panels stacked with industry hacks, agencies ignoring credible panel recommendations and concerted efforts to undermine basic environmental and conservation biology science.

*Tim Montague*²

Groups of experts, academics, science lobbyists and supporters of industry, hiding behind a smoke screen of 'confidentiality' have no right to assume legislative powers for which they have no democratic mandate. The citizens and their elected representatives are ethically competent to democratically evaluate and shape their own future.

*Wilma Kobusch*³

1 *The New Yorker*. Volume 52, Number 13 · August 11, 2005. John Gray, 'The World is Round.' A review of *The World Is Flat: A Brief History of the Twenty-first Century* by Thomas L. Friedman Farrar, Straus and Giroux.

2 Tim Montague. 'Honest Science Under Siege: Conflicts of interest, "seeding results" and a broken monitoring system erode the public's trust'. Internews. July 22, 2005. Citing 'Scientific Integrity In Policymaking; Investigation Into The Bush Administration's Misuse Of Science' (Cambridge, Mass.: Union of Concerned Scientists, February 2004). And 'Scientific Integrity In Policymaking; Further Investigation' (Cambridge, Mass.: Union of Concerned Scientists, July 2004), both available at: http://www.ucsusa.org/global_environment/rsi/index.cfm

3 Founder member of the 1994 International Initiative Against The Planned Bio Ethics Convention with Erika Feyerabend, Jobst Paul and Ursel Fox.

Because I believe that technological development is the last remaining historical force abroad in the world that could plausibly be described as potentially revolutionary, and because I believe that we might make of technological development our most tangible hope that humanity might truly and finally eliminate poverty, needless suffering, illiteracy, exploitation, inequality before the law, and social injustice for everyone on earth I am often mistaken for a **technophile**.

And because I believe that whenever technological development fails to be governed by legitimate democratic processes, whenever it is driven instead by parochial national, economic, or ideological interests, that it will almost always be a profoundly dangerous and often devastating force, exacerbating existing inequalities, facilitating exploitation, exaggerating legitimate discontent and thereby encouraging dangerous social instabilities, threatening unprecedented risks and inflicting unprecedented harms on individuals, societies, species, and the environment as a whole I am often mistaken for a **technophobe**.

*Dale Carrico*⁴

⁴ 7/01/2005 <http://cyborgdemocracy.net/2005/07/technoprogressivism-beyond.html#comments>.

Dedication

This book is dedicated to
Marco Mamone Capria,
whose thinking on science and democracy
is completely joined up.
To the memory of **Serge Lang**, 1927 – 2005,
whose book *Challenges* contains founding
arguments against the politicisation of science
and how to act on it.
And to the memory of **Brian Inglis**, 1916 – 1993,
whose book *The Hidden Power*
introduced me to a particular aspect of science.



Acknowledgements

Thanks to Viviana,
Rose, John, Frederica, Robert, Bob, Liz, Jonathan, Finlay,
Elaine, Mags, Andy, Louise, Tony, Loïc, Marianne, Michelle,
Anne, Sepp, Gordon, Emma, Rebecca, Ivan, Eric, Louise,
Teddy, Steven, and Barclays Bank.
All of whom have supported me
with either love, kindness, friendship, money or editorial help
over the past couple of years.
Once again thanks to the lawyers
who worked hard nit picking with a purpose.
Thanks to Latin Quarter, Bonnie Tyler, Cyndi Lauper,
Pedro Vargas, Paul Young, Rod Stewart, Kate Rusby, The
Dualers, Joni Mitchell, Timi Yuro, Lolita Garrido, Nina
Simone, Whitney Houston, John Coates Jnr. and Eric Doney,
Bryan Ferry, Catalani and Puccini.
T. Coraghessan Boyle, George P. Pelecanos, Alan Hunter,
Lawrence Block, Mark McShane, Nicolas Freeling, Gary Krist,
A. J. Quinnell and Robert Crais, for keeping me company
while I wrote.

CONTENTS

Part One

Preface | xi

Introduction | xvii

1 Cleaning up the Crime Scene | 1

2 Corporate Science Takes a Knock | 9

3 The Emergent Campaign for Corporate Science | 15

Part Two

4 Trotsky Meets Hayek | 29

5 Dr Michael Fitzpatrick | 37

And MMR | 40

And ME | 51

And Alternative Medicine | 59

6 Is it a Bird? Is it a Plane? No, It's Lord Dick | 69

7 Open Government, Shut to the People | 77

8 Life and Obscure Letters of Lord Dick | 87

Risk Analysis and AXA Sun Life | 96

Part Three

9 Against Nature ~ Naturally | 99

The People Involved | 105

10 Guiding the Media | 111

The Social Issues Research Centre | 113

SIRC People | 116

The Guidelines | 118

11 Science Sans Sense | 127

Whose Sense and Whose Science | 129

The Trustees | 138

The Advisory Board | 145

The Greatest of These is Charity | 168

Part Four

- 12** The Resistible Rise of Rebecca Bowden | 173
 - 13** Science Media Centre | 183
 - Science Advisory Group | 191
 - 14** The Major Players | 193
 - Sir Richard Sykes | 193
 - Professor Christopher J. Leaver | 201
 - Professor Simon Wessely | 203
 - Professor David King | 208
- 15** The Concerned Scientists | 211
- 16** Just Another Conference | 217

Part Five

- 17** The National Health Secret Service | 223
 - Ganging Up on the Grassroots | 225
 - The State Plan | 227
- 18** Prime Time For Another Project | 233
 - Vivienne Parry | 237
 - ME/CFS Gets a MakeOver | 242
 - The GUS Trust | 245
- 19** PRIME Management | 247
 - The Research Project | 250
- Who's Who in the PRIME Steering Group | 252
 - Prime Conclusions | 255
- 20** The Coming Boom in Mental Illness | 257

Part Six

- 21** You Take the Risk, We'll Take the Money | 265
 - The Magic of Science, Making the Evidence Disappear | 267
 - 21st Century Political Science | 269
 - Who Wants Risk Free, We Just Want the Truth | 273
- 22** The Corruption of Science | 277
 - European Convention on Bioethics and Human Rights | 280
- 23** What the Corporations Are Covering Up | 283
- 24** From Political Party to Corporate Science Lobby | 295
 - Anti-Science or Real Science | 298

PART ONE

Preface

Introduction

1 Cleaning up the
Crime Scene

2 Corporate Science
Takes a Knock

3 The Emergent Campaign
for Corporate Science

Preface

I am especially concerned when people who construct a reality askew from the outside world have the influence or power to impose their reality in the classroom, in the media, and in the formulation of policy, domestic or foreign. I find the situation especially serious when political opinions are passed off as science, and thereby acquire even more force.

*Serge Lang*⁵

HAS IT EVER occurred to you how impossibly difficult it must be to compute the multiple risks of contemporary society? Where does one start, for example, with a woman of 55 who worked for 20 years as a hairdresser, eats only factory farmed or processed food, is taking three different prescription drugs, and HRT and now lives in an area where pesticides are regularly sprayed in neighbouring fields? Do insurance actuaries actually still assess risk seriously in such complex situations?

Explaining risk in contemporary society places some of the cleverest communicators in a double bind. The first crude, throw-away comment used by the practised risk analyst when faced with a personal statement about a particular risk is, 'Of course nothing is without risk.'

In the boardroom, however, or when planning a strategy with a client over a lunch, risk analysts have to use other arguments. In these environs, even a nano admission of risk, could sound the death knell for an industry. In the cut and thrust of

⁵ Serge Lang, *Challenges*. Springer-Verlag, New York 1998.

public debate, the statement 'Nothing is without risk' will inevitably be followed by the question, 'How high is that risk?' And then by the same question in relation to every product and every industry; the risk analysts' nightmare begins.

The early corporate risk producers, operating in the years immediately after the Second World War, the cigarette and asbestos manufacturers, fought each battle alone without advisers or public relations experts, and not until after the Sixties with the occasional epidemiologist. The strategy then was to admit to risk, but to suggest that public health regulations, despite encumbering the industry, diminished the risk so substantially that it was no longer of concern to the consumer.

In the first years of the new millennium, however, everything is quite different. As the developed world enters a new era of post-industrial⁶ production, possible new risks are accumulating for the health of both individual consumers and collective societies. Of even greater concern to the post-industrial manufacturer is the ongoing but often diminishing relationship between manufacturer and consumer, created by increased risk and the failing trust that accompanies it. Throughout the greater part of the industrial revolution, for almost two centuries, the very nature of industrial culture enforced a binding relationship upon producer and consumer.

In the 21st century, a new cornucopia of products has to be consumed if the economic system is to survive. However, without the factory system to discipline the population, and without the constraints of small communities to enforce consumption on producers, the world's corporations now haplessly worry about the citizens wandering off the field during play. And besides a growing anti-globalisation movement, each industry has its own particular critical mass, which threatens to cause

⁶ I have tended to use this phrase rather than 'post-modern' or the seemingly useful 'second period of modernism.'

meltdown for their product. On top of all this, the very nature of production is due to change soon, absolutely and irrevocably, from the reproduction of mechanical parts to the reproduction of living parts.

Pharmaceutical companies worry endlessly about those who protest against animal experiments, while they fight to distract the attention of consumers from the increasing damage of adverse reactions. The mobile phone industry is as concerned as the processed food industry that recurrent scare stories will leave only the inner city poor partaking of their products, usually by virtue of a black market. The biotech industry is struck dumb with an inability to even begin explaining to the general population its future concept and the dangers it entails.

There have grown up classic lines of response to these increasingly shaky relationships between producers and consumers. The State itself can buy the products of a collapsing market, so burdening itself with technological advances, which have to be passed on to citizens with add-on authoritarianism. Some technological advances, such as multiple, genetically modified (GM) vaccines, can be made mandatory and markets secured. Others, such as mobile phones, might ride on a high cultural wave, which drowns out, in the short term at least, any regulatory intervention.

For all products, the overarching argument that they represent the acme of civilised progress can be used to shame consumers into participation. But the actual portents for the mass of innovative technological products are dark and worrying, and the consumer relationships upon which they are founded are filled with vaporous mistrust.

In every occasion of economic and technical crisis since the beginning of the human world, vested interests have found arguments to defend themselves against the conservative-minded. Now, as a real rift appears between the authority of the

producers and the individual autonomy and safety of the consumers, corporations are working hard to structure a coherent if phantasmagoric philosophy of life, production and consumption, relevant to the new world they are creating.

The central element of this philosophy is risk analysis, and the most determinist statement of this analysis is that there isn't any risk – or certainly not on a scale that is going to look like more than a shaving cut on the face of civilisation. The philosophy is only slightly more expansive than this. It allows for idiosyncratic, mentally or genetically weak individuals, who bring a higher risk upon themselves, and it allows for the odd accident, although any public scrutiny of both these circumstances is discouraged.

As this new zero-risk philosophy develops, it tends to displace what we have known previously as civil democracy, a circumstance in which issues were debated and resolved by political decisions. This new revolution of the means of production replicates in part the last industrial revolution, with the owners of capital moving into and inhabiting new structures of civil power and creating a visible confrontation of class forces.

In the new biotechnology revolution, however, there are no new structures of 'civil democracy', and the citizens deprived of information rarely 'see' or understand that they are in conflict with the owners of capital. Inevitably, those who dissent from its consequences, who 'rage against the machine', are awarded a place within it. Dissenters against techno-consumption are depicted not simply as the 'lunatic fringe', but more specifically, as the post-industrial diaspora of the mentally ill; the irrational unbelievers of necessary production and consumption. New laws have to be brought into being even before they are broken, to identify, restrain and if necessary wipe out those who are unprepared to consume the brave new future.

The dissident mass, destined to become the *lumpenproletariat* of the techno-industrial world, is comprised not of 'the workers', as was the last, but of those who have lost faith in the advancing nature of the machine, those who insist that cancer might be treated other than by a person with a plastic tag on their white coat reading 'oncologist', those who press for democratic forums to discuss scientific developments, those who turn away from scientific medicine and insist upon having illnesses which physicians don't recognise. The traditional 'political' dissenters are still there, of course, those consumers who mistrust the products of politicians and governments, together with those who insist that many products of industrial society, such as pesticides, might harm them. Finally, those who have deserted corporate and militaristic Christianity for an irrational pantheism or the anarchy of new age beliefs, or, even more alarming, the highly structured but different moral code of alien foreign religions.

Dissent over lifestyle and its choices in the face of the post-industrial machine is becoming the new subversion and the new illegality. The battlefield on which this new order is being fought out is the home ground of the new technology of production: science. The visiting team are those who, it is said, are anti-science, or those who unthinkingly, being unaware of its power, sleight it with criticism or rejection, be they whispered from behind the hand or bellowed from the heart.

Introduction

THE NEED for the book that follows was made clear to me by two apparently unrelated conflicts in the area of health, which have been going on for some time now. Firstly, the battle that has been forced upon those who are asking for scientific research into the organic causes of Myalgic Encephalomyelitis (ME). Secondly the attacks on Dr Andrew Wakefield, who posed questions about the safety of the multiple measles, mumps and rubella vaccine (MMR) after research into Crohn's disease and ulcerative colitis, which are the most familiar manifestations of a family of disorders called Inflammatory Bowel Disorders (IBD).

In both these altercations, those aligned with 'science' and orthodox medicine, while consistently referring to the 'correctness' of science as a tool for uncovering the realities of the material condition, even hinting at it as a lifestyle philosophy, have refused to publicly discuss this science.

In the circumstances involving Dr Andrew Wakefield, the scientific dispute is not over the most recent red herring, that he may not have declared funding on a related study, in a published paper, that he may or may not have engendered panic in the population, that he might have undermined the Government vaccine policy, or even that he might have used experimental research procedures on children. None of these issues throws into dispute his scientific findings.

The real dispute, which has almost destroyed Dr Wakefield's professional career, is his finding that the measles virus introduced into the bodies of children by the artificially attenuated MMR vaccine,⁷ remained in different body sites, from where it created problems, firstly with digestion and then possibly with brain function.

Dr Wakefield had pursued his research into Crohn's disease at the Royal Free Hospital in London since the late 1980s, funded largely by many of the leading pharmaceutical companies. During the first years of the 1990s, his work came to focus on IBD in relation to infectious causes. In the mid-Nineties, he became concerned that there could be a relationship between a novel form of IBD, the measles virus from MMR, and autism.

Despite a number of requests for meetings with the Department of Health (DoH) and government funding for further research, publicity around Dr Wakefield's research, withdrawal of funding and his 'expulsion' from the Royal Free Medical School, led to the collapse of his professional life in Britain and a pending hearing before the General Medical Council.⁸

In the case of ME, the conflict involving science has grown over roughly the same period. A relatively small group of psychiatrists and psychologists has been determined to define ME first as an undiagnosed condition and then as a product of mental aberration or 'false illness beliefs'. The groundwork for the assault on ME was laid in the late 1980s by the newly-formed Campaign Against Health Fraud (later called HealthWatch),

7 The MMR vaccine is not genetically modified, it is, however, cultured in the cells created from an aborted foetus, which has given rise to a wholly separate area of moral concern about its production.

8 The best account of this battle up until 2002, is by Heather Mills, *Private Eye* special report, *MMR, Measles, Mumps, Rubella: The story so far, a comprehensive review of the MMR vaccination / autism controversy*, May 2002.

especially by three of its leading members, Simon Wessely, Caroline Richmond and Dr Charles Shepherd.

The exclusion of ME sufferers from the canon of allopathic medicine in Britain has shown all the signs of an operation carried out by powerful vested interests.⁹ In order to ensure that it is perceived as an illness without clear bio-medical causes, doctors and researchers have refused bio-physical testing to patients with suspected ME, while supporting a complete moratorium on research funding for physical causes.¹⁰ Instead research money has gone to psychologists and psychiatrists predisposed to the view that ME, multiple chemical sensitivity and Gulf War syndrome are *illnesses that the sufferers only have because they think they have them*.¹¹

Part way through this book, I found that, as most creative projects do, it had moved beyond the confines that I originally imposed upon it. In looking at where it travelled, I could now say that underlying my observations about ME and MMR is a complex foundation of arguments and institutions, which are preparing for a number of eventualities. Generally, there is manoeuvring by commercial interests to gain a good place in the new age of bio-science. This is accompanied by massive, gear-crunching changes, as the monolithic chemical drugs

9 See the brilliant *Denigration by Design?* by Eileen Marshall and Margaret Williams, volume I (1987-1996); volume II (1996-1999) (pp 488). Bound copies available at cost price from The Countess of Mar, House of Lords.

10 There are a number of different postulated suggestions for a physical cause of ME, from the effects of chemical toxins to post-viral illnesses and vaccination. Most scientists working in the area of physical causes believe, as does the WHO, that the brain is physically affected and neurological function is impaired.

11 All these arguments and their supporting evidence can be found in the author's books *SKEWED: Psychiatric hegemony and the manufacture of mental illness in Multiple Chemical Sensitivity, Gulf War Syndrome, Myalgic Encephalomyelitis and Chronic Fatigue Syndrome*, Slingshot Publications 2003, and some history is in *Dirty Medicine: Science, big business and the assault on natural health care*, Slingshot Publications 1993. (Cont.)

industry metamorphoses into the person-, plant- and animal-modifying agents of the new bio-world.

The attack on Dr Arpad Pusztai of the Rowett Research Institute (see page 11), and the wider campaign against GM crops brought campaigning groups in Britain into conflict with the same people and the same organisations, although now more developed, about which I wrote in my 1993 book *Dirty Medicine*.¹² Investigative journalists and activists involved in the Pusztai affair and its surrounding circumstances have paid relatively little attention, however, to the conflicts around MMR and ME. This lack of analysis of 'front organisations', 'lobby groups', and even of paid 'agents', and of the involvement of multinational corporations and think tanks in *the field of medicine and health*, reflects an odd inability of liberal information-based groups to get critically involved in the area of health and medicine.¹³

In both of the above conflicts, the status quo and science policy are defended by a motley band of politically-motivated individuals linked to 'science', quackbusting organisations, a variety of corporate interests, and individuals from the Liberal Alliance and New Labour.¹⁴ In the main they are people with

(cont.) Both are available as e-books from <http://www.truthcampaign.ukf.net>. *SKEWED* is also available from Cygnus Books, <http://www.cygnus-books.co.uk/> and with other Slingshot books from Slingshot Publications, BM Box 8314, London WC1N 3XX, England.

The continuous conflict between the psychiatric and organic thinkers is well documented on the One Click web site at: <http://www.theoneclickgroup.co.uk>

12 Ibid, *Dirty Medicine*.

13 I will always remember sending a copy of *Dirty Medicine* to a US publishing group whose investigative political publications I admired. They wrote back to me saying that they could not publish the book because, after showing it to a number of physicians, these advisers had told them it was biased. Hopefully!

14 For readers from countries other than the British Isles. In the years prior to the election in 1997, the Labour Party transformed itself from Labour to New Labour. Today those in the Labour Party who still believe in Socialism (cont.)

long-established financial and political motives, who have consistently made light of these conflicting interests. Also within this gathering, some might think oddly, is a network of political activists previously associated with the small Trotskyist group, the Revolutionary Communist Party (exRCPers or exRCP Network).¹⁵

A substantial part of the following book is dependent upon information garnered and investigated by those who were opposed to the automatic introduction of GM crops into Britain and upon the affair of Arpad Pusztai. Most of the past and continuing writing around these issues leaves little to be desired. With Greenpeace activists at the helm, and in the very best traditions of muck-raking journalism, a handful of writers and activists exposed an ants' nest of corporate interests and opened up a democratic debate that has in the main been ignored by political parties.

I have tried, as I say above, to conjugate this established research with the matters to do with health, particularly ME and MMR. I have tried as well to place all the diligently garnered information around GM within a more demanding political context of New Labour and its anti-democratic governance since 1997.¹⁶

(*cont.*) are referred to as Old Labour. The Liberal Alliance contains what used to be called the Liberal Party, together with a cluster of smaller liberal and social democratic groupings, which have emerged from both the Labour Party and the Liberal Party since the end of the Sixties.

15 Describing 'networks' and 'groups' with cohesive ideas presents a particular problem in writing. Sometimes, the group can be easily described by using the name of the major character, such as Wesselyites, or using the form 'those around Simon Wessely', etc. One can define groups by the position they have in any conflict, eg, 'those who believed in psychiatric aetiology.' However, when talking about a group that has emerged from a now defunct political party and whose activities cover a wide range, the problem is almost insurmountable. Most writers in the field use the RCP's last magazine title *LM* to define the participants, but this magazine is now itself defunct, and the term does not seem to invoke the central and most important fact (to me) that these people claimed for 20 years to be Revolutionary Communists. (*Cont.*)

I realise that a good part of the following text is a historical narrative and analysis. It often seems to me, however, that as critical social observers and activists we don't learn enough from our history. Few people in Britain, for instance, raised much of a protest against the Campaign Against Health Fraud in the late Eighties and early Nineties. Even today, only a handful of individuals understand the links between the US American Council on Science and Health, the Committee for Scientific Investigation of Claims of the Paranormal, and the plethora of North American and UK quackbusting organisations.

(cont.) It is important because this network is determined to disintegrate the focus and thereby the attention drawn to their political insurgency. To get round the problems of describing this diaspora, and to maintain a focus that implies that all these individuals are still part of a common cause, I have used the expressions 'ex-RCPers' or 'ex-RCP Network'. I realise this is unwieldy. At times, I have sunk to sarcasm, calling individuals 'revolutionaries', 'failed revolutionaries', or 'comrades'. I apologise to readers for this, but it was too tempting.

16 Most of my information relating the battles over GM crops, and the background to exRCPers comes from <http://www.gmwatch.org/search.asp/>. Some of the most detailed information on this site, originated with George Monbiot whose articles can be found on his own site, <http://www.monbiot.com>. There are around 36 articles and sets of information about exRCPers and LM on the GM Watch site. It represents a serious and detailed body of research. Other information comes from Lobby Watch at <http://www.lobbywatch.org/profile1.asp?PrId=143>, and Spinwatch (Yes, I know these names are unbelievably boring) www.spinwatch.org/. And an excellent article in the *What Next Journal* at:

<http://www.whatnextjournal.co.uk/Pages/Newint/Rcp.html>.

One of the best pieces on the development of RCPers is by Andy Rowell and Jonathan Matthews, 'Strange Bedfellows', in *The Ecologist*, March 2003. This can be found at the always informed site: <http://ngin.tripod.com/190303d.htm>, which is a sister site to GM Watch. Another article among many on the site that traces the links between disinformation and science in the GM debate, is 'False reports and the smears of men', first published in *GM-FREE* magazine. The article in the *Guardian* by David Pallister, John Vidal and Kevin Maguire, 'Life after Living Marxism: Banning the bans: An agenda for radical change', Saturday, July 8, 2000, at: http://www.guardian.co.uk/uk_news/story/0%2C3604%2C341053%2C00.html, gives a good all-round view of the RCP's gradual fall into the dustbin of history. One of the most straightforward and factual summaries of the RCP and its development can be found at: Wikipedia: www.wikipedia.org/.

The appointment in August 2005 of John Hutton, the Cabinet Office Minister, to act as media censorship supremo in GM matters, shows clearly the need to understand the GM battles in the context of earlier, government-linked, covert science policy operations and their relationship to the pharmaceutical industry. An understanding of this history, should inform our understanding of how the government is planning on dealing with dissent in the future.

CHAPTER ONE

Cleaning up the Crime Scene

The medical establishment has become
a major threat to health.

*Ivan Illich*¹

In February 2005, in an article in the *British Medical Journal* (BMJ)² entitled 'Journalists accused of wrecking doctors' lives' Joanna Lyall reviewed a debate that announced itself as being on standards of medical journalism.³ The title of the article had been taken from the argument put forward by Professor Raymond Tallis (professor of geriatric medicine at the University of Manchester for the past 20 years) that doctors were falling victim to journalists' search for human interest stories written on behalf of patients damaged by drugs, medical mishap and malpractice. Almost a page was devoted to Tallis's view, with just three paragraphs of opposing view tacked on.

One of the most striking trends in recent years has been the increasing ease with which journalists smash the lives of doctors and ruin the reputation of hospitals.⁴

1 Ivan Illich, *Medical Nemesis: The expropriation of health*. Calder & Boyers. London 1975.

2 *BMJ* 2005;330:485 (26 February), doi:10.1136/bmj.330.7489.485.

3 The debate, Standards of Medical Journalism, was organised by the Guild of Health Writers.

4 'Journalists accused of wrecking doctors' lives.' *BMJ* Volume 330 Reviews. 26 February 2005.

In and between the lines, however, the article said much more than this. Tallis criticised the prominent reporting of mistakes by doctors, and accused the media of giving the same weight to the parents' views of medically damaged children as it did to the conclusions of large studies.

In Tallis's view, only sheer luck had stopped a public health catastrophe after journalists reported the allegedly erroneous research of Dr Andrew Wakefield. Drawing attention to the credence given to Peter Duesberg's views on HIV and AIDS – that the two phenomena were not so simply connected as medical science tells us – Tallis told his audience:

An infantile preference for conspiracy theories over data ...
had world-wide consequences.

Tallis failed to point out that Peter Duesberg was one of the world's leading virologists, and that this issue represented one of the great conflicts *within science* over the past century.⁵

Perhaps the most important general but submerged argument put forward by Tallis was contained in his description of a world in which journalists were entirely responsible for spinning the picture of an isolated medical and scientific profession, driven by vested interests, adrift from citizens and consumers, rather than this state having a basis in reality.

The only language that can describe scientific medicine and its practitioners, according to Tallis, is that of science itself: an exacting statistical analysis and a subdued communication of risk. In this argument, Tallis was putting the case for a qualitative scientific assessment of the work of doctors and other professionals, which has been propagated by vested corporate interests in medicine and science over the past two decades.

5 For an account of Duesberg's scientific life and times, see *Oncogenes Aneuploidy and AIDS* by Harvey Bialy, Institute of Biotechnology, Mexico 2004.

As is evident from the e-mail post-bag to the *BMJ* which followed the article, some readers believed that Professor Tallis was saying that when patients and journalists complained, as is usual in a democracy, they made men of medicine and science ill, and this being a foul crime, they must desist.

The e-mail returns must have given the uninitiated a peculiarly disjointed view of the arguments Professor Tallis had put forward. From reading them it would have been difficult for most observers ignorant of the context and background to the article, to understand where the focus of conflict was. Especially notable were two emails from Australia and New Zealand. The one from New Zealand was written by Guri Bagnall, a campaigner on behalf of children with ME.

Tallis gave no thought to the horrendous (though incomplete) iatrogenic statistics. He should have done. While very emotional about the 'hardships' imposed upon erring colleagues by journalists who report on the effects of medical error, he gave no consideration whatsoever to the vast numbers who have died needlessly as a result of medical treatment, often leaving families destitute. Nor did he consider those left permanently damaged and suffering unspeakably while trying to deal with the effects of being financially ruined as well.

We have seen how the typical 'so what?' attitude leads to further (and in this instance, deliberate) harm time and again, for psychiatric 'diagnoses' are commonly used to cover up the adverse reactions of ill-considered drug therapy.

Why did Guri Bagnall 'go into one' when she read Tallis's article? Why did she throw in the issue of iatrogenic illness?

The second letter came from world-renowned anti-vivisectionist and retired principal research scientist for the Australian government, Dr Viera Scheibner:

Contrary to undocumented statements by Dr Tallis ... many journalists and doctors are involved in a massive attack and

victimisation of patients and more particularly if their patients are babies and small children. History will judge harshly such nonsense diagnoses as shaken baby syndrome (SBS) and Munchausen per proxy.

Iatrogenesis kills some 18,000 people a year in Australia alone (proportionately higher figures apply in larger countries) and yet the orthodoxy want to do away with alternative systems such as homeopathy and naturopathy, which kill no-one. The United States has infant mortality rates rivalling those of the Third World - the reason? Mandatory vaccination. S.I.D.S. more appropriately stands for Sudden Immunisation Death Syndrome.⁶

There it is again, mention of iatrogenic death. Clearly there is something more at stake than the words reported from the debate. Both these e-responses, provoked apparently calm but essentially furious replies from some other readers of the *BMJ*. With utter seriousness, some wanted to know the meaning of the term iatrogenic. We cannot, however blame contemporary physicians for not knowing this word, since it has been expunged from both the concise Oxford Dictionary and Collins English dictionary, and as I type it, the US-originating Microsoft 'spell check' underlines each mention of the word with a red wavy line. (The UK version does at least still recognise 'iatrogenic', though it can't quite run to 'iatrogenesis'.)

Contemporary critics of allopathic medicine could well have picked up the word from reading Ivan Illich, one of the 20th century's most erudite and intellectually critical analysts of professional medicine. In *Medical Nemesis: The expropriation of health*, Illich says:

The technical term for the new epidemic of doctor-made disease, Iatrogenesis, is composed of the Greek words for 'physician' (iatros) and for origins (genesis). Iatrogenic disease comprises only illness which would not have come about unless

6 Scheibner 2004, J ACNEM; November issue.

sound and professionally recommended treatment had been applied ... In a more general and widely accepted sense, clinical iatrogenic disease comprises all clinical conditions for which remedies, physicians, or hospitals are the pathogens or 'sickening' agents.

Illich goes on to provide a footnote, which says that iatrogenesis was being studied by Arab doctors in Baghdad in the 9th century A.D.

One reply to Viera Scheibner's email asked, in an apparently confused daze, from where she could possibly have got the figures which she reported for iatrogenic deaths. In fact, so high have the levels of iatrogenic death become, that, based only on the fraction of them actually reported, the *Journal of the American Medical Association (JAMA)* was able to report in 1997, that adverse reactions to pharmaceutical drugs were the third highest cause of death in the United States.⁷

Scheibner and Bagnall introduce two other factors into their attack upon the arguments of Professor Tallis, which again would appear confusing to many who lack knowledge of this battleground. Remember Bagnall's words: 'We have seen how the typical "so what?" attitude leads to further (and, in this instance, deliberate) harm time and again, for psychiatric "diagnoses" are commonly used to cover up the adverse reactions of ill-considered drug therapy.'

⁷ In his 1994 *JAMA* paper, 'Error in Medicine', Dr. Lucian L. Leape began by reminiscing about Florence Nightingale's maxim—"first do no harm." But he found evidence of the opposite happening in medicine. He found that Schimmel reported in 1964 that 20 percent of hospital patients suffered iatrogenic injury, with a 20 percent fatality rate. Steel in 1981 reported that 36 percent of hospitalised patients experienced iatrogenesis with a 25 percent fatality rate, and adverse drug reactions were involved in 50 percent of the injuries. Bedell in 1991 reported that 64 percent of acute heart attacks in one hospital were preventable and were mostly due to adverse drug reactions. In 1997 Dr. Leape released a nation-wide poll on patient iatrogenesis conducted by the National Patient Safety Foundation (NPSF), which is sponsored by the American Medical Association. At this press conference, Dr. Leape (*cont.*)

Although this argument appears to come straight from left field, the premise is gradually gaining credence, that a growing number of people, or their relatives, who complain either of medically undiagnosed illness, or of adverse reactions to drugs and/or medical procedures, are being falsely labelled mentally ill. This proposition might be clearly tied to the first problem of the refusal to acknowledge that medicine (and other industrial processes) causes sickness.

In her second response, Scheibner links the iatrogenic harm done by allopathic medicine with the censoring of 'safe' alternative therapies such as herbal medicine and homeopathy. One doctor writes in response, suggesting that this was a terrible piece of misinformation, because both these forms of therapy kill many people – though she failed to provide statistics to back up this assertion.

One problem could be that many doctors, working as hard as they do, are so completely immersed in the culture of allopathic medicine that they are genuinely unaware, that pharmaceutical companies have superseded the role of the physician in society. They also appear unaware that these companies have, over the past 30 years, conducted a vituperative campaign against alternative and nutritional medicine, which has resulted in the passing of an extra-governmental Codex Alimentarius. This global regulatory mechanism will radically restrict the right of those who wish to treat themselves, to purchase vitamins, food supplements and herbs.⁸

(cont.) updated his 1994 statistics. As of 1997, using Leape's figures, the annual deaths could be as much as 420,000 for inpatients alone. This does not include nursing home deaths, or people in the outpatient community dying of drug side effects or as the result of medical procedures. (Abridged from *Death by Medicine* Part One, Gary Null PhD, Carolyn Dean MD ND, Martin Feldman MD, Debora Rasio MD, Dorothy Smith PhD.)

8 The process of the Codex was begun in the 1950s by a group of physicians and scientists left over from the I.G. Farben trials. See Dr Rath Health Foundation. <http://www.dr-rath-foundation.org/>.

But what of Professor Tallis? Is he a part of the mass of allopathic practitioners for whom hard work constrains otherwise welcome knowledge about these things? Perhaps not. Together with some 15 other 'scientists', Professor Tallis finds time to be on the advisory network of an organisation called Sense About Science (SAS). This highly-politicised organisation, which campaigns in support of science, is funded by the Association of the British Pharmaceutical Industry (ABPI), a number of individual pharmaceutical companies, and other corporate concerns.

Two of the administrators of Sense About Science used to be in the Revolutionary Communist Party. The principle theoretician of this party, and still the 'leader' of its network, is Frank Furedi, an academic at the University of Kent. Furedi, no longer apparently a Marxist, now writes, speaks and pontificates about 'risk', sometimes on behalf of corporate interests.

According to the rationalists and sceptics aligned to SAS, there are no adverse health consequences of the modern industrial or biotech complex, nor will there ever be. The few adverse consequences which are reported are always manipulated dramatically out of all recognition by the media and those who make the complaints can be mentally ill, but are mainly losers, unable to keep pace with the progress brought by advancing technology.

Ex-Revolutionary Communist Party members and their pro-science campaigning fellow travellers take no prisoners. They are utterly opposed to 'victim and compensation culture', siding completely with the strong, risk-taking wealth producers. They have campaigned hard over the past seven or eight years, to ensure that the media report only the 'truth' about science, and not 'misinformation' about fallacious adverse consequences.

Oh, and in case you were wondering, these people are vehemently opposed to anyone who so much as mentions alterna-

tive medicine, and are as fanatical in their support for vivisection and animal testing as they are for genetic modification and surgical procedures such as head transplants. Oh, again, I almost forgot, they have publicly accused environmentalists of being Nazis, no different from Göring, in fact.

CHAPTER TWO

Corporate Science Takes a Knock

During the 1990s, the worst fears of rationalists and sceptics – who hold an absolute belief in science – were realised. While scientists kept their sanity, they watched much of the rest of society run amok. Society was suddenly poisoned by irrationality. As the House of Lords Select Committee on Science and Technology so succinctly put it, ‘Public unease, mistrust and occasional outright hostility are breeding a climate of deep anxiety amongst scientists.’¹

Any concerned person observing this might have suggested a visit to a friendly psychiatrist for cognitive behavioural therapy – but no, the consensus appears to have been that scientists who feel deeply anxious must protect themselves and be protected from the irrationality they find so disturbing.

What had the common populace done to invoke these spasms of neurotic anxiety? Some wanted to reject GM crops, others were having doubts about cloning, others yet were claiming to have illnesses that scientists didn’t recognise. And at the end of this continuum of irrational behaviour were individuals taking alternative therapies, while others refused chemotherapy for cancer, and still others were having second

¹ House of Lords Select Committee on Science and Technology Third report: *Science and Society* this can be read on the Dti web site at: <http://www.dti.gov.uk/scienceind/report3response.htm>

thoughts about giving their children combination triple vaccines. Some scientists stood, heads in their hands, inconsolable, shedding tears; the subjects of the human project, which after all belonged to them, were revolting.

These things, however, were only the tip of an iceberg. The common population had also doubted what scientists had said about 'mad cow disease' (BSE) and its resultant damage to the human population. Constant outbreaks of salmonella introduced new fears about the factory farming of egg-laying hens. Some people even seemed concerned, without the slightest cause, that animals bred for food by being fed a diet of pharmaceuticals, synthetic hormones and anti-bacterial chemicals might cause ill health. There was chatter about global warming, and growing clamour about electromagnetic fields, the health damage caused by mobile phones and their masts.

Some 'idiots' in England had even suggested that those who live downwind of high voltage power lines might stand a higher chance of getting cancer. And hovering over the whole free world was the most terrible of threats aimed at the right of the tobacco industry to distribute carcinogenic products without regulation.

Perhaps the worst thing about this almost imperceptible collapse of civilisation was that often those making these critical claims called themselves scientists.

During the early Nineties, it appeared that alternative medicine was taking a real hold. Practices such as acupuncture, which had been used for thousands of years in China without ever, it appeared, developing a scientific base or even being written up, were being used in Europe. Citizens had been seduced by the occult flimflammy of homeopathy, which, despite it having its origins in rigorously scientific observation by a highly-qualified German physician during the enlightenment, was obviously irrationality of the highest order.

In 1997 Hungarian-born Dr Arpad Pusztai, a little-known geneticist at the Rowatt Institute in Scotland, discovered that mice fed genetically-modified potato suffered stunted growth and depressed immune systems. Within weeks of his announcing the results, his career was suddenly terminated, and he became Enemy of the People Number One. Having talked on Newsnight and World in Action Pusztai was accused of breaking the rules of the Biotechnology and Biological Sciences Research Council (BBSRC) funding by breaking a gag clause that prohibits scientists from becoming 'involved in political controversy on biotechnology and biological science'. He was, it was suggested, a second-rate research scientist, and, at age 68, past it; 'an old man who had muddled the results.' His grants were withdrawn, he lost his position at the Rowett after 36 years' service, and the 18-strong research team that he had assembled was dismantled.²

Later in the last months of the century, Lord Sainsbury, the Minister for Science, became embroiled in a furious row when it became apparent that he had been having secret meetings with emissaries from Monsanto. These good citizens were eager to sell the Government 'magic beans', which would solve *all* of the world's problems. When news of this reached the irrational masses, all hell broke loose; out they came in white plastic coveralls to trample on fields of crops.

For the second half of the Nineties, science had to somehow muffle the continuous background noise of the scientific research of Andrew Wakefield, with his obviously risible suggestion of links between, MMR vaccines and IBD. Quite unrelated to Wakefield's work were the gathering armies of parents, especially in North America, who were determined that their children had been damaged by vaccination and particularly any mercury preservative component.

² George Monbiot, *Silent Science*, in *Captive State: The corporate takeover of Britain*. Pan Books, London 2000.

The North American Congress dealt with this rising threat to public order by introducing a bill that made it compulsory to include mercury preservatives in vaccines, then another law that protected pharmaceutical companies from legal actions for damages. Also, anti-terrorist laws strengthened the State's right to enforce vaccination on the population.

Throughout the decade, there was a continuing rise of reported adverse reactions to, and death caused by, pharmaceutical products. Increasingly, lawyers and claimant patients in North America gained large pay-outs from the pharmaceutical companies, such that many of them had to set up trusts to pay out damages expected over the coming decade.

Despite the apparently rigorous epidemiological science of people such as Sir Richard Doll, so many workers and citizens outside factories died from cancers and lung diseases brought on by inhaling asbestos fibres, that the whole world-wide industry went bankrupt.

Mixed in with all this somewhere were the astonishing rumours about AIDS. Was it caused by HIV? and, if it was, was the virus man made? If it was, why had Dr Robert Gallo had to steal it from Dr Luc Montagnier?³ And why was Peter Duesberg, one of America's leading virologists, not allowed to present an alternative view about HIV in the journal *Nature*.^{4,5}

3 That Gallo was credited as being the discoverer of HIV, became the issue of a diplomatic row at the highest level between the US and French governments, when it was found that long before any public announcement, Luc Montagnier working at the Institute Pasteur, had passed Gallo samples of the virus which his team had already identified.

4 Sir John Maddox, then editor of *Nature*, is now a Trustee of Sense About Science and a member of the Council of CSICOP, of which more later.

5 This conspiracy became the subject of one of the greatest pieces of journalism by John Crewdson finally published as contemporary *Science Fictions: A Scientific Mystery, A massive cover up, and the dark legend of Robert Gallo*. Little Brown, 2002.

The most disturbing thing about this was that as a consequence of all the rumours, patients refused to attend drug trials for HIV treatments. Later in the decade, some doctors even suggested that AZT, the first Wellcome produced AIDS drug, caused rather than prevented the condition.⁶

Added to all this, scientists had to dodge the gathering of storm clouds concerning Gulf War syndrome, multiple chemical sensitivity, ME and chronic fatigue syndrome (CFS). And in the background, for a decade, was the growing militancy of the anti-vivisection movement, who oddly demanded democratic debate about the use of animals in science. Having been led down a blind alley by New Labour's false promises of a Royal Commission they had now turned to more militant strategies.

Their campaign against the Government-backed Huntingdon Life Sciences had turned into a kind of long-term trench warfare. The rise of this movement had driven New Labour and Big Pharma into closer mutually reassuring embraces, the progeny of which was an even more dogmatic defence of 'science' and public order, and the determination to be proud publicly of destroying even larger numbers of live animals.

In the course of damage limitation, against the background of general undermining of industrial science in the 1990s, in 1996, Oprah Winfrey and her show's producers were charged under food disparagement laws.⁷ The laws had been introduced into thirteen US states in 1989, after consumers and citizens campaigned against the pesticide Alar. Two large Texas

6 See John Lauritsen, *The AIDS War: Propaganda, Profiteering and Genocide from the Medical-Industrial Complex* and *Poison by Prescription: The AZT Story*, op. cit. Walker's *Dirty Medicine* and Anthony Brink, *Just say yes Mr President: Mbeki and AIDS*, produced as a DVD by the author.

7 The food disparagement law in Texas requires that the person making the statement 'knows the information is false,' and that 'the information states or implies that the perishable food product is not safe for consumption by the public.' Further, in determining whether or not the information is false, (*cont.*)

cattle feeders and some business associates held that false statements about the risks of BSE were made on the Oprah television show in April 1996. Consequently both they and their industry generally had suffered a loss of profits and a possible permanent loss of faith and trust.

The food disparagement laws were grounded in the ‘rightness’ of scientific views expressed by the producing companies. They were heavily supported by the American Council on Science and Health. The trial of Oprah Winfrey and her programme took place in January and February 1998, in Amarillo, Texas. Oprah won the case when the judge deemed that there was insufficient evidence brought by the plaintiffs.

It didn’t take an Einstein to see that, despite the fireworks, the *fin de siècle* was clearly not going to be good for corporate science.

(*cont.*) the judge or jury is to consider ‘whether the information was based on reasonable and reliable scientific inquiry, facts, or data’. The tort of product disparagement generally requires harmful intent or malice, and that the defendant knew the statement was false but expressed it anyway. (Taken from Marvin Hayenga, Professor of Economics, a consultant and expert witness for the defence during the trial of Oprah Winfrey and others).

CHAPTER THREE

The Emerging Campaign for Corporate Science

Money changes everything
Tom Gray, sung by Cyndi Lauper

Although there had been company- and even industry-wide campaigns in defence of industrial science before *Silent Spring*,¹ the first real signs of a collective defensive strategy used by science and multinational global corporations came in the mid-Eighties. The founding quackbuster group, the American National Council Against Health Fraud (NCAHF),^{2,3} set up in 1984, had from the beginning two companion organisations. One, the American Council on Science and Health (ACSH),⁴ was obviously concerned with the defence of corporate science; while the other, the Committee for Scientific

1 Martin Walker, *The Unquiet Voice of 'Silent Spring': The Legacy of Rachel Carson*. *The Ecologist*, Vol. 29, No. 5, August/September 1999.

2 I have started here because this seems to be the beginning period of truly organised corporate defence groups, especially those that acted on behalf of the pharmaceutical companies. Before this time, there were, however, all kinds of Institutes and strategies for individual industries.

3 See P. J. Lisa, *Are you a Target for Elimination* and *The Assault on Medical Freedom*. Also op. cit. Walker, *Dirty Medicine*.

4 It is reassuring to see the ACSH taking on board all the aged, failing flotsam and jetsam of commercial science, for whom life in the real world has (*cont.*)

Investigation of Claims of the Paranormal (CSICOP),⁵ had all the hallmarks of a CIA initiative, and although it defended science, it still spent most of its energy *attacking* the assumptions and organisations of those it saw as ‘anti-science’.

Since the early Nineties, the American NCAHF had divided, amoeba like, mainly to escape the consequences of legal actions. More obviously radical splinter groups have set up across North America. ACSH has grown considerably, bringing even more ‘scientists’ on to its Council, and CSICOP has proliferated, with a large number of sibling local and national *Skeptic* organisations.⁶

ACSH now resembles the archetypal corporate-funded science lobby group. When it was set up it found a ready funder in Monsanto, and it has continued to take money from all the major corporations. It defends any corporate product that comes under attack, apart from tobacco, and its long-term head, Elizabeth Whelan, has coined a language of denigration for what she and the group see as the opposition. ASCH itself employs one of the biggest and most potent PR companies in North America, to defend itself and the corporate products which come under its umbrella.

CSICOP appeared to develop out of a socialist grouping around Paul Kurtz, a prominent US humanist whose origins were in the Marxist Left. The group works with the Humanist movement and has seeded an international ‘Skeptics’ movement,⁷ with numerous small groups across North America and

(*cont.*) become too painful. A couple of years ago, the great Monsanto recipient Sir Richard Doll joined their Advisory Panel, and in 2004 Professor Simon Wessely joined the same panel, where he can rub reputations with Dr. Stephen Barrett, North America’s non-practicing psychiatric MD and failing quack-bustermaster, Dr Ronald Gotts, the great insurance marketeer, plasticman Denis Avery, and such great organs of the libertarian right as *Reason*, *Skeptic* magazines, and the American Enterprise Institute.

5, 6, 7 Op. cit. Walker, *Dirty Medicine*.

Europe. CSICOP began by almost exclusively attacking religion. By the late 1980s, however, the focus on religion had dissipated, and the organisation began attacking any kind of research into psychic phenomena, then alternative medicine of all kinds.

In the cracks between these three organisations, over the past two decades, have appeared a plethora of organisations intent upon capturing science for industry. Sociology, epidemiology, academic and clinical research have all been dragged from the hands of 'independent' groups, to be controlled by industry funding.

The British quackbusting organisation, originally named the Campaign Against Health Fraud (CAHF) and now called HealthWatch, was set up in 1988 by CSICOP activists, a couple of 'skeptics', and a small group of individuals linked in different ways to corporate science. It gained initial funding from PPP, the medical insurance group, and the Astra pharmaceutical company. Although it has insisted since its name change that it has raised most of its money by subscription, it no longer makes its accounts public.

Caroline Richmond, the apparent founder of the group, had been working as a journalist on trade magazines, and there was involvement from other members of the Medical Journalists Association of the time. While CAHF immediately gained the reputation of an organisation that attacked alternative therapies, the more 'constructive' recorded aim of the group was the defence of scientific research and particularly double-blind placebo trials.⁸

As well as receiving help from Paul Kurtz's organisation in America, CAHF received considerable support from the

⁸ One of the central figures of the CAHF, who is still involved with the groupings discussed in this essay, Vincent Marks, was one of the first British scientists to research monoclonal antibodies.

Wellcome Trust, the income of which was at the time based upon the Wellcome Foundation, one of Britain's largest drug companies. The group used classic attack strategies employed frequently by CSICOP and quackbusting individuals in North America. These included verbally aggressive attacks on vulnerable individuals, shouting them down and talking over them, while in other circumstances claiming that they had received death threats or threats of violence from 'the other side'. A mention of their activities was enough to merit a letter from their lawyers, although threats never resulted in action.⁹ A common strategy, one used against my book *Dirty Medicine*, was to call it a Nazi work. The hope is, in using this ploy, that some mud sticks.

At the time that the CAHF was defending the AZT 'Concorde' double-blind placebo drug trials, Sir Alfred Shepherd, the chairman of Burroughs Wellcome and of the Wellcome Foundation, was appointed to the Advisory Committee Science and Technology, the body which then advised the Government on science. He was on this Committee during the marketing of AZT, at the same time, one of the Trustees of the Wellcome Trust, Professor Roy Anderson, was on the same Committee.¹⁰

Professor Trevor Jones, who was the director of research and development at the Wellcome Foundation during the time that

9 In North America the strategy has been quite different and the major quackbusting proponents have gone from a couple of early successes to later major humiliation, as defendants have gathered support and experience, and judges have become angered by the legal anarchy quackbusters have brought to court.

10 In the mid nineteen nineties, the Council fell into disuse but was resurrected in 1998. Of present members a number of them are either close to government or have links to pharmaceutical or chemical companies. Dr Mark Walport is on the R&D advisory panel of SmithKline Beecham, and on the boards of Amersham and Novartis while being a member of the Merck Institute. He is also a member of the Gates vaccine Institute, a Wellcome Trustee and (cont.)

AZT was developed and licensed, was also selected to sit on the Medicines Commission. In 1994, Jones became director general of the ABPI.¹¹

The science base of CAHF was clear.¹² All the science-based organisations, societies and institutions welcomed its arrival, and it was very close to the British Association for the Advancement of Science and the British Science Writers Association. In 1987, Caroline Richmond was elected on to the Committee on the Public Understanding of Science (COPUS), an organisation set up by the British Association for the Advancement of Science, while CAHF was in its gestation. At that time, the chairman of COPUS, Sir Walter Bodmer, was a friend of Richmond's.¹³ Bodmer and some CAHF members went on to be involved in the bogus trial that was used to discredit the Bristol Cancer Help Centre.

Both Professor Simon Wessely and Dr Charles Shepherd played a prominent role in the Campaign. Wessely spoke out primarily against the idea that ME was a physical illness, and frequently joined forces with Richmond to denigrate sufferers. In August 1990, as part of her role in the Press Briefing Committee of COPUS, Richmond gave a press briefing on chronic fatigue syndrome. The briefing was chaired by Professor Anthony Clare of Trinity College Dublin.

(cont.) member of Public Engagement (in science) Strategic Advisory Group, managed by the Wellcome Trust. Other members of Council for Science and Technology include Sir David King, Government Chief Scientific Adviser, Dr Rob Margetts of the Chemical Industries Association, Professor John Beringer of the John Innes Centre and Mr Andrew Gould, a Director of Rio Tinto Zinc and Schlumberger.

11 Jones retired from the position in August 2004, just before assuming the Chair of the Advisory Group on Genetic Engineering, an advisory body supported by the DoH but not listed in the list of advisory bodies.

12 See *Dirty Medicine* for the names and roles of other members of CAHF and their links with scientific research of different kinds.

13 Bodmer was later implicated with Sir Gordon McVie in the fraudulent research which brought the Bristol Cancer Help Centre to its knees.

Dr Shepherd, who became an adviser to the ME Association, launched a wide range of attacks upon anyone who presumed to treat ME with nutrition or alternative remedies of any kind. The Campaign Against Health Fraud held its early meetings at the Ciba Foundation, the academic front for the drug company Ciba Geigy, which later became Novartis. The Ciba Foundation ran an information service, named the Media Resources Service (MRS), which was already doing the same kind of work in defence of science, health, pharmaceuticals and the chemical industry, that CAHF expected to do and that the Science Media Centre would begin to do a decade later.¹⁴ The MRS put scientists and sympathetic journalists in touch with each other. Dr Shepherd was an adviser to the MRS.

The *métier* of CSICOP and the skeptic organisations was their promotion of 'debunking'. Like the public school jape that it resembles, debunking left those involved laughing behind their hands at their dirty little secrets, in labs and offices. They would say 'Kurtz is a great de-bunker', or 'did you see the way Randy de-bunked that guy?' Debunking entailed showing up someone's 'spurious' scientific claim. The only problem was, of course, that many of these critics were not scientists. Kurtz was an ex-lefty 'philosopher', Randy was an entertainer who hankered after being the new Houdini, while others edited magazines or were non-practising psychiatrists or sceptical academics. Inevitably, if they tried to debunk some real scientist, they failed and had therefore to fabricate their results.

The most absurd debunking that they did was of the late Jacques Benveniste^{15,16} in 1988. An important piece of work by Benveniste and thirteen other scientists was published in *Nature*, the science magazine, which John Maddox then edit-

14 See later chapters.

15 Jacques Benveniste died in the operating theatre of a French hospital in 2004.

16 Op. cit. Walker, *Dirty Medicine*.

ed.¹⁷ As Benveniste's previous scientific work had done, the results of this work went against the grain. The paper, entitled 'Human basophil degranulation triggered by very dilute antiserum against IgE', was the result of a five-year study, which showed that even in great dilutions, aqueous solutions of antibodies retained biological activity that was not present in plain water.¹⁸

To Benveniste, this was another step towards proving that homeopathy had a scientific basis. But to the science zealots of CSICOP, it was a challenge too far. Maddox demanded the right of reply for science, and a team of non-scientists, including himself, Randy 'the magician' and Walter Stewart, an academic science snoop, 'parachuted' into Benveniste's lab, with the declared intention of debunking his work. They joked about and – using their limited experience – examined his lab notebooks and 'replicated' his research.

A month later, this team of clowns published their research, and surprisingly their results were at variance with Benveniste's five years of work – not to mention that of his participating colleagues. They wrote in *Nature*, 'The claims of Benveniste *et al* are not to be believed.'¹⁹ Within a few months Benveniste, who up until then had been one of the most well considered, if temperamental, scientists in France, with a position at Inserm, the French equivalent of the Medical Research Council, had lost his funding and been thrown out of his lab. It took him some years and considerable personal hardship to regain his laboratory.

17 Maddox, who was always on the side of industrial science, is now a member of the CSICOP Executive Committee.

18 Benveniste, Jacques et al. Human basophil degranulation triggered by very dilute antiserum against IgE. *Nature*, 30 June 1988.

19 John Maddox, James Randi, and Walter Stewart. 'High dilution' experiments a delusion. *Nature*, 28 July 1988.

When I interviewed Benveniste in 1992, he expressed very simply an analysis of CSICOP, which it would take me some years to arrive at. He told me that he had always been a rationalist, and if it were not for the authoritarian attitudes of CSICOP, he would belong to them. I didn't point out that they would not have him because he did not support the right brand of rationality. Probably, however, he knew this. He said, 'Even if these people are defending industry rather than science, they are clearly stupid, because if we are right our discoveries will ultimately augment any possible intervention in the market by pharmaceutical companies.'²⁰

The Campaign Against Health Fraud also articulated many of the anti-environmental positions pursued by the chemical companies in North America. They were decidedly antagonistic to environmentalists because they saw them restricting and regulating business. And on behalf of the chemical companies they took up an extravagant position against anyone said to be suffering from damage from chemicals. They attacked out of hand any alternative practitioner who attempted to treat chemical damage, maintaining that such complaints were entirely mental health problems. Throughout the Nineties they consistently attacked Dr Jean Monro, one of the most experienced British doctors treating chemical sensitivity.

As far as CAHF was concerned, the problem was mainly people who believed they were ill when they were not. And it was not only patients fabricating illnesses, it was also unscrupulous alternative practitioners who made a mint from convincing the vulnerable that they had illnesses that they had not, or they could be cured of illnesses of which they could not. At the end of this chain of self-deception and criminal illusion were the media, journalists all too happy to side with the deluded patient or to believe too seriously in the honesty of the alter-

²⁰ Op cit. Walker, *Dirty Medicine*.

native practitioner. CAHF made it endlessly clear that they believed that journalists colluded with patients who had false illness beliefs, to attack doctors and science.

With a determination to expose this situation CAHF cultivated journalists who sided with allopathic medicine and corporate science. They set up or used existing groups, which developed safe journalists. Such groups were heavily funded by the drug companies, who also gave honoraria, prizes and titles to young journalists. And, of course, they cultivated journalists who would wage war on their behalf, attacking alternative practitioners and others who stood out against science or allopathic medicine.

CAHF and its fellow travellers never had the support from government that was necessary for them to win their case. They did apply to be taken into the Department of Health, but they were far too combative and contentious for any links with government to be publicly admitted.

Science was at this time in a kind of limbo in Britain. Having originally been a part of the Department of Education and Science, science policy was moved in 1992 to the new Office of Public Service and Science, from where William Waldegrave, the Conservative minister in charge, told the press, 'We need to show that the powers that be are on the side of rationality.'²¹

The new department, however, did not last long, and Science eventually became embedded in the Department of Trade and Industry (Dti), where again it failed to thrive until New Labour came to power in 1997. When Lord Sainsbury²² followed Peter Mandelson into the Dti as the science minister, it really took off. The office for science, which Sainsbury still oversees, has changed substantially from the time that science

²¹ *The Independent* cited in Walker, *Dirty Medicine*. Op. cit.

²² Op cit. Walker, *SKEWED*.

might have been considered a lay preoccupation based on curiosity. The Office of Science and Technology (OST) has policy control of the chemical and biotechnology industries as well as all the Research Councils, including the Medical Research Council (MRC). If its title read The Office of *Corporate* Science and Technology, it would be more accurate but still not cover the full range of its activities, such as attacking alternatives.

Partly because New Labour further opened government to consultancies and corporate interests, and partly because science policy had always floundered inside the governmental structures, the integration of science policy into the Dti presented a great opportunity for private interests.

After their election victory in 1997, in pursuit of their plans to privatise government and not just to sell the family silver but to give the house away as well, New Labour opened the doors of the civil state to the private market. Anyone with a good spiel and a mobile phone was able to buy bits of the administration.

On the fringes of parliament, industry, democracy, health care and weapons were bought and sold by an army of consultants, PR reps, multinational corporations, odd-jobbers and spivs. The Arthur Dalys of Oxford and Cambridge and the Del Boys of the new concrete campuses, the hard-hearted, go-getting Thatcherites who had taken in individualism with their mothers' powdered milk, came to feed on the remaining carrion of public service in Westminster and Whitehall.

The rather eccentric individuals of HealthWatch and its old guard of charitable supporters of science were no good to this new generation, they needed professional lobby groups, and the decade-old deception had to come to an end as well. Why make bones about it? The multinationals wanted to sit with the Government on the front benches, not to rely on a group of amateurs to pass messages for them.

A new series of more sophisticated lobby organisations backing science and orthodox medicine, began taking over the foot soldier work of HealthWatch and organising in defence of science on a more professional level. Some elements of the work of HealthWatch, which had taken place on a purely national basis – i.e., their battle against vitamin supplements – were overtaken by regulations introduced through the EU and Codex Alimentarius. In the case of B6 the Dti actually organised the campaign against it.

Other campaigns, such as that against ME, were upgraded, and with the organisational abilities of Professor Simon Wessely and colleagues, were adopted by the Medical Research Council (MRC) and other government-funded bodies. The Health-Watch battle against alternative remedies was stepped up by the MCA and then a newly structured MHRA – a margin of tolerance was offered to those groups with a viable commercial future, but alternative purists of any speciality were pushed aside.

The New Labour Government began regular meetings with the Pharmaceutical Industry and handed over large parts of the NHS to them.²³ Within medicine and health care, all kinds of professional quasi-regulatory bodies came into being. In the vanguard, the honourable legions of corporate science donned their armour and trained for a more final confrontation than HealthWatch had ever envisaged.

²³ See this author's article *The Ghost Lobby* on the Internet, or the longer paper, *The Ghost Lobby and Other Mysteries of the Modern Physic: Wyeth Pharmaceuticals and New Labour*, Martin J Walker, 2005. Available as a Pdf download on the Scienza e Democrazia 3rd Conference 2005 site.

PART TWO

- 4 Trotsky Meets Hayek
- 5 Dr Michael Fitzpatrick
And MMR
And ME
And Alternative Medicine
- 6 Is it a Bird? Is it a Plane?
No, It's Lord Dick
- 7 Open Government, Shut to the People
- 8 Life and Obscure Letters
of Lord Dick
Risk Analysis and AXA Sun Life

CHAPTER FOUR

*Trotsky Meets Hayek*¹

After much internal conflict and a number of splits within the British Trotskyite movement, the Revolutionary Communist Party (RCP) came into being in 1978, one of five main strands of Trotsky's legacy in Britain. The leading theoretician of the small group was Frank Furedi, a sociology lecturer at the University of Kent.

Throughout the 1980s, the Party acted like any other revolutionary communist party in Britain, they sold their papers, attached themselves or didn't attach themselves to popular causes, had lots of meetings and tended to think of themselves as more important than they would ever be. Individual members of the RCP, like members of the Revolutionary Communist Group (RCG), their rival sibling organisation, frequently changed their names in an apparent attempt to stay one step ahead of MI5, or perhaps to suggest that their party had twice its actual membership.

Like other left groups of this period, they saw gains to be made by nationalist groups that fought imperialism for independence and autonomy. One outcome of this political analysis

1 Friedrich A. Hayek (1899-1992), free market and classical liberal economic thinker. Leon Trotsky (1879-1940), revolutionary communist, member of the Central Committee of the Bolshevik Party in 1917, expelled by Stalin from the Comintern in 1928. Assassinated in Mexico by a Stalinist agent.

was a continuing and unquestioning support for Irish Republicanism up until the end of the 1990s.

The party began supporting the 1984-1985 miners' strike, which began when the Thatcher government failed to follow through with its negotiated agreement to stagger the closure of uneconomic pits following consultation with the NUM. As the government broke the agreement and arbitrarily began to close pits, a rolling strike began. When the strike appeared to be taking hold, reformist elements within and without the workforce demanded that the NUM hold a ballot to ensure that the public could see that the strike was democratically accepted by all the workers. The NUM executive, aware that all kinds of groups and organisations whose interests were inimical to those of the miners would take advantage of a ballot, backed the pits that had already stopped work and refused to hold one. At this point, the RCP withdrew their support for the miners.

The miners' strike was also a turning point for the Labour Party. Neil Kinnock, the leader of the party in opposition at that time, refused to offer Labour's backing to the miners. Behind the scenes, Labour was being pushed, cajoled and influenced by liberals trying to force it into the middle ground of social democracy. These liberals and social democrats, at that time working on changing the nature of the Labour Party were also supporting working miners and trying to break the strike.

In 1987, the RCP contested the general election as the Red Front. Their improbable hope was the replacement of the Labour Party by the RCP. Their failure in this election sounded the death knell of the decade-old Party with respect to revolutionary politics. When the Labour Party lost the election, Neil Kinnock resigned and John Smith took up the position as leader.

The RCP appeared to 'give up' on the working class as an autonomous entity capable of carrying out popular revolution.

They began to formulate a theory and a practice that better suited their own cadre, which tended to be drawn from middle-class university students. Throughout the 1990s, the Party moved to capture ideological space within the middle and lower middle classes, with a political philosophy that began to reflect the economic strengths and self-interests of Thatcherism.

From the early Nineties, the Revolutionary Communist Party appeared to fall in step with the growing consumer culture of the economic libertarianism and the politics of *individual* freedom advocated historically by liberalism and embraced by the contemporary politics of Reagan and Thatcher. This swing in political direction ran parallel to radical changes in the Labour Party that became more pronounced following the sudden death of John Smith and the assumption to the Party leadership by Tony Blair.

In 1997, the year of the general Election that swept New Labour to power, the RCP was apparently disbanded and its monthly journal, *Living Marxism*, became the glossy magazine *LM*. The new ex-RCP network adopted radical right libertarian ideas about freedom of the individual.²

The organisational tenets of the ex-RCP Network, which replaced the RCP, was reflective of the new means of production. Rather than a machine-like collective organised from the centre, the new party became a network, sparking synaptic groups, all of which held certain basic principles in common. As well as this of course, the new Network ditched any reference to Communism, Marxism or class-struggle.

2 Another major example of the left liquidating itself into the social democratic liberal governments is that of the North American non-Communist left after the Second World War. As these groups folded and their most prominent members worked their way into the ever-expanding administration, they provoked a backlash from the right, who created the House Unamerican Activities Committee to weed them out.

Clearly understanding the words of Margaret Thatcher that the next industrial revolution would be a scientific one, ex-RCPers began organising to become part of the developing scientific establishment. They opposed all restrictions on science and technology and threw their lot in with the world's largest corporations in the area of biotechnology, chemicals and pharmaceuticals. The anti-green, anti-environmental and anti-ecologist strand that had always played a part in their philosophy became more stridently expressed.

In 1998, the German edition of *LM* claimed that a film shown by ITN had falsely suggested that the Serbs were organising concentration camps in Bosnia. As a consequence, ITN began a libel action against the publishers and journalists of *LM*. When this action was successful in the year 2000, the magazine was struck with a large libel award and folded. With the loss of *LM*, the new network launched the on-line magazine *spiked*, which became the network's main organ. Like *LM*, *spiked* had the added colour of PR, and most of its meetings – until the setting up of the Science Media Centre (See Part Four) – were held in the offices of Hill and Knowlton, one of the biggest global PR companies, many of whose clients are multinational pharmaceutical companies.

It is fairly simple to follow the RCP out of the morass of left groups at the end of the Eighties. The defeat of the miners represented a major watershed for the British working class in the face of post-industrial economic restructuring. The miners had come as close as any working-class group since the 19th century to gaining autonomous control over their industry and communities, but it was nowhere near close enough. The strike manifested the dislocation that had occurred since the second world war between the main elements of the working class, and between the class and its traditional political party. There would never again be a united working class leadership made up of the miners, other energy workers and transport workers.

Nor, it appeared, would there ever be a majority party that represented those who worked manually in industrial processes.

The choices for revolutionary or Marxist groups in the late Eighties was limited: they could take up the cause of fractionalised minorities such as prisoners, fight racism, fight poor housing conditions, fighting for women's rights, against drug addiction and for community self defence. This route was not as well travelled by Marxists as it was by anarchists, primarily because these 'client' groups could not weld into a central party that might ultimately take power.

Then there was the possibility of supporting anti-imperialist struggles, but apart from the well-organised and effective fight against the part played by the British government in support of apartheid in South Africa, and earlier struggles in solidarity with Chile, this support was limited in Britain. Many people who found themselves marginalised after the miners' strike put their energy into nationalist struggles, particularly that of Irish Republicanism. The people caught up in such conflicts did not have to be convinced of theoretical constructs; they were fighting for land and identity.

A further expansion of the anti-imperialist campaign involved the anti-globalisation or eco campaigns, which many 'upcoming' political activists quickly joined. Mixed with the anti-globalisation movement was a developing green and environmental movement, which was tied up with organic farming. These campaigns, however, all sought organising principles along anarchist lines, with small, autonomous groups pursuing different kinds of novel tactics. It was soon evident that there was no place here for the Trotskyite or Marxist party.

The Revolutionary Communist Party is not the first group to substitute a radical political network for a party. This kind of network has been the foundation for the 'Liberal' power of the Rhodes/Milner/Rockefeller group, which has exerted influ-

ence in British and North American society from the late 19th century to the present day. Throughout the 1980s and Nineties, a number of left groups such as Big Flame and La Lotta Continua began to organise as networks, rather than on a party basis.

* * *

Karl Marx was critical of the way in which the industrial revolution developed. He pointed out that the factories had been built, and the means of production rapidly changed, without any institutional structures being organised to accommodate the thousands of people who were moving from the land to the developing cities. While the owners of capital thrived, there were no social institutions through which the new working class was able to participate in the developing society.

The social chaos caused by this hiatus between rural and industrial production, which displaced millions of people and left them suddenly without any means of existence, was inevitably one of the factors that influenced socialists and anarchists towards ideas about revolution throughout the 19th century. It was also one of the factors that persuaded Communists that, in the future, major shifts in the economy should be planned.

In their unquestioning support for science without any public consultation, the RCP Network had clearly drifted a long way from one of the seminal ideas of socialism. Few democratic socialists would argue against transitions in the means of production being discussed and planned, so that technological advances can be turned to the advantage of the whole society. The ex-RCP Network, however, appears to believe in a governing elite, which is brought to power with the new scientific means of production, only because they *own* those means of production – a repeat of the 200-year industrial revolution.

The exRCP Network is adamant that scientists have to be given their head, that they should suffer no regulatory constraints, and that there should be no democratic discourse about the direction of science, lest this leads to constraint. While it seems quite plausible that a Marxist group could take up the cause of developing technology and science, it is after this point that an understanding of what happened to the RCP becomes increasingly difficult.

Why, when they realised that science would be the guiding power in the 21st century, did they not side with science on behalf of the people? Why did they not join forces with those scientists who have struggled for decades to find solutions to problems, which could bring massive benefit to large numbers of people in developed and developing societies? Why have they been utterly indiscriminate about their advocacy of science? In siding with Big Science and its political and financial backers, they have sided with some of the most politically reactionary forces in the world.

Karl Marx might have believed that the development of industry and technology was the primary force that guided society and created all other social relations. However, the identification of the primacy of this power should not have led Marxists to a completely fatalistic concept of corporate social organisation. Quite the opposite: advanced means of production and the power of technology were meant to free the human identity, not just one small section of the population.

Some of the most fascinating aspects of the continuing development of the politics of the ex-RCP Network can be seen in its conviction that the will of the strongest is a good political organising principle. Its ideology must be one of the first theoretical models of society outside of fascism, in which the sick and the weak are simply 'not seen', and are left to fend for themselves in the shadows cast by the increasingly rich and powerful. In this sense, the Party or Network has become the

absolute antithesis of socialism. With its shades of *The Disposessed*, or *Ozone*,³ it now represents a future society that will be dramatically divided. A society in which a rich, leisured class enjoys all the fruits of bio-science, indifferent to a seething mass of the affected poor.

3 In Ursula le Guinn's novel, *The Disposessed*, two worlds develop, one a libertarian socialist world where all science is used for the benefit of the people as a whole, the other a high capitalist, apparently libertarian world, where the teeming poor live in the shadow of an immensely rich class of individualists who keep to themselves the fruits of scientific progress. In Paul Theroux's *Ozone*, the rich live in authoritarily administered but consumer libertarian walled cities, where they enjoy all the benefits of a science that has all but completely destroyed the human habitat in areas of surrounding countryside.

CHAPTER FIVE

Dr Michael Fitzpatrick

Michael Fitzpatrick has played a leading role in expressing the views of the ex RCP Network in the area of science and health. He touches many of the organisations that the group has set up, such as Sense About Science, the Science Media Centre, *spiked*, and the Institute of Ideas (IoI), which is funded by chemical giant Pfizer.

A look at Mike Fitzpatrick and some of his ideas gives us a virtual tour of the New RCP Network's mindset in the area of health. Other members of the group and their affiliations mentioned in this essay are listed in the footnote below.¹

Dr Michael Fitzpatrick was in the Revolutionary Communist Group for most of his adult life. Like his comrades, until the mid-Nineties, he was seriously intent upon the working class turning Britain into a communist state based on the ideas of Leon Trotsky.

1 This list of names of ex-RCPers, which numbers 50 or so in its original version, appears on the *Living Marxism* (LM) profiles page of GM Watch. <http://www.gmwatch.org/profile1.asp?PrId=78>. I have edited it, to include only those people who appear to be relevant or mentioned in this essay.

KEY: IoI: Institute of Ideas. UKC: individuals known to have studied or taught at the University of Kent at Canterbury where Frank Furedi is based. SMC: Science Media Centre. SAS: Sense About Science. Living Marxism: *LM*, *spiked*.

Tracey Brown, Global Futures, *LM*, *spiked*, IoI, UKC. **Martin Durkin**, director of *Against Nature* (see page 105.) **Bill Durodié**, *Living Marxism*, *LM*, *spiked* (cont.)

Dr Fitzpatrick is a General Practitioner in Hackney, London.² He is a Trustee of Sense About Science,³ which is funded by a number of the major pharmaceutical and biotech companies. Sense About Science has shared its telephone number with Global Futures, of which Fitzpatrick has been a Trustee, and in which Sense About Science workers Tracey Brown and Ellen Raphael have also played a part. Global Futures is supported by, among other groups, the Association of British Pharmaceutical Industries (ABPI), Amersham Biosciences plc, Glaxo-SmithKline (GSK), AstraZeneca plc and Pfizer plc. In the past, Fitzpatrick frequently contributed to *Living Marxism* and had a regular column in *LM*. Sometimes, as was the custom with the RCP cadre, his writing appeared under an alias.

Fitzpatrick makes regularly contributions to *spiked*, which is supported by Hill and Knowlton, which handles the accounts of a number of pharmaceutical companies, including the three main vaccine producers. Fitzpatrick has spoken at events

(cont.) IoI. **Martin Earnshaw**, *Living Marxism*, *LM*. **John Fitzpatrick**, *Living Marxism*, *LM*, *spiked*, IoI, IFM, UKC. **Michael Fitzpatrick** (aka Mike Freeman), *Living Marxism*, *LM*, *spiked*, IoI, Global Futures. **Claire Fox** (aka Claire Foster), *Living Marxism*, *LM*, IoI's director. **Fiona Fox** (aka Fiona Foster), IFM, *Living Marxism*, *LM*, IoI. **Frank Furedi** (aka Frank Richards), *Living Marxism*, *LM*, IoI, *spiked*, UKC. **Ann Furedi** (aka Ann Bradley, Ann Burton), *Living Marxism*, *LM*, *spiked*, IoI. **Tony Gilland**, *LM*, *spiked*, IoI. **Chris Gilligan**, *spiked*, IoI. **John Gillott** (aka John Gibson), *Living Marxism*, *LM*, *spiked*, IoI. **James Heartfield** (aka James Hughes), *LM*, *spiked*, Audacity (a campaigning company that advocates developing the man-made environment, free from the burden of 'sustainababble' and 'communitwaddle'). **Mick Hume**, editor of *Living Marxism*, *LM* and *spiked*. **Eve Kaye** (aka Eve Anderson), *LM*, assistant producer, *Against Nature*, married to **James Heartfield**. **Pandora Kaye**, sister of **Eve Tiffany Jenkins**, *LM*, IoI, *spiked*. **Ellen Raphael**, *LM*, IoI, Global Futures, UKC. **Juliet Tizzard**, *LM*, *spiked*, IoI, Novo.

GM WATCH's investigative work is undertaken by a loose alliance of independent researchers co-ordinated by its founder, Jonathan Matthews. The standard of the writing and research on the GM Watch site is very high.

2 Showing their professional commitment to the poor and the working class, a number of physician members of the Socialist Workers Party, (cont.)

organised by both *spiked* and the Pfizer-funded IoI. He was a member of the Joint Forum of the Social Issues Research Centre,⁴ and of the Royal Institution, which drew up the *Guidelines on Science and Health Communication*. The Social Issues Research Centre is indirectly funded by PR company clients, including pharmaceutical companies, and by a number of the major food and drink companies.

As a physician, Fitzpatrick has been outspoken in two medical matters in recent years, both of which involve the interests of pharmaceutical companies as well as those of the public. These are the campaign supporting ME as a psychiatric illness, and the campaign in support of the government-backed MMR vaccine. Despite having a much thicker veneer of intellectual plausibility than his predecessors in HealthWatch, Fitzpatrick's writing is a boilerplate version of most quackbusters material. The pharmaceutical companies have now had 20 years, since the setting up of the American National Council Against Health Fraud in 1985, to 'refine' their 'philosophy' and arguments about prescription drugs, undiagnosed illnesses and alternative medicine.

(*cont.*) Trotskyites and other aligned groups, went to work in the East End of London in the 1970s and 1980s. The most impressive of these individuals was David Widgery, who had been involved in left politics since the upheavals of 1968. At the time of his accidental death in 1992, Widgery was working at a practice in Limehouse, and writing about it and his patients, most of whom were under siege from the massive docklands development underway at the time. See the Bob Light obituary at <http://www.dkrenton.co.uk/light.html>

3 All the following groups are analysed briefly in the next section of the essay.

4 Other members of the Forum included Professor Sir John Krebs FRS, then chairman of the Food Standards Agency, Lord Dick Taverne QC, founder of Sense About Science, the co-directors of the Social Issues Research Centre and the Baroness Susan Greenfield, Director of The Royal Institution.

Dr Fitzpatrick and MMR

The issues involved in MMR are relatively straightforward. Increasingly, the government has been working with vaccine manufacturers to plan and produce vaccines. The New Labour government has agreed the premise that an increased number of combined and genetically modified (GM) vaccines will be produced in the coming years. These combined vaccines, the pharmaceutical companies argue, will rid society of most known diseases.⁵ They will, as well, create a bridge between the old and ailing chemical drugs industry, and the future, expanding, biotech, person-altering products industry.

There is a well-recorded history of adverse reactions to many different kinds of vaccination. There is, too, a deep-seated moral and political argument, which has ranged back and forth through society over the past century-and-a-half, about the right of the State to enforce medication on citizens.

MMR was introduced in 1988; it replaced single vaccines for these illnesses. Andrew Wakefield, a research gastroenterologist, had been throughout the late Eighties and early Nineties a 'golden boy' of medical research. The pharmaceutical companies showered funding on him as he gradually uncovered a new and fundamental mechanism of Crohn's disease, one that was strongly suggestive of an infectious cause. In 1995, Wakefield and his colleagues published the first of a series of papers relating Inflammatory Bowel Disorders (IBD) to an infectious cause: measles virus. This culminated in 2002 with the molecular identification of measles virus in the bowels of children with a novel form of inflammatory bowel disease and a regressive autism. In a published presentation by colleagues at Trinity College Dublin this was subsequently identified as being of vaccine strain.

⁵ Op. cit. Walker, *The Ghost Lobby*.

The possible causative effect of measles virus in IBD was also researched in Japan, where peer reviewed papers were published that potentially linked measles virus to IBD. During the same period, the Japanese Government withdrew MMR after a significant number of adverse reactions and paid out compensation to damaged children. In Sweden, researchers at the Karolinska Institute had also observed a connection between the virus and Crohn's disease.

These observations, and where they led Wakefield's scientific investigations, were to prove highly unpopular with his funders, and with some of the academic medical hierarchy at the Royal Free Medical School, where he did his research. In 1992 Wakefield wrote to the Department of Health (DoH), giving his findings with respect to a potential link between IBD, including Crohn's disease, and the measles virus. He asked for a meeting and argued his case for further research. In 1993, when Wakefield heard that there was to be a renewed re-vaccination programme in 1994, he again wrote to Dr. David Salisbury, Principal Medical Officer for Communicable Diseases and Immunisation, and other concerned individuals at the DoH. Again he drew the Department's attention, especially to the work of Dr Anders Ekblom in Sweden.

Although his letters to the DoH were met with bland reassurances, and the re-vaccination programme went ahead, the then chief medical officer, Dr Kenneth Calman⁶ (see Part Five),

⁶ Calman was the person who first instigated the CMO's Inquiry into ME and CFS, which ultimately, being part-funded by one of the Lord Sainsbury's charities, awarded even more research funding to the psychiatric lobby without conceding a penny to research into the organic causes of the illness. Calman was rewarded for his work as Chief Medical Officer by both the pharmaceutical companies and David Sainsbury's Office of Science and Technology, with a position alongside two major vaccine company executives, on the pharmaceutical industry-funded Advisory Committee (*Ghost Lobby*) to the Associate Parliamentary Health Group, and with a position on the Chemistry Leadership Council.

did grant Wakefield a meeting in 1995, three years after he had first asked. At the meeting, Wakefield made a case for government-funded research and for a proper review by a meeting of the Medical Research Council (MRC) of his and the other scientific research. It would be *another* three years before the MRC meeting was organised, and then it did not conduct an independent review. As for the research funding, this was never considered.

A second meeting took place in September 1997, between the research team and the solicitor acting for the 12 children, and, among others, Tessa Jowell and Kenneth Calman. The discussion focused on the developmental pattern of 1,200 children whose parents the solicitor represented, and another 500 cases, which the vaccine concern group JABS brought to the meeting. An agreement was reached that Calman and Wakefield would co-operatively draw up the names for an international forum, which would review the papers on MMR, IBD and autism. ‘Co-operation’ was not, however, to be the name of the game.

In February 1998, *The Lancet* published a study authored by Dr Wakefield and 12 other researchers, which looked at 12 children⁷ who had attended the Royal Free Hospital during 1996-1997, with digestive problems and degrees of autism. After a series of clinical tests and observations in 1997, the research team had concluded that all of the children had developed normally, then had lost acquired skills and had developed severe stomach pains and diarrhoea. But perhaps the most serious finding was that 11 of the 12 had inflammation of the colon, while seven of them had swollen lymph glands in the intestine.

7 Wakefield AJ, Murch SH, Anthony A, Linnell J, Casson DM, Malik M, Berelowitz M, Dhillon AP, Thompson MA, Harvey P, Valentine A, Davies SE, Walker-Smith JA. Ileal-lymphoid-nodular hyperplasia, non-specific colitis, and pervasive developmental disorder in children. *The Lancet* 1998; 351: 637-641.

The researchers had also found virus protein from measles. Again, concerned by what they had found, the team had asked to meet with Tessa Jowell, then New Labour's Junior Health Minister.

When *The Lancet* piece appeared, it put forward the suggestion that what the researchers had found was a new disease process, which they named 'autistic enterocolitis'. The paper considered the onset of the illness in the children and, noting its proximity to MMR vaccination, called for further research into the new syndrome and the vaccine.⁸

At a press conference called to coincide with publication of the paper, Wakefield was asked what he would do about the MMR vaccination. He suggested that it might be better to offer three separate single vaccines until further research had been carried out.

In March 1998, apparently spurred on by Wakefield's *Lancet* cases, the MRC finally organised the review meeting for which Wakefield had asked three years previously. It took the form of a one-day seminar, and involved 37 experts, all chosen by the government. After a nine-hour discussion – with Wakefield and an epidemiologist colleague, Dr Scott Montgomery, being the only ones present to report favourably on their research – the meeting dismissed out of hand the suggestion that MMR might be related to autism or that any further research was needed.

Dr Wakefield's work at the Royal Free Medical School, threw into a panic the government and the vaccine manufacturers together with those pressing for the uninterrupted progress of combined vaccines and GM pharmaceuticals. Their crisis management of Wakefield's research had been devastat-

8 Op. cit. Heather Mills, page xviii*n*.

ingly bad, organised to engender hysteria about falling immunisation, rather than demonstrate a confident conclusion about the science while backing an honest need for further research.

Over the second half of the Nineteen Nineties, Dr Wakefield's life and work began to fall apart. Articles appeared about him, questioning his character and his science; his phones were tapped, and he suspects that his mail was opened. His funding from pharmaceutical companies dried up, and, in 2001, he was asked to leave the Royal Free. Unable to raise any more funding and concerned about his own safety and that of his family, he was forced to begin commuting to North America, where his research has continued in a more open environment.⁹

In 2002, a part of the *BMJ* publishing group, *Clinical Evidence*, published a government-organised review study of MMR and autism.¹⁰ A **study review** – not original research – which, inevitably, because there was little comparative research, found not even a suspicion of any link between MMR and IBD or any similar condition. The publication of this paper was accompanied by a press release from the Science Media Centre (see Part Four). Included in this under the guise of 'a London GP and father of an autistic child' – rather than a member of the Science Media Centre well known for his anti-Wakefield stance – were these views of Dr Fitzpatrick:

The Clinical Evidence survey is yet another authoritative review which confirms that there is no scientific basis for *scaremongering* accounts linking MMR to autism and bowel

9 In July 2005, Wakefield et al published their latest peer reviewed work: *The significance of ileo-colonic lymphoid nodular hyperplasia in children with autistic spectrum disorder*, AJ Wakefield, P Ashwood, K Limb, A Anthony, *European Journal of Gastroenterology*, July 2005.

10 Donald A, Muthu V. MMR links with autism and inflammatory bowel disease. *Clinical Evidence* 2002; 7:331-340.

disease. It is time that Dr Andrew Wakefield and his supporters either came up with evidence to substantiate their claims or publicly repudiated allegations against MMR that have caused great anxieties among families with autistic children as well as reducing the uptake of MMR.

Of course, Dr Wakefield *had* come up with evidence linking measles vaccine to IBD, and had requested research money from the government to pursue the meaning of this in relation to autism. It is interesting that Fitzpatrick plays the 'anxiety of families with autistic children' card. Not only pandering to irrationality (we surely don't give up on the science because it might upset people?), but it is completely illogical.

Perhaps Fitzpatrick had done some research into the matter, and had found at least 2,000 anxious parents of autistic children, to compare with those who willingly supported Dr Wakefield's research in the hope that it would uncover treatments for their children's condition and so relieve them of their terrible anxiety.

In February 2004, *The Sunday Times* splashed across its front page an article, 'MMR Research Scandal', by Brian Deer.¹¹ This apparently independent article discussed Wakefield's research, focusing almost wholly on *The Lancet* paper of six years before.

Deer presented the case against Wakefield in sensational terms, as if Wakefield were a quack or a charlatan, and as if, he, Deer, had just discovered, astoundingly, that Wakefield's research was biased, unethical and untrustworthy. It accused Wakefield of failing to disclose that legal aid money – to be used in a civil action against the vaccine manufacturers – had been used to fund the research into the twelve children. Deer

¹¹ Brian Deer, 'MMR Research Scandal'. *The Sunday Times* (London) February 22, 2004.

followed his *Sunday Times* article with a *Dispatches* programme¹² in November 2004.¹³

The Government's position on MMR, following Blair's dissembling over his own son's vaccination, strengthened around Deer's article and the evident decision once and for all to finish Wakefield's career as a doctor. On the morning of Thursday, March 4, 2004, just a week after the article, the official spokesman for the Prime Minister gave a statement that exactly reflected the views of the Dr Fitzpatrick, Sense About Science and the Science Media Centre.

Asked if the issue of MMR had been raised in Cabinet this morning, the Prime Minister's Official Spokesman (PMOS) said only in the context of a discussion on GM issues in which the importance of the *primacy of science* had been underlined. Asked to explain the 'primacy of science' argument, the PMOS said that in relation to MMR, for example, it was clear that on one side of the scales stood a vast body of scientific opinion which stated that the vaccine was safe. On the other side, however, stood one research report – about which we now knew even more – which claimed otherwise. The important thing was not to assume an immediate equivalence between two differing points of view when that was not borne out by the overall weight of opinion.¹⁴

12 MMR: What they didn't tell you – Channel 4 Television, *Dispatches*, November 18, 2004.

13 On September 11, 2005, Brian Deer followed up his *Sunday Times* article on Dr Wakefield with a second, entitled 'MMR scare doctor faces list of charges.' The 850-word article provided no new information about Dr Wakefield's research or the charges being prepared by the GMC, which had been known since September 2004. However, Dr Wakefield's *crimes* appear to have escalated from having brought down the vaccine acceptance levels in Britain to having 'triggered ... a *world wide alarm* amongst parents.' (Author's italics.) The article did not make clear whether this 'world wide alarm' had been recorded in Japan, where the MMR vaccine was withdrawn and where the government paid out compensation to the parents of damaged children.

14 Downing Street, no not the Soap, the cabinet web site: [http:// 66.102.9.104 /search?q=cache:w6JGDAAlxYJ: www.downingstreetsays.org/ archives/ 000300.html+GM+MMR&hl=en&ie=UTF-8/](http://66.102.9.104/search?q=cache:w6JGDAAlxYJ:www.downingstreetsays.org/archives/000300.html+GM+MMR&hl=en&ie=UTF-8/).

If the statement itself is far from transparent, its disingenuous nature surely is. In fact the statement is a downright lie, worthy of the worst and most corrupt State machines. To say that only one 'research report' (or scientific paper) stood against a vast body of scientific opinion was a patent dishonesty. The British government knew this statement to be untrue, because even if they were incapable of drawing on the papers themselves, Dr Wakefield had told them about a growing body of scientific work, from Harvard and elsewhere, roughly corresponding to his own. As well, one would have hoped that the British government knew about the research carried out by the Japanese Government, or maybe that was *bad Japanese science*.

Six months after *The Sunday Times* article appeared, and a month before the television programme, apparently with the connivance of the New Labour Minister for Health, the General Medical Council (GMC) served notice on Dr Wakefield. He was to appear before the Council's Preliminary Proceedings Committee (PPC), a necessary step before possibly being brought before the Professional Conduct Committee.

From the onset of the attack upon Wakefield, his character, his competence and his ethics have been in the forefront of the campaign. There has been a wide range of articles, television programmes and Internet texts claiming that Wakefield is a 'maverick' and a quack. There have, however, been no independent scientific studies using the same protocols as he and his colleagues used, which have come to contrary conclusions.

Dr Michael Fitzpatrick, and the organisations inhabited by his Liberal mate, Lord Dick Taverne, have been most outspoken in the criticisms of Dr Wakefield. They have lent considerable support to the government, the NHS and the ABPI over the issue. Never once have vested or conflicting interests been made clear.

Fitzpatrick was fortunate to receive a contract from Oxford University Press for a book on MMR entitled *MMR and*

Autism.¹⁵ The book, which pursues the government and pharmaceutical side of the debate against Dr Wakefield, was lavishly praised by Brent Taylor, Professor of Community Child Health at the Royal Free and University College Medical School and the person primarily responsible for asking Dr Wakefield to leave. 'Every health worker, parent, politician and journalist concerned with these issues must read this brilliant book,' proclaimed Taylor.¹⁶

The book is typical of the work of an ex-Revolutionary Communist Party member and corporate publicist. It talks science but never brings any to the table to be discussed. It regurgitates the corporate view in a sickeningly weak, visceral liquid of pharmaceutical marketing leftovers. Even the introductory blurb is gibberish, which somehow contrives to suggest that the medical world has a monopoly on science and sense, while the 'public world' – a lesser world – has been subverted by irrationality.

The MMR controversy has been characterised by two one-sided discourses. In the medical world, the weight of opinion is overwhelmingly in favour of MMR. In the public world, the anti-MMR campaign has a much greater influence, centred on the fears of parents that the triple vaccine may cause autism in their children.

In order for this paragraph to make any sense at all, we would have to know what the medical world is, in this context. Is it GPs, specialist paediatricians or, for example, medical ex-members of the Revolutionary Communist Party? Then we would

15 I say fortunate because Oxford University Press is a prestigious publishing company and as Fitzpatrick has no special qualifications to write about vaccination, one wonders why he was given the contract and, of course, as many of the groups he now works with are funded by pharmaceutical companies, how, and how much money he received. Or is this being too conspiratorial?

16 Quoted on Amazon, April 2005.

have to know how large a group of parents had failed to get their children vaccinated specifically because they were afraid that MMR might induce autism in their children.

In the eyes of any rational person, the great majority of general practitioners who agree with MMR vaccination probably match the great majority of British parents who have agreed to have their children vaccinated with MMR. Far from there being 'two one-sided discourses', there is actually one main establishment and orthodox medical discourse, and one minority or dissident view about MMR. An 'anti-MMR campaign' is a figment of Fitzpatrick's imagination.

Paul O'Neill, the father of an autistic child, wrote a review of Fitzpatrick's book on the Internet, under the heading 'What is Fitzpatrick's agenda?:'¹⁷

Fitzpatrick makes bold statements claiming Wakefield is totally discredited but as usual only focuses on the 1998 paper while declining to mention or discuss the research work by Buie (Harvard), Krigsman (NY) and others who have completely replicated Wakefield's research and in fact taken it much further. He also fails to mention that vaccine strain measles has been found in the GI tracts of many of this sub-set of autistic children and more recently published research by Bradstreet *et al* has found vaccine strain measles RNA in the cerebral spinal fluid.

What I fail to understand is why people like Dr. Fitzpatrick want to stand in the way of such researchers who at best will prove a causal link and ultimately a cure, or at worst waste a lot of their own time and reputation.

One last comment to Dr. Fitzpatrick – just because the UK Govt has its head stuck in the sand (or coffers of the Pharmaceutical companies) does not mean their position is correct. During your prolonged commentary on Govt opinion

¹⁷ August 7, 2004, reviewing the book on Amazon.

it would have been more balanced to have mentioned that the Japanese Govt withdrew MMR in 1992 because of safety concerns and then paid compensation to more than 1,000 children damaged by the vaccine.

While the pro-science lobby detractors of Dr Wakefield have essentially failed to follow their own remit of transparent reporting of scientific trials and the replication of research work, a number of those commentators who have seen the configuration of vested interests have produced excellent journalism.

One of the best pieces which tried to present a clear narrative explaining the way in which the pharmaceutical companies were orchestrating the evidence against Wakefield was 'MMR RIP' by Robert Sandell.¹⁸ This appeared in *The Sunday Times Magazine* of December 2003, at which time, we must suppose, Brian Deer had his head down, working on his exposé of Dr Andrew Wakefield's ethics, so that Sandell's rigorous investigations passed him by and gave him no pause.

Sandell's story followed parents and autistic children involved in the action for damages against three pharmaceutical companies, across Europe and to North America, in their search for biophysical tests, the results of which would, they hoped, add to their evidence. Pharmaceutical company lawyers in a parallel caravan blocked their access to tests at every pit stop.

At a later date Robert Sandell attended a conference organised by the American research group Defeat Autism Now! (DAN!). Having flown back to England, Sandell attended quite a different kind of meeting in London. Describing the energy and openness of the DAN! meeting, Sandell reported one of the last presentations by Rick Rollens, formerly secretary to the

¹⁸ Robert Sandell, 'MMR RIP?', *The Sunday Times Magazine*, December 14, 2003 London.

California State senate. Despite being clearly biased, said Sandell, at least the presentation 'dealt in what looked like hard facts.' He then reported on the London meeting.

Shortly after returning from DAN!, I attended a public seminar in London that addressed the MMR/autism issue in ostrich-like fashion. It was hosted by the PR company Hill & Knowlton, whose clients includes the three drug companies that manufacture the triple vaccine, and it was introduced by an online magazine, *spiked*, one of whose columnists, the east London GP Michael Fitzpatrick, led the discussion. The audience was chiefly composed of health professionals, DoH representatives and media types. Two things stood out.

One was the meeting's concern that anxieties about MMR had been hyped by our old enemy the media. The other was its refusal to address the evidence that aroused public distrust in the first place. For these people, immunisation was an incontrovertible religious doctrine. Fitzpatrick rubbished the work of Wakefield, whose research papers currently outnumber his own by 128 to 0, as a superstition on a par with astrology. When somebody mentioned the divergence of scientific opinion, Professor Brent Taylor interrupted, again announcing that 'the scientific debate is over'.

Dr Fitzpatrick and ME

If the public is misinformed about the interests involved in the battle around MMR, they are even more confused about myalgic encephalomyelitis (ME) and chronic fatigue syndrome (CFS). Having been assured in the late Eighties and early Nineties that they should castigate and ridicule those with 'Yuppie flu', they have more recently been informed that ME/CFS is indeed 'a real illness'. In fact, no one had ever said that it was not a 'real' illness, only that it was a real illness that had its roots in the mind, rather than a 'real' *physical* illness.¹⁹

¹⁹ Op. cit., Walker, *SKEWED*.

Semantics play a considerable role, as they often have in covert operations, in the struggle of powerful vested interests to stop ME becoming a diagnosed physical illness. The fact that the argument could still be carried by psychiatrists, despite the fact that the World Health Organisation has for many years defined ME as a neurological – that is, physical – condition originating in the tissue of the brain is testimony to the power of these semantics.

ME was an illness of some proportion, which appeared to develop following certain viruses or after contact with chemicals. A number of outbreaks of the illness had been observed since the second world war in different countries. In the Seventies and Eighties, it appeared that it was on the increase. There was no pharmacological treatment for ME.

Up until the late 1980s, there existed a specific disease entity, which had been called, for want of a better title, myalgic encephalomyelitis (ME). In the United States, in 1988, following an outbreak of ME on the shores of Lake Tahoe²⁰ (coincidentally the year that the Campaign Against Health Fraud was set up in England) an 18-strong panel of medical scientists and clinicians, Holmes *et al*, formulated a new case definition and a new name for the illness: chronic fatigue syndrome (CFS). Two of the most experienced clinical members of the panel refused to sign a final document, and withdrew from the panel because the proposed definition and new name were too different from the historical cases of ME with which they were familiar.

Three years later, in 1991, at a self-appointed meeting in Oxford, a group of mainly ‘Wessely school’ supporters adopted

²⁰ See Hillary Johnson, *Osler's Web, Inside the Labyrinth of the Chronic Fatigue Syndrome Epidemic*, Crown Publishers Inc. (Random House), New York 1996.

the new US definition for use in Britain. Two of this group, Wessely himself and Dr David Pearson, were leading members of the Campaign Against Health Fraud (CAHF), which propagandised against ME and all kinds of environmental illness. The British definition was adapted slightly, to define the new chronic fatigue syndrome as a psychiatric illness of which ongoing fatigue was a prominent symptom. In 1994, the US CDC produced a revised case definition – known as the Fekuda criteria – which emphasised unequivocally that there need be no physical signs present. ‘We dropped all physical signs from our inclusion criteria [and] we agreed that multiple symptoms criteria increased the restrictiveness of the 1988 definition.’²¹ Wessely and one of his colleagues, Dr Michael Sharpe, were both advisers to the National Institutes of Health in drawing up this definition.

In the 1980s, things began to happen beyond the medical world of case definitions, which pointed to an organised campaign by doctors, science organisations and media pundits, downgrading ME as a specific disease entity and recasting it as a popular urban myth, generated by neurotic victims of mental illness or people hyping their illness in order to claim sympathy, insurance pay-outs or benefits. It was then, and is now, difficult to analyse which individuals and organisations were behind this determination to liquidate ME. Some people have, however, firmly embraced the idea that those with the most to lose in the perpetuation of the classification of ME as an organic illness are the insurance and chemical companies.²²

Gradually, throughout the Eighties and Nineties, battle lines became distinct. On the one side are thousands of sufferers and

21 *The Chronic Fatigue Syndrome: A comprehensive approach to its definition and study*. Keiji Fekuda et al. *Ann Intern med* 1994; 121; 953-959.

22 The cost of the illness to the state and other organisations has been estimated at 4 billion pounds.

carers, together with their advocate organisations.²³ On the other is a small handful of doctors and psychiatrists, who, by lobbying, entry into important committees and authorship of countless papers, officially control the view that the only thing wrong with people who claim to have ME is that they ‘think they have an illness called ME’.

One of the interesting things about Professor Wessely and his campaign to enlarge the population of the mentally ill in Britain, is that he probably would have more easily got away with it had he stuck to ME.²⁴

Professor Wessely, however, did not stick to ME. Eschewing all possibilities of epidemiological studies, he turned his psychiatric gaze to those who had been in the first Gulf War and later fell sick. He observed the cognitive behaviour and illness presentation of people who used mobile phones, and reassured the public that these, too, produced ‘false illness’ beliefs. Finally, as if no alchemical challenge was too great, he even hinted that the tragedy of wide-scale chemical poisoning in Camelford, Cornwall, could actually have been a hysterical outburst related, but only partially, to the 20 tonnes of chemicals tipped into the wrong tank and the water supply by a water authority worker. (See Part Four for Wessely’s latest ‘every UK public health illness’ challenge.)

Inevitably, the beliefs of even the most sceptical begin to flag when apparently knowledgeable experts decide irrationally that large percentages of the common people are prone to undi-

23 Estimates of numbers of people with ME in Britain suggest between 250 and 300,000, three to two in favour of adults.

24 Even this has been inflated by the psychiatric lobby, who not only claim that the illness comes as a consequence of the depression but also depression is very high in those with ME. In fact, a number of studies not carried out by psychiatrists have shown that the percentage of clinically depressed individuals with ME is the same as, if not lower, than that of the general population.

agnosed psychiatric conditions. Most interesting, however, as this battle has heated up, are the implied demands behind the arguments of the two sides. Sufferers and helpers are asking for just two things: recognition of scientific research that evidences the fact that ME is a neurological illness, and consequent continued scientific research into its biological causes.

The demands of those in the psychiatric camp are equally simple: that patients should not be given bio-medical tests when they report with the symptoms of ME, that there should be no further scientific research into ME as a physical illness, and that a varied selection of failed psychiatric 'treatments' should be imposed on those reporting ME.²⁵ For adults and some children, these 'treatments' involve anti-depressant drugs, graded exercise therapy (GET), and cognitive behavioural therapy (CBT), which involves trying to disabuse the patient of their 'false illness beliefs'.

After a great deal of time, wallowing in the liberal shallows, while patients advocacy groups were increasingly infiltrated by pharmaceutical companies and quackbusters, those who demand more scientific enquiry have formed a serious opposition to the psychiatric lobby.²⁶

In 2002, the chief medical officer, Sir Liam Donaldson, reported on the four-year deliberations of the CFS/ME working group. For the first time, there had been lay representation on some panels of the Inquiry, and it was hoped by many sufferers that this would mean that they and their carers would get both recognition of ME as a physical illness, and government money for scientific research into the biological basis of the illness.²⁷

25 These 'treatments', for children, have involved physical challenges, designed to force the child to respond, such as throwing paralysed children into water.

26 See Part Five of this essay. The leading organisation in this increasingly vociferous political opposition is the One Click Group, which now comes under attack almost weekly.

27 Op. cit., Walker, *SKEWED*.

As it was, the psychiatric lobby managed to control some aspects of the committee's work, and those aspects that they did not manage to control, they influenced at the post-recommendation stage. The CMO's Report concluded that ME was a 'real' illness – of course, no one had ever argued about this in the first place – and suggested that the MRC should be funded for a research programme into ME. Although some sufferers drew scant comfort from finding out that they had 'a real illness', no one held their breath about research funding. In fact, with indecent haste, money was turned over to the MRC, and then to Wesselyites to research cognitive behavioural therapy and graded exercise therapy.

Some physicians reacted to the Report as if it had suggested that psychiatrists should be banned from dealing with ME and CFS patients – not a wholly unreasonable idea. In the *Guardian*, a paper frequently poor in its analysis of medical issues involving pharmaceutical or professional medical interests, Mike Fitzpatrick wrote a plaintive, almost whining piece of rhetorical propaganda, meant to make you weep for doctors bullied into diagnoses with which they did not agree, by ignorant, if not mentally disturbed, patients.²⁸

This article which had first appeared in *spiked*, ran in the *Guardian* with a sub head proclaiming that the 'medical profession's latest ruling on ME (or chronic fatigue syndrome) is nothing short of disastrous'.

The problem was, of course, that the latest ruling was almost identical to the medical profession's old 'ruling', hinging on the perception that ME originated in the mind, which appeared to have been compromised a tad by the introduction of patients and patients groups. However, it was the fact that lay sufferers, patients and their representatives, had been

28 The following paragraphs are reproduced from *SKEWED* with some editing.

involved in the CMO's Report, which apparently infuriated Dr Fitzpatrick. This idea flew directly in the face of all the principles of ex-RCPers, that on no account should the public be involved in any debate about medicine and science.

Fitzpatrick, no different from the worst of old-school physicians, quoted the chief executive of Action for ME, who had suggested that patients might now use the CMO Report in arguing with GPs if they insisted that they were imagining their illnesses. That patients might bring this kind of evidence to bear on GPs, and even in the final recourse report GPs who failed to acknowledge the illness, Fitzpatrick found disturbing. In the usual manner of the psychiatric lobby, he turned the world on its head: to act in this way would be, he said, to use a 'dogmatic and authoritarian approach.'

In a following soliloquy about the labels ME and CFS, Fitzpatrick places himself clearly in the psychiatric camp and makes some alarming statements. In his surgery, he says, ME is always a self-diagnosis:

Somebody comes in, sits down and says: 'I think I've got ME, doc.'

This is what we in general practice call a 'heartsink' encounter. Once a patient has accepted the ME label, it seems to become a self-fulfilling prophecy, and it is very difficult to deflect them from a course of prolonged incapacity, with all its adverse consequences.

Fitzpatrick's assertion that everyone who comes to his surgery and ponders whether or not they might have ME is actually seeking acquiescence in a course of prolonged, and presumably undeserved, 'incapacity', is simply a re-run of the ME-patient-as-malingerer story. Would he, one wonders, take the same cynical approach to a patient who turned up at his surgery to tell him, 'I think I might have a cold coming on because, I've got a sore throat'?

Fitzpatrick then goes on to repeat another old chestnut, in defiance of all the research, describing nearly all patients who suggest that they might have ME as 'young, female and middle class; teachers, nurses, social workers'. He follows this statement with a less comprehensible but no less questionable one: 'In more recent years, ME has appeared in the children of the above, and, unlike wealth, it has shown a tendency to trickle down into less affluent sections of society.' Does this mean that, while working-class adults do not get ME, their children have begun to claim to have it? One wonders what Fitzpatrick is insinuating, and what he tells these children and their parents when they attend his surgery.

Dr Fitzpatrick accuses the Report, and by implication patients who insist that they have organic illnesses, of setting medicine back 300 years. This is the time, he says, that it has taken medicine to piece together the philosophy that illnesses are a delicate conjunction of mind and body. In other words, people who believe that ME is an organic, biomedical illness and demand further scientific research, are forcing medicine back into the Dark Ages! Others might argue that to refuse research into an illness, and to describe it, without material evidence or even a theoretical model, as a psychiatric condition, is the incantation of a profession trying hard to disguise its ignorance.

But perhaps Fitzpatrick adopts a similar routine in relation to those who come to his surgery with broken limbs: 'The cause of this break in your leg,' he might say, 'is clearly a conjunction of your cognitive perception and the concrete block that dropped on you at work. Before we even think about x-rays or anything like that, I think you should go and see the cognitive behavioural therapist and as well take some mind-altering drugs. I want you to think really seriously about how you would feel if you didn't have a broken leg.'

Unfortunately, Dr. Fitzpatrick doesn't stop with his accusation of mediaevalism; he berates those who believe in an organic aetiology of ME and CFS for 'endorsing the stigmatisation of mental illness'. Again with the most perverse logic, he argues that if you say ME and CFS have an organic or biomedical aetiology, you are in fact arguing that the illness has no psychological dimension, and denying mental illness its proper place in culture and medicine. You could only be doing this because you believe that admitting to a psychological dimension to any illness stigmatises the sufferer. Clearly, it is much better for everyone concerned if patients just admit to mental incapacity, take their anti-depressants and go along to be re-educated at a cognitive behavioural therapy centre.

As if all this weren't enough, Dr Fitzpatrick throws together all the usual suspects in presenting his picture of contemporary mentally ill patients:

Others complaining of symptoms for which no cause can be found are offered labels such as 'irritable bowel syndrome', 'repetitive strain injury', 'fibromyalgia', 'food allergy' or even 'multiple chemical sensitivity'. The new diagnostic labels are descriptive rather than explanatory. Far from opening up the prospect of treatment, they merely confirm the hopelessness of the sufferer.

How many doctors share Dr Fitzpatrick's opinion – hopefully only as many as shared his view that there would be a Trotskyite revolution in Britain – it is impossible to know. Dr Fitzpatrick's views must be seen, at best, as ideological, and at the worst as utterly irrational.

And Alternative Medicine

*In Put alternative medicine back in its box: In the battle against disease, reason is the best weapon we've got,*²⁹ Michael Fitzpatrick

29 If I didn't know better I would swear that this was a Maoist slogan.

glances briefly and irrationally at alternative medicine.³⁰ Like all good quackbusters, whose speeches are informed if not written for them by the ABPI, Fitzpatrick doesn't actually focus on any particular therapeutic practice, but skitters all over the whole grand subject, making irrelevant asides.

He begins by extolling the intellectual and rationalist virtues of the dead journalist, John Diamond. Why quackbusters and others sing the praises of John Diamond, I'll never know. His main claim to recognition, aside from his marriage to a domestic goddess, is that he died, horribly, painfully, from cancer, without a tongue, unable to speak, unable to eat, while in print proclaiming personal prejudices against unspecified treatments of which he was completely ignorant.

Michael Fitzpatrick says of him, 'Though four years of surgery and radiotherapy robbed him of his voice and much else, he remained to the end an implacable enemy of alternative medicine'. And however long you hold your breath you will never read the rest of the sentence which explains why this perverse dogmatism should be applauded.

Let's face it, who cares a monkey's about John Diamond's assessment of alternative medicine. Are we supposed to think that the importance of his views was enhanced because he recorded them while he was dying of cancer from which allopathy could give him no respite? By what distorted logic does this make him an expert of alternative medicine?³¹

Fitzpatrick expects us to immediately comprehend the wisdom of Diamond's philosophy, simply because he has died of cancer. On this basis, we should ensure as a matter of national record that all dying motor mechanics make clear their views

30 Dr Michael Fitzpatrick, *Put alternative medicine back in its box: In the battle against disease, reason is the best weapon we've got*. 26 June 2002, *spiked-health*.

31 Journalist John Diamond, died in 2001 of cancer of the tongue at the age of 47. C: *Because Cowards Get Cancer Too*, John Diamond, Vermilion, 1999.

on brain surgery, all dying confectioners reveal their thoughts on the collapse of Communism, and nuclear scientists leave to posterity their dying views on dress-making – perhaps we could enter such views into learned journals.

Still, this speciousness is like much else that drug-company-patronised quackbusters spout about alternative medicine. Far from the rationalism and reason that they claim to espouse, Diamond's comments on alternative medicine are simply non-sequiturs. Why do people apparently in favour of rationality have to call upon the bitter, pain-infused, subjective invective of a dying hack to prove their case?

Having lionised the dead Diamond, Fitzpatrick then dismisses as irrational, the eloquent, erudite Michael Gearin Tosh,³² who was diagnosed with 'terminal' myeloma in 1994, and, embracing alternative therapies and a holistic approach, survived and thrived until his death 11 years later, from unrelated causes. From this absurdity (Gearin-Tosh was in the pink of health when Fitzpatrick so characterised him), Fitzpatrick moves on to a political analysis of mystical treatments that have passed on from ancient and recent ruling elites to disillusioned radicals of the post-industrial era. He takes a good page to propound a solidly Marxist analysis of alternative medicine, and while it appears to make sense at first reading, when you analyse it, it's the usual bunk.

In the 20th century, upper-class reactionaries and their followers provided the natural base for conservationist and environmentalist causes. They also patronised mystical cults such as theosophy and alternative healing systems such as homeopathy.

32 Michael Gearin-Tosh, *Living Proof: A medical mutiny*. Scribner, London, 2002. Michael Gearin-Tosh, who died on August 3rd 2005, wrote the book *Living Proof*, about his self-treatment of his bone marrow cancer, mainly with Gerson therapy.

This doesn't actually apply to acupuncture or cancer treatments such as Gerson therapy, or for that matter to ideas about nutritional medicine, but for the sake of argument, let's waive these errors of fact.

There is clearly a good reason why, in the modern world, only the rich were able to use homeopathy. Once doctors formed professional associations in the middle of the 19th century, they refused to adopt the spirit of rational enquiry on which Fitzpatrick is so keen, and threw out from their number anyone who practised certain forms of medicine.

Inevitably, these under-the-counter therapies became available only to those who could pay for them. After bitter wars within the medical profession, in the case of homeopathy, the medical establishment finally relented, and until recently, the greatest number of trained homeopaths were medically-qualified doctors. In relation to homeopathy, at least, when Fitzpatrick asks 'Have we all lost our marbles?' he is referring to himself and his professional colleagues.

Fitzpatrick's analysis of how alternative therapies get passed on from rich conservatives to disillusioned radicals is so senseless that the ABPI should drum him out of their cabal. Take acupuncture, for example, a therapeutic practice used in China today as it has been for hundreds of years. The simplest reason for its spread to the West is globalisation, in its strictest economic sense as well as its wider senses. The introduction of acupuncture to the Western canon of medicine is not a conspiracy of tree-hugging hippies, more the exchange of cultural and medical ideas, brought about by migration and the opening up of international trade – something of which Fitzpatrick and his comrades are usually profoundly in favour.

Fitzpatrick argues that modern mystics fall upon alternative medicine because they are against humanism and rationalism, because they accept ideas without thought, act primarily on

their feelings and have no consciousness about the history of scientific thought. Fitzpatrick's 20 years in an authoritarian Communist clique led by a University of Kent guru, has seriously eroded his intellectual capabilities. His thinking is so limited that it never gets near to the core of anything it describes. Take this drivel:

Anti-humanists collapse the dialectical interactions between humanity and the natural world, between the individual and society, into unmediated unities: from their perspective, humans are at one with nature and with one another. This approach results in the degradation of individuality, selfhood and rationality. Further consequences are the abolition of history (or its replacement with a mythical descent from a Palaeolithic golden age) and the repudiation of progress (in favour of a series of chronicles of regress).

I find that it's best not to bother with the massive assumptions implicit in this kind of writing. Better just to put the alternative view. I would suggest that it is scientific medicine and professional physicians who have robbed present generations of any consciousness of history or medical progress. Most doctors no longer understand what they are prescribing, so how are patients expected to grasp the chemical intrigue that stands for healing in the modern world?

Dissenting against this cauterisation of knowledge about our own bodies, our illnesses and our health, many people have reacted by returning to basic ideas, which make sense to them and their bodies. This model of how people who are made sick by the industrial world turn to simpler principles by which to live their lives, is nowhere clearer than in the massive turn towards new and healthier patterns of nutrition.

The industrial revolution and its aftermath introduced chemicals and techniques of intensive farming to every aspect of food production in the search for productive efficiency and maximum profit. Fitzpatrick agrees with this historical process,

in public at least; whether he eats McDonald's in private I know not. But why are these people so insistent on telling us that we all have to eat chemically-laced foods?

It is actually hard for any thinking person to read the whole of this article, because it wanders off in such casual and unthinking ways. You have to keep reminding yourself that you are in the company of someone whose whole Communist world view has collapsed and been replaced by the detritus of culture awash in the slip stream of capitalism. Take this paragraph:

Medical science has proven dramatically effective in the treatment of a wide range of diseases, from infections (*such as MRSA!*) to endocrine disorders (*like Crohn's disease!*), in which the pathological processes are fairly well understood. This success of modern scientific medicine is the key reason why it prevailed over diverse ancient competitors (many of which have now re-emerged under the alternative health umbrella).

How are we to understand the assertion that scientific medicine 'has prevailed over diverse ancient competitors'? It's complete rubbish. From the 18th century, modern scientific medicine, measured by most parameters, has developed in an almost completely upwards curve; it has not had any 'diverse ancient competitors'. Modern scientific medicine was developed sometimes by amateurs, sometimes by professionals, but always by the ascending class of the industrial revolution.

Physicians of one kind or another gradually replaced daft ideas with less daft ideas, which fitted a more cohesively scientific system. Diverse ancient practices never got a look in, the only extensive craft medicine was herbalism, and far from being a competitor to scientific medicine, it provided its very foundation. In many countries just as rational as England but more economically libertarian, the use of unadulterated herbs is still advocated by professionally-trained doctors who practice scientific medicine.

One wonders sometimes, reading Fitzpatrick's moronic prose, how anyone with an education can retail such nonsense. After telling us that modern scientific medicine has still got a lot of questions to answer, he says: 'The judgement of the value of any particular treatment is made with reference to a body of scientific knowledge, which is, *at least in theory and increasingly in practice, available to the patient as well as to the doctor.* (By contrast, the client of the alternative practitioner relies on faith alone in an inherently unequal and undemocratic relationship).' The idea that the denizens of the modern inner city, leisurely swap medical and scientific knowledge with their doctors would be funny if Fitzpatrick hadn't written it.

When Fitzpatrick so wishes, for instance at the beginning of this article, he invokes the Marxism of his failed revolutionary years, but he is just as capable of forgetting the simplest theoretical propositions and replacing them with extravagant whimsy.

In the quote below, for instance, he chooses to forget completely that up until the staggered introduction of a National Health Service, beginning in the second decade of the twentieth century, no one but the rich could afford to see a professionally trained doctor. Then, following the introduction of the complete NHS in 1948, people got apparently free treatment – although it was paid for in taxation – which can be a very effective motivator when choosing medical treatment.

Why [patients in the past] chose orthodox medicine rather than diverse alternatives decades before medical science first began to yield effective treatments has long been a matter of controversy among historians. Some have attributed the success of orthodox medicine to the political and organisational skills of the early medical profession. A more likely explanation is the common commitment of doctors and patients to the advance of medical science.

Just as often as he forgets these small points, Fitzpatrick forgets seminal and vital issues that don't suit his case. Many of his libertarian compatriots of even 60 years ago, were strongly opposed to the introduction of the NHS, because they said it meant the introduction of treatment without choice, foisted upon the patient solely by dint of the more powerful position of the State-employed doctor.

It is in relation to matters such as this that we can see how Fitzpatrick is forced to produce an argument for his corporate backers, which is at odds with his apparent newly adopted liberalism. But we all know that Fitzpatrick's libertarianism is not real, anyway. From his heart he's still bleeding the same authoritarian Communism that he believed ten years ago, but now the corporations are footing the bill, and their philosophy, though no less authoritarian in practice, has to be disguised as libertarianism. This is why, when it comes to the all-pervasive question of whether or not patients should have choice, based on their own intelligent appraisal of the options, Fitzpatrick's libertarianism slips off like a velvet glove.

In his article, he makes it clear just how far he is willing to travel in the company of libertarianism. He is not even willing, he says, to see any integration between different forms of therapeutic approach; for him and his patients, it's drugs or nothing.

Just as reason cannot be reconciled with irrationality, so orthodox medicine cannot be integrated with alternative medicine.

Not only should patients not get choices – what about those cosy chats? – but, actually, when it comes down to it, all scientific research into alternatives should stop now, cease, desist, finish. (Of course it could, if allopathic medicine were to recognise the results of the trials that have taken place over the past 50 years.) Fitzpatrick's argument in this respect, however, is truly bizarre and irrational.

If I have followed him correctly – and it's not easy – he says that there is no point in carrying out double-blind placebo research into alternative medicine, because the results *always* find that it does not work, and just as inevitably, those who believe irrationally in alternatives *always* deny these findings. Here, read it for yourself and mull it over as something which passes for rationality in the overheated mind of an ex-Revolutionary Communist, now corporate technophile:

Indeed, this is why the project of subjecting alternative therapies to randomised controlled trials and other scientific methods, now underway on both sides of the Atlantic, is doomed. Though numerous trials have already revealed that such treatments do not work, these results are simply denied or ignored: faith in alternatives cannot be challenged by such methods. These researches lead only to the demand for more researches.

Hmm, good argument that, Mike, but I think I can see a man in a white coat coming up the path. Hey, take this copy of *The Daily Telegraph* with you, there's an interesting article about a trial in it.

Homeopathy has been proved more successful and cost-effective than conventional medicine in the first comparison of the two approaches. Proof of its effectiveness has emerged from an extensive study of its use in treating chronic disorders such as back pain. The study ignored the question of how homeopathy might work and focused on how well it performs. Researchers in Germany recruited more than 400 adults and children with long-term health problems ranging from sinusitis to insomnia and depression. Half were treated using conventional therapy; the other half were treated homeopathically. After six months, the condition of the patients treated homeopathically had improved significantly more, and more quickly, than the others while the cost for each was similar.³³

³³ Robert Matthews, 'Homeopathy wins in test with medicine,' *The Sunday Telegraph*, 24 July 2005.

CHAPTER SIX

Is It A Bird? Is It A Plane? No, It's Lord Dick

Almost everything about a Blair regime was known before it was elected. Blair's Vichy-like devotion to Washington was known: read his speeches about a 'new order led by America'. His devotion to Rupert Murdoch, who flew him and Cherie Booth around the world first class, was known. His devotion to an extreme neoliberal Thatcherite economics was known, spelled out in Peter Mandelson's and Roger Liddle's *The Blair Revolution: can New Labour deliver?*, in which Britain's 'economic strengths' are listed as multinational corporations, the 'aerospace' (arms) industry and 'the pre-eminence of the City of London'.

*John Pilger*¹

The story of the creation of New Labour and its subsequent victory in 1997, is a narrative that involves the entry of a powerful Liberal and Social Democratic rump, supported by the US, into the Labour Party. This rump brought with it like a virus, three conditions from which all discontents with New Labour have sprung. It brought an intensification of the Anglo-American special relationship, and with it a new commitment to the US-initiated project of a European Union; an unregulated

¹ *Protecting A Regime With Blood On Its Hands*, by John Pilger. First published in the New Statesman. March 2005 - www.newstatesman.co.uk. http://www.winkstleak.net/aapilger_March_05.html.

introduction of major corporations into government, with their respective lobby groups and campaigning organisations; and finally, an all-out assault on the collective rights of the 'working class' and their replacement with a strengthening of corporate rights without responsibility.

A detailed historical analysis of this situation is not appropriate here. However, as all the above factors have had an effect on the evolution of covert science policies in Britain, I have tried to give a narrative which shows how these factors meshed together.

* * *

Dick Taverne's time inside and outside the Labour Party covers the most contentious decades of Labour Party history. In the years between 1950 and 1979, a number of forces were to turn the Labour party from one that represented the trades unions and working people, to one in lock step with US global policies, which defended multinational corporations.²

2 For those who have no idea about this political journey, here is a summary: Throughout the late Fifties and early 1960s, Labour was split between social democrats and socialists elements. The Party came to government under Harold Wilson in 1964 and remained in power until 1970. Wilson's leftish government was narrowly defeated by the conservative Edward Heath in the 1970 general election, but won power again in February 1974, with a minority after Heath had faced a challenge from the miners. It won power with a small majority after a second general election in October 1974, again under Harold Wilson. In the decade from 1970 to 1979, the Labour Government was forced to go to the IMF for a loan, which carried with it conditions of a more liberal economic programme. In 1976, Wilson was replaced by James Callaghan. The defeat of Edward Heath had caused a reappraisal within the Conservative Party, which had elected a radical rightwinger, Margaret Thatcher, to the leadership. In the 1979 general election, Labour suffered electoral defeat. The Conservatives were to stay in power for almost 20 years.

During the years of Conservative Government, the Labour Party was torn by division between those who wanted to return to Socialism and those who wanted to transform the party into a Liberal Social Democratic Party. Following conflict between left-wingers Michael Foot and Tony Benn, and (*cont.*)

Dick Taverne contested and won the Lincoln seat for Labour in 1962. He remained a Labour MP for 10 years, until the post-war economic boom began to end and the long decline into structural unemployment and public sector cuts began. The year he left Labour, 1972, was the time of the first miners' strike against the Heath government. Taverne was a successful Labour politician, becoming, among other things, a Minister in the Home Office and a Minister of State in the Treasury. He was, from the beginning, like many of the Gaitskillite 'right'³ of post-war Labour leadership, closely aligned to the United States and deeply committed to Britain's entry, first into the Common Market, the European Community and then the European Union.

After resigning as a Labour MP in 1972, following his concern that Labour was dominated by Trotskyites and Communists, Taverne called himself a Democratic Labour MP, and in 1973 he held his Lincoln seat under this affiliation until 1974. From 1981 until 1987, outside of Parliament, he was instrumental, with the Gang of Four and others, in setting up the Social Democratic Party (SDP), and became a Member of its National Committee.

(*cont.*) pro-American right-winger Dennis Healey, the election of Foot to the leadership led the 'Gang of Four', Roy Jenkins, David Owen, Shirley Williams and William Rodgers, in January 1981 to form the SDP. The SDP garnered support from the Liberals and from defecting Social Democrats within the Labour Party. They were heavily pro American and pro EU.

The Labour Party manifesto for the 1983 general election contained pledges of unilateral nuclear disarmament, withdrawal from the EC and a programme of industry nationalisation. Labour suffered a landslide defeat and Foot was replaced by Neil Kinnock, who moved the party to the centre. He intensified moves to expel left groups, and supported EC membership.

In 1987, the party was again defeated, but by the time of the 1992 general election, it was closing on the Conservatives. Kinnock resigned and was replaced by John Smith, who died suddenly in 1994. Leadership of the party was won by Tony Blair, who began to radically reconstruct the party's policies, to bring them into line with the SDP. His first move was to delete Clause IV of the party's constitution, which had committed it to 'the common ownership of the means of production.' The change was approved in March 1995.

During his committed involvement with the SDP, Taverne worked closely with Lord Sainsbury, then plain David, a founder member and funder of the party, of which he was also a Trustee until 1990. In the late 1980s, both Sainsbury and Taverne served with Roger Liddle on the SDP's Steering Committee. Sainsbury also funded the Institute of Fiscal Studies,⁴ after being approached by Taverne.⁵

After defeat in the 1983 General Election, Labour chose Neil Kinnock as leader, and he began to move the party to the centre. He intensified moves to expel left groups and committed the party to EC membership. In 1985 Kinnock appointed Peter Mandelson as the Labour Party's director of communications, and Mandelson began to modernise the party's image.

At the time, Mandelson, who had been a Lambeth borough councillor until 1982, was working as a producer with London Weekend Television. Mandelson continued in this job until 1990, managing Labour's widely admired but ultimately unsuccessful 1987 general election campaign. In 1992, he was selected as Labour candidate for the safe Labour seat of Hartlepool.

In 1987, the year of the general election, Taverne and Roger Liddle set up a consultancy company called PRIMA

3 This was against the 'left', which wanted to reduce dependence on the US, and wanted to stay out of Europe on the grounds that it was a capitalist Europe which held no promise for working people.

4 From the IFS web site: The Institute for Fiscal Studies is a research institute, which exists to provide top-quality economic analysis, independent of government, political party or any other vested interest. IFS exerts substantial influence through publications, the media, close contacts with civil servants and regular meetings with Cabinet and Shadow Cabinet members. As Gordon Brown, Chancellor of the Exchequer, said on our 30th birthday, the IFS has 'established itself as an indispensable British institution.'

5 Spinwatch. <http://www.spinwatch.org>

Europe, 'a small, sharply focused consultancy'. Shortly after, Ian Wrigglesworth, another influential member of the SDP, joined the company, and it employed Peter Mandelson as a consultant.⁶

During these years when Taverne was not a Member of Parliament, he fought a number of elections, trying to gain a seat as an SDP member. When the Liberal Democrats emerged, as a breakaway from the Liberal Party, Taverne became a Federal Policy Committee member with them, between 1989 and 1990. He also worked in Europe with the European Commission, taking on membership of the International Review Body, examining the workings of the European Commission, of which his two close associates in the SDP, Lord Thomson and Jenkins, had also been members. He travelled often to America, and attended Trilateral Commission meetings.⁷

PRIMA Europe was a conventional PR and consultancy company, which offered help to corporations in relation to the regulatory change in Europe. It protected the interests of corporations such as Unilever, RTZ, BNFL and Glaxo Wellcome,⁸ as they lobbied for preferential treatment in the new European Parliament, the Commission, and its regulatory bodies. As

6 The Blair Project Cracks, Lindsey German. Issue 82 of *International Socialism Journal*, March 1999.

7 The Trilateral Commission is a 'world leadership' group, formed by a tripartite meeting of influential people from Japan, North America and Europe. Its principle objectives have always been linked to creating a one-world economic plan, which does away with all national boundaries. However, all other important areas of analysis, from oil to terrorism, come under its view. It is made up of government and ex-government office holders, government advisors, academics and heads of major corporate entities.

8 *Food: The voodoo science of organics*, Julia Watson, *The Washington Times*, March 5, 2005. Filed from United Press International.

early as 1990, Taverne authored pamphlets about biotechnology, in support of PRIMA's clients; one was called *The case for Biotechnology*.⁹

Derek Draper, another young activist who helped to organise the SDP, also became a director of PRIMA during the time he was working for Peter Mandelson, whom he had met through the Young Fabians between 1992 and 1996. He set up the magazine *Progress*, which was to become the Blairite house journal, and helped Mandelson and Liddle to write the book, *The Blair Revolution*.

Taverne was knighted in 1996, a year before the Conservative government was replaced by New Labour. In 1997, the year of the general election, Channel 4 screened a series of three television programmes called collectively *Against Nature* (see chapter 9 below). These programmes, which stated the case for a non-regulated corporate economy, were conceived and produced by ex-members of the Revolutionary Communist Party, with whom Taverne had become involved. The programmes were ostensibly a manifesto for a neo-Conservative, corporately-driven political party.

The participants in PRIMA Europe were at the centre of plans for New Labour in the lead-up to the 1997 general election. And while it might be said that old Liberals manufactured the New Labour that made Blair Prime Minister, it can equally be said that they brought to power a New Labour Party, which would serve the interests of the corporate clients of PRIMA, the Liberal Alliance and the US Government.

9 Cited in Mike Peters, *New Labour is Networking: A guide to Who's Who in the British political elite in the 1990s*. A paper presented at the School of Applied Social Sciences, Leeds Metropolitan University, May 28 1999. Some of the material used in this paper came from, Easton T. (1998/1999) Liddle and Lobbygate, *Lobster* 36, Winter 1998/99.

PRIMA was undoubtedly good at its job. Its publicity around the time of the general election suggested that 'companies must anticipate trends in order to influence the public agenda. They need a systematic process for developing consistent public positions. These must be integrated fully with their commercial strategy'.

After the Labour victory, the many Liberal Alliance personalities who had been circling the borders of New Labour and had helped bring Blair to power, were brought in from the cold by the Party Leadership. David Sainsbury, who despite previously funding the Social Democrats, had donated over £1 million to Labour to help them to win their campaign, was immediately made a peer in 1997, and by July 1998 he had been made Parliamentary *Under Secretary of State for Science and Innovation*. His position in his own department within the Dti, gave him responsibility for the Office of Science and Technology (OST) and the chemical and biotechnology industries, as well as all the research councils, the most important of which is the Medical Research Council (MRC). At the centre of the new commerce whose interests Sainsbury looked to advance, were industries in which he had significant vested interests, based upon new high-technology and bio-science.

While Blair did not introduce any members of the Liberal Alliance into his cabinet – something that he claimed recently to have regretted – he did something perhaps more effective. As well as making Sainsbury Minister for Science, in July 1998 he made Peter Mandelson Secretary of State for Trade and Industry (Dti) where he survived for five months.

CHAPTER SEVEN

Open Government, Shut to the People

With New Labour in government, a tidal wave of PR, lobby and consultative groups, agents and interests swept in. PRIMA Europe, who were now as close to government as it was possible to get, claimed ‘unrivalled knowledge of the Labour Party’s policies and personalities,’ going on to say, ‘to resort to lobbying is to accept that you have failed to shape the policy agenda. PRIMA’s approach is more strategic, effective and in keeping with today’s needs.’ Lord David Sainsbury continued to pour money into party coffers, giving around £6 million between 1997 and 2001.

In the year of the election, PRIMA Europe was taken over by a larger consultancy company called GPC Market Access – which could then have called itself New Labour Access. GPC’s clients included some of the biggest TransNational Corporations, including, Pfizer, Bayer UK, Johnson and Johnson, Novartis and SmithKline Beecham, mining company Rio Tinto, Scottish Power, Rupert Murdoch’s News International and BskyB.

Looking to the role he would play in the House of Lords, Taverne resigned as chair of PRIMA and, after the take-over, Richard Holme,¹ another Liberal and friend of Peter

¹ Lord Holme of Cheltenham’s business interests in North America and Britain are extensive. He has been chairman of several publishing (*cont.*)

Mandelson, became Chairman. At the time of the SDP launch, Holme was President of the Liberal Party (1980-1981); now he is a Lib Dem Peer, Lord Holme of Cheltenham. Along with Sainsbury, Taverne, Rogers, Williams and Liddle, Holme was one of the organisers of the SDP. He is also an enthusiastic supporter of the Anglo-American alliance and the European Union.

Holme is, and has been for some years, a member of the Joint Advisory Board to the British American Project for the Successor Generation (BAP), a primary Anglo-American project, which grooms trans-Atlantic's bright young things for power in the new world order.^{2,3} Corporate sponsors of BAP are Monsanto, Philip Morris, the arms manufacturers GEC Marconi and Raytheon. SDP activists Sue Slipman, the former communist president of the National Union of Students, and Penny Cooper, an old Communist Party and NUS colleague of Slipman's, and also a founder member of the SDP, despite being communists from way back, received early invitations to join BAP.

BAP is linked to all the vital organisations of Anglo-American power, including the Royal Institute of International

(cont.) companies, including a directorship of Penguin Books, Hollis Directories and Brassey's. He was also vice chairman of the Independent Television Commission and chairman of the Broadcasting Standards Commission. Recently, Holme became the initial member of the board set up to advise one of the UK's major media and communications companies, NTL. He has acted as a close adviser to David Steel and Paddy Ashdown. He acted as Parliamentary spokesman on Northern Ireland for the Liberal Alliance throughout the 1990s, and was chosen as a member of the Joint Constitutional Cabinet Committee with the Labour government. In 2000, he was made a Privy Councillor.

2 Dec 22 1998 – *In their own words: What is the British-American Project?*
<http://www.bilderberg.org/bap.htm#Psyops>

3 From the really excellent site SchNEWS: POWER DRUNKS, SchNEWS 238, Friday 26th November 1999. The British American Project for the Successor Generation (BAP) was set up by Ronnie Reagan, Rupert Murdoch and Sir James Goldsmith in 1985, for the elite of up 'n' coming thirtysomethings (cont.)

Affairs (RIIA), Chatham House and the Ditchley Foundation. Holme was educated at Oxford and Harvard, and was a director (until becoming an adviser) of RTZ-CRA, which helps to fund BAP. BAP is supported by, among others, British and American Tobacco (BAT) Industries, Fleishman-Hillard Inc. (one of the world's biggest PR consultancies, which finally joined with GPC Market Access), Hughes & Luce, Monsanto, Philip Morris Companies, Saatchi & Saatchi, SmithKline Beecham, Coca-Cola and Unilever plc.

Holme's involvement in PRIMA illuminates our understanding of the important Anglo-American position of the PR company in the years following the election. It is necessary to look at these developments, so that we have a provisional understanding of Taverne's work later. Although this work has been developed mainly using a charity – the Association of Sense About Science – the strategies of the organisation can be readily identified with the approach of PR consultancies.

The original members of PRIMA obviously did well from the buy-out by GPC. Derek Draper, who had become a director, made £250,000. PRIMA's links inside the newly elected New Labour government, were of considerable value in Europe and

(*cont.*) from both sides of the Atlantic to be nurtured in the 'special relationship' existing between the two nations. Past members Peter Mandelson and George Robertson have both recently spoken at Bilderberg. BAP has just held its 14th annual shindig (described by ex-member Jeremy Paxman as 'four days of beer') in Harrogate, with this year's theme 'Making Culture Count.' No Tracy Emin here, of course, just Saatchi & Saatchi execs and the like, discussing art's role in the global marketplace. And, in the words of Alison Holmes, chair of the executive committee: 'It's all been quite mad, sorting out the world's problems and drinking too much.' Quite. BAP emerged in response to worries about the anti-nuke, anti-American drift of the Labour Party in the early Eighties, and the current co-ordinator is all-round bad egg Lord Carrington, ex-NATO chief and for nine years chair of the Bilderbergers. Sounds dodgy? Never! As Alison Holmes told a *Big Issue* journalist, 'Bilderwhat? I've never heard of that in all my life.'

America. Despite GPC's involvement in the Lobbygate 'cash for access' debacle of 1998, within 18 months of taking over PRIMA, it joined the mammoth Fleishman Hillard.

The Lobbies

In 1998, almost but not quite unconnected to Liberal attempts to create an entirely new, corporately-backed government, Lobbygate happened. When Greg Palast, a journalist for the *Observer* Newspaper, ventured into the environs of the New Labour Government, disguised as a businessman looking for political leverage, he met up with Draper, representing GPC. Draper couldn't stop talking. Within 24 hours of the publication of the resulting allegations in the *Observer*, he has been suspended from the company and sacked from his £60,000-a-year column on the *Express*.

Sir Ian Wrigglesworth, head of GPC Market Access, said: 'Following discussions, Derek Draper has this afternoon told us he has resigned in the best interests of GPC, its clients and staff, and to pursue other interests.'⁴

In relation to the world of consultancies, if not with regard to politics, Lobbygate scattered the personnel of GPC, making it almost impossible for an outsider to tell which individuals and which crisis management companies continued to promote the Liberal-New-Labour-Global-Corporation-EU-Atlantic Alliance.⁵

4 Oddly because he was at the very heart of the 'scandal', Draper was one of the only people to get out of the politics/PR world entirely. He went to San Francisco and began training as a psychotherapist.

5 One early member of GPC, before it took over PRIMA Europe, was David Earnshaw. His career since leaving GPC Market Access in 1995, tells us something about the kind of lobbying that Big Pharma has conducted in Europe. Earnshaw left GPC to join SmithKline Beecham (now GlaxoSmithKline), where he became director of European government affairs in Brussels, where, in 1998, he was 'instrumental in ensuring the adoption' of the controversial biotechnology Patents on Life Directive. (*Cont.*)

Taverne had left PRIMA only months before Lobbygate, so that he could sit in the Lords without being open to the criticism that he was representing the global corporations whose praises he had been singing for the past 20 years.

Michael Craven, who, with GPC Market Access, had also been at the Centre of the New Labour Victory in 1997, left after Lobbygate to set up Lexington Communications, which was to become one of the main PR, communications consultancies working for New Labour. Craven had been an adviser to John Prescott MP and chief media spokesperson for the Labour Party.

He was soon joined at Lexington by three other GPC executives, including Ian Kennedy, who had been a Labour party adviser working for senior government ministers while Labour was in Opposition. In January 2003, Craven hired Bernard Marantelli, a PR operative from Monsanto, to help Lexington in its work for the ABC in its battle to get New Labour to allow GM crop commercialisation.

One company which broke away from GPC in the late nineties, went on to cover work for New Labour. In the mid nineties, the PR company Connect Public Affairs merged with GPC, to become GPC Connect, part of the large Omnicom group. In 1997, there was a management buy-out from Connect and Connect Public Affairs was reformed in January 1998. Connect Public Affairs, deals with different kinds of Government policy including housing. One of its consultants, was previously a conference organiser for the Federal Trust and is a Liberal Democrat activist.

(Cont.) He left SKB for Oxfam's Brussels Office, to spearhead the charity's campaign for easy access to important drugs in the developing world, especially Africa, before moving again, in June 2002, to become managing director of BKSH, a subsidiary lobbying company of the world's fifth-largest PR company, Burson-Marsteller.

Hill and Knowlton and Weber Shandwick Communications are linked to the Liberal ascendancy within New Labour, the pharmaceutical industry and New Labour itself. Shandwick started in the early 1970s, and, as Weber Shandwick, is now the fourth-largest PR firm in the world. The three largest firms are Burson-Marsteller, Hill & Knowlton and Porter Novelli. Shandwick's clients include New Labour and 3M, Bayer, Coca-Cola, Monsanto, Novartis, Novo Nordisk.

Paul Taaffe the present chairman and chief executive of Hill & Knowlton, was previously a managing director of Shandwick Consultants.

Another favourite son of Shandwick who is still with them and whose career has been intimately linked with New Labour is Colin Byrne. Byrne met Mandelson in 1986 when he was director of communications for the Labour Party. He was employed on the 1987 general election campaign and then as Labour's chief press officer, until the 1992 election. Byrne worked with Blair, Gordon Brown and Jack Straw MP on media relations while they were in the Shadow Cabinet. Byrne worked for Mandelson again during the 1997 general election.

Byrne joined Shandwick in 1995 as an associate public affairs director, became a director in 1996 and in 2001 became CEO of the new enlarged Weber Shandwick after its merger with BSMG.

The Liberals In but Out of Government

The idea in the minds of a number of those who promoted him was for Blair's premiership to open the doors of government to the Liberals. Blair had agreed to this. 'I would prefer to have a government in which Liberal Democrats are present,' he told the Liberal peer Lord Jenkins before the election, 'than a government made up entirely of the Labour Party – and that applies whether I get a majority or not.'⁶

6 Op. cit. Lindsey German, *The Blair Project Cracks*.

Like some other Liberal Lords, Tom (now Lord) McNally's career overlaps with New Labour, politically and in relation to PR companies. He joined the full-time staff of the Labour Party in 1967. He had been a member of the CIA-funded European Movement since student days. In 1972, he was appointed by Callaghan as head of the political office in 10 Downing Street. In 1979, he was elected Labour MP, but joined the newly formed SDP in 1981.

In 1983, McNally lost Stockport for the SDP. Out of Parliament, in 1987, he joined Hill and Knowlton as director of public affairs, before moving to a similar position at Shandwick Public Relations in 1993. Shandwick's clients include New Labour and 3M, Bayer, Coca-Cola, Monsanto, Novartis and Novo Nordisk. He subsequently became vice-chairman.

In 2003, McNally was appointed non-executive vice-chairman of Weber Shandwick, after Shandwick's take-over of by American communications giant Interpublic. Politically, McNally remained SDP until 1987, when he supported the successful merger with the Liberal Party to form the Liberal Democrats. He served on the Federal Executive of the new party from 1988 to 1998. In October 2004 he was elected leader of the Liberal Democrats in the House of Lords.

Although, after his landslide victory, Blair did not actually appoint liberals to the cabinet, he took a number of them on as advisers. Roger Liddle became an adviser to Blair on Europe and Defence.⁷ Liddle's wife, Caroline Thomson, is the daughter of Liberal peer Lord Thomson of Monifieth and the former PA to Lord Jenkins.

⁷ Peter Mandelson was made an EU Commissioner for Trade in 2004. Roger Liddle, after serving as Blair's policy adviser on Europe from 1997 to 2004, is now a member of Mandelson's cabinet. In a fabian pamphlet, *The new case for Europe*, by Roger Liddle, published in March 2005, Liddle, makes the case for the European Constitution: 'It is impossible to be on the progressive left (*cont.*)

Other individual associated with the Liberal Alliance who came into New Labour included, Martin Taylor, then head of Barclay's Bank and a member of the elite 51-year-old Bilderberg group (reputed to be one of the most sinister and powerful organisations in the world, and accused of determining the fate of the world in secret); Derek Scott who advises Blair on economics; former Liberal Democrat councillor and parliamentary candidate Andrew Adonis, who advises Blair on education.

Roy (now Lord) Jenkins is considered an ideological mentor by Blair and a key player in *The Project* of merging the Lib-Dems with New Labour. Lord Newby and Sir Ian Wrigglesworth, both lobbyists, became immediately close to Blair's office in 1997. Sir Ian Wrigglesworth had continued as chairman of GPC until 2000, before chairing a northern industrial property group, UK Land Estates Ltd. He is a non-executive director of the medical division of Smiths Industries Plc, and a non-executive director of the PR company Corporate Citizenship.

As soon as he took up his seat in the House of Lords, with other Liberal and Liberal Democrat peers, Dick Taverne joined the Science and Technology Committee, from where he had linkage and access to the resources of the Dti and the personal Office of Science and Technology (OST) of Lord Sainsbury.

Following Lobbygate, the venue for buying and selling bits of government moved from the New Labour cabinet office and policy unit to the Dti. Like the immense Exchanges of the 19th century, the Dti, had become the Government exchange. Beneath the bell tower of the Dti, government departments, global corporations, think tanks and small, specialised companies, all bought and sold, broke off and disassembled remaining aspects of the UK government.

(cont.) without being a pro-European?' While Mandelson's other European foray is the *Policy Network* of which he is the Honorary Chair, an international think-tank launched in December 2000 with the support of Tony Blair, Gerhard Schröder, Giuliano Amato and Göran Persson.

Between 1997, when he took his seat in the Lords, and 2002, when he set up Sense About Science (see Part Three), Taverne was involved in laying the foundation for a massive lobby campaign on behalf of corporate science and technology. A major plank of this campaign was to be its anti-environmental rhetoric. It was to become clear very quickly that the whole ethos of US lobbying against any alternative voice in a growing corporate economy was to be introduced wholesale to Britain.

CHAPTER EIGHT

Life and Obscure Letters of Lord Dick

Encouraged by hysterical newspapers and irresponsible lobby groups, the public is turning against science. This is most evident in the GM food debate. There is no evidence that GM crops are dangerous, and plenty of evidence that they are good for the developing world and the environment ... With its anti-science dogma, Greenpeace is in some ways our equivalent of the religious right in the US.

*Lord Dick Taverne*¹

Dick Taverne, has often said that he is enthusiastic about science, but it is his wife who is a scientist, he prefers to describe himself as a rationalist. Taverne married Dr Janice Hennessey, the daughter of a pathologist, in 1955. Janice spent her early years in Uganda and Palestine, then trained as a scientist. She ended her working life, a malariologist in the Department of Immunology, University College London Medical School.

In the late Nineties, Dr Janice Taverne was involved in the international attempt by the chemical and pharmaceutical companies to ensure that DDT was not banned in some countries. In December 2000, she was one of the 416 signatories to an open letter on DDT publicised by the Malaria Foundation International (MFI). The MFI ran the campaign to save DDT in

¹ Lord Dick Taverne, 'Against Anti-science', *Prospect*, December 1999.

the developing world. It won, and DDT was saved indefinitely from being banned world-wide.

‘At the end of this long and successful campaign, the Malaria Foundation International (MFI) and the Malaria Project (MP) would like to both thank and congratulate you and the many parties for valuable assistance that helped to successfully obtain an exemption for DDT at the INC 5 POP’s negotiations recently in South Africa. In particular, we thank the over 400 doctors and scientists from 63 countries, who lent strong support last year when this issue was first brought to the attention of the scientific community.’

In aid of the campaign, Dr Taverne also wrote ‘DDT – to Ban or not to Ban?’ In *Parasitology Today*.² MFI is sponsored by, among others, Abbott Laboratories, Bayer A.G., Burroughs Wellcome Fund, Merck & Co. Inc. USA, Pfizer Inc. and SmithKline Beecham International.

After becoming a Lord, Taverne began writing in earnest in defence of multinational corporations, and attacking exactly those things that the quackbuster groups, CSICOP and the ACSH have attacked over the past two decades. His chosen venue has often been the Blairite *Prospect* magazine.

In a 1999 article, Taverne compared those who wanted to stop GM crops in Britain, to the religious Right in North America.³

In 2002, he co-authored with Sense About Science worker Tracey Brown, again in *Prospect*, the article, ‘Over-precautionary tales: The precautionary principle represents the cowardice of a pampered society.’⁴ And then again, in a 2004 article, he

2 Janice Taverne, *Parasitology Today*, Volume 15, Issue 5, 1 May 1999, pages 180-181.

3 Op. cit. Taverne, *Against Anti-Science*.

4 Taverne and Brown, ‘Over-precautionary tales,’ *Prospect*, September 2002.

railed against those who suggested that the precautionary principle was a scientific and political necessity.⁵

Taverne was elected president of the Research Defence Society (RDS) in 2004. He was a member of the House of Lords Committee on the Use of Animals in Scientific Procedures, and has been a member of the House of Lords Science and Technology Committee.

Also, in 2004, Taverne wrote a short piece in *Nature* asking people to be sensible about public participation.⁶ This followed the political line taken by Sense About Science and the ex-RCPers that science was too difficult for ordinary people to make decisions about.

'When crops burn, the truth goes up in smoke,' was the headline of an opinion piece by Taverne in *The Times*. In it, Taverne denounced the 'anti-GM campaign' as 'a crusade' led by 'eco-fundamentalists'. He warned, 'When campaigns become crusades, crusaders are more likely to turn to violence.' He also referred to farmers being 'terrorised' and claimed that 'the tactics of animal welfare terrorists' were being adopted against GM researchers. These assertions were entirely unsupported.

In November 2002, Taverne chaired the Scientific Alliance conference on GM called 'Fields of the Future'. In April 2004, *Prospect* published a further article by Taverne,

5 (Issue 47 December 1999) *Against anti-science*: Dick Taverne. *Anti-GM campaigners are Britain's equivalent of the religious right in the US*. (Issue 97 April 2004) *Safety quacks*: Dick Taverne. *The Stewart inquiry into mobile phones shows the danger of taking public fears over science too seriously*. (Issue 101 August 2004) *Radiation works*: Dick Taverne. *Part of the anti-nuclear case is based on the false, official view that all exposure to radiation is harmful. Small quantities are good for you*. He had letters published in September 2004/May 2004/June 2004/August 2004.

6 Taverne, D. (2004). 'Let's be sensible about public participation.' *Nature* 432 (18 Nov): 271.

‘Safety Quacks’.⁷ Although this piece was not co-authored with Tracey Brown, it drew extensively on a book by Brown’s husband and exRCPer, sociologist Adam Burgess.

In ‘Safety Quacks’, Taverne is critical of public involvement in decision-making about technologies, but says he is willing to see some public discussion where there are ‘ethical’ concerns. However, public discussion, he says, ‘needs to be structured carefully to prevent domination by special interests.’

In 2005, Taverne published *The March of Unreason*, which, because it was such a rant, got generally panned by those who might have been its most sympathetic reviewers:

The delicate interplay between science, risk and democracy demands serious analysis and reflection. But any subtleties in these debates are drowned in the torrent of polemic poured onto those he condemns as the ‘enemies of reason’. Near the start of the book he decries those who ‘use evidence selectively and unscrupulously to bolster prejudice, and who go through the motions of inquiry only to demonstrate some foregone conclusion’. A more apt description of Taverne’s own method it would be hard to find.⁸

This is symptomatic of the book’s greatest weakness: an insistence that the scientific, rationalist world-view is not just mostly right, but always so without exception. This is manifest in its skimpy and simplistic treatment of religion. In attacking a loosely defined ‘fundamentalism’, Lord Taverne conflates private piety with public zealotry, and appears to assume that deeply held religious belief is always synonymous with intolerance. Evidence-based approaches to life are undoubtedly useful, but what about ethics?⁹

7 Taverne, ‘Safety Quacks,’ *Prospect*, April 2004.

8 James Wilsdon, *Financial Times*, April 15 2005. *The March of Unreason: Science, Democracy and the New Fundamentalism* by Dick Taverne; Oxford University Press.

9 *The Economist*, April 4, 2005; <http://www.economist.com/>.

A news story in *The Sunday Telegraph*, which accompanied the publication of *The March of Unreason*, highlights Taverne's views about the biotechnology debate in the UK, suggesting that aid agencies and environmentalists have deceived the public over genetically-modified crops by deliberately ignoring scientific evidence that supports the technology.

According to Taverne, who he says, used to ride a bicycle to the Commons, environmental fundamentalists lie and distort the truth all the time. They continuously draw on their own and associates' research reports, while ignoring the science of other researchers. Over GM crops, Green groups 'deceive the public'.¹⁰ Taverne accuses environmentalists of ignoring 'solid science', of citing each others' reports, and of using discredited studies. 'The green lobby,' Taverne says, 'misuses both evidence and research.'

According to Taverne, environmentalists do an 'enormous' amount of damage to British Industry. His trumpeting of the GM Golden Rice, which produces Vitamin A in the body, and which could, in his words, help '14 million children under five years old who suffer from vitamin A deficiency, which can lead to measles and blindness', is quite hilarious when one considers that the international pharmaceutical industry is trying to restrict access to vitamins, which apparently represent part of an irrational health concept.

A Report from Action Aid dismissed the project as worthless and cited a 'finding' by Greenpeace that a child would have to eat about 7kg of cooked Golden Rice to obtain the required amount of vitamin A. The project is reminiscent of the famous idea which Professor McVie, the champion of scientific cancer research, had about producing brightly-coloured vegetable

¹⁰ 'Green groups deceive the public' by David Harrison. 20/03/2005, syndication@telegraph.co.uk

products, which children would find attractive, as an aid to cancer prevention.

Lord Taverne is deeply antagonistic to homeopathy, which he thinks is an ancient superstition. It's actually quite refreshing to find Taverne's irrational beliefs fitting so exactly into the 'clearly bonkers' school of Health Fraud activists and US quackbusters.

'Homeopathy and alternative medicine: they all claim it works,' he says. 'Of course it works. The placebo effect works. Witchcraft worked when people believed in it. Anything that makes people feel better is, in a sense, a good thing, but it is also a form of deceit.' He thinks that alternative medicine will do a lot of damage.¹¹

Although what is disturbing is the realisation that he actually believes this argument of mirrors, which dare not cast an eye over even the most rudimentary scientific studies done by allopathic medics about homeopathy. When someone says, apparently seriously, 'alternative medicine will do a lot of damage', it must surely be time for the fat lady to sing, or to ask simply, 'Who to?'

Various chapters in the book deal with all the ongoing debates put forward by ex-members of the Revolutionary Communist Party and their friends in US think tanks,¹² from genetically-modified crops and food, and organic farming, to the MMR vaccine, environmentalism, the precautionary principle and the new anti-capitalist and anti-globalisation movements.

¹¹ Ibid, *The Sunday Telegraph*.

¹² Contents: 1 From optimism to pessimism / 2 Medicine and magic/ 3 Organic farming/ 4 GM: the case for/ 5 GM: the case against/ 6 The rise of eco-fundamentalism/ 7 The perils of precaution/ 8 The attack on science/ 9 Multinational companies and globalization / 10 Reason and democracy.

The Sunday Telegraph article took quotes from Tony Juniper, the executive director of Friends of the Earth, who coped exceptionally well in disputing Taverne's arguments in favour of GM crops, in one sentence. Juniper said 'the green lobby' took science very seriously and studies so far had failed to prove the long-term safety of GM crops. More pointedly, 'Science has its limits. We have concerns about the social, economic, environmental and ethical impact of this technology,' he said. And Pete Riley, the spokesman for the Five-Year Freeze Campaign, another anti-GM lobby group, said: 'Dick Taverne and his friends should get out and find real solutions to the world's problems, and not just help those who want to profit from new technology.'

In July 2004, Taverne stuck his oar into the MMR argument, with an article in the *BMJ*, 'The legal aid folly that damages us all', not by any means discussing science, but bemoaning the terrible waste of money, in the form of legal aid, which the parents of vaccine-damaged children had cost the nation.¹³ This article follows the path that was later trodden by Professor Raymond Tallis in February of 2005. Taverne looks at what he calls 'two recent prominent cases' to illustrate that the law can be 'an ass'.

What he describes are not in fact prominent cases; rather, they are two circumstances in which the public have considered themselves damaged by doctors and have thought to claim compensation for this damage. The two circumstances are the claim by parents of children they believed damaged by the MMR vaccine, and the parents of children from whose dead bodies samples were taken before burial.

There is little point in going through this article in detail, since Taverne's arguments are quite preposterous. There is,

13 'The legal aid folly that damages us all.' *BMJ* Volume 329, 24 July 2004.

however, a point in understanding why Taverne cites these two cases. The MMR case, Taverne says, should never have been given legal aid because there is no evidence that MMR is anything other than perfectly safe. Forgive me for saying this, Dick, but that's the case for the defence. I know that you don't like it, but the claimants are usually allowed to enter their case as well. But at least the object is clear, Taverne would prefer it if people were not given legal aid to fight pharmaceutical companies, especially when multiple vaccines come into the frame.

The second circumstance he looks at is slightly different. Here he argues that of course doctors should be able to retain pieces of human bodies for research, and while it is better if relatives are asked, at the end of the day it's no big deal. In fact he goes further, saying that to make a legal fuss about the matter is to 'go back to the primitive rituals of pre-classical times as if our human rights are infringed if any part of a body is missing'.

Clearly, what Taverne is saying is that, as we have no soul, what does it matter how the body is treated. It is odd that he should suggest a return to pre-classical times. The case makes me think about early 19th-century rationalist Britain, when the State disposed most finally of the criminal's identity by having him or her 'hung drawn and quartered', *those quarters being scattered to the four corners of the earth*.

Again, it isn't hard to understand the point of Taverne's argument: scientists need bits and pieces of people's bodies for research, so why shouldn't they have them? After all, the person is dead, why shouldn't doctors carve bits off them as if they were on a spit in a high-street kebab shop. Why would relatives object? Surely they see how much more important scientific progress is than all this irrational sentiment.

Taverne's business life outside his PR and lobby groups has been spent in insurance and as a director of the BOC Group plc. He was the first director, then later chairman, of the

Institute for Fiscal Studies, where he stayed until 1982. In that period, from 1989 for 10 years, he was also chairman of OLIM Investment Trust, in addition to becoming deputy chairman of the Central European Growth Fund in 1994.

On his Lord's declaration of interests, Lord Taverne records his involvement in Sense About Science,¹⁴ a non-remunerative position, as well as his remunerated positions as chairman of IFG Development Initiatives Ltd (a company providing consultancy services in South-Asia) and chairman of the Monitoring Board, Axa Sun Life plc.

¹⁴ A typo in the Lords' register of interests turns this entry into an unintended joke. Instead of Sense About Science the record reads: 'Sense Above Science.' Had the words been the other way round it would have been more factual and even more amusing.

Risk analysis and AXA Sun Life plc.

What is at stake is the role of reason in democracy. What is also at stake is truth.

Lord Taverne

IN DECEMBER 2004, AXA Sun Life was fined £500,000 by the Financial Services Authority (FSA), for producing misleading advertisements for the sale of two products. According to the FSA, 'The advertisements were part of a far-reaching media campaign, which included direct-offer promotions, advertising in a variety of national magazines and newspapers, and television advertisements. They were distributed over almost two years, from February 2002 to January 2004, thereby exposing a significant number of consumers to the risk of being misled.' According to the judgement, AXA Sun Life's advertisements for the Bonus Cash Builder Plus Plan (BCP) and the Guaranteed Over 50 Plan (GO50) did not provide customers with sufficient information about how the product worked or the risks involved. The design, content and format of the promotions focused attention on the benefits of the products, including the offer of free promotional gifts, but gave less prominence to key information about the risks. Furthermore, advertisements for the BCP between January 2002 and April 2003 included comparative data that were themselves inaccurate.

AXA Sun Life appears to promote the Furedi concept of risk: tell the public about the positive values of the product and back pedal on the information about risk. □

PART THREE

9 Against Nature – Naturally
The People Involved

10 Guiding the Media
The Social Issues
Research Centre
SIRC People
The Guidelines

11 Science Sans Sense
Whose Sense and
Whose Science
The Trustees
The Advisory Board
The Greatest of These
is Charity

CHAPTER NINE

Against Nature ~ Naturally

In November and December 1997, Channel 4 broadcast a series of three programmes, the first of which was entitled *Against Nature*. The programmes laid out in detail the political philosophy of a small group of science-supporting sceptics, most of whom had been associated over the past decade with the Revolutionary Communist Party.

While the programmes articulated the new philosophy of the ex-RCP Network, they also fitted within a broader context, into a trend ongoing since the Sixties, when corporate science began covertly to challenge criticisms relating to the health-damaging effects of some forms of industrial production.¹ The most notable of these critical campaigns were against DDT, asbestos, the drug thalidomide and tobacco products. There were, however, many more defensive campaigns, which were run covertly.

One example of these was the campaign in defence of oestrogen replacement therapy. Richard Wilson, a New York

1 Although this started mainly as a consequence of Rachel Carson's book, *Silent Spring*, published in 1965, it had happened before, especially in an ad hoc way. Upton Sinclair's serious critique of the meat-packing industry in the early 1900s met with heavy opposition and dirty tricks. Op. cit. Walker, *The Unquiet Voice of "Silent Spring."*

gynaecologist was paid millions of dollars by Wyeth and other pharmaceutical companies to advertise and praise their hormone replacement products. In 1963 he wrote *Feminine For Ever*, which recounted how women's lives and those of their husbands had been massively changed for the better by the consumption of HRT. When, in 2002, the Women's Health Initiative Study finally showed that HRT actually caused heart attacks, deep-vein thrombosis, strokes and breast cancer, Wilson's son stated publicly that his father had been paid by Wyeth to write the book and that they had catered for its publication.

In England, a similar thing happened when Teresa Gorman and Dr Malcolm Whitehead put their names to *The Amarant Book of Hormone Replacement Therapy*. The book, which was also covertly subsidised by Wyeth, clearly broke the law in advertising a prescription medicine to the public.

The journalist George Monbiot, a supporter of the campaign against GM crops, was drawn into a row with ex-RCPers, following his well-argued articles critical of *Against Nature*. Despite his excellent investigative work, he was wrong, when he baldly stated that there had never been a television programme like *Against Nature* on British television. Actually, there had been a couple.

In 1990, the Campaign Against Health Fraud managed to gain complete control over the making of a half-hour programme screened in the World in Action series under the title *The Allergy Business*. The programme was determined in its view that neither allergy nor chemical sensitivity existed, and that people who presented with signs of such illnesses were mentally unstable. It claimed that clinical ecologist Dr Jean Monro, who treated people with environmental illnesses, was a charlatan. One renowned professor went so far as to mention racketeering. All its witnesses and commentators, were drawn from the CAHF's own political lobby group.²

Although *The Allergy Business* was just a 30-minute programme, it displayed many of the same approaches to documentary film-making as would be adopted by *Against Nature*. A long, drawn-out legal battle over the programme was settled out of court with an apology to Dr Monroe.³

In the same year, a two-part BBC programme followed the global misinformation distributed around the interim results of a deeply flawed, erroneous study, published prematurely in *The Lancet*. The study, which accused Bristol Cancer Help Centre of killing its clients with alternative treatments, was later thoroughly discredited, and one of its authors committed suicide. Characters from the Campaign Against Health Fraud were involved in the making of these programmes, also.⁴ And again, as with *Against Nature*, the two programmes were followed by a live TV discussion. As with *The Allergy Business*, there were considerable complaints following the two programmes. Women who had been interviewed had been misrepresented, and their interviews had been mischievously cut and edited – as they had been for *The Allergy Business* – to make it appear that interviewees were unhappy with the regime at Bristol.

Interestingly, the maker of the Bristol programme, David Henshaw, a CAHF fellow traveller, later wrote in an *Observer* supplement that, despite having made programmes about Colombian drugs Barons, he had never felt so threatened as he had when he received hate mail from Bristol Cancer Help Centre supporters. He presented no evidence for this charge, which fits perfectly into a long history of exaggerated accounts

2 Op. cit. Walker, *Dirty Medicine*.

3 For a complete narrative and analysis of this programme and the ones about Bristol Cancer Help Centre below, see *Dirty Medicine*.

4 Including Vincent Marks, who has recently surfaced again as a pro-MMR pundit, involved in the unscientific attacks upon Dr Andrew Wakefield.

of irrational and sometimes violent attacks, which rationalists claim have been made against them.⁵

The *Against Nature* series kicked off with a programme that accused environmentalists of wanting to stop technological advances in the developing world. It accused them of hypocrisy and of desiring a return to mediaevalism – for others, not themselves. While they enjoyed the fruits of technological progress, ran the argument, the environmentalists would happily see developing societies live in poverty. Following the repeated corporate line to which Bush still holds, the programme further held that global warming was a myth, and that the environment in the developed world was continuing to improve.

The second programme looked at the ‘myth’ of overpopulation and pointed to the ‘barbarism and racism of environmentalist plans to reduce population levels in the Third World.’ It accused contemporary environmentalists of Malthusian strategies for reducing populations, comparing them, along with vegetarians and anti-vivisectionists to Third Reich Nazis.

The last programme concentrated entirely on identifying environmentalists as the new enemies of science. It argued that Green scaremongering about research into genetics, fertility and reproductive technology had led to valuable scientific research being stopped. So powerful had the Green movement become, apparently, that it was able to dictate scientific direction in the developed world. To illustrate this power, the programme claimed that the profitability of the top 12 Green organisations in the US alone had an annual turnover of just under a billion dollars.⁶

5 Op. cit. Walker, *SKEWED*.

6 This is about the amount that a large pharmaceutical company expects to make on the annual sale of one drug, or a small percentage of the money that a large company will pay out in bribes every year to governments in developing countries.

Professor Robert White, who has made head transplants his life's work, was chosen as standard-bearer for science and its immense benefits to mankind. The programme showed him transplanting a monkey's head. In the accompanying written text on the Internet, his work is described thus:

Against Nature shows Professor White performing this experiment. After the blood supply has been connected, the head can safely be removed from its original body, with its brain functioning more or less normally. Then the body's original head is disconnected and its new head is attached. Shortly after, the transplanted head appears to regain consciousness. Although the transplanted head cannot control its new body, the head itself appears to be working normally. Its eyes follow Professor White around the room. The monkey will survive for up to a week but could possibly live like this indefinitely if drugs were used to prevent the body from rejecting the head.

But Professor White's ambitions lie beyond monkeys and dogs. He believes his work could be developed to help humans whose bodies are diseased or damaged. Professor White's work has been hugely controversial, especially among animal rights groups. There have been calls for this type of scientific research to be banned.

The programme-makers expressed amazement that anyone might suggest that this kind of science should be regulated, and saw such regulation as an impossible constraint on Professor White's rights as an individual to do the work he enjoyed.

These were, of course, unremittingly politically-biased programmes, and the points that they omitted to raise were far more interesting than those that they did. Amongst the uninterrupted glorification of onanistic scientists was no critical mention of any form of scientific progress. Nor was there any discussion of scientists exploiting a lack of accountability, to blur the line between scientific experimentation and criminal activity – such as the growing illegal trade in body parts.

Once it had been established that our environment was less polluted than it had been a hundred years ago, everything was all right. 'Air pollution has been falling in modern industrialised countries for the last 40 years,' Steve Hayward reassured us. 'And it's been falling precisely because of economic growth and improvements in technology.'⁷

According to *Against Nature*, there were no new developing environmental threats caused by science, it was all a good-news story. To try, even in small part, to understand why this was, we have to be aware of the kind of corporations and think tanks that have been promoting the arguments of the programmes since the 1960s.⁸

The series was a manifesto for a party apparently in its death throes. However, in the year that New Labour swept to power, the corporeality of the Revolutionary Communist Party was very evident. The inclusion of the RCP's principle architect and theoretician, Professor Frank Furedi, as the main interviewee in the three programmes, made it clear that this was a clarification call.

Channel 4 had to broadcast a prime-time apology on behalf of *Against Nature*, after the Broadcasting Complaints Commission ruled, 'Comparison of the unedited and edited transcripts confirmed that the editing of the interviews with the environmentalists who contributed had indeed distorted or misrepre-

7 Even this story, to which the anti-environmentalists cling like a bible, is a distortion of the truth. Science and technology created the terrible pollution that occurred in the 19th century – whether or not the progress which accompanied it was worth it is another question – and regulations imposed by public health practitioners diminished that pollution before the post-industrial change in the means of production took place. It is obviously the case that present-day electronic means of production are less polluting, but it wasn't for this that they were brought into existence, and even they have brought with them new problems of their own.

8 It is worth reading all the books by Sheldon Rampton and John Stauber on which you can lay your hands.

sented their known views. It was also found that the production company had misled them ... as to the format, subject matter and purpose of these programs.'

The People Involved

Martin Durkin, the series director, describes himself as a Marxist, but denies any link with *LM magazine*, *Living Marxism's* successor and forerunner of the online journal *spiked*. Three years after *Against Nature*, Durkin also made *Modified Truth: The rise and fall of GM* in the Equinox series for Channel 4. This film claimed that GM was perfectly safe. Both Dr Arpad Pusztai and Dr Mae-Wan Ho, who appeared in the programme, complained that they were misled about its content.

George Monbiot participated in the televised discussion that followed the third programme of *Against Nature*, and was amazed at the way Durkin responded to his comments.⁹ 'I had scarcely broached this subject on Tuesday night's debate when Martin Durkin began – and



⁹ The late Penny Brohn, founder of the Bristol Cancer Help Centre, had experience of facing Campaign Against Health Fraud members in television programmes and debates. The first occasion was in the summer of 1989. Brohn was invited to appear on a programme in Birmingham, where she found herself in a confrontation with Vincent Marks. This was her first encounter with Marks, and she found reasoned debate with him impossible. Marks began the discussion by identifying Bristol with some stereotypical New Age institution run by crackpot practitioners. These practitioners were, according to him, denying patients proper medical attention, and withholding orthodox medical care from them. Brohn told the author, when he was researching *Dirty Medicine*, 'I have taken part in some debates in my time, but I realised that this was in *another* league. I left that studio gobsmacked. I just reeled out. That was the first time that I felt people were really angry and vindictive. It was not an intellectual debate.' (Cont.)

I do not exaggerate - screaming. I was a McCarthyite and a despicable conspiracist. What on earth did his personal political views have to do with this series? Well, rather too much. The RCP and its associates can make as many programs as they like as long as they do so openly and honestly . . . But Martin Durkin and his commissioning editor, Sara Ramsden, maintain that *Against Nature* is not a polemic, but a well-balanced documentary series.¹⁰

Eve Kaye, the assistant producer of *Against Nature*, is one of the principal ex-RCPers. She is married to James Heartfield another ex-Party member, co-author of the RCP's manifesto.

Frank Furedi, the series' main interviewee, is a professor of sociology at the University of Kent, and the theoretician behind the Revolutionary Communist Party. Despite his leading the RCP towards a proletarian revolution for almost 20 years, Furedi's Marxism now appears to have



(Cont.) On the second occasion, Brohn participated in the televised discussion, which the BBC insisted follow the two BBC television programmes on Bristol. These were shown a week after the Centre had been plunged into the worst crisis of its existence, following the publication in *The Lancet* of the fraudulent research paper. Brohn felt utterly betrayed by the programme-makers and the 'debate' which followed the second programme. She found it an extraordinary experience. 'I have never been treated like that before in my life. I have never been so deceived. It was the first time that I realised that human beings did that sort of thing to each other. It was like the thing with Vincent Marks all over again, though this time there were three of them.' During the 'debate', Brohn tried hard to defend Bristol and its ideas, but she was so loudly and vehemently attacked that she left the studio feeling that she had helped in the Centre's public humiliation. For the next few days, however, she and the Centre were flooded with sympathetic mail. Members of the public expressed shock and disgust at the treatment she had received.

10 George Monbiot, 'Who's Behind Against Nature', the *Guardian*, December 18, 1997.

been replaced by a bland liberalism exemplified by such statements as: 'Yes, industrialisation is often exploitative, often leads to the uprooting of people. But at the same time it adds to human civilisation and *means progress for all*.' Furedi's wife, also an ex-RCPer, works in the Human Fertilisation and Embryology Authority (HFEA).

Juliet Tizzard who appeared in *Against Nature*, moved to her latest post is with the Human Fertilisation and Embryology Authority (HFEA) from the lobby group Progress Educational Trust which enjoyed a close relationship with AstraZeneca.

John Gillott, another interviewee, was *LM*'s science correspondent. Both he and Furedi were billed as independent experts.

Fred Singer, one of the series' talking heads is executive director of the Science and Environmental Policy Project (SEPP). The Project was founded in 1990 as an affiliate of the Washington Institute for Values in Public Policy, a think tank funded by the cult leader Reverend Sun Myung Moon, which provided SEPP with free office space. Since severing its ties with the Moonies, SEPP has held a number of conferences and seminars attempting to discredit theories of ozone depletion, global warming, acid rain, pesticide exposures and toxic waste as real or potential threats to human health. Singer has received consulting fees from Exxon, Shell, Unocal, ARCO, and Sun Oil.

Larry Craig, Senator (R-ID), another contributor, is a far-rightwing, anti-environmental Republican senator from Idaho, closely linked to the forestry and logging industries. He is also a prominent representative for the Wise

→

Use movement.¹¹ He is a leading figure in Alliance for America, which is supported by corporations connected with the timber, mining, fishing and cattle industries.

Gregg Easterbrook is a former *Newsweek* journalist, now best known for his book *A Moment on the Earth*, which espouses the view that many environmental problems have been overstated. It claims that the most important thing about Rachel Carson's seminal book *Silent Spring* is that virtually none of what Carson predicted has come true. Jack C. Schultz, professor of entomology at Pennsylvania State University (USA), wrote in *Natural History* magazine that *A Moment on the Earth* 'contains some of the most egregious cases of misunderstood, misstated, misinterpreted, and plainly incorrect "science" writing' he had ever encountered. Mobil Oil has used the book as a basis for newspaper ads.

Michael Gough is director of Cato's Science and Risk Program. The Cato Institute, a libertarian rightwing think tank founded in 1977, sponsors policy conferences and distributes publications on issues as diverse as the global economy, military intervention and 'eco-terrorism'. Cato views the environmental movement and the demands it places on industry as a major obstacle to its vision of small government and an unregulated economy. With policies in mind to de-regulate the pharmaceutical market, the Cato Institute advocates, 'moving pharmaceutical and medical device approval into the private sector.' According to the Institute and other similar think tanks,



11 An account of the Wise Use Movement can be found in David Helvarg's brilliant book, *The War Against the Greens: The "Wise Use" Movement, the New Right and Anti-Environmental Violence*. USA, Press Gang Publishers, 1993, Sierra Club Books, 1994.

those who worry about the adverse reactions caused by drugs, chemical sensitivities or allergies, are at best hysterical and at worst subversive. They behave irrationally and seek to shift the blame for their problems away from themselves and on to industry or government.¹² The Cato Institute is a founding member of the Wise Use movement. Among Cato's funders are American Farm Bureau Federation, American Petroleum Institute, Amoco Foundation, ARCO Foundation, Association of International Auto Manufacturers, Exxon, Ford Motor Company Fund, Monsanto, Philip Morris, Procter & Gamble Fund, Sarah Scaife Foundation¹³ and Toyota Motor Sales.¹⁴

Gough has examined the differences between science and risk assessment, and claims to have 'exposed the shoddy science that underlies government risk assessments.' He argues that testing and certification of consumer products by non-government, third-party laboratories will provide safe and effective products in a far more timely fashion than current regulatory schemes based on prejudiced government risk assessments.

Julian Simon, besides being a business professor, is also a Cato adjunct scholar. In 1992 he told a policy conference that 'The plain fact is that the gloom and doom about our environment is all wrong.'

Dennis Avery is a senior fellow of the Hudson Institute, a private, not-for-profit research organisation founded in



12 See *SKEWED* for more information about the Cato Institute views on health.

13 This foundation gave the start up money to the American Council on Science and Health.

14 See *Greenpeace Guide to Anti-Environmental Organisations*, 1992.

1961. Hudson analyses and makes recommendations about public policy for business and government executives. He is director of Hudson's Center for Global Food Issues. He is the author of *Saving the Planet with Pesticides and Plastics*, a book published by the Hudson Institute, and *Biodiversity: Saving Species with Biotechnology*, a Hudson executive briefing. Avery is a leading member of the science advisory panel of The American Council on Science and Health. □

CHAPTER TEN

Guiding the Media

The more recent scare over the MMR vaccine has resulted in a drop in immunisation rates, to a level possibly below that needed to prevent a measles epidemic. In such cases, the 'source' must bear much of the responsibility, but more cautious media reporting could have significantly limited the damage.

Guidelines on science and health communication, RI, SIRC, RS.

The Guidelines on Science and Health Communication were published in November 2001. Despite sounding terribly official, they were prepared by a small, privately-funded and relatively-unknown social research organisation called the Social Issues Research Centre (SIRC).¹ They were partnered by two better-established organisations, the Royal Society and the Royal Institution of Great Britain. Their sole objective was to censor articles critical of corporate science, professional medicine and their products.

¹ In May 1999, a House of Commons Select Committee on Science and Technology recommended in its Report, *Scientific Advisory System: Genetically Modified Foods*: 'Media coverage of scientific matters should be governed by a Code of Practice, which stipulates that scientific stories should be factually accurate. Breaches of the Code should be referred to the Press Complaints Commission.' The SIRC, together with the Royal Institution of Great Britain, were appointed to develop this code.

For the SIRC to partner the Royal Society and the Royal Institution is a bit like the Scottish football team *Queen of the South* partnering Manchester United and Real Madrid on a document about the financing of European football. It did, however, raise the status of the SIRC in relation to this one issue, and it meant, ostensibly, that a small group of corporately-funded individuals from SIRC and Sense About Science were apparently left to implement the recommendations of The House of Lords and the Royal Society.

The process began in March 2000, when the Royal Society published its *Scientists and the Media: Guidelines for scientists working with the media and comments on a press code of practice*.² The House of Lords Select Committee on Science and Technology subsequently endorsed this document in its 2000 report *Science and Society*.³

In order to produce the *Guidelines*, and to bring together the Royal Society and the Royal Institution with the SIRC, the SIRC formed the Joint Forum of the Social Issues Research Centre, a combination of people from Sense About Science and SIRC. The joint forum included, apart from SIRC personnel, Dr Michael Fitzpatrick, with his 20-year history of Revolutionary Communism, and Lord Dick Taverne, QC, a Liberal Democrat Peer (see chapters five and six). Other members of the Joint Forum included: Peter Bell, former controller of policy, BBC News; Philip Harding, controller of editorial policy, BBC; Steve Connor, science editor, *The Independent*; Dr Graham Easton, GP and 'senior broadcast journalist', BBC Science Radio; Professor Susan Greenfield, director, The Royal Institution; Dr Michael Clark, MP, chairman, Commons Science and Technology

2 *Scientists and the Media: Guidelines for scientists working with the media and comments on a press code of practice*. Royal Society 2000.

3 The House of Lords Select Committee on Science and Technology, *Science and Society*, 2000.

Committee; Professor Sir John Krebs, University of Oxford and the then chair of the Food Standards Agency. The Forum was moderated by SIRC directors Kate Fox and Dr Peter Marsh.

At the same time as bringing out the *Guidelines*, the SIRC set up The Health and Science Communications Trust, a charity that aimed to disseminate the *Guidelines*, while also organising seminars and workshops to bring together journalists, broadcasters, scientists and health professionals. The administration of the Trust was left mainly in the hands of the SIRC.

The Social Issues Research Centre

The Social Issues Research Centre (SIRC) claims to be an independent, non-profit organisation, founded to conduct research on social and lifestyle issues. Its web site tells us that 'SIRC aims to provide a balanced, calm and thoughtful perspective on social issues, promoting open and rational debates based on evidence rather than ideology.' As with many contemporary social and medical research groups, the centre's claim to be 'not for profit' is meant to suggest that it is not linked to any commercial organisations.

However, SIRC is funded mainly from the profits of a sister organisation, MCM, and both bodies share the same founding management staff. MCM Research is a problem solving, *risk management* research, positive communication and PR organisation, which works almost entirely for the food-and-drinks industry. It is also a research and consultancy company, which specialises in applications of social psychology to the workplace and public contexts.

MCM presents marketing campaigns for the sugar and alcohol industry, among other clients, including Conoco, Grand Metropolitan Retail, Kingfisher Leisure, Marks and Spencer, Mars Confectionery, The Ministry of Defence and the Sugar Bureau.

The SIRC's campaign in support of hormone replacement therapy (HRT) also showed how far this organisation was willing to travel away from any notion of scientific research, even social science.

In 2000 and 2002 respectively, the Women's Health Initiative study in America, and the British Million Women Study, both concluded that HRT could cause breast cancer, heart disease, stroke, deep-vein thrombosis and a number of other, less serious diseases. Immediately, Wyeth Pharmaceuticals, who prior to the studies had controlled 70% of the market in HRT, fought a rearguard action, pronouncing a lesser risk and trying to claw back the market.

Even before the results of the studies were announced, and in preparation for their termination, Wyeth had set up front organisations and got tame consultants on board. HRT Aware was one of the front organisations set up by Wyeth and other companies⁴ to advocate and proselytise the benefits of HRT.

In the first half of 2002, HRT Aware was guided towards the Red Consultancy, a discreet public relations company based in Central London. The Red Consultancy, founded in 1994, became a member of the Incepta Group plc,^{5,6} a marketing communications group, in 2001. Red offers strategic advice and implementation in the business-to-business, corporate and con-

4 Funded by Wyeth and five other pharmaceutical companies.

5 Incepta Group, the international communications and marketing group, has 58 offices and 1,600 clients world-wide, including Hewlett-Packard, H.J. Heinz, Honeywell, HSBC. The biggest group affiliated to Incepta is Citigate, which runs a global PR operation in Britain. Citigate clients include Baxters of Speyside, Procter & Gamble, Chiltern Railways, The John Lewis Partnership. In 2002, Incepta had revenues of \$241m.

6 Incepta is an affiliate of Bechtel Enterprises Holdings Inc., the development, financing, and ownership affiliate of the Bechtel organisation, which is one of the world's largest engineering, construction and project management companies. Bechtel has more than 20,000 projects in 140 countries. It was Bechtel that won the contract to reconstruct the Kuwait oilfields after the (*cont.*)

sumer public relations market. Red's other clients include or have included Ladbroke's and Batchelors foods, Kellogg's, Lever Brothers, McDonald's, Novartis UK, Johnson & Johnson, Aventis Pharma and the BBC.

The Red Consultancy came up with the Choices Campaign for HRT Aware, linking HRT to an 'aspirational' lifestyle. Red then designed a campaign for Choices, which took the drugs directly to their target audience, women over 45. It pushed Choices out at venues such as Bingo halls, which held Choices evenings, and on a media tour involving an ex-*East Enders* soap star.⁷ Advertising prescription drugs direct to the public is, of course, illegal, however, this did not seem to worry any of the campaigns participants.

Red next commissioned the SIRC to 'create' a piece of research that would 'show how today's generation of 50-year-old women were vastly different to their counterparts of 50 years ago, and link the 'improvements in quality of life with HRT.'

Its 'research' complete, the SIRC duly published a glossy 12-page 'Jubilee Report', which purported to show that improvements in health and happiness in contemporary women were more marked in those taking HRT. The work is skimpy and intellectually minimalist. It might just pass muster for a local newspaper article, were it not for the fact that the last section of the report, which puts many of the historical changes in women's lives entirely down to HRT, would be recognised as fallacious by most five-year-olds. On the back of the Jubilee Report, the contact address for help and advice for menopausal women is The Amarant Trust, the drug company front set up to push HRT for Wyeth (see page 100).

(cont.) first Gulf War, and the Iraqi oilfields after the last war. Fifty-one-year-old Riley P. Bechtel, the chairman and COE of Bechtel Group Inc., is a director of J.P. Morgan Chase & Co.

⁷ Incepta Group plc, Annual Review 2002.

Kate Fox, co-director of the SIRC, says in the introduction to the report, 'I had heard people say that "life begins at 50", but as a scientist I needed evidence to believe such statements. Now I have some.' As a scientist!! Evidence!! Thank God Fox didn't join the police force!

The campaign was judged a success by the PR industry. In a later survey of the coverage of its launch, it was found that '100 per cent of the articles mentioned HRT positively, 85 per cent referenced women on HRT reporting greater enhancement in all areas of life compared to those who are not.'

SIRC People

Prominent in the SIRC is **James Harkin**, a writer and social forecaster who now works at Demos, 'the think tank for everyday democracy', on research into mobile phone technology. Harkin, who is also director of talks at the Institute of Contemporary Arts (ICA), writes regularly for *spiked*, the news web site organised by exRCPers. (See chapter five.)

Kate Fox, the co-director and 'scientist', is a social anthropologist, engaged in 'monitoring and assessing global socio-cultural trends' for the SIRC. She is a colleague of Prof. Susan Greenfield, director of the Royal Institution, a board member of the Science Media Centre and Sense About Science, as well as an adviser to the SIRC. The two women sit on the Wellcome Trust Public Engagement Strategic Advisory Group. Kate Fox is the daughter of Professor Robin Fox, one of the founders of the SIRC and one of the world's best known anthropologists.⁸



⁸ Anne Fox, one of his other daughters, runs Galahad SMS Ltd, a social-science research firm that conducts large-scale research and evaluation projects for the Army, Home Office, Youth Justice Board, etc.

Dr Peter Marsh, Fox's co-director, who, with Fox, founded the SIRC in 1997, is a director of MCM Research, the body that helps to fund SIRC. Between 1979 and 1990, Marsh was a senior lecturer in psychology at Oxford Brookes University. SIRC people claim to be scientists, but in their training they lean towards culture and psychology. Inevitably, many of them have sceptical views, which dovetail into the essentially anti-science views of those critical of alternative medicine and cynically anti organic causes of ME, GWS and MCS. Speaking at the Institute for Cultural Research 'In praise of "bad habits"', Dr Marsh was reported on the Institute's web site as saying:

We live in an age which is the safest we have experienced in our evolution and yet we see dangers lurking in every aspect of our daily lives – from the food we eat to . . . When our lives are objectively risk-free, we perversely become more risk averse – often to the point of neurotic obsession.

SIRC member **Dr Graham Easton**, a west London GP, is similarly sceptical about popular contemporary thoughts on risk. A consultant on the *Guidelines on Science and Health Communication*, Easton also produces and presents science and medical programmes for BBC Radio.

Dr Easton chaired sessions at a conference on childhood immunisation at the Royal Society of Medicine in March 2004. Others speaking at the conference included the most adamant pro MMR supporters in Britain: Dr David Salisbury CB, principal medical officer for communicable diseases and immunisation, DoH; Dr Joanna Yarwood, DoH; Dr Elizabeth Miller, CDSC, Health Protection Agency; Professor Brent Taylor, Royal Free Hospital; and Dr Mary Ramsay, CDSC, Health Protection Agency.⁹ Dr Andrew Wakefield doesn't appear to have been invited. □

⁹ This is a large part of the contingent of individuals that has been waging a propaganda war against Andrew Wakefield.

The Guidelines

Consider the title of the document *Guidelines on science and health communication*, and the problem comes immediately into sight. In the body of the *Guidelines*, it becomes clear that what the title should read is, *Guidelines to enforce a corporate scientific construct on health communications*.

Balance. Newspapers may suppose that they have produced 'balanced' reports by quoting opposing views from scientists about a particular issue. While the intention may be to present both sides of an argument, a majority view on that matter may be held within the scientific community, and the opposing view is held by only a quixotic minority of individuals.

Scientists and the media: Guidelines for scientists working with the media and comments on a press code of practice.
The Royal Society 2000

The *Guidelines*, which did the rounds of 'experts' for their input, remained virtually intact throughout their travels. This was mainly because, although the opinions of many people were apparently canvassed, almost all of those people were fervent defenders of corporate science and its contemporary corporate funding.

There can be no doubt about the motivation and the goal of the *Guidelines*. They were to serve as a defensive weapon in any future conflicts between corporate science, the will of industry, and scientific, cultural or political dissenters. The *Guidelines* attempt to cut off the oxygen of information to both dissidents and those who might be swayed by dissident arguments. At the same time, of course, the organisations behind them could easily turn the infrastructure of the *Guidelines* into an offensive weapon, to be used against transgressors such as Pusztai and Wakefield, effectively censoring them.

Only slightly beneath the surface of the *Guidelines* lurks the same defence of vested corporate interests dominating all the apparently 'scientific' lobby organisations. The central problem seems to be that those involved in propagating the social construct based upon corporate science, are unable to conceive of a democratic process involving political, moral or social opposition to their ideas. As Fitzpatrick says in his book about MMR – there is nothing political about vaccination.

Journalists should be encouraged to treat with healthy scepticism work that has not been approved through peer review, including information that can be accessed through the Internet.

Scientists and the media, The Royal Society 2000

The health of society depends not upon science or even upon the quality of its medical services, but on its political structures and whether or not these allow citizens to guide the growth and direction of their own communities. Determining the kind of society within which communities have to live, means questioning, debating and controlling the direction of the work of scientists and other professionals, which might in the long term have radical effects on the community.

Although the majority view may occasionally prove to be incorrect at a later date, such instances are exceptions rather than the rule. While we appreciate that it may be difficult for journalists to take a poll of scientific views, it is in the public interest that journalists identify, whenever possible, a majority view.

Scientists and the media, The Royal Society, 2000

The growth of the *Guidelines* through the Royal Society and the Royal Institution, and finally through the SIRC and then into

the hands of the Science Media Centre, marks the development of a terrible arrogance, which is abroad in the community of corporate science. Members of that community want to outlaw political, personal and alternative views on health. They wish to dismiss personal views on illness and to restrict the writing, even fictional writing, about science entirely to observations about 'successful' science.

They are seriously determined to exclude the personal narrative of illness and treatment, illness and cure, and to outlaw the stories of curers, herbalists and homeopaths, and original scientific research, which is inevitably the minority. In exactly the same manner as criminals have been denied their right to a narrative history in case it is seen as justification, those who would offer any subjective criticism of science or medicine must now be silenced. It is necessary to control 'bad' narratives, which do not coincide with the profitable projects of the corporations, because they might disturb our perception of the work and motives of those professionals.

Some risks are acceptable, others are not, and much depends on circumstances and subjective factors. The very question "Is it safe?" is itself irresponsible, since it conveys the misleading impression that absolute safety is achievable. It also defeats its own purpose, since the only possible answer is "No".

Scientists and the Media, The Royal Society 2000

And what of the minority view, which is implicit in any democracy and only previously dismissed in totalitarian systems? Will it no longer be possible to report a variety of therapeutic approaches? The pharmaceutical approach will, of course, represent the majority view; so what of the minority within that majority, those who suffer adverse reactions to allopathic medicine? Have competing alternatives no place in research? As it

is they have neither ready funding nor access to select journals? Are reports of them now to be censored?

Then, what of research that reaches critical and uncomfortable conclusions, such as those on environmental illness, almost inevitably representing a minority view? Where would we be with research into smoking and lung cancer if corporate science had controlled it in the 1960s? *Ah, yes, I forgot, we have a young impressionable Dr Doll to blame for that; it was all a terrible mistake.*

In addition to negative images of real science, the media purvey an exotic range of material on and beyond the fringes of scientific respectability: horoscopes, the “paranormal”, and much of what appears under the banner of health ... as the Royal Astronomical Society puts it, too much of this sort of thing ‘tends to *weaken in the public mind* the validity of the rational approach to problems.’ (Italics added.)¹⁰

The House of Lords Report, Science and media, Chapter 7

What of investigative writing about science, such as the ‘monumental’ 50,000-word article by Pulitzer-Prize-winning journalist, John Crewdson, published by the *Chicago Tribune*, which ‘put science under the microscope’ and questioned Robert Gallo’s role in the discovery of HIV?¹¹ What of criticism?

In Sweden, Lennard Hardell is one of a small number of scientists who have managed to persuade government to ban herbicides containing dioxin. Hardell is still fighting his corner

10 Talk of ‘weakening of the public will ... sorry, public mind ... made me wonder whether this quote had got into this essay by accident. Was it a quote from Germany in the 1930s?

11 Discussed by Serge Lang in *Challenges* and published with additions as *Science Fictions: A scientific mystery, a massive cover up, and the dark legacy of Robert Gallo*. John Crewdson. Little Brown and Company. USA. 2002.

after Sir Richard Doll, at the time a paid consultant for Monsanto, wrote to the judge in the Australian Royal Commission Inquiry into Agent Orange, suggesting that Hardell's 'minority' views should be struck from the record.

While many developed countries, even the United States, are considering how we might encourage and support whistleblowers, the British scientific establishment is desperately *guidelining* them out of existence. If you were a drugs company whistleblower, would you go to the BBC, the Royal Society, the Royal Institution, Sense About Science, the Science Media Centre, No? What about *Private Eye*? Sidelined? Yes, I see. Hmm.

And what of political debate? Just because the Revolutionary Communist Party has replaced politics with a quasi-religious faith in science, do we all have to do the same? Are we not longer to be allowed political choices because the RCP cadre has decided that politics has ended? Will corporate science now advise the correct course of action on health, on vaccination, on the taking of pharmaceuticals?

The Royal Society supports this proposal so does SmithKline Beecham.

The House of Lords Report, Science and media. Chapter 7

Everything was done in the *Guidelines* to give them an almost statutory authority. In fact they had been put in published shape by a small group of individuals who, despite being associated with celebrated organisations, now frequently worked in partnership with the pharmaceutical vaccine industry, the Biotech industry and major chemical companies.

The controversy over GM crops and foods put science on the front pages of the newspapers to an unusual extent for most of 1999. Media handling of the story has been fiercely criticised: Sir Robert May told us that newspapers have had 'an extraordinarily one-sided presentation of the facts.'

The House of Lords Report, Science and media. Chapter 7

By the patent lack of any discussion with anyone who might be said, even remotely, to have alternative views, the creation and *issuing* of the *Guidelines* could not be said to be inclusive in any form.

Save British Science demands that science must receive more exposure in news and current affairs, in order to be perceived 'more for what it is — a part of everyday life.' They demanded that the panels of current affairs discussion programmes should include more scientists; that scientists in fiction should be more realistic; that there should be more and better coverage of the process of science.

*Could this be the end of science fiction?*¹²

The *Guidelines on Science and Health Communication* look forward to a time when there will be only mainstream reporting and practice in health matters, when all health matters will be viewed only through a scientific lens. Permission for any study from an ethics committee, double-blind placebo controlled trials, correct procedures for peer review, publication in a mainstream journal, and finally reports in the media, in lay language, controlled by regulatory observers ... *1984 and after?*

12 Are you up for that Mike, when we eventually take power? Say, Bureau of State Correctness of the Portrayal of Scientists in Fiction. Good job. Lots of work. Oh, yes, sorry I forgot, you're a doctor, best stick to that.

Consider the idea that corporate science is the only lens through which we are allowed to observe and understand the working of our bodies, the only way we diagnose or treat ill health. Consider the proposition that the *Life Sciences* have greater authority in our world than religion, culture, politics or the individual's emotional identity; this is a consequence of a number of factors. Perhaps the primary one, however, is the development of the contemporary pharmaceutical company and its insinuation into all aspects of life.

The *Guidelines* are, in effect, an attempt by science to impose a scientific construct on all health and the creation of a break wall to censor criticism of corporations that cause either environmental or iatrogenic health damage.

If these *Guidelines* had been arrived at by discussions generated within the scientific community, and were to be used by that community to regulate itself, they would be greeted with relief by all of those affected. When, however, the standards are designed by people beyond science, who have entirely political motives, they must be viewed with nothing short of combative hostility. They should be torn up and burnt by demonstrators, preferably in front of major newspaper offices.

Most pointedly, when these *Guidelines* are backed by the very corporations that are sheltered by them, and that, like the pharmaceutical companies, consistently disguise or bury or fail to make public their research results, they jeopardise the very soul of scientific enquiry. When such guidelines are used to censor other kinds of research, for instance from lay patients, or qualitative or participatory or biographical work, they deprive science of the humanity it has traditionally professed, and the little that it actually has.

Information that is misleading or factually inaccurate can cause real distress to vulnerable groups. Misleading information that provokes unfounded public reactions (eg, reluctance to undergo vaccination) can be said to cost lives.

Guidelines on science and health communication

What about correct, factually accurate information that provokes well-founded public reactions (eg, reluctance to undergo vaccination)? Does this also cost lives? What are scientists with a dissident view to do? Clearly they should wipe their mouths and walk away. If they don't, what will the consequences be? Will they be accused of endangering public health, as was Professor Peter Duesberg for daring to question the role of HIV in Aids. Will they be dragged before a court, charged with manslaughter, perhaps? Or will the offender just be fingered by government and corporation stooges in the pages of New Labour's fawning media? Will offending scientists have their phones tapped, their mail opened and funding denied? How far are we from the Gulag?

The introduction to the *Guidelines* exhorts, 'both journalists and scientists concerned with the general reporting of research results should explicitly consider the likely public reaction and should make appropriate decisions about the manner in which reports are made.' Only a thought, but was this culled from an old 'D Notice' Committee Report, or maybe contemporary anti-terrorist legislation?

CHAPTER ELEVEN

Science Sans Sense

If you are to have guidelines to constrain the press, you need enforcers, and Sense About Science have appointed themselves to that role. Lord Dick Taverne set up Sense About Science in 2002, the same year he attended the annual Bilderberg meeting. Bilderberg is the lobby group to end all lobby groups, the closest body we have to a shadow transatlantic government. Its meetings serve the purpose of creating an aura of consensus about globalisation, and persuading visiting politicians and other men and women of influence that it is an entirely good thing and, anyway, inevitable. It is about personal greed, power and naked self-interest. Any higher morality or kinder, more inclusive world vision plays no part, and dissent is not countenanced.¹

Among other British personalities involved in organising the Bilderberg conference, or simply attending that year, were, interestingly, Lord John Sainsbury of Preston Candover, who, though having remained a Conservative, seems to have a community of interest in some areas of science with his brother, Lord David Sainsbury of Turville, under-secretary of state for

¹ A very very short and unfair summary of some nice writing on <http://www.bilderberg.org/tonyhon.htm> run by the redoubtable Tony Gosling.

science and innovation;² Lord Roll of Ipsden, one of the most prominent figures in Bilderberg over the years, who died in April 2005, aged 97; and Martin Taylor, the head of Barclay's bank until he was pushed off the board, one of Blair's closest advisers on finance and the public services.

Taylor's CV includes stints as chief executive of Courtaulds Textiles, chief executive of Barclay's Bank, international adviser to Goldman Sachs, and now chairman of the UK bookshop giant, W.H. Smith. Taylor is part of 'New Europe', a group of politicians and business leaders who, while being pro-Europe, are strongly opposed to Britain joining the single currency. Alongside Martin Taylor in this group are ex-SDP and Labour politicians Sirs David Owen and Dennis Healey, Jim Prior and Lord Sainsbury of Preston Candover – all, at some time, Bilderberg attendees.

On leaving PRIMA Europe and GPC, to show clearly that he was not pushing the interests of their corporate clients, Lord Taverne began championing these interests through the Science and Technology Committee in the Lords.

Taverne's background in libertarian think tanks and anti-environmentalist US organisations, together with his friendship with David Sainsbury and his background in PR and consultative companies, not to mention Bilderberg and the Trilateral Commission, made him exactly right to set up Sense About Science. He got the emergent organisation charitable status, and from the beginning was its chairman. It appointed advisory and management boards, and took on a staff of four.

2 One of John Sainsbury's Trusts, Linbury, has been funding Professor Wessely in his battle to drive ME sufferers mad.

Whose Sense and Whose Science

There can be no doubt that Sense About Science, a lobby organisation funded entirely by corporate interests and boasting on its board a number of people who have access to the Prime Minister's Policy Unit, is primarily a crisis management PR entity.

As detailed in Part Two, a number of PR companies work for New Labour as well as for corporate clients, and it is more than probable that a number of agencies are behind the New Labour lobby to protect the science industry as well as working on accounts for ABPI members. The support of Hill and Knowlton, the agency whose clients include the three major MMR vaccine companies, for *spiked*, would be a good example of this.

However, there are some positive reasons why one crisis management communications company in particular might have been involved in the coming together of Taverne's front groups involving ex-RCPers, the Royal Society and the Royal Institution.³

Regeister Larkin is a PR company, co-founded by Mike Regeister and Judy Larkin, both of whom have appeared at events organised by the Institute of Ideas (IoI), the ex-RCPers

³ Two groups set up in 2001 and 2002 are worth noting here in their relation to science, although neither group appears to have been involved in setting up the Taverne-exRCP lobby groups.

Foresight Communications Ltd was established in 2001 by Mark Adams OBE. Adams had been a private secretary for parliamentary affairs to John Major and then for Tony Blair for six months. Adams also chairs the policy committee of the London Chamber of Commerce and Industry. Foresight helped to launch the corporate front group the Scientific Alliance. It appeared to get mired in right politics and did not become a major PR company.

Northbank Communications was created in 2002 from a merger of STMP Marketing Solutions Ltd and Charles Consultants, to become a fully integrated communications consultancy, focusing on science-based sectors. As (*cont.*)

front organisation funded by Pfizer.⁴ It is one of those companies that specialises in 'risk management', quickly stepping in to manage media around a crisis, and hopefully to try to salvage the reputation of a company or an industry. While these agencies have continuing accounts with companies and industries that are *often in crisis*, their work and their philosophy is different from that of agencies that simply reflect a consistent and even relationship between companies their distributing partners and consuming citizens.

Reputation is primarily a matter of perception, and it is in perception that crisis management PR companies deal. They try to ensure that the public perceives their client companies in a positive light. This can, of course, be done only by manipulating information in favour of some and against others.

In March 2005, Andrew Griffin, a director of RL, gave a seminar presentation with Andrea Dawson-Shepherd, director of **Corporate Communication** for Cadbury Schweppes. The title of their presentation was **Crisis Management: Managing Issues and Minimising (the perception of) Risk**. The seminar was held at the Institute of **Social Psychology** in the London School of Economics. It was part of the Social and **Public Communication** Seminar Series, Assessing the **effectiveness of communication: Methods and metrics for evaluating public relations**

(cont.) part of the merger, Northbank attracted investment and boardroom support from Pembroke Partners. Northbank advertises a wide range of specialist skills, including science communications, corporate communications, financial PR/IR and issue management. Their concentration is on the new biotech businesses as well as the older pharmaceutical drug-producing companies. Clients include Oxford BioMedica plc, Morphochem AG, Solexa Ltd, Cambridge Antibody Technology plc.

4 In July 2000, Judy Larkin took part in 'Interrogating the Precautionary Principle', an Institute of Ideas event at the Royal Institution. This was billed as: 'eminent scientists, social scientists and writers will question the premises of the precautionary principle.' The event was 'convened' by Susan Greenfield of the RI, and Tony Gilland and Helene Guldberg of the exRCPers Network.

and corporate communication. The words in bold type in this paragraph are good general pointers to the work and future direction of crisis management PR companies.

With companies or industries that are frequently in crisis, as the pharmaceutical companies have been over the past decade, crisis management agencies need not only to project an unreal consensus of good news, but also to play an incisive part in denigrating any research work or authoritative opinion which reflects badly on their clients. Regester Larkin has, for instance, worked for the Dti on the perception of the nuclear industry, which has attracted low esteem over the years.⁵

Harry Swan, a previous press officer for Monsanto, was taken on board by RL to fight Monsanto's corner for GM crops. Swan's blurb on RL's web site read: 'Working for Monsanto at the height of the controversy surrounding GMOs, Harry gained firsthand experience of crisis and issues management. He built up an expertise in scientific communication which he now applies to clients such as the BioIndustry Association.'

Swan got himself into deep GM doo-doo when he liberally accepted the challenge of the Millenium Debate (eventually held in July 1999) at the Oxford Union. He agreed to face Dr Arpad Pusztai in a debate about GM animal feed, having first asked for a change in the wording of the title, but was then slapped on the wrist and taken home by his senior at Monsanto, who told the Millenium Debate that the company could not take part. Swan later told the press, 'If we were to lose a debate on GM animal feed at the Oxford Union, and this were to be

⁵ See *Reputation, perceptions and the 'vanishing workforce': a report on a study of young attitudes to oil & gas, nuclear industries*, February 2005, by Andrew Griffin, managing director, Regester Larkin Ltd. This study and the report resulted from a contract with Cogent SSC, the Sector Skills Council for the Chemical, Nuclear Oil & Gas, Petroleum and Polymer industries, which was funded by the Dti.

reported back in the US and be seen by our customers there, it could be very damaging.’ Swan, when a risk Management Consultant for Regester Larkin, represented the company at a Science Media Centre meeting at the Royal Institution.

In July 2005, Mike Regester took part in a BBC discussion with Chris Grimshaw from Corporate Watch and Tony Gilland from the Institute of Ideas, to talk about how companies deal with crisis situations and salvage damaged reputations. The programme was introduced thus: ‘Recent US research claiming that farmed salmon contains higher levels of dioxins than wild salmon has been widely reported. It’s the latest example of a public safety crisis to hit the food and drink industry. For each alarming story published there is a back-room army of communication professionals trying to mop up the damage.’ So much for science.

Regester is the author, with Larkin, of *Risk Issues and Crisis Management*, published by Century Hutchinson, which is internationally regarded as a leading work in the field, and with Neil Ryder, *Investor Relations*.

Larkin is a Fellow of the Royal Institution (RI) and a board member of the Washington DC-based Issue Management Council, whose members include AstraZeneca, and Glaxo-SmithKline. Its ‘partners’ include Shell and the Philip Morris Management Corporation. Her most recent book, *Strategic Reputation Risk Management*, was published by Macmillan in November 2002. She has written for and appeared at meetings organised by the Association of Insurers and Risk Managers (AIRMIC). A former head of corporate relations for Logica plc, she has held board level positions with a number of major UK and US consultancies, and has worked extensively in Europe, the United States and Australasia. Her client experience includes working for Shell, GSK, IBM, Vodafone, Cable & Wireless, Bayer, Baxter, 3M, British Airways, Sony Corporation and British Nuclear Fuels (BNFL).

In 2003, Larkin spoke at the Birmingham Business School's Centre for Research in Brand Marketing on the subject of 'Strategic Reputation Risk Management.' 'Reputation influences who we buy from, work for, supply and invest in. People today are much less trusting – particularly in Western democracies. At the same time, businesses operate in a complex global environment, where both risk and opportunity are worked out in the glare of 24/7 media. Today, a reputation that takes years to build can be destroyed in a moment – but take decades to recover.'

Larkin is also on the advisory board for King's College's Centre for Risk Management (KCRM), where she advises on risk communication. The board consists of academic experts and leading figures from both the public and private sectors in Europe and the United States. One of the departments at KCRM organises studies about risk and mobiles phones. The mobile telephones and mast-siting controversy is covered by the Mobile Telephones, Risk and Communications project, in which professor Simon Wessely is involved. It describes itself as rapidly becoming 'a centre of excellence for European risk management research', which pursues a scientifically-based approach to risk (perception) management in environmental, technological, health, safety, food, business and terrorism contexts, as well as R&D that is theoretically, methodologically and empirically grounded.

According to the KCRM site, there are three main areas of research in relation to mobile phones and masts:

- assessment of the use of 'precaution' in regulatory policy, its impact on regulatory decision-making and public acceptance of risk.
- evaluation of the success of the UK government and mobile phone industry attempts to communicate the risks associated with mobile communications technologies.

- analysis of policies aimed at modernising the UK planning system and resolving mobile telephone mast-siting conflicts in terms of risk.

The projects at KCRM have nothing to do with epidemiology or the real measurement of physical illness. The starting point is how people 'perceive' the effect upon themselves of mobile phones and the relationship of this to their perception of risk. What centres of this kind are measuring is *what industry can get away with*.

At the same time as measuring this, their very presence and their funding militate against any real bio- or physical health epidemiology. Their evidence is gathered from people who are actually ignorant of the health damage that might occur - to themselves as well as others.

Other unbiased advocates of a balanced view of risk on the King's Centre advisory board include: Dr Richard Taylor, head of health, safety and environment at British Nuclear Fuels and the Centre's senior adviser on UK regulation; Katie Wasserman, vice-president, marketing, Audiovox Corporation and the Centre's senior adviser on mobile telephone corporate affairs; Martina Bianchini, director, EU Government Affairs and Public Policy, Dow Chemicals Europe and one of the Centre's senior advisers on European Affairs; Dr David Slavin, senior director, Pfizer Global Research and Development and the Centre's senior adviser on pharmaceutical affairs.

Judy Larkin is also on the advisory board of another Anglo-American risk management PR company, called ECHO. ECHO is very large, with an extensive client list that includes AstraZeneca and Zeneca Agrochemicals, Bayer, Glaxo Wellcome, Hoffmann-LaRoche, Merck Sharp & Dohme, Novartis, Novo Nordisk, Hill and Knowlton, Dow Chemicals, Cellnet, Pfizer, Parke Davis and Rhône Poulenc. ECHO has worked for a number of government departments, including

the Dti, the Ministry of Defence, Industrial Development Board for Northern Ireland and the Advertising Standards Authority.

Claire Snowdon, a senior consultant for Regester Larkin, in the words of the company's web site, 'helps clients to communicate around and manage public perception of risk.' Caitlin West, another senior consultant, has also developed a particular expertise in the mobile telecommunications and energy sectors, managing a consultation programme for BT and advising energy companies such as Shell and Total on how to present sensitive issues to their stakeholders. West has managed media and profile-raising initiatives for clients such as the BioIndustry Association and the KCRM.

For some years now, there has been a revolving door between the media corporations, especially the BBC and PR crisis management companies. The advantages of this are obvious: people from the media can speak to people in the media. People from the media can tutor corporations on how to present things to people in the media. Regester Larkin has Julian Bishop, who is termed a media associate. 'Julian now divides his time between coaching Regester Larkin clients on how to manage hostile media interviews and working as a freelance producer for the BBC on the 10 O'Clock News and a number of business programmes.'

Rachel Hicks, another Media Associate at Regester Larkin, was a journalist for fifteen years, ten of which she spent at the BBC. According to the web site, she had the dubious pleasure of interviewing people like Tony Blair and Sir Richard Branson. 'Having left the corporation, Rachel now divides her time between freelance journalism and coaching Regester Larkin clients on the techniques required to deal with challenging media interviews.'

Look at Regester Larkin's analyses of the following crisis situations: Toxic toys – understanding and anticipating risk.

Mobile telephones – communicating the risk. AIDS drugs in Africa – managing emotive issues. Nanotechnology – proactive communication to avoid the fear factor. Ford and Firestone – confusion of ownership slows the crisis response ... Of course, ‘communicating the risk’ is pure double-speak for ‘denying the risk.’

It was from research jobs at Regester Larkin that Tracey Brown and Ellen Raphael, both former graduate students in Furedi’s department at the University of Kent⁶ and ex-RCPers, moved on from their jobs to administer the newly set-up Sense About Science.

Given that two RL employees became the organisation’s first administrators, and that Larkin herself is a member of the Royal Institution, it seems most probable that the organising intelligence behind Sense About Science was Regester Larkin. Further, given the involvement of figures highly placed in both the pharmaceutical industry and Government, it seems more than probable that Sense About Science is partially a creature of New Labour and grew from within the Dti, probably with the involvement of the Prime Minister’s Policy Unit.

It comes as no surprise that one of the case analyses that Regester Larkin shows on its web site, concerns MMR. The case example is entirely to do with the Government’s handling of the problems thrown up by Andrew Wakefield’s work. To be fair, whatever Regester Larkin’s involvement, the case history is well balanced. It accuses the Government of handling the issue like a bull in a vaccine laboratory, of ‘fighting fear with fear’ and ‘pouring oil on the fire’ by warning parents that their children could die if they didn’t get the vaccine, and inevitably increasing anxiety and consternation. It makes clear that scientific review had to be the first step in resolving the crisis, but

⁶ George Monbiot, ‘Invasion of the Entryists,’ the *Guardian*, December 9 2003.

predictably accepts without question the MRC rebuttal review of Dr Wakefield's science, and suggest that the Government should have built quietly on this.⁷ At the same time, they say that the denial of the single vaccine to parents who wanted it was a PR blunder.

You can't always believe what you read on PR company web sites, and further this one gives no hint of the negative publicity that might have been expended on Dr Andrew Wakefield. However, their analysis throws into stark relief the militaristic solutions embarked upon by New Labour and the ABPI. The first option that came to mind with both seems to have been the blanket bombing of Dr Wakefield, followed by a Junta approach in telling the population what it had to do and what the punishments would be if it did not. This approach grows organically from the corporate philosophy of Taverne and Sense About Science and the communist mindset of the ex-RCP Network.

None of this, however, should take us away from our understanding that the scientific community should have been the first to address the matters brought up by Dr Wakefield, and that any censure of or agreement with his research could have been bestowed only by independent scientific investigators. There is no place in science for spin or politically inclined PR companies or Lobby groups.

The fact that SAS, Taverne and Regester Larkin all have the same vested interests in suggesting that not only Wakefield, but litigious parents of vaccine-damaged children, were conscious agents in an organised offensive against the pharmaceutical companies, the Government and vaccination per se, indicates a level of joined up thinking.

⁷ Regester Larkin's web site.

The Trustees

Sense About Science is governed by a board of trustees, which meets quarterly. Its main declared objective is to advance the education of the public in any branch of scientific research (including social science), to disseminate useful information about research, and to promote social understanding of, and interest in, the creation, presentation and use of scientific research.

Trustees discussed in other parts of this essay are: Lord Taverne, QC, (chair) [see pages 69-75], Dr Michael Fitzpatrick [see pages 37-67], Professor Chris Leaver, CBE FRS [see page 201], Professor Sir Brian Heap, CBE FRS [see page 141], Dr Peter Marsh [see page 117]. Other trustees include: Dr Mark Matfield (treasurer), Baroness O'Neill of Bengarve, Lord Plumb of Coleshill, Dr Christie Peacock, Professor Dame Bridget Ogilvie, FMedSci FRS (vice-chair) and Ms Diana Garnham. Below are profiles of four further trustees.

Dr Shereen El Feki has been Healthcare Correspondent for *The Economist* since 1998. Her interests include medical research, the pharmaceutical and biotechnology industries, international healthcare policy, medical ethics, agribusiness and intellectual property.

The Economist also trades in market intelligence, a large part of which is about the pharmaceutical industry. It organises conferences especially for insiders in the industry and people interested in investing in the industry. It is also deeply locked into the Trilateral Commission while traditionally providing the rapporteurs for the Bilderberg. A number of Shereen El Feki's interests reflect its involvement.

The Genetic Age Festival in 2004 took place at the Royal Institution, and was organised by the Royal Institution and the ex-RCP Network. Dr El Feki chaired all the sessions, which included discussions on genetics and health, and



genetics in crime, race and behaviour. The event was opened by Dr Ian Gibson MP, chair of the House of Commons Science and Technology Select Committee.

Other panellists included Fiona Fox, head of the Science Media Centre; Dr Duncan McHale, senior director, Clinical R&D, Pfizer; Professor Sir Michael Rawlins, chairman, National Institute for Clinical Excellence; Dr Paul Debenham, director, Life Sciences, LGC; Professor Terrie Moffitt, professor of social development, Institute of Psychiatry; Dr Matt Ridley, honorary president, International Centre for Life and on the Advisory panel of Sense About Science; Professor Colin Blakemore, chief executive, Medical Research Council and on the advisory panel of Sense About Science.

Dr El Feki is also a working group member of Pharma Futures,⁸ which describes itself as ‘a scenario planning exercise, designed to permit industry and its investors to assess and successfully act on the long-term risks & opportunities facing the pharmaceutical industry.’

The pharmaceutical sector faces challenges to its business model in all markets. The key to better managing this dilemma lies in adapting the sector’s business model to fulfil the needs of the industry and its investors, and those of society and the growing recognition of improved global health as a public good. All of this in the context of unprecedented scientific opportunity for new therapeutics that could vastly improve human health around the world.⁹



8 Other working group members include: Stewart Adkins, Senior Analyst, Pharmaceuticals, Lehman Brothers; Caroline Dorsa, vice-president and treasurer, Merck & Co. Inc; Lise Kingo, executive vice-president, Stakeholder Relations Novo Nordisk; Sarb Klair, managing director, Global Healthcare Equity Research, Citigroup Asset Management; Eloan dos Santos Pinheiros, senior adviser at the Oswaldo Cruz Foundation and ex-director Farmaguinos, Brazil; Takashi Shoda, president and representative director, Sankyo Co. Ltd, Japan; Andrew Witty, president pharmaceuticals Europe, GSK.

9 Pharma Futures’ web site.

In May 2003, El Feki was an invited attendee at a conference hosted by the Atlantic Bridge at Merton College, Oxford, entitled 'Scientific Research and Medical Provision: The Anglo-American Dynamic', which mainly discussed the future of biotechnology, pharmaceuticals and the life sciences. Speakers included Dr Liam Fox MP, Shadow Secretary of State for Health, whose talk, 'Critical Issues in Biotech and the Pharmaceutical Industry', centred upon competitiveness in the European and US pharmaceutical industry and '*Convergence between biotech and the pharmaceutical industry*'. Dr Peter R. Farrow, senior director of science policy at Pfizer Global Research and Development spoke on 'The Threats to Development: Regulation, Finance and the Militant Activists.' In his summary he asked, 'How best can we tackle the destructive force of activists? Other speakers were: Dr David J. Brickwood, vice-president of Government Affairs, Johnson & Johnson, Spiro Rombotis, chief executive, Cyclacel Ltd; Kevin Rigby, vice-president of public affairs, Novartis Pharmaceuticals; Dr Timothy Morris, Head of Comparative Medicine, Glaxo-SmithKline.

The PR and communications companies that were invited to this gathering were: Chris Mockler from GPC International; Andrew Gay, director of marketing, Huntingdon Life Sciences; Mark Davies from APCO; Dr Ted Griffith of the BRET Biomedical Research Education Trust (which sends speakers free to schools to impress upon children the need to mutilate and torture animals), and Pallab Ghosh, BBC science correspondent, who is often associated with Sense About Science and the Science Media Centre.

Professor Janet Bainbridge, OBE (senior vice-president Government & Europe, CPI). Interests: Process Industries Centre (Life Sciences), chief executive of the European Process Industries Competitiveness Centre – a not-for-profit company funded by public and private income, whose

→

activities in research, development, training and technology transfer support the Process Manufacturing industrial base with a view to increasing its competitiveness. She is also responsible for the Food Technology Transfer Centre, which works with the regional Food and Drink Cluster supporting the food manufacturing industry.

Professor Bainbridge has chaired the Government Advisory Committee on Novel Foods and Processes since September 1997. She was also co-opted on to ACRE (Advisory Committee on Releases to Environment), is a member of the Engineering and Physical Sciences Research Council and of EPSRC Resource Audit Committee, was formerly on the Food Chain and Crops for Industry Foresight Strategic Panel, and chairs the Debate Task Force of the panel. She is an international expert on food regulatory processes.

Until June 2001, she was director of the School of Science and Technology at the University of Teesside. She is currently a member of three large European research consortia.

Professor Sir Brian Heap, CBE FRS, like Simon Wessely and a number of other scientists, hovers on the edge of British and Western defence policy. Once scientists get to the top of their tree, they can get dragged or go willingly on to NATO committees and such like. Sir Brian Heap is the UK representative on the NATO Science Committee. In a NATO video he explains that, while the original purpose of the NATO Science Committee was to bring Soviet and Western scientists closer together, it is now, with the end of the Cold War, mainly concerned with helping with international security.

According to Sir Brian, there are both hard and soft security issues. The hard ones, such as scientific ways of detecting explosives, are of course very important. However, such things as 'winning the hearts and minds of people in disad-

→

vantaged countries,' by making sure, for instance, that these people have sufficient food, is also very important. 'We refer to this as "food security",' Sir Brian carefully explains. There seems, however, to be a contradiction between the hard and the soft with which Sir Brian can't really get to scientific grips.

One of the soft issues is that of making sure that 'the environment is safe ... particularly after military activities.' There is also the 'issue of how to look at the possibility of developing new methods of removing pollution from the environment.' Of course, this is all cobblers, perfectly befitting a member of the Royal Academy. When push comes to shove, I don't think that we will see Sir Brian and many of his friends from Sense About Science rushing off to Iraq to ensure that those Iraqis who were not killed by the heavy bombing, can live free from the horrors of depleted uranium – it's not really their kind of thing, is it?

From this interview, we can see that Sir Brian has strong views about the integrity of science and whether its research can be used for good or ill. While this question doesn't seem to be quite so significant when he and his mates are discussing GM crops, it is obviously of real importance when we are talking about military security.

Now with the tremendous growth in the biological sciences, and particularly in the genetic sciences, there are questions that we have to address, and one of those, of course, is the issue of biological weapons, and the extent to which the new knowledge that is emerging could be abused and used in a way that is going to be dangerous . . . And so, for example, in my own case, I've been promoting the thought that when we receive grant proposals, or where papers are published and sent to scientific journals, scientists should be asked the question, is there any possibility that this work could be used in ways that would be damaging to society rather than positive?

→

Could this be a break through in scientific ethics! 'Come on, Sir Brian,' I can hear your colleagues call in the background, 'We would never have developed the atomic bomb if we'd taken that namby-pamby attitude.'

Sir John Maddox FRS was editor of *Nature*, first in 1966, and then between 1980 and 1995. He is now the scientific journal's editor emeritus. In his second stint as editor, he was involved with the magician James Randi in trashing the work of French allergy researcher Jacques Benveniste's at Benveniste's INSERM laboratory. He was also deeply involved in the censorship row that raged over the scientific work of Peter Duesberg when he suggested that perhaps HIV was not the sole cause of AIDS. Maddox is now a fully-fledged member of the management committee of the Committee for the Scientific Investigation of Claims of the Paranormal (CSICOP), along with other scientific giants such as Dr Stephen Barrett, the US quackbuster and non-practising psychiatrist.

In 1972, Maddox wrote one of the first Good News books,¹⁰ *The Doomsday Syndrome*, which concluded that those who suggested that the environment might suffer from pollution were misguided doomsters. In the book, Maddox particularly derided ideas about global warming and got solidly behind chemical pesticides. Maddox's view of any rising environmental problem is not that it might be prevented, but that with the use of advanced technology, we can always dig ourselves out a future.

He is still expressing the populist and optimistic view that if some catastrophe were identified as closing in on us, mankind could jettison the rest of the eco-system, clone itself and go on living. He doesn't say what kind of life it would be.



¹⁰ John Maddox, *The Doomsday Syndrome*, Magraw Hill, 1972.

My guess is that if the question of human extinction is ever posed clearly, *people will say*¹¹ that it's all very well to say we've been a part of nature up to now, but at that turning point in the human race's history, it is surely essential that we do something about it; that we fix the genome, to get rid of the disease that's causing the instability, if necessary we clone people known to be free from the risk, because that's the only way in which we can keep the human race alive. A still, small voice may at that stage ask, but what right does the human race have to claim precedence for itself. To which my guess is the full-throated answer would be, sorry, the human race has taken a decision, and that decision is to survive. And, if you like, the hell with the rest of the ecosystem.¹²

Although *Nature* is considered the foremost scientific magazine, the views of Sir John are often expressed in the most personal of terms, and science is simply a word that describes his personal beliefs. One of the most consistent victims of Maddox's personal views about life and the universe has been Richard Sheldrake. Sheldrake's conclusions that both humans and animals can communicate with each other without a verbal language, have become the focus for much anger and resentment among the science amateurs of CSICOP and the proliferating international skeptic movement.¹³ In 1981, reviewing Sheldrake's first book, *A New Science of Life*, in *Nature*, Maddox suggested that it was a prime candidate for burning. Maddox has gone on to criticise all the scientific studies carried out by Sheldrake into non-verbal communication.¹⁴ In an interview broadcast on BBC television in 1994, Maddox said about Sheldrake, 'he is



11 'People will say,' is a bit like going to see the doctor and saying 'my friend has a problem.' Why doesn't Maddox just say 'I would say'?

12 http://www.edge.org/3rd_culture/bios/maddox.html

13 Sheldrake, who is happy to have open public discourse with his CSICOP antagonists, details on his web site the main sceptics who have attacked his work, including Maddox, J. Randi, and L. Wolpert (mentioned below.)

14 <http://www.sheldrake.org/controversies/maddox.html>

putting forward magic instead of science, and that can be condemned in exactly the language that the Pope used to condemn Galileo, and for the same reason. It is heresy.' This is an extraordinary analogy from a scientific skeptic – and a resounding own goal. Galileo, you will remember, was prosecuted by the Roman Catholic Church for daring to question the belief that the sun and all the planets revolved around the Earth. Galileo, not Pope Urban VIII, had it right. Throughout history, many of the 'heretics' who have dared to challenge the orthodoxy, have over time been vindicated. Think of Charles Darwin. Who next? Wakefield? Duesberg? Sheldrake? □

The Advisory Board

The advisers to Sense About Science are described by the organisation as a 'network' of individuals who might be consulted on various issues. They are almost without exception people who support corporate science and on the whole eschew views that technological development can endanger human health. The opinions of two of the board, Professor John Adams and Professor Tallis are discussed in other parts of this book. The interest of the rest, while primarily concerned with biotechnology, include a range of scientific and industrial specialities, especially those that might imminently find themselves on the front pages of the papers, or on television news bulletins. Most of the specialities, however, contain a dash of risk analysis – and why not? It's a very simple speciality.

Mr Richard Ayre, a journalist, became deputy chief executive of BBC News. He was with the BBC until the end of 1999 when he resigned and became a 'consultant in media ethics.' During the row between the BBC and the Government over Saddam's WMD capacity, Ayre called for the resignation of director general Greg Dyke. In March 2000, Ayre was appointed to the board of the Food



Standards Agency, bringing the total number of board members at that time to fourteen.

Mr Peter Bell was former controller of policy at BBC News. He joined ex-RCPers and Lord Taverne in advising the Social Issues Research Centre (SIRC) on its *Guidelines on Science and Health Communication*. The other BBC staffers who joined the group were Philip Harding and GP Graham Easton, whom we met in chapter 10.

Dr Nicola Gray is a lecturer in pharmacy practice at the University of Cardiff. She is also a tutor at the Academy of Pharmaceutical Sciences (APS). This is an organisation dedicated to the advancement of the pharmaceutical sciences in the UK. It is sponsored by 11 pharmaceutical or bio-pharmaceutical companies, including Glaxo-SmithKline, Pfizer, AstraZeneca, 3M Healthcare, Celltech.

In 2001, Dr Gray was awarded a Harkness Fellowship in International Health Care Policy by the Commonwealth Fund of New York City. She conducted a comparative study in New York, looking at where people obtain information before attending their doctors' surgeries. She is of the opinion that young people have a deficit of health literacy skills, which is linked to the challenges they face in finding relevant and reliable online information.

Her studies come at a time when Edzard Ernst, professor of complementary medicine, has been trying to find a way of censoring alternative medical information on the Internet. She is one of the authors of a paper entitled, 'Adolescents' knowledge of and beliefs about complementary and alternative medicine: a qualitative study.'¹⁵



15 Sesselberg TS, Wilson KM, Gray NJ, Klein JD. 'Adolescents' knowledge of and beliefs about complementary and alternative medicine: a qualitative study.' *Journal of Adolescent Health* Vol. 32(2): 126. (February 2003). Other papers include: Gray NJ, Klein JD, Sesselberg TS, Cantrill JA, Noyce PR, (cont.)

Lord Hunt of Chesterton, aka Professor Julian Hunt, chairman and non-executive director, is a professor of climate physics at UCL, a Fellow of the Royal Society, and a consultant to Risk Group Ltd on scientific matters. He is a member of Cambridge Environmental Research Consultants Ltd, of which he has a 25% share, and whose clients include: BP, AstraZeneca, ICI, Shell and UK Government departments and agencies.

Charles Patrick Fleming Jenkin, Baron Jenkin of Roding, briefly Conservative Minister for Energy in 1974, is a consultant to the Sumitomo Trust and Banking Company Ltd, and chairman of the Foundation for Science and Technology. The Foundation's purpose is to provide a neutral platform for debate of policy issues that have a science, engineering or technology element. Professor Mark Walport, Lord May and Sir John Krebs are all also members of the Foundation's Council and are associated with either Sense About Science or the Science Media Centre. The Foundation organises dinner/discussions and workshops on relevant issues when Parliament is sitting. He is a past president of the Association for Science Education.

Sir Peter Lachmann is a member of the Royal Society. In 1999, at the height of the row over Dr Arpad Pusztai's research, which had found that GM potatoes damaged the health of mice, *The Lancet* editor Dr Richard Horton



(cont.) 'Adolescents' health literacy and the Internet', *Journal of Adolescent Health* Vol. 32(2): 124. (February 2003); and Gray NJ, Klein JD, Cantrill JA, Noyce PR, 'Adolescent girls' use of the Internet for health information: Issues beyond access', *Journal of Medical Systems* Vol. 26(6): 545-553 (December 2002.)

revealed that a senior Fellow of the Royal Society had threatened him with the loss of his job if he published Dr Pusztai's research.^{16,17} The *Guardian* later found that that scientist was Lachmann. Despite Lachmann's extra-scientific intervention in the case of Dr Pusztai, some time later he was sounding off in *The Times* about the importance of 'scientific trials'.¹⁸ In *The Times* letter Lachmann made it clear that he was against the precautionary principle, claiming that it would have a deadening effect on progress. The letter was also signed by Bridget Ogilvie, visiting professor of biology, University College London, and the Academy of Medical Sciences, one of the leading members of Sense About Science.

Lachmann's extensive CV includes a recent consultancy to Geron Biomed, which markets the cloning technology behind Dolly the sheep, and a non-executive directorship for the biotech company Adprotech. Professor Lachmann is also on the scientific advisory board of the pharmaceutical giant SmithKline Beecham, which invests heavily in biotechnology.

Professor Trevor Jones served as director general of the ABPI from 1997 to 2004. He is also a member of the board of the European and International Federations of Pharmaceutical Industry Associations, EFPIA and IFPMA. During an earlier stint for the ABPI, from 1987 to



16 Pro-GM scientist 'threatened editor', Laurie Flynn and Michael Sean Gillard, the *Guardian*, November 1st 1999

17 Shameless Hypocrite of the Day – Sir Peter Lachmann FRS. 4 December 2002 <http://ngin.tripod.com/rs.htm>

18 Letters, *The Times*, December 04, 2002, from Professor Sir Peter Lachmann and others.

1994, he was also a director of Wellcome plc, responsible for R&D, including the development of Zovirax and AZT. He was, for 12 years, a member of the Medicines Commission of the UK Medicines Control Agency.

Professor Jones is a visiting professor, fellow, deputy chairman of council and president of appeals at King's College, University of London; a non-executive director and chairman of the Scientific Advisory Board of the venture capital company The MERLIN Fund LP, chairman of the biotech company ReNeuron, and a member of the board of the medical IT company Datapharm Communications.¹⁹ He is a founder Member of the Geneva-based Medicines for Malaria Venture (MMV), a not-for-profit, public-private partnership. Jones was awarded the CBE in the 2003 New Year's Honours List. In February he was appointed by the director-general of the WHO to the Commission on Intellectual Property Rights, Innovation and Public Health (CIPRH).

He retired from the ABPI in August 2004, just before assuming the chair of the UK Advisory Group for Genetics Research, to which he was appointed in April 2003. The Advisory Group is supported by the DoH but not included in the web list of its advisory bodies. It provides strategic oversight of the programmes of genetic research funded by the DoH. It monitors and co-ordinates the work of the newly-formed genetics knowledge parks, and advises the DoH Portfolio Director for genetics research on matters relating to research to address the



¹⁹ Datapharm is locked into the NHS, providing them and the public with information about drugs and treatments, always from the perspective of the ABPI.

needs of the NHS and wider Department of Health. The group consists of representatives from major funding agencies such as the Medical Research Council, Economic Social and Research Council, medical charities, and university departments of medicine, sociology, and life sciences.

Professor Sir Colin Berry, FmedSci, is a leading member of the Research Defence Society, appointed member of the General Medical Council representing the University of London and the Society of Apothecaries.

Professor Colin Blakemore, FMedSci FRS, is chief executive of the Medical Research Council and another leading member of the Research Defence Society. Despite being involved and apparently at home in Sense About Science, Blakemore got himself into trouble with the risk people. Such hardened activists as Dr Mike Fitzpatrick were scathing of both him and Sir Richard Doll when, after a review of studies, they concluded that high-voltage electricity pylons might *slightly* increase the risk of leukaemia. Blakemore was criticised for bad science – criticised, in fact, for being involved in epidemiology.

In September 2002, Blakemore took the opportunity of a trip to Canada to make non-scientific points about MMR. ‘Consider the way in which the media have handled the recent concern about a possible linkage between MMR (mumps, measles, rubella) vaccination and autism.’ He told a Canadian audience, to whom he addressed his talk, ‘Science, Risk and Ethics, an explosive mixture’, at the National Research Council, Ottawa, ‘In a very short period of time, over just a few days, I saw the following headlines on this matter. First, in the *New Letter*, a Northern



Ireland paper, on June 12, a report on just one of many epidemiological studies was headlined: "Study gives MMR jab the all-clear", implying that the question was settled. But on 28 June, a headline in *The Daily Telegraph* said, "MMR 'may be linked to certain type of autism'." On the same day, the *Daily Mail* presented the same story slightly differently: "One in every 1,500 MMR jabs 'could be causing autism'." And finally, just three days later, the headline was "Measles soars as parents say no to MMR. Danger of an epidemic". Every little step presented as a sensational new story.'

Well, I don't know about you, but to me the first three stories, linked it seems to two eventualities, appear pretty rational and low key. Of course the same cannot be said about the sensationalist story put out by the DoH and picked up by the *Mail*.

In February 2005, listener Stephen Ralph submitted a question to Professor Blakemore on the BBC Radio 5 Live Simon Mayo Programme.²⁰ Blakemore's answer, taking the classic, much-parodied politicians' 'I'm glad you asked me that' line, shows just how hopelessly tongue-tied scientists can become when defending the indefensible. In this case, Blakemore tried to rationalise the idea that, despite ME being a physical illness, it doesn't need researching, or even to be treated as if it were a physical illness. Sadly, in his reply, he only confirmed the fears of many by comparing myalgic encephalomyelitis to depression. As Stephen Ralph said later, 'Blakemore used the ongoing mantra of not worrying if ME/CFS was



²⁰ Professor Colin Blakemore on the BBC Radio 5 Live Simon Mayo Programme, 22nd February 2005.

either psychological or neurological, and that if psychological interventions worked, then we should all be thankful for this.'

QUESTION: Why (after several years of promises) the Medical Research Council has so far failed to fund any biological research into the physiological issues surrounding ME and Chronic Fatigue Syndrome – conditions that are recognised by the World Health Organisation as being a disease of neurological origin. Thus far the Medical Research Council has been seen to do not a lot more than perpetuate the status quo of funding psychological interventions into what they call "chronic fatigue syndrome, slash ME." These interventions do not address neurological, cardiological, immunological and other abnormalities highlighted in international research that so far have been ignored in the United Kingdom.

ANSWER: Well I'm glad to have the chance to respond to that. I know that this is a very current issue of very great concern to ME sufferers, it is by no means ignored by the Medical Research Council. We are very, very concerned about it. We set up a committee to work with the ME charities and with patient groups to try and work out a strategy a couple of years ago. We have put out a call for research grant applications in this area, we are funding trials on chronic fatigue syndrome and ME clinical trials of treatments. I think to concentrate on this question of whether ME is thought to be a neurological or a psychological condition actually isn't going to get us far. Compare the situation with depression – depression is a brain condition. We know quite a lot about what goes wrong chemically and physically in the brain of a depressed person. Depression can be treated both by psychological approaches and by drugs, and they both actually work in rather similar ways on the brain – they change brain chemistry – so I don't think we should look down



*our noses at psychological treatments. **If they work that would be wonderful, and if they did work it wouldn't mean that it wasn't a neurological condition.***

We are open-minded as to the basis – we accept that this is a real disease, there's no doubt about that, people suffer terribly with this condition. We don't understand its basis. Presumably it has to do with real faults in the nervous system in the brains of sufferers, and work is needed in that area – but we need high-quality proposals. The Medical Research Council can't just invent good science, and I think everyone would agree that they wouldn't want tax payers' money wasted on bad science however important the cause. Getting right the balance between recognising the urgency of the need and yet funding only the research which is worthwhile is what we have to do, you can see the problem.

This is, of course, a radically new medical theory called '**treatment diagnosis.**' If you don't know what causes a condition, you try out various treatments on it. If a treatment is effective, then you look at what other conditions the treatment is useful for, and bingo! You have a diagnosis.

And then the bit about good and bad research, this is really in keeping with a scientist notorious for having sewn up kittens' eyes in a vain attempt to understand squints in humans. Yes, it's true, *you can't just invent good science.* Good science comes, in fact, as part of a continuum: once you begin to get results from your work, you make decisions about how to proceed. If, however, you don't ever embark upon good science, you do have to invent bad science, such as the psychological theorising of Professor Simon Wessely in the matter of ME/CFS.



In fact, Blakemore's answer gives us a clue to the latest and perhaps most worrying line of argument about ME. Having been all but defeated in their ridiculous argument that ME is a product of mental aberration and false illness beliefs, the psychiatric aetiology group have adopted a new approach. Rather than arguing between the psychological and the physical, they are now saying that the two aetiologies are so similar that the issue isn't worth discussing; let's just get on with the treatment.

Professor Derek C. Burke, CBE, was professor and vice-chancellor of the University of East Anglia from 1987 to 1995, and chairman of the Advisory Committee on Novel Foods and Processes (ACNFP) from 1987 to 1997. In June 1999, Burke responded in *The Daily Telegraph* to ten questions attributed to the Prince of Wales, titled 'My 10 fears for GM foods', that had previously been posed to readers of the *Daily Mail*. Burke was responsible for a letter, signed by 114 individuals, to PM Tony Blair on 30th October 2003. The letter was sent following the results of the Farm Scale Evaluations of three GM crops, announced on 16th October and reported across the media as 'the end of GM in the UK.'

A number of the signatories were from the clique involved with Sense About Science and the Science Media Centre, including Professor Philip Dale, Professor Alan Gray, Professor Sir Peter Lachmann, Professor Christopher J. Leaver, Professor Julian Ma, Professor Vivian Moses, Professor Dame Bridget Ogilvie, Sir Richard Sykes, Professor Anthony Trewavas, Professor Lord Robert Winston, and Professor Lewis Wolpert, FRS CBE.



Burke publicly accused those who opposed GM crops of being 'criminal' for turning their backs on the greater quantities of food supposedly made available by genetic modification. He was a key participant in the UK Government's 'Technology Foresight' exercise, which examined how science could be made to contribute most fully to economic competitiveness. Foresight identified 'building businesses from biology and genetics' as a generic priority for UK science, engineering and technology. As a result, the Biotechnology and Biological Sciences Research Council (BBSRC) developed a strategy for integrating scientific opportunity with the needs of industrial and other users. The BBSRC has won an extra £50 million in funding since David Sainsbury became Science Minister. Until 2003, its chairman was Peter Doyle, a director of biotech giant Syngenta. Doyle was executive director of Zeneca at the time of taking up his BBSRC post. He was succeeded by Dr Peter Ringrose, formerly chief scientific officer of the Bristol-Myers Squibb pharmaceutical company based in Princeton, USA, and president of the Bristol-Myers Squibb Pharmaceutical Research Institute.

Of the fifteen BBSRC council members, five, including the former chairman, are directly industry linked. Industrial 'interests' of other members have not been disclosed. The five include Peter Doyle, Guy Walker, CBE, formerly national manager for Unilever and president of the Food and Drink Federation, and Peter Schroeder, previously director of research and development, Nestlé, now the director of the Institute of Food Research. In addition, BBSRC committee members include representatives of such firms as: AgrEvo UK Ltd, Unilever Research,



Advanced Technologies (Cambridge) Ltd, Rhône-Poulenc Ltd, Zeneca, Merck Sharp & Dohme and SmithKline Beecham. On the Strategy Board, out of 16 members, six are directly industry linked.²¹

Professor Burke's influence on the development of British biotech has also been more direct. He was a member of the Royal Society's influential working group on *Genetically Modified Plants for Food Use*, which is said to have reassured Ministers on this issue. He is, in addition, a member of the Nuffield Council on Bioethics group, which produced the recent pro-GM report, *Genetically modified crops: the social and ethical issues*.

Professor John Coggins, FRSE, director of the Institute of Biomedical and Life Sciences, dean of the Faculty of Biomedical & Life Sciences and professor of molecular enzymology at the University of Glasgow, Professor Coggins leads one of the largest unified academic biological and biomedical science departments in Europe. His research interests focus on the enzymes involved in the biosynthesis of amino acids and nucleotides as potential targets for novel drugs and herbicides. He has a small holding of shares in Glaxo-SmithKline (under £10,000 pounds). Professor Coggins is vice-president of the Royal Society of Edinburgh. His membership of the Scottish Science Advisory Committee was announced in May 2002.

Professor Phil Dale works in the department of crop genetics, at the John Innes Centre, the UK's leading plant



21 From <http://members.tripod.com/~ngin/articleBurke.htm/>. *The Godfather, some reflections on the industrial alignment of UK bio-science*.

biotechnology institute, which helps to fund Sense About Science. He was appointed as a specialist member of the ACNFP by the then Food Standards Agency chair, Sir John Krebs, in 1998. In 2000, he was appointed to the Agricultural and Environment Biotechnology Commission (AEBC), which advises government on issues surrounding biotechnology. He served on the GM Science Review Panel, organised by the Office of Science and Technology, along with his Sense About Science chums Chris Leaver and Alan Gray.

Dr Simon Festing²² is director of public dialogue for the pro-vivisection Association of Medical Research Charities (AMRC), provides advice to British charities as to which projects and researchers to fund, and as such is ideally placed to direct funding to animal-modelled research, which it does. Festing wrote the briefing document about animals and research for the ABPI.

He recently agreed to appear on the BBC's newnight – but only on condition that he had his own 'green room', and did not have to engage, off camera, with a spokesperson for the anti-vivisection group, SPEAK.²³

His father, Dr. Michael Festing, is a consultant for Harlan UK, a part of Harlan Sprague Dawley Inc, world leader in the supply of animals to research, and is a member of, or holds a financial interest in, PPL Therapeutics; Glaxo-SmithKline; Oxford Glycoscience; Acambio; Powerject Pharmaceuticals; Alizyne; Cambridge Antibody; Shire Pharmaceuticals; and Celltech.



²² SPEAK <http://www.speakcampaigns.org.uk/articles/20041203simon.php/>.

²³ Ibid.

Further, he is one of five Trustees who control the British Fund for the Replacement of Animals in Medical Experiments (FRAME), a front for the vivisection industry. He is a member of the Institute for Laboratory Animal Research (ILAR) Council, the animal model lobbying arm of the US National Research Council, a part of the National Academies of Science.

Dr Stephen Ladyman MP has worked as a research scientist for the Medical Research Council and was head of computer support at Pfizer's Division of Central Research from 1991 to 1997. He moved on to become MP for South Thanet, though he has stayed in contact with his former employers who have a facility in Thanet. From 2003 to 2005, he was parliamentary under-secretary of state for community in the Department of Health, where he helped with the modernisation of the NHS and began to implement some of the strategic plans organised in Pharmaceutical Industry Competitive Task Force (PICFT) meetings. He is now Minister of State at the Department of Transport. As chairman of the All Party Parliamentary Group on Autism, he represents The Autism Awareness Campaign UK.

Ladyman is one of the 135 MPs from various parties on the political opinion panel of the Business Planning and Research International (BPRI) consultancy. The BPRI seeks the panel's specialised opinions, which they sell to their clients to help them with their marketing. The panel MPs can also, of course, usefully raise questions in the Commons. BPRI was founded in 1986 and is now part of WPP plc, one of the largest PR companies in the world.²⁴



24 BPRI has 65,000 people in over 1,400 offices in 103 countries and services 300 of the Fortune Global 500 companies.

WPPs has a number of subsidiary health care companies, which promote the interests of various pharmaceutical and life science companies, including vaccine companies CommonHealth, Shire Health Group and Sudler & Hennessey.

When he was a Health Minister, Ladyman helped make a video, produced by the Centre for Healthy Ageing.

The Centre for Healthy Ageing,²⁵ which appears to be just one administrator, Joy Marriott, inside the Sheffield Institute for Studies on Ageing (SISA), is part of the University of Sheffield Medical School. Both the Centre for Healthy Ageing and the SISA receive funding from Pfizer.

The aim of the Centre for Ageing is, in the words of the web site, to 'take forward the agenda on user centred care and the Single Assessment Process.' The Single Assessment Process (SAP), which was created by Sheffield University in collaboration with European partners EASY-Care, is 'an assessment tool that is fully accredited by the Department of Health.' SAP is a form that can be filled in by elderly people so that doctors and health service providers can tell which drugs and which treatments to give them. And woe betide you if you get any of the answers wrong, it might mean the difference between a home help and a handful of sleeping pills.



25 The Centre for Healthy Ageing is supported by an educational grant from Pfizer – a company that, as UK Managing Director Olivier Brandicourt explained, Pfizer is in a great position to make a real difference to this important section of society.

EASY-Care was originally developed on behalf of the European Regional Office of the WHO (World Health Organisation), for use in Europe as a first-stage assessment of older people in primary or community care settings by nursing staff, social work staff, therapists and care assistants. The assessment contains sections on Seeing, Hearing, Communicating, Looking After Yourself, Safety & Relationships, Your Accommodation & Finance, Looking After Your Health, Your Well-Being, Your Memory, Additional Personal Information.

What staff get from this form, apart from saving time and forgoing such difficult things as making eye contact with the elderly, is all the information they need for trial subjects who might be approached later to test drugs of various kinds.

The authority of Sheffield University, in the development of this pro forma, got it accredited by the Department of Health. We don't know if this full accreditation occurred when Stephen Ladyman was at the Department of Health.

Once SAP had been accredited EASY-Care in 2004 established a training and development programme in the supervision of form filing under the auspices of the Centre for Healthy Ageing based at Sheffield Institute for Studies on Ageing.

Another movement forward by the modernising NHS, is the National Service Frameworks; one of these has been established for each area of ill health or health problem. 'National Service Frameworks (NSFs) are long term strategies for improving specific areas of care. They set measurable goals within set time frames.' The idea is to



view the area focus on the problems which might be defined within, community uptake, diagnosis and treatment. The rolling programme of NSFs, launched in April 1998 are developed in partnership with industry.

These NSFs have all been followed through in partnership with the pharmaceutical industry who quite clearly will be interested in identifying the points of research and development – in partnership with the NHS – for new drugs. Pfizer is particularly interested in the Long-term Conditions NSF, presumably such conditions as Alzheimer's which the elderly might be suffering from.

Over the last few years, the pharmaceutical industry and the NHS, has set up The Long-term Medical Conditions Alliance (LMCA). LMCA is an 'independent' organisation, funded by a variety of sources; which currently include members' subscriptions, Pfizer, The Department of Health and The Association of the British Pharmaceutical Industry.

A personalised care plan for everyone diagnosed with a long-term condition is one of the cornerstones of the new National Service Framework – perhaps based on a SAP interview – ministers have confirmed.

Ms Pru Leith, OBE, has been on the board of the Halifax, Whitbread and Safeway's. She is a member of the Nuffield Council on Bioethics, established by the trustees of the Nuffield Foundation in 1991, to identify, examine and report on the ethical questions raised by recent advances in biological and medical research. Since 1994, it has been funded jointly by the Nuffield Foundation, the Medical Research Council and the Wellcome Trust. Leith sits on this august body with Professor Derek Burke, Professor Mike Gale, Professor Brian Heap.



Dr Robin Lovell-Badge, FRS, is head of the developmental genetics division of the National Institute for Medical Research (NIMR), part of the Medical Research Council (MRC). The NIMR has wide-ranging interests in the development of genetics, from the fertilised egg to the adult, with gender determination as an important theme. The issue of embryo stem cell research is particularly politically charged and emotive, prompting biologists to begin engaging in ethical debates, and generating in the general public an unusually high level of interest in this aspect of biology.

Professor Julian Ma was made a consultant in immunology and oral immunotherapy at Guy's Hospital Dental School, the first such consultant appointment in the UK. He holds the Hotung Chair for Molecular Immunology at St George's Hospital Medical School, University of London. He graduated in dentistry at Guy's Hospital in 1983, and went on there to gain his PhD in immunology, studying topical anti-microbial immunotherapy using monoclonal antibodies. He was a post-doctoral fellow at the Scripps Research Institute, La Jolla, in Andrew Hiatt's laboratory, where he worked on the expression of recombinant antibodies in transgenic plants.

Professor Ma is probably Britain's foremost advocate of the genetic modification of plants to produce medicines – so called 'pharmacrops'. He has recently been working on a five-year programme to introduce HIV antibodies into a plant, and then take that product all the way through the regulatory trail. Ma and his colleagues have bastardised the already bastard neologism 'neutraceutical', which first meant the introduction of extra nutrients such as vitamins to nutritional products. In their extended version, it now means GM plants grown for pharmaceutical use.



Ma, who is the scientific co-ordinator of the project, said that it would take about two years from its inception, to develop the technique, before the first crop is scheduled to be grown in 2006. Clinical trials of the first vaccine derived from GM plants are planned for 2009.²⁶

In another act of sheer semantic terrorism, Ma cites the fact that 75% of the world's population use plants for treating illness – not GM plants, just plants – as an argument to support the 'normality' of GM medicinal plant production. The irony is that physicians and pharmaceutical companies have been striving to destroy herbal treatments and their practitioners for at least a century. Obviously, pharmaceuticals production through plants would raise all the same issues of contamination, safety and patent rights involved in all other GM issues. The 'new' plants created by GM would not be plants as we know them, but privately-owned commodities and products.

Genetically modified plants are to be used to grow vaccines against rabies and Aids. Europe's first field trial, announced in 2004, is likely to be carried out in South Africa. The EU has awarded Ma a pan-European consortium of other scientists and colleagues, and £8.6m to develop the technology for growing GM plants that can be turned into vaccines against a range of common diseases in the developing world.²⁷

Ma uses all the usual arguments of the GM lobby for food, in support of GM medicines – principally that the



26 Steve Connor, 'GM plants will be used to create Aids vaccine,' *The Independent*, 13 July 2004.

27 Ibid.

growth of pharma crops in the developing world would give inhabitants easy access to cheap medicines, especially vaccines. This plan envisages a vast acreage of pharmaceutical plants in developing countries. Ma cites a recently trialled vaccine against dental caries (tooth decay) as setting a precedent for producing monoclonal antibodies in plants, and is himself presently conducting Phase III trials at Guy's to test the efficacy of a treatment against dental caries. An active protein is applied directly to the teeth to prevent the disease-causing agent, *Streptococcus mutans*, from attacking the surface enamel. The antibodies currently being used in the trials are being produced in tobacco plants, grown in both Italy and the US.

Professor Alan Malcolm, is chief executive of the Institute of Biology, and a director of the Science Council. He was a signatory of Sir Derek Burke's open letter to the PM on GM crops (see page 154). He was formerly director of the Food Advisory Committee of the Institute of Food Research (IFR), a not-for-profit company with charitable status, sponsored by the Biotechnology & Biological Sciences Research Council.

Professor Vivian Moses is head of The Centre for Genetic Anthropology (TCGA), in University College London. TCGA was established in September 1996 to pursue research on the evolution and migrations of human populations in North Africa, East Africa, the Near East, Asia and Europe.

→

Moses is a member of the Scientific Alliance,^{28,29} launched in 2001 with the help of Foresight Communications. The Alliance claims to offer a rational scientific approach to the environmental debate. It is anti-environmental, anti-organic and pro-GM. It is also pro-nuclear and dismisses climate change. It runs conferences along with other corporate front groups. In November 2002, it organised a conference on GM called *Fields of the Future*. The conference chairman was Lord Taverne, and Tracey Brown of Sense About Science helped organise the event. In 2003, Bill Durodié, who, like Brown, is part of the *LM (Living Marxism)* network, joined the Scientific Alliance Advisory Forum.

Moses also runs the pro-biotech, industry-funded lobby group CropGen, which is linked to Lexington Communications, and is a member of the Scientific Alliance,³⁰ led by a scientific panel whose aim is to 'make a case for GM crops' world-wide. It describes itself as, 'an education and information initiative for consumers and the media on the subject of crop biotechnology.' Until the end of 2003, CropGen was run by PR company



28 SpinWatch Profiles. <http://spinwatch.server101.com/modules.php?name=Encyclopedia&op=content&tid=23>

29 The Scientific Alliance had an advisory forum, which included the following: Professor Tom Addiscott, Dr Sallie Baliunas, Dr Jack Barrett, Professor Sir Colin Berry, Dr Sonja Boehmer-Christiansen, Bill Durodié, Professor Mick Fuller, Dr Jeremy Hodge, Dr Judith Irwin, Professor Emeritus Michael Laughton, Martin Livermore, Professor Vivian Moses, Dr Benny Peiser, Professor Anthony Trewavas, Professor William Wilkinson and Professor Michael Wilson.

30 Op. cit. SpinWatch Profiles.

Countrywide Porter Novelli. Since then, it has been run by Lexington Communications, which also represents the UK biotechnology-industry-funded lobby group the Agricultural Biotechnology Council (ABC), as well as Monsanto, BASF, Dow AgroSciences, DuPont, Syngenta, and the Crop Protection Association.

CropGen was established with nearly £500,000 from a consortium that included Aventis CropScience, Dow AgroSciences, Monsanto and Novartis Seeds. A number of the statements made about GM crops have been heavily criticised by other scientists working in the field.³¹

Professor Sir Keith Peters, FRS PMedSci, is Regius Professor of Physics at the University of Cambridge, where he is head of the School of Clinical Medicine and honorary consultant physician at Addenbrooke's NHS Trust. Sir Keith's research interests centre on 'the immunology of renal and vascular disease, and in particular on how delineation of immunological mechanisms can lead to new therapies for these disorders.' He was knighted in 1993. Sir Keith is a founding fellow and president of the Academy of Medical Sciences; a Council member of Heads of Medical Schools and Deans of UK Faculties of Medicine. He is a member of scientific advisory boards of the Gairdner Foundation and Merck Institute, and a non-executive director of Amersham plc.

Dr Matt Ridley is a contributor to *spiked*, the on-line journal that grew out of *Living Marxism* and *LM*, and in 1996 was founding chair of the International Centre for Life, Newcastle-upon-Tyne's science park and visitor centre



31 More information about the Scientific Alliance can be found at PR Watch, GM Watch and other sites already cited in this essay.

devoted to life science. He was succeeded by Dr Michael Dexter, former director of the Wellcome Trust, in 2003. On his resignation, Ridley said, 'The International Centre for Life is now a world pioneer in public engagement with the new scientific discoveries of genetics and genomics.'

'Wellcome Trust supported this project both financially and scientifically from the outset, and I have always taken a keen interest in its pioneering approach to public engagement in bioscience. These are exciting times in genetics and it is vital that we find ways to engage the public in subjects that will have direct effects on their healthcare in the future.' □

The Greatest of These is Charity

Q. What's the difference between Sense About Science and a PR Company?

A. Sense About Science is a charity.

Q. What's the difference between Sense About Science and a lobby group?

A. Sense About Science is a charity.

Q. What's the difference between Sense About Science and an ad hoc group of ex Revolutionary Communist Party members?

A. Sense About Science is a charity.

Q. What's the difference between Sense About Science and a crisis PR company?

A. A crisis PR company isn't a charity.

Sense About Science would not have been possible as it is without the involvement of the Charities Commissioners. Now that the organisation has a footing as a charity, even if ceases to be one, the common perception of the organisation will remain as one that does good on slender means.

But the Charities Commission has also been affected by corporatisation, and long ago drifted towards unquestioning support of corporate interests, particularly those of the pharmaceutical companies. The Commission has in effect become an agency that helps to organise the voluntary sector on behalf of the pharmaceutical industry and other corporate interest groups. A clear example of this is the growth of the Association of Medical Research Charities. Begun under the auspices of the Wellcome Trust, with the apparent purpose of helping small 'amateur' charities with their administration and clarification, and with obtaining their 'market share' of research and funding.

The real and undisclosed reasons for its existence involved a long-term plan of the pharmaceutical companies, first, to rid the research field of small independent research organisations who might attract funding away from pharmaceutical interests; and, second, to ensure that the pharmaceutical companies had tight control of trial fodder, through its funding domination of the collective charities. The present chair of the AMRC is now the head of the Research Defence Society. So it seems that Big Pharma has achieved its long-term aim, and that any small voluntary-sector or community-based health groups that do not agree with animal testing or vivisection are unlikely to survive in the future.

Small, alternative-style voluntary research organisations in the area of health are refused charitable status, sometimes on the grounds that they are not representative of their claimed base, but also sometimes on the grounds that they receive part of their funding from alternative health sources.

The pharmaceutical corporations can no longer be seen as a part of some social superstructure. Their need for a research base, for trial subjects, for organisations to agree licensing and other regulatory matters, together with their need for markets and consumers of their products, means that, like a metastasised cancer, their growth now extends into all areas of society, which has become a massive human laboratory.

PART FOUR

12 The Resistible Rise of
Rebecca Bowden

13 Science Media Centre
Science Advisory Group

14 The Major Players
Sir Richard Sykes

Professor Christopher J. Leaver

Professor Simon Wessely

Professor David King

15 The Concerned Scientists

16 Just Another Conference

CHAPTER TWELVE

The Resistible Rise of Rebecca Bowden

It was always the case that Rebecca Bowden PhD would end up heavily supporting the cause of genetically modified everything, but perhaps not so inevitable that she would end up organising the defensive strategy of the government's science policy on behalf of Lord David Sainsbury; that was more a matter of being in the right place at the right time.

Bowden, who was born in 1970, got her first BSc (Hons) degree in microbial biotechnology at the School of Biological Sciences, the University of Liverpool. She stayed on in the Department of Genetics and Microbiology, to undertake a three-year project, funded by the Natural Environment Research Council (NERC), on *the ecological impact of biological transfer of antibiotic-resistant genes within natural populations of bacteria in the soil environment*. She was awarded her PhD in 1995.

Her sponsor, the NERC, works closely with, among others, the Biotechnology and Biological Sciences Research Council (BBSRC) and AstraZeneca UK.¹ The NERC's evident lack of concern about vested interests can be seen in this short story from GM Watch.

1 The present chairman of the NERC is Rob Margetts, CBE FREng FICHEM, also currently chairman of Legal & General Group plc and chairman (Europe) of Huntsman Corporation. He is non-executive director of Anglo American plc. On 18 January 2002 he became chairman of the BOC Group plc. (*Cont.*)

The NERC sponsored a series of on-line debates run by *spiked*, the ex-RCPers web site magazine. One of this series was an on-line debate on GM. It was begun with the opinions of five experts and three other experts were then involved.² Of the eight experts selected by *spiked*, only one has been known to take a critical attitude towards the technology. When the history of those behind *spiked* was drawn to the NERC's attention, their press officer, Marion O'Sullivan, responded, 'NERC is satisfied that *there is no evidence suggesting that, on environmental matters, spiked have any particular agenda.*'³

In fact, as you will already have read, *spiked* and other organs and individuals attached to what was once the RCP are probably the most rabid anti-environmentalists on the planet.

After Liverpool, armed with her PhD, Bowden went on to become a research associate at the Department of Agriculture and Environmental Science, University of Newcastle, to do work on development and risk assessment of genetically-engineered avian probiotics.

Her next stop up the greasy poll was the post of a senior scientific officer at the Department of the Environment. There she became manager of the administration section of the

(Cont.) He is a governor and fellow of Imperial College of Science, Technology & Medicine and a fellow of the Royal Academy of Engineering and Institution of Chemical Engineers. He is a member of the Council for Science & Technology and of the Advisory Committee for Business & Environment. He has also been a member of the Foresight Steering Group.

2 Les Firbank, leader of the UK farm-scale evaluations of genetically modified crops. Tony Gilland, science and society director, Institute of Ideas. Robin Grove-White, professor of environment and society, Lancaster University. Gregory Conko, director of food safety policy with the Competitive Enterprise Institute. Dr Channapatna S. Prakash, professor of plant molecular genetics at Tuskegee University, Alabama. Alan Gray, director of the NERC's Centre for Ecology and Hydrology in Dorset, a Sense About Science stalwart and signatory to Professor Derek Burke's pro-GM open letter to the PM in 2003 (see page 154). John Conroy, a Brazil-based TV producer and journalist and part of the network behind *spiked*.

3 <http://www.gmwatch.org/profile1.asp?PrId=124/>.

Biotechnology Unit, now called the GM Policy, Science and Regulation Unit – part of the Chemicals and GM Policy Division within the Environmental Protection section of the Department for Environment, Food and Rural Affairs (DEFRA). In this department, a team of policy-makers, scientists and regulators take regulatory decisions about GM.

This division controls the deliberate release of genetically-modified organisms (GMOs); develops national GM policy, turns EU directives into national law, represents the UK in EU and international negotiations on the environmental safety of GMOs; commissions and disseminates scientific research on GM, and assesses the environmental risk of the contained use of GMOs. Bowden's job there was to review applications for contained use.

The GM Policy Division is at the very heart of GM regulatory and propaganda matters, and in the course of her work, Bowden must have come into contact with all the corporate and company scientists seeking licenses to use their GM products. DEFRA is advised on many of these matters by the Advisory Committee on Releases to the Environment (ACRE). During 1997 and 1998, ACRE was made up of⁴ Professor John Beringer, Dr Philip Dale, Dr Ian Garner, Professor Alan Gray, Ms Julie Hill, Dr Julian Kinderlerer, Mr John MacLeod, Professor Bev Moseley, Professor David Onions, Professor Nigel Poole, Dr David Robinson, Dr Ingrid Williams, Dr Katherine Venables. In the majority these are individuals who are in favour of the ongoing development of GM. (See Part Three for more on Phil –Sense About Science– Dale and Alan Gray.)

Anyone charting Rebecca Bowden's career, might have assumed that she was heading for great administrative things in the field of government science policy. She *was*, but in a

⁴ Fifth Annual Report of the Advisory Committee on Releases to the Environment (ACRE.) 1 April 1997 to 31 December 1998.

slightly offbeat way. By 2002 she had arrived at the Department of Trade and Industry, in the intimately close Office of Science and Technology (OST), in the private office of both the chief scientific adviser to the government, and Lord David Sainsbury, the Minister for Science. There, she was helping to organise science policy and its communication to the public, as well as organising its 'onflow' into Europe, where it was important that British biotechnology gained pole position.

But first, a deviation: Bowden came out of government in 1998, to take up a position at the Royal Society as a manager in the Science Advice Section. As described in Part Three, the Royal Society was – and is – a hotbed of pro-GM scientists, all corporeal with corporate money and deeply immersed in the battles for GM acceptability. Whatever she went to the Royal Society to do, she quickly became responsible for organising the pro-GM lobby.

By the late Nineties, corporate funding was overflowing from all the elegant architectural portals and some cracks of the Royal Society; the Royal Society had become the Royal Corporate Society. The funding included case loads of mazuma from such major biotechnology interests and Royal Society funders as Aventis Foundation, BP plc, the Wellcome Trust, Astra-Zeneca plc, Esso UK plc, the Gatsby Charitable Foundation, Andrew W. Mellon Foundation, National Grid Transco plc, Rhône Poulenc and Glaxo-Wellcome.⁵

One of the first things Bowden did at the Royal Society was to form a group that would present a timely report on GM plants, in September 1998, entitled *Genetically Modified Plants for Food Use*. Its expert group broadly concluded that the use of GM plants had the potential to offer benefits in agricultural practice, food quality, nutrition and health.⁶

⁵ The Royal Society Annual Review 1998-99.

⁶ Op. cit. GM Watch.

Every member of the group was a known supporter of GM foods. The chairman was Peter Lachmann, who, as related in Part Three (page 147) was later accused of threatening *The Lancet* editor Richard Horton in an effort to prevent the publication of Dr Arpad Pusztai's research showing adverse effects on rats from GM potatoes.

Other contributors holding positions within the Society were Aaron Klug, the President, and Sir Brian Heap, UK representative on the NATO Science Committee and a trustee of Sense About Science (Part Three, page 141). Others involved in the report included Ed Dart of Adprotech, the biotech company that Lachmann helped found, and a former R&D Director of Zeneca Seeds; Neville Craddock of Nestlé; the usual suspects Phil Dale and Mike Gale plus other colleagues from the John Innes Centre, Derek Burke, Chris Leaver, Alan Malcolm and Noreen Murray, whose husband Sir Kenneth Murray co-founded Biogen, the first European-based biotech company.

But, of course, Bowden was doing more at the Royal Society than just organising a report. Working to a plan seemingly resolved by her future employers, OST, which involved creating a body of scientists, particularly those from the RS who could be put in front of the media to support the government's position.⁷ It also involved setting up what the *Guardian* called 'a rebuttal unit' and what might otherwise be called a centre for disinformation.

Between 1999 and 2002 Rebecca Bowden and the RS extended themselves to dealing with the problem of Arpad Pusztai and his inconvenient findings about GM potatoes. His reputation as a scientist was quickly destroyed. In the year 1999-2000,

⁷ Pro-GM scientist 'threatened editor,' Laurie Flynn & Michael Sean Gillard, the *Guardian*, November 1, 1999.

the scientists from Royal Society, organised by Bowden, produced their contributory 'white paper' on *Transgenic Plants and World Agriculture*, issued jointly by seven national academies of science. Predictably, the paper emphasised the potential of GM crops to relieve hunger and poverty.

In February 1999, nineteen Fellows of the RS condemned Pusztai in a letter published in the national press. Then, in May 1999, the Society published a partial 'peer review' of Pusztai's then unpublished research. This was based, not on a properly-prepared paper, but on an incomplete internal report. The obvious covert activities of the group came to a temporary halt when the *Guardian* named Lachmann as the man who had telephoned and verbally attacked Richard Horton, just prior to *The Lancet's* publication of Pusztai's paper.

In 2001, as senior manager of science policy at the RS, Bowden was responsible for coordinating biotech policy for the society, reporting directly to Sir Aaron Klug. Clearly the government, or the Minister for Science, had chosen the Royal Society as the public outpost of government policy on bio-technology, and someone had chosen Rebecca Bowden as the command post co-ordinator of the corporate fight-back against those who wanted a precautionary freeze on GM crops.

Those who wanted a proper democratic discussion on GM crops had, by the beginning of the new millennium, become highly organised. Most particularly because of the great muck-raking writing of Andy Rowell, George Monbiot and GM Watch, the manipulation of corporate science had been revealed. On consideration, it must have occurred to Lord Sainsbury and his colleagues that, although a base at the Royal Society had seemed a good idea, there were too many old codgers swinging from the trees, their fists full of money, for it to remain even vaguely discreet for any length of time.

In September 2001, that old Marxist from way back, Fiona Fox (page 189) had been appointed to run the Science Media Centre, and between December 2001 and February 2002, a completely opaque consultation process was carried out. In November, £120,000 worth of corporately-funded work on new offices situated in the Royal Institution was completed, and in March 2002 the Science Media Centre opened for business.

By this time, Rebecca Bowden was back home in the not-so-civil service, at the OST, where she was active in a series of cabinet-level groups organising the government communication of science policy.⁸ Science policy 'communication' was now big business at the very centre of New Labour. Every week saw new plans hatched to push the corporate perspective on GM and other issues.

Discussions in the SCI Ministerial meeting of December 2001, on Public Confidence in Science, and further discussions at the CSAC meeting in January 2002, considered the need for '*proactive communication of the Government's approach to science, including controversial issues*'. In layman's language this means propaganda.

Rebecca Bowden was at the meeting representing the OST, and it was proposed that the committee should organise a workshop to be held in September 2002, to consider best prac-

8 The following cabinet-level groups meet to discuss science policy: **The Ministerial Committee on Science Policy** (SCI), which is organised from within the Cabinet Office and is comprised of the secretaries of state from all the major departments, the Leader of the House of Commons, Minister for the Cabinet Office, Minister of State, Office of the Deputy Prime Minister. It provides the framework for the collective consideration of, and decisions on, major science policy issues. Its terms of reference are 'to consider the Government's policies in relation to scientific advances *and public acceptance of them*.' The secretariat is provided jointly by the Cabinet Office and the OST.

The Ministerial Sub-Committee on Biotechnology (SCI-Bio), which includes participants from Foreign and Commonwealth Affairs, the secretaries of state for Health, DEFRA, Foreign and Commonwealth Office, the Home Office, (*cont.*)

tice in government communication of science and scientific issues. Among other things, the workshops would explore, existing relationships between science policy-makers and scientific advisers and the media. The aim would be to establish best practice code of guidelines for government, drawing on the work already done by the Royal Society, the Royal Institution and the Social Issues Research Centre (SIRC), and to set up a continuing network to exchange experience and best practice in science communication by government and public bodies.

The workshop would be organised especially for members of Scientific Advisory Committees, directors of Communications in government departments, units or individuals with experience of dealing with the media, members of the media, policy-makers in departments, and others. To develop the workshop, the OST would set up a steering committee to advise on content, target audiences and outputs. It was proposed that the following people be on the steering committee: chair – Jo Durning (OST), Leonie Austin (Cabinet Office, director of communications), Monica Winstanley (Research Council), Ailsa White (DoH), Fiona Fox (above), Pallab Ghosh (the BBC Science Correspondent aligned with Sense About

(*cont.*) Lord Sainsbury from the Office of Science and Technology, Dti. The sub-committee has a brief to ‘consider issues relating to biotechnology – including those arising from genetic modification, biotechnology in health-care and genetic issues – and their economic impact; and to report as necessary to the Committee on Science Policy.’

OST also has joint responsibility with the Cabinet Office for providing support and the secretariat for the Cabinet Committee on Biotechnology. Sir Robert May, in his capacity as chief scientific adviser, also attends this Committee as an observer. Other issues picked up and addressed by the OST have included resistance to antibiotics, Vitamin B6, sports science, science centres and herbal products.

The Ministerial Science Group (MSG), chaired by Lord Sainsbury. Its membership comprises Ministers from each of the departments with significant S&T activity, including the devolved administrations. The secretariat is (*cont.*)

Science), Neil Martin (DEFRA, director of communications), and Graham Jordan from the MoD. The first meeting was to take place in June.

The contact at the OST for anyone who wanted to know more about the steering committee meetings or the eventual workshops, which would teach ministers to spin the news on science, especially in controversial circumstances, was Rebecca Bowden.

In September 2002, according to plan, the OST held a workshop to discuss government communication on scientific issues. This allowed the participants from science advisory committees, government departments, and journalists to discuss best practice in communication of complex issues on a 'lessons learnt' basis.

The Science Media Centre had been slotted expertly into government at Cabinet level. Its glide path had been cleared through the OST and it had been signalled in by Rebecca Bowden. Not only was Lord Sainsbury's misinformation unit by now firmly in place, but an ex-member of the Revolutionary Communist Party, in the shape of Fiona Fox, aka Fiona Foster, was now closely advising members of government departments on how to communicate science policy to the public.

(*cont.*) provided jointly by the OST and the Cabinet Office and sets out its stall thus: 'MSG is an informal committee, which aims to promote a co-ordinated and coherent approach to S&T policy-making across government. Its role will include the review of departmental science strategies.'

The Chief Scientific Adviser's Committee (CSAC) is the main official-level, cross-departmental forum for discussion of S&T issues. New arrangements following devolution, meant that officials of the devolved administrations could no longer see Cabinet Committee papers or be involved in discussions that became Cabinet Committee advice. The terms of reference for CSAC include: 'facilitating communication on particular high-profile SE&T-related issues and those posing new challenges for Government and providing advice to Ministers, primarily through the Ministerial Science Group.'

Apart from this work on the domestic front, Rebecca Bowden was also ‘outputting’ science policy into Europe, organising the British MRC leadership of the European Science Foundation (ESF). The ESF is the European association of 65 major national funding agencies, devoted to scientific research in 22 countries. It pursues British science policy in Europe on behalf of the corporations, and is co-ordinated by the MRC from the offices of the OST.

The ESF has an ongoing interest in developing better interactions between science and the media. To this end, it has supported the establishment of AlphaGalileo as an information site for science journalists. It also supports the activities of the EU Science Journalists’ Association (EUSJA), whose secretariat it hosts. The ESF devoted a major part of its 2001 Assembly to a debate on the media’s role in transmitting public perception and culture of science.

If you thought that corporate control of science policy and its expression in the media was bad in Britain, take a look at it in mainland Europe. There, a CIA-initiated organisation, the Council of Europe, set up by the Americans in 1948 to handle the Allies’ side in the Cold War, dominates most pre-EU decision-making. The European Science Foundation, on behalf of British tax payers, pursues science policy, not through the European Commission or the European Parliament but through the Council. And our end of it, you will be pleased to know, is being organised by Rebecca Bowden, from her office in the Dti.

CHAPTER THIRTEEN

Science Media Centre

After its rather shaky start using the amateur crisis management scientists at the Royal Society, the rebuttal unit settled in at the Royal Institution as the Science Media Centre.

A year after the *Guidelines on Science and Health Communication* had been published, the Consultation Report for the Science Media Centre – *Where science meets the headlines*¹ – was published. The Report ushered in the centre, which, it said, was to be ‘unashamedly pro science’. The centre would ‘strive to promote a broad spectrum of scientific opinion’. Of course that was all codswallop, just like the frequently reiterated question that ran through the report: ‘Should the Science Media Centre be Pro-Science or Neutral?’ What an absurd dichotomy! The lobbyists are good at setting up straw men, which they knock down while acting dourly serious facial expressions.

The consultation report is a completely phoney document, produced to make it appear that there was in-depth discussion about the structure and philosophy of the SMC. Contributions from those who attended the consultative meeting are tossed in like raisins into a cake. Although they appear to be given consideration, nothing deflects the organisers of the Centre from their already agreed plan to set up a corporate PR vehicle, which would endorse and control the communication of government science policy.

1 Science Media Centre, Consultative Report. March 2002.

In the report, Nick Russell, the science communication officer at Imperial College, is reported as offering the sage advice, 'You can't be PRs for science and neutral brokers.' What does this mean? That you can't be pro science and objective? Again, according to the Consultative Report, Trevor Phillips argued that the Centre should provide access to dissenting voices on science from NGOs and protest groups, and perhaps include representatives from these groups on the board. It looks like Trevor wasn't briefed too well – or he could have been at the wrong meeting.

April Fool's Day 2002 fell on a Monday. Google reported that it had been using clusters of trained grey pigeons to process search queries. Mohamed Al Fayed announced plans to float Harrods – on the Thames. But the biggest hoax of all at the expense of the British public was not perpetrated until the following day, when the Science Media Centre opened for business. Nor did it waste any time in going about that business. Just a month later it had produced its first document, a report, *MMR and the Media: Learning the lessons*, followed a meeting hosted by the SMC on May 2 and involving what the Centre organisers and Comrade Fitzpatrick suggest were 'many of the key players'.² The way in which this report was achieved shows how smoothly practised cadres can very simply apply the rules of political campaigning to science and appear to use an established social consensus to 'bring down' a scientist whose work challenges corporate profit. In almost every line it lays bare the truth about the SMC.

Time and again it reiterates that 50 people attended the meeting, as if to lend validity to it as a consensus statement. That the meeting lasted for a mere two hours, does not hint at full and frank debate.

2 The Science Media Centre's 'Lesson Learning' session on 'MMR and the Media.'

The 'MMR: Learning Lessons' meeting was hosted by the Science Media Centre at the Royal Institution from 4pm to 6pm on Thursday 2nd May 2002. *There were 50 people present at the meeting*, which was chaired by Fiona Fox, Head of the SMC.

A look at the list of 50 attendees reveals a high percentage of ex-RCPers, none of whom is a scientist. A number who are not part of the inner circle are at least ex-RCP fellow travellers, and the remainder are 'faces,' invited along with insufficient information to cause them to decline what looks like a prestigious event with alcohol. The report itself is anonymously written, most probably by Mike Fitzpatrick. Its prose sings with liberality, and fairness, before it comes to its predetermined consensus.

The whole document is predicated on the idea that, at the heart of the difficulties the government has with MMR, is a communications problem, when it is actually a problem thrown up by a critical scientific investigation.

The section titled *Background to the Meeting*, says almost everything that has to be said about the document, complete as it is with slippery misrepresentations. Five bullet points tell the reader what the meeting was designed to cover. All written from the nebulous perspective of 'we', intended to mean 'the scientific community', the points pretend to address the scientific issues thrown up by Dr Andrew Wakefield's research.

1 -

Did the scientific community engage effectively with the surge in media interest in MMR between December 2001 and February 2002? If yes, how? And if not, why not?

The first question that has to be asked is who is 'the scientific community' in this case. Is it every Tom, Dick and Janice with a science education? Is it scientists working in space research or multiple heart bypass technology? Or only those involved in

medical research? Or, perhaps more appositely, those actually doing research into gut problems in children? This last group comprises the only scientists and therefore the only people qualified to pass an opinion on the work of Dr Andrew Wakefield, and even then they would have to have an intimate view of his work or to have tried to replicate his research.

What point of view are these scientists supposed to have on MMR and Wakefield's research? What does 'engage effectively' mean? Refute? Argue the toss? Research science is not about views, it is specifically about singular material questions and their answers thrown up by research. Given that Andrew Wakefield made no general statements questioning the efficacy or safety of vaccines, but simply produced findings, how was the 'scientific community' to 'engage effectively' with the surge of media interest in MMR?

It is obvious what this question really means, and that is: 'Did government spokespeople and corporate representatives successfully reassure the public that MMR was perfectly safe, after Andrew Wakefield had spoken at a conference to announce the results of his 1998 paper?

2 –

What efforts have been made since 1998, when Andrew Wakefield's research first began to garner serious attention?

Sorry, I must have nodded off. Did I miss something? 'What efforts have been made' to *what*? To test his observations, scientifically? Well, none. To get him to a meeting of scientists and ministers to explain his observations? None. To employ a team of scientists to replicate his work? Again, none. To destroy his reputation? Well there's ... Ah, *I* see what it means! What efforts have been made to engage effectively with the surge in media interest since 1998? Does this mean to join with or to combat?

The question is evidently not asking what any independent Science Media Centre should ask. That is, 'Have we helped to bring this information to relevant members of the scientific community and then given publicity to the process by which those scientists have been equipped to review Wakefield's research? Have we done our best to educate the public as to how scientific disputes of this kind are resolved?

3 -

Are scientists powerless in the face of a news media that loves the minority, anti-establishment view?

Now, this is a really interesting question. Dr Wakefield was one of Britain's most acclaimed medical scientists until 1995, when, according to comrade Fitzpatrick he became a 'maverick'. And what is Dr Wakefield's 'minority view'? Is it the results of his scientific research? How is it possible for the conclusions of scientific research within a small, select area of enquiry, to be anything other than a minority view? Were all the other medical research workers involved in vaccine work also looking at whether or not measles vaccine had settled in the gut? Did they come to a majority verdict at odds with Andrew Wakefield's? Dr Wakefield's research results do not represent any *view*, only his clinical case observations or the results of laboratory enquiries.

If this 'view' of Andrew Wakefield is the minority view, presumably the majority view is that no circumstances exist in which measles vaccine in MMR can ever create health problems. All that is necessary, in that case, is for the government, the ABPI or the MHRA to release all the tons of observational evidence on every child who has ever been given MMR. Shouldn't be too hard.

Then, what's this about the media 'loving the minority, anti-establishment view'? That must be why the Revolutionary

Communist Party won the 1987 general election, no? The Party always had phenomenal support from the media.

* * *

The problem is that the SMC and corporate science does not now, and has not ever, wanted Dr Wakefield's research results to become an issue in a public debate. Hence the description of him as 'a minority', as 'anti-establishment', as 'a maverick'.³ These are all epithets designed to denigrate. The document discusses 'mavericks' at two points.

Of particular concern is the scientific community's treatment of 'maverick scientists'.

The way that the science and media communities deal with 'mavericks' is crucial to whether their research is lauded, decried or ignored.

One wonders how this would translate into other areas of professional competence. *The way that the architectural and media communities deal with 'maverick' architects is crucial to whether their buildings are lauded, decried or ignored. The question of whether they collapse or stay standing is, of course, entirely incidental.*

The programme of the SMC echoes to the letter that of the pharmaceutical and chemical companies. They are most concerned to develop a language of risk that minimises the perception of the dangers to the public of chemicals and pharmaceuticals. Like small boys with test tubes, they want to impress

3 The concise Oxford Dictionary defines maverick as: 'an unbranded calf, in other words a calf which has not had the sign of ownership stamped on it; an unorthodox or undisciplined person.' It is difficult to see how either of these epithets could apply to a scientist carrying out scientific work, all of which is highly disciplined – except, of course, if the user was illiterate.

upon you the importance of peer review, despite the fact that most pharmaceutical company science is not only not properly peer reviewed but rarely sees the light of day.

The People Involved

Fiona Fox, head of the SMC. Her long and controversial involvement in the RCP Network first came to light after she wrote an apologia for the genocide in Rwanda that appeared in the magazine *LM*. Fox's article was condemned by the Nazi-hunters of the Simon Wiesenthal Center, amongst many others. It is revealing that someone whose journalism has been called 'shoddy' and 'and affront to the truth' was selected as the director of an organisation which claims the role of making sure controversial scientific issues are reported accurately in the media.

Becky Morelle, the senior press officer, graduated from Oxford University in July 2001 with a first-class degree in chemistry. She began work at the Royal Institution in September 2001, and has been working at the Science Media Centre since 2002.

The other staff at the Centre, originally included Dr Mark Peplow, who was responsible for liaising with the scientific community; Claire Bithell, science information officer, and Becky Purvis, assistant.

The Governing Board of SMC, includes a core of civil servants and former civil servants who link the SMC directly to government. Professor David Cope, is director of the Parliamentary Office of Science and Technology (POST). Dr Peter Cotgreave is director of Save British Science. Dr Tristram Hunt, a historian, and TV presenter, is a former adviser to Lord David Sainsbury. Dr Paul Martin, a science writer, is a former director of communications at the



Cabinet Office. Vivienne Parry is co-ordinator of the GUS Charitable Trust, Lord Andrew Stone is chairman of Deal Group Media plc and, among other things, is on the advisory board of McDonalds Restaurants, while Adrian Van Klaveren, Head of News Gathering at the BBC, is in charge of the department at the hub of the BBC's news operation.

The Science Media Centre is supported financially by, among others, Abbott Laboratories, AstraZeneca, Chiron, Glaxo-SmithKline, Wyeth and Powerjet – vaccine manufacturers all. As well as other pharmaceutical interests, which include Eli Lilly, manufacturers of Prozac, Elsevier, publishers of *The Lancet*, whose chairman is on the boards of GSK, Merck Sharp & Dohme and Pfizer.

Chemical companies are also very generous with their funding, with the Chemical Industry Association, and Du Pont (UK) Ltd, the Chemical and herbicide producers stumping up for the Centre.

The biotech and agribusiness industry, including Syngenta, the world's leading agribusiness company, and of course science organisations such as the American Association for the Advancement of Science, the Medical Research Council, and a scattering of food and drink companies. The two large media interests that give money are the BBC and Rupert Murdoch's News International, a major supporter of New Labour. □

Science Advisory Group

The Science Advisory Group of the Science and Media Centre is made up of 16 high-ranking scientists and Professor Simon Wessely. The distinction between Major Players and Concerned Scientists on the science advisory panel below is slightly false. All the scientists on the panel are of more or less of the same mind, in that they want to see science in the driving seat, they all believe in animal testing and vivisection, while most of them play an active part in popularising science.

However, in relation to MMR, myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS) and GM produce, the major players stand out as being those who spin their dogma through government and into the media. This is not to say, of course, that in the future the most serious conflicts might not arise around global warming, nuclear fusion, robotics or any of the specialities of other panel members.

The Science Advisory Panel for the SMC shows strong links to the government, the pharmaceutical industry and the biotech and GM industry, and with the inclusion of Professor Simon 'Mystic' Wessely, representing the psychiatric aetiology of ME/CFS, Gulf War syndrome (GWS) and multiple chemical sensitivity (MCS), non-scientific advice is also available. The panel contains thirteen individuals, whom, although obviously not without influence, do not actually have their hands on the tiller. Others, however, are in such powerful positions that their place on the panel makes it appear to be a direct conduit for corporate-government spin.

CHAPTER FOURTEEN

The Major Players

The great advantage to New Labour of privatising government in the way that the Party has done, is that a large part of government can now be conducted beyond the Palace of Westminster, in virtual secret. New Labour has decided to organise the whole bioscience programme of Britain out of public view.

The person who is nominally in charge of implementing bioscience policy is Sir Richard Sykes. He is doing it, probably, as you read this, drawing on government funds, with a secret group of helpers, half of whom are executives of the major pharmaceutical companies.

Sir Richard Sykes is the most major of players, especially since he stood down as chairman of Glaxo-SmithKline plc in May 2002. In the early Eighties he had experience in North America, working for the Squibb Institute for Medical Research in New Jersey, returning to the UK in 1986 to work for Glaxo. He was appointed deputy chairman and chief executive of Glaxo in March 1993, then chairman and chief executive of Glaxo-Wellcome plc in May 1997. Sir Richard received his knighthood in 1994 for services to the pharmaceutical industry. In January 2001 he became Rector of Imperial College of Science, Technology and Medicine London.

He served as President of the British Association for the Advancement of Science in 1998-99. He is a Fellow of the Royal Society, an Honorary Fellow of the Royal Society of Chemistry, a Fellow of the Academy of Medical Sciences, a Fellow of Imperial College School of Medicine, King's College, London, and an Honorary Fellow of the Royal College of Physicians. He is, clearly, a jolly good fellow, as nobody can deny, and appended his signature to Sir Derek Burke's 2002 letter to the PM.

Sir Richard has been a member of the board of directors of Lonza Group Ltd, Basel, since March 2003, and was appointed vice-chairman of the Lonza board in April 2005. Lonza Group is a wealthy life sciences company, which operates 18 production and R&D facilities in eight countries, and is the world's leading custom manufacturer of active chemical ingredients, intermediates and biotechnology solutions to the pharmaceutical and agrochemical industries. Sir Richard has also, since 1997, been a member of the board of directors of Rio Tinto plc, 'a world leader in finding, mining and processing the world's mineral resources', or plunderer of the planet, depending on your point of view, and a company that, down the years, has needed all the crisis management it could get.

Sir Richard's career in government as an invisible minister began in 2000, when he was elected to lead the Pharmaceutical Manufacturers delegation in the Pharmaceutical Industry Competitive Task Force (PICTF) negotiations. From that point onwards, things just got better.

The Task Force deliberated between April 2000 and March 2001. The co-chairmen were Lord Hunt, then Parliamentary Under-Secretary of State for Health, and Tom McKillop from AstraZeneca. The Government team consisted of Lord Sainsbury, Baroness Blackstone, Nick Raynsford MP, Stephen Timms MP and the Permanent Secretary at the Department of Health. The team from the ABPI comprised Sir Richard Sykes,

J-P Garnier, now chief executive of Glaxo-SmithKline, Bill Fullagar, ABPI president and chairman of Novartis, Ken Morgan, ABPI vice-president and with Pfizer up to June 2000, and Vincent Lawton, APG chairman and afterwards Merck Sharp & Dohme; and, finally, Trevor Jones, then the director general of the ABPI. Observers from the Prime Minister's Policy Unit attended all meetings, and a variety of officials from government departments were called to meetings to discuss certain issues.

The concluding of the PICTF was followed by the implementation of another group, to meet at least once a year, named the Ministerial (Pharmaceutical) Industry Strategy Group (MISG). This group, involving cabinet Ministers, staff from the DoH, the Dti and executives of the major pharmaceutical companies, continues to refine policy at its meetings.

In the MISG, leading pharmaceutical executives meet with ministers to resolve 'key issues that affect not only the industry, but the interests of Government and patients'.¹ The most important benefit of the MISG to the pharmaceutical companies, however, is that through it they are able to advance partnerships, linking up with the government and NHS, and that through these partnerships, they can sell drugs.

When the Strategy Group first met in 2001, it was co-chaired, as was the PICTF, by Lord Hunt and Tom McKillop.² Like the PICTF, the MISG negotiates rolling policies. The phar-

1 ABPI Review 2003.

2 Other members of the Group were: Lord Sainsbury; Margaret Hodge, Minister of State for Education and Skills; Paul Boateng, then Financial Secretary to the Treasury; Sir Richard Sykes of Glaxo-SmithKline, Vincent Lawton of Merck Sharp and Dohme. Margaret Hodge is married to Henry Hodge, who began his professional life as a solicitor in Camden and Islington, before becoming a barrister. The company that he established, but in which he is no longer a partner or associate, has been involved in a number of difficult and mainly unsuccessful product liability cases against chemical, vaccine (*cont.*)

maceutical industry puts its demands to government, and the government pledges action in exchange for the industry taking larger parts of the NHS off its hands.

One of the results of the MISG, announced in March 2002 by Lord Hunt, was an agreement between the Department of Health and the pharmaceutical industries, enabling joint funding of clinical research on pharmaceuticals in the UK. This agreement, it was said, would lead to the *faster development* of new drugs.

The agreement is something for which Wyeth Pharmaceuticals, in particular, has continued to ask since their collaboration in the early Nineties with the Public Health Services Laboratory (PHSL) over the meningitis vaccine. One thing that this means for patients is that increasingly they will be asked by their doctors or hospital consultants to take part in trials. While this sounds fine in theory, in practice it could well lead to the NHS bringing pressure to bear on patients to be experimented upon.

The Labour peer Lord Hunt of Kings Heath has become a lynchpin in Blair's plans to bring the NHS into partnership with the pharmaceutical industry. As well as co-chairing both the PICTF and the MISG, Hunt attended the High Level Group on Innovation and Provision of Medicines meetings, which wrote the G10 Medicines Report published in May 2002.³ Press releases issued during the G10 medicines meetings, and the report itself, offered every incentive for pharmaceutical sector expansion in Europe.

(*cont.*) and pharmaceutical companies. He became head of the Bar Council, and he is now Judge Henry Hodge, Chief Adjudicator at the Immigration Appeals Authority.

3 These meetings brought together health ministers from Germany, France, Portugal and England, with the president of Glaxo-SmithKline, the president of the European Federation of Pharmaceutical Industry Associations, the Swedish Secretary of State for Industry, the president of Internationale (*cont.*)

The next stage in the planning of the new NHS and the development of the pharmaceutical industry in partnership with government, was the Bioscience Innovation and Growth Team (BIGT), set up by Lord Sainsbury and Lord Hunt. After a meeting with the BioIndustry Association⁴ (BIA) in the summer of 2002, they decided to ensure that by 2015 the British bio-industry sector would equal in competitiveness that of the North Americans.

In order to plan this progress, in December 2002, the Dti and the NHS, together with the BIA, set up the Bioscience Innovation and Growth Team (BIGT). Four working groups were set to examine specific topics, with one dedicated to reviewing NHS/industry partnerships and how they might be constructed 'to enable expeditious developments of new technologies such as vaccines, diagnostics and other medicines'.

The chairman of the BIGT steering group was Sir David Cooksey, chairman of Advent Venture Partners, a leading UK

(*cont.*) de la Mutualite, the European Commissioners for Enterprise and Consumer Protection, the chief executive of the Picker Institute, the president of the Association of the European Self-Medication Industry and the chairman of the European Generic Medicines Association. The Picker Institute is an international survey research institute of which the European part is based in Oxford. The institute, which conducts feedback surveys for the whole of the NHS area, assesses medicines and procedures from the point of view of the patient. It is one of a clutch of evidence-based medicine research establishments, which have evolved over the past decade, was set up by an American and is funded in part by Merck & Co. The Institute chairman is Sir Donald Irvine.

4 The ten-man Executive Committee of the BioIndustry Association (BIA) includes representatives of the following companies: Antisoma plc (anti-cancer drugs), Astex Technology, (anti-cancer drugs), Lectus Therapeutics Ltd (drugs for diseases of smooth muscle hyper-reactivity), Oxford BioMedica (gene therapy drugs), Microscience (vaccines, in production: Hep. B, Anthrax, Meningitis B, Streptococcus), Paradigm Therapeutics (human-genome-based drugs), Chiron Biopharmaceuticals (vaccines), InteRea International (management company.)

venture capitalist.⁵ Considering that BIGT was planning the use of biotechnology for the NHS over the next decade, it is odd that there was only one health person on the steering committee of 11 members.

Seven members represented private biotech interests, one was from the Prime Minister's Office, one from HM Treasury, and one from the Office of Science and Technology. Of the seven members of the steering group with interests in private industry, a number had worked for or had interests in pharmaceutical companies. Dr Peter Fellner, the executive chairman, has worked for or has interests in Roche, Searle, Celltech and Ionix pharmaceuticals.

This complete imbalance of private interests over government departments was reflected in the working groups. Even the group reviewing NHS/industry partnerships, made up of 17 members, included only three from the NHS, and one NHS-orientated academic. Only one of the NHS representatives was from a department that even vaguely dealt with health, that of the Chief Scientific Officer of the NHS. In fact, although the PR catch-phrase for BIGT was *Improving National Health, Increasing National Wealth*, the emphasis on health was minimal and the creation of wealth optimal.

The problem was, of course, as it had been with Sainsbury's other bright ideas, that two crucial elements were missing for the plan to create the best bioscience health delivery service in the developed world. Traditional epidemiology was complete-

5 Sir David Cooksey has been involved in the venture capital business since 1981, when he founded Advent Venture Partners. He was the first chairman of the British Venture Capital Association in 1983/84. He entered the venture capital industry following a career in industrial engineering. Sir David is also currently the senior director of the Bank of England and chairman of the UK Government's Small Business Investment Task Force. Until the end of 1999, he was a governor of the Wellcome Trust.

ly absent, so all the participants were talking in a vacuum without considering the health needs of real populations.

As is often the tendency today, representatives of the bio-industry were all trying to snatch a piece of the action, based purely on the apparently theoretical forward development of science. The other missing element was democracy. In clearing the runway for bioscience, New Labour was also clearing it of citizens. There is no room for ordinary citizens' input into the new world of science, so they have been dropped utterly from the equation, and 'steak' holders (the better fed citizens), are now the powerful vested interests, the NHS, the Dti and academic departments in Universities.

The task of the BIGT was to identify any barriers that could significantly hold back the growth of the bioscience industry in the UK and to make recommendations as to how these obstacles could be overcome. These recommendations were to influence the future shape of government policy. In fact, this was the same brief as PICTE, and some of the recommendations were along the same line.

When the BIGT Report was finished in November 2003, Blair welcomed it in a speech, 'Science Matters', at the Royal Society, commenting: 'The biosciences are, rightly, drawing much admiring attention at the present time. I want Britain and Europe to be at the forefront of scientific advance.'

With the acceptance of The BIGT Report, the Bioscience Leadership Council (BLC) was set up. The Council was to be chaired by Sir Richard Sykes for a three-year period. It is comprised of six leaders of the bioscience industry and six stakeholders. It meets four times a year and reports to David Sainsbury and the head of the NHS twice a year. Since 2004, this Bioscience Leadership Council (BLC) has been implementing the BIGT Report recommendations. How far New Labour has now moved away from any kind of people-centred democratic

process can be seen by the fact that I could not readily find the names of members of Sir Richard Sykes's BLC.

The most bizarre overbalance of the private sector and lack of democratic overview, can be seen on the ethical, safety and regulatory committee which has been set up at the behest of the Bioscience Leadership Council. It is here, of course, in this area, that one would expect the maximum input from lay consumers and users of therapeutic services.

The BIGT report recommended the creation of a Bioscience Risk Assessment Forum. Set up by the BLC, it was initially called the Bioscience Futures Forum (BFF). A PR puff for the group says they 'will horizon-scan across bioscience advances and consider the ethical, social and regulatory questions, which they raise.' The BFF is an expert group with 11 members,⁶ five of whom currently work for pharmaceutical companies, one whose institute is involved in the design of drugs, a science journalist, an IT expert, an executive of a venture capital company, and two people who look as if they might be of use, but who, unfortunately, are likely to be of more use to the pharmaceutical companies than to citizens or consumers – an expert in risk communication, and a Cambridge philosophy don. The BIA, the trade association, provides the secretariat for the BFF and organises the expert working group meetings.

It might be said without exaggeration that Sir Richard Sykes is the most important man in Britain in relation to science poli-

6 Dr Gill Samuels, CBE, executive director of Science Policy & Scientific Affairs, Europe at Pfizer. Dr Simon Best, chairman, Ardana Ltd reproductive health pharmaceutical company. Dr Peter Cochrane, Co-Founder ConceptLabs C A, IT consultant with a 38-year career at BT. Jeremy Curnock Cook, executive chairman, BioScience Managers Limited, an international venture capital firm. Dr Roger Highfield, science editor, *The Daily Telegraph*. Professor Ragnar Lofstedt, director of the King's European Centre for Risk and Risk Communication. Dr George Poste, director of Arizona Biodesign Institute, Arizona State University. Quote: 'The work of the institute will (cont.)

cy as it is affected by the pharmaceutical and biotech industry. It's difficult to imagine what he talks to ex members of the Revolutionary Communist Party about over tea and biscuits following meetings at the SMC.

* * *

Professor Christopher J. Leaver, CBE FRS, is currently professor of plant science, Oxford University, head of department and a Fellow of St John's College.⁷ He is vice-chairman of the Executive Committee of the Biochemical Society and a leading Fellow of the Royal Society. Leaver was a member of the working group organised by the Royal Society, that produced the 1998 report *Genetically Modified Plants For Food Use*.

The second major player in the SMC advisory panel is also, as revealed in Part Three, a Trustee of Sense About Science who promotes GM crops, while attacking organic agriculture. In an article in 2003, based around a survey by Sense About Science, Leaver claimed he had been 'the victim of personal threats as a result of taking part in the GM debate'. He put his name to Professor Derek Burke's letter to Blair of 2003, which argued that scientists working in GM were demoralised, and that their sterling work was being misrepresented and sabotaged. Typically, quackbusters and sceptics use this tactic to expose the irrationality of the opposition, presenting no evidence in support of their claims.

(cont.) significantly enhance ability to develop new classes of pharmaceuticals.' Professor Dominic Scott, senior lecturer in philosophy, University of Cambridge, and one of the founders of The Forum for Philosophy in Business. Dr Malcolm Skingle, director of European Academic Liaison, GSK, with responsibility for research interactions and collaborations with universities. Dr David Slavin, global head of benefit and risk technologies, Pfizer Inc. Professor Patrick Vallance, Professor of Medicine UCL, research advisory board of GSK.

⁷ John Innes Centre.

Leaver was a panel member of the government-sponsored GM Science Review. From spring 2000 to summer 2003 he was on the Council of the Biotechnology and Biological Sciences Research Council (BBSRC), the leading funding agency for academic research in the biosciences in the UK, which is awash with funds granted by Lord Sainsbury. The BBSRC was responsible for gagging Arpad Pusztai when he announced the results of his research.

For most of the time that Leaver was on the BBSRC's council, its chairman was Syngenta director Peter Doyle. Leaver is also a member of the Governing Council of the UK's leading plant biotechnology institute – for which the BBSRC is the principal funder – the John Innes Centre (JIC), a Trustee of the John Innes Foundation, the director of John Innes Bioprospects Ltd, and a director of John Innes Agriculture. The JIC's biggest commercial investor has been Syngenta. The John Innes Centre is also closely linked to Lord Sainsbury and helps to fund Sense About Science.

Leaver took an active part in the UK's public debate on GM in 2003, despite characteristically claiming that it had been 'hijacked' by non-governmental organisations (NGOs). His declaration of interests on the GM science review web site lists at least two paid consultancies with GM companies: Rhône Poulenc (1993-1998) and Syngenta (1998-2002).⁸

When the report on the debate was published showing overwhelming public opposition to GM, Leaver complained that public hostility was leading to a brain drain. George Monbiot suggested that Leaver's closure of the Oxford Forestry Institute, 'and shifting the focus of his department away from whole organisms and ecosystems towards molecular biology and genetic engineering' represented a brain drain in itself.

⁸ GM Watch. Profile, Professor Chris Leaver.
<http://www.gmwatch.org/profile1.asp?PrId=75>

In a paper presented at a British Crop Protection Council conference, Leaver gave as his main source Dennis Avery's book *Saving the Planet with Pesticides and Plastic* (1995). Avery is a one-man war zone in the fight to legalise DDT and vociferously promoting every other chemical known to man.

Professor Simon Wessely plays an important part in a network of psychiatric medical professionals whose views and research are almost completely coincidental with those of the government policies of Britain and North America. He has access to funding, media and support, which enables him to shape and promote the prevailing view about a number of issues which are of importance to those States.

Professor Wessely is the leading chronic fatigue syndrome research academic in Britain, heading the CFS Research Unit at King's College Hospital, now part of Guy's, King's and St. Thomas' School of Medicine (GKT). There he also heads the Gulf War Research Unit and pursues the role of civilian adviser in psychiatry to the British Army. Since the end of the 1980s, Professor Wessely has steered a fine line, carefully avoiding categorising ME and CFS patients as mentally ill, whilst nevertheless working hard to classify their illness, against the prevailing trend, as a psychiatric condition.

Wessely has established an unrivalled position as a well-placed government adviser and peer reviewer in almost all the seminal journals. He has been involved with every serious inquiry into ME and CFS over the past decades, and his papers and those of his colleagues, produced in considerable number, dominate the field in any literature review.

Professor Wessely should be granted a dictionary of his own, so far has he stretched the meaning of the English language while attempting to explain that ME although a 'real' illness, is often first imagined. He has trodden the tightrope of

confusing semantics with the balance of Blondel and the focus of a train spotter.

In the late 1980s, as described in Part One, as a member of the newly-formed Campaign Against Health Fraud, Wessely collaborated closely with former trade magazine hack Caroline Richmond, the campaign founder, who played a leading role in helping him to publicly demolish the scientific categorisation of ME and to re-determine it in the minds of the public as a sham illness. His collaboration with Richmond, and later with the feminist literary critic and professor of humanities Elaine Showalter, empowered both Richmond and Showalter to speak with spurious authority at conferences and seminars on ME, CFS and Gulf War Syndrome, despite their complete lack of medical expertise or education. Showalter has become deeply involved in Wessely's forays into military-funded GWS research. Her atrociously muddled book, *Hystories: Hysterical Epidemics and Modern Culture*, suggests that ME, GWS and such things as claimed alien abductions are all equally part of a contemporary hysteria.

Wessely's research results and publicly-expressed views have stirred the ire of patient self-help groups. He has stated openly that members of such mutual support groups for ME and CFS are fooling themselves, refusing to face up to the reality that their illness is psychosomatic.

Wessely works in the most prestigious London units involved in psychiatric research. The GKT complex also encompasses the Institute of Psychiatry (IOP). The whole of Wessely's department in the IOP is committed to, and working on, issues relating to the psychiatric aetiology of illness. He is also involved in the King's College Centre for Risk Management (KCRM), which is researching the perceived health risks of mobile phones and their masts, with the view, no doubt, to finding that there are none.

The IOP receives funding from, among others, Unilever, SmithKline Beecham, Pfizer, Novartis, NPS Pharmaceuticals; Lilly Industries Ltd. (manufacturers of Prozac), Hoechst Marion Roussel, Glaxo-SmithKline (Seroxat), Bristol Myers Squibb, Bayer, Zeneca and Wyeth.

Professor Wessely has been employed or grant-aided by both the British Ministry of Defence and the US Defense Department. He has contributed to seminars and meetings at NATO on crisis management of public fears of terrorist incidents. His connections with the military clearly involve conflicts of interests, and his work on Gulf War syndrome is thus automatically more suspect than that of independent researchers.

Professor Wessely is an adviser to PRISMA Health, which was founded in 1999 and began establishing its programme in Europe and North America. Its head office and the corporate staff are based in Essen, Germany, and its president in the year 2000 was George F. Thoma, a German managing partner at Shearman & Sterling, a global law firm with more than 1,000 lawyers based in the world's financial capitals. Representatives of the US government and the most powerful corporations of North America, such as Monsanto, have visited the company's offices in New York. Thoma is a member of the company's Mergers & Acquisitions Group, and practises primarily in the areas of corporate law, mergers and acquisitions, corporate restructuring and privatisations.

Thoma, who has worked for banks, chemical and pharmaceutical companies, worked inside the Treuhandanstalt, the Berlin-based agency created by statute and charged with directing all aspects of the privatisation process in the federal states. He helped to privatise the East German shipyards, and became the principal counsel and co-ordinator representing the Treuhandanstalt for the privatisation and corporate reorganisation of the chemical, mining and public utility industries in for-

mer East Germany. His law firm worked for SmithKline Beecham in its \$189 billion merger with Glaxo Wellcome, creating the world's largest pharmaceutical company. Another partner at Shearman & Sterling was chosen by Bush to be Ambassador to China, while others can be found on the Council on Foreign relations.

Professor Wessely devised the programme on CFS that PRISMA is selling to insurance companies for people with chronic fatigue syndrome. Interestingly, he says nothing in the company introduction about patients suffering from any kind of psychological difficulties, although he lays emphasis on antidepressant drugs, the prescription of which, one imagines, must be preceded by some kind of psychiatric evaluation.

Professor Wessely played a leading part in the Chief Medical Officer's Inquiry into ME/CFS, which was organised from 1998 to 2002. Very near the end of the inquiry, the psychiatric aetiology contingent walked out en masse, claiming that the final report of the committees would veer too close to suggesting that ME and CFS was a physical illness. Despite this childish protest, the final report advised that more funding should be given to the MRC to investigate ME and CFS.

The money for this further research was duly granted to the Medical Research Council, and then diverted, *in toto*, to Wessely's colleagues. The funding was used to finance what have become known in ME circles as the 'fraudulent PACE trials'. This research looked at the already-decided psychological treatments for the 'psychiatric' conditions of ME and CFS.

Wessely has also, recently, found a perfect home working alongside Professor Sir Kenneth Calman (see Parts Two and Five), the former chief medical officer, who initiated the CMO's report into ME/CFS, and to whom Dr Wakefield wanted to talk about the risks of MMR.

Calman, now of Durham University, sits on the Advisory Panel to the All Party Group on Health with two highly placed vaccine company executives.⁹ He is also Chairman of the Radiation, Risk and Society Advisory Group (R,RSAG), a body within the Health Protection Agency (HPA) that was set up in 2001 and of which Wessely is a member.¹⁰ The purpose of the group was originally to spin the work of the National Radiological Protection Board (NRPB). [At this point, the words, 'all in it together' drift through my mind.]

The purpose of the R,RSAG is explained on the HPA web site in an obscure manner. The R,RSAG, it says, was set up to 'improve the ways it [the NRPB] heads public views and communicated with the public.' A linguist would find the use of the word 'heads' in this context very interesting. The word that comes closest to explaining 'heads' is 'leads' which in turn means to guide or, as in 'lead story', *the items of news given greatest prominence in newspapers*. What it might have meant to say is that the R,RSAG 'heeds' public views, if so, this was an interesting Freudian slip.

Perhaps more frightening than the fact that the HPA has built in communications units or spin groups, is the oddly alienated and thoroughly patronizing manner in which the R,RSAG talks about its role: 'R,RSAG assesses, on a continuing basis, *what the public wants to know about radiation, risk and how society will be affected by such issues.*'

9 Op. cit. Walker, *The Ghost Lobby*.

10 Other members of the R,RSAG are, Ms Lis Birrane, HPA, Ms Deborah Cohen, BBC, Professor William Gelletly, University of Surrey, Mr Edward McConnell, The Marlborough School, Professor Jim McQuaid, Royal Academy of Engineering, Dr Michael Murphy, University of Oxford, Professor Nick Pidgeon, University of East Anglia, Professor Lynda Warren, University of Wales Aberystwyth, Dr Hilary Walker, Department of Health.

One of the bullet points that explain what the R,RSAG actually does, has an ominous ring which we have heard before (see chapter on Media Guidelines): 'Developing a series of guidelines, testable by the HPA, on ways of responding to risk issues.'

The R,RSAG is keen to get into schools to explain science and risk to schoolchildren, and to this end it has been holding meetings with various education bodies.

The web site goes on to say that the R,RSAG was set up to help the NRPB to achieve this leading of public opinion in practical ways. The group reports only to the board of the HPA, which is studded with members who have pharmaceutical and other conflict interests.

In October 2004, after a meeting between the R,RSAG chair and secretary and the communications director of the HPA, it was decided that the group was handling spin for the RPB so well that, with the inclusion of other representatives, it could handle spin for all the other departments of the HPA. The new group would be managed by Lis Birrane, the HPA communications director. So Wessely is now quite close to helping spin **all** matters relating to public health and science in Britain.

Professor Sir David King was appointed chief scientific adviser to HM Government in 2000, and is head of the Office of Science and Technology. He was formerly professor of physical chemistry at the University of Cambridge, then Master of Downing College and head of the university chemistry department. King is in among the major players, not because he appears to have taken a dogmatic or corporate view on any of the scientific subjects upon which this book focuses, but simply because, as chair of the Advisory Committee on Science and Technology, and as the man who briefs the Prime Minister and the Cabinet Office on anything of scientific importance, whose office is next to that of Lord David Sainsbury, it is likely that he

would take soundings from those with whom he sits. In effect, this means that others associated with the SMC have a direct conduit on their subjects to the Prime Minister, or even, conceivably, vice versa.

CHAPTER FIFTEEN

The Concerned Scientists

Professor Sir Chris Llewellyn-Smith is director of the UK Atomic Energy Authority (UKAEA) Culham Division, which is responsible for the UK's thermonuclear fusion programme. He is a theoretical physicist. He has been a Fellow of the Royal Society since 1984. He presently serves on the Government Advisory Committee on Science and Technology (ACOST).

Professor Lord Robert Winston became a Life Peer in 1995. He was recently chair of the House of Lords Select Committee on Science and Technology. He currently researches transgenic technology, particularly for models of human disease and organ transplants. His research also involves maturing human eggs outside the body.

Winston is professor of fertility studies at Imperial College School of Medicine, London University. He also heads the Department of Reproductive Medicine at the Hammersmith Hospital in London.

Professor Sir George Alberti was president of the Royal College of Physicians, London, until July 2002, when he was appointed by the government as the first national clinical director for emergency access.¹ He is responsible for overseeing the implementation of the Reforming Emergency



¹ Don't call him if you get locked out of your house, it's emergency access to hospitals.

Care Strategy. As president of the RCP (not, in this case, the Revolutionary Communist Party), 'he was in close contact with the government and the Department of Health, 'providing advice and feedback from a medical viewpoint to ensure the highest standards of patient care in the implementation of new developments in the NHS'.

He is a GMC committee member and president of the International Diabetes Federation (IDF), which is sponsored by corporate partners, including Eli Lilly, Novo Nordisk A/S, Roche, AstraZeneca, Merck Sharp and Dohme, Novartis, Bayer, Pfizer UK, Sanofi-Aventis, Groupe Servier, Glaxo-SmithKline.

Professor Peter Atkins is a SmithKline Beecham Fellow and a tutor in physical chemistry at Oxford. He is the author of the world's best-selling chemistry book, *Physical Chemistry* and a contributor to the *New Humanist*, published by the Rational Press Association. As a confirmed skeptic, he was involved in a long-running row with Professor Robert Morris, who, before he died in 2004, held the Arthur Koestler Chair in the Parapsychology Unit at Edinburgh University for almost 20 years. One of the more reasonable charges levelled against Professor Morris was that he was anti-science. In answer to his detractors, however, Morris said, 'I see what we're doing as within the spirit of science, not even slightly anti-science.' He warned, 'Scientists do themselves a great deal of disservice if they say a particular area has a lot of problems and we are going to ignore it. If it has a lot of problems, you shine a spotlight on it. Why should we hide from it?'

In the BBC2 *Counterblast* programme shown in April 1998, Professor Atkins admitting that he was a 'bigot' and that his mind was totally closed towards anything connected with the paranormal. He is the husband of Professor Susan Greenfield (see below).

→

Professor Sir John Krebs is a Royal Society research professor in the Department of Zoology at Oxford University. Between 1994 and 1999 he was chief executive of the UK Natural Environment Research Council. Krebs is described as one of the worlds leading ecologists, so it came as a surprise when, in the year 2000, he was chosen as the first chairman of the UK Food Standards Agency (FSA). The Agency was set up to try to restore the ailing reputation of British farm produce following the BSE crisis, and thus emphasised food safety over nutrition.

It duly set about revealing 'the sometimes surprising truth' behind such 'food myths' as that there are good and bad foods ('False: There is no such thing as "good" food or "bad" food. There are only "good" or "bad" diets' - got that?) To this end, it has a 'Naughty but nice' page on its web site, featuring recipes that include 'a mouth-watering chocolate cake for you to gorge on', and the advice that 'biscuits, cakes and confectionery make significant nutritional contributions to the average diet'.

After five years of urging caterers to wash their hands, manufacturers to cut back on salt, and the rest of us to eat our greens along with those biscuits and cakes, Krebs announced his resignation. In October 2005 he will take up the post of principal of Jesus College Oxford.

As it turned out, the Food Standards Agency had not been set up simply to reassure British consumers, let alone to promote high nutritional standards, and it quickly became known as an organisation that supported GM produce while denigrating organically-farmed produce, with Krebs at the forefront in this propaganda.² →

² Norfolk Genetic Information Network (NGIN.) FOOD FIX: G8, OECD, FSA, Krebs and Paterson. <http://members.tripod.com/~ngin/fsa.htm>

In the year 2000, the Organisation for Economic Co-operation and Development (OECD) organised a series of conferences, intended to persuade observers of the complete safety of GM crops. The first conference was held in Edinburgh, and the man invited to chair it was Sir John Krebs.³ The only independent participant invited to the conference was Dr Arpad Pusztai, who concluded that it was 'more of a propaganda forum for airing the views and promoting the interest of the GM biotechnology industry'.

In June 2000, fears that the FSA was simply a pro-industry front group, was confirmed when FSA Scotland took on its first director, Dr George Paterson, previously director general of Health Canada's Food Directorate.

After Paterson had taken up his post, it became known that he had left his Canadian department in the wake of scandals, during which Canadian scientists complained that they had been put under enormous pressure to support the genetically-engineered cattle drug Bovine Growth Hormone (rBST). Fast-track approval for GM potatoes in Canada, brokered between Monsanto and Health Canada, pointed to evidence of high-level industry interference in a regulatory process.⁴

Krebs joined ex-RCPers, Lord Taverne and others in advising the SIRC on its *Guidelines on Science and Health Communication*.

The Baroness Greenfield is the first female director of the Royal Institution and a passionate populariser of science. She presented BBC2's *Brain Story* as part of her mission to explain the brain 'in a way that makes sense to everybody'.



³ Ibid, Food Fix.

⁴ Information from George Monbiot sent to anti GM campaigning groups.

She is a neurologist by training and is a professor at Oxford, where her research focuses on Alzheimer's and Parkinson's diseases. She set up the research drug company Synaptica, to patent a novel use for a chemical in the brain. See chapter 10 to read of her involvement with the joint forum of the Social Issues Research Centre. Interestingly, she elected to say 'I'm not a maverick' (unlike Dr Andrew Wakefield) in one of her recent interviews.

Professor Steve Jones is professor of genetics in the department of biology at University College London. He has spent time at Harvard and other North American Universities. His research over the years has centred on understanding genetic variation.

Probably Britain's greatest science populist, he is a frequent radio broadcaster, including presenting a long-running Radio 3 series on science and the arts, as well as a six-part TV series on human genetics. He has a column in *The Daily Telegraph* – 'View from the Lab'. He has won a range of prizes for his popular science books and gave the 1991 Reith Lecture on 'The Language of the Genes'.

Jones is President of the Galton Institute, which was founded in 1907 as the Eugenics Education Society, with Charles Darwin's cousin, Francis Galton, as its honorary president. In 1926, it became the Eugenics Society, and in 1989 the Galton Institute. The Society has struggled to deal with the loss of prestige and support suffered after the Second World War, when 'eugenics' became a very dirty word.

Vehement science proselytisers such as Jones, still fall into difficult arguments about eugenics, despite suggesting that it has been fully rehabilitated. In 2004, he and others got



embroiled in a row about the mention of eugenics in the EU Constitution.⁵

In an article in *The Daily Telegraph* in 2004, Jones argued against an EU Constitution clause, which prohibited 'eugenic practices'. In defence of his argument that scientists should be 'free' to work as they wish, he argued that, in the contemporary world, 'eugenics' meant gene manipulation that could help people to avoid giving birth to children with serious diseases. The clause, he said, could 'curb academic freedom and undermine the efforts of doctors concerned with genetic disease.'

It's a shame that he simply didn't expand on the clause so that we could know that he, too, thought the population should be protected from certain practices of eugenics that might conceivably occur, well beyond his own lifetime, when, for example, an EU State might decide upon mandatory drugging or even sterilisation for the mentally ill.

Jones and Robert Winston, whom Jones brought into his *Daily Telegraph* article without saying that he too was a Fellow of the Galton Institute, still appear to suffer from the impression that the procedures of science are more instructive than the collective views of the people. I for one can see very clearly why the Germans, for example, would want to include a clause about eugenics in the EU Constitution, and why the German people might be terribly sceptical about any kind of manipulation of the reproductive capacity of citizens. □

⁵ EU law on eugenics attacks our freedom. *The Daily Telegraph*, 7 April 2004.

CHAPTER SIXTEEN

Just Another Conference

It's not all grinding cerebral work at the Science Media Centre; it has its perks. In October 2003, the Centre organised a two-day conference, *A New Beginning for Science Communication with the Media*, with the Global Public Affairs Institute. The conference was held at the Dorchester in Park Lane.

The Global Public Affairs Institute (GPAI) controls large sums of money on behalf of leading US PR companies and global corporations facing product liability crises. It was founded in 1988 by a group of executives who believed that there was a need for a supplementary service to help public affairs/communications executives to do a better job in international markets.

The annual corporate membership fee is assessed on corporate revenue and can be \$3,000, \$5,000 or \$10,000. The scope of the Institute's programs include the strategic, advisory, and implementation activities of public relations, crisis management, issues management, employee communications and community relations.

The board of the Institute includes representatives from the Eaton Corporation, Burson-Marsteller, American International Group (AIG), ExxonMobil, Abbott Laboratories, BP, ALCAN Inc., Bristol-Myers Squibb, Johnson & Johnson, and Novo Nordisk A/S, manufacturers of HRT implants. There is one British representative, Dr Jon White, of the University of Birmingham.

The Institute is supported financially by companies which include, as well as those already mentioned on the board: Bechtel International, Biotechnology Industry Organization (Bio), The Dow Chemical Company, Coca-Cola Enterprises Inc, Enron Corporation (time they laundered their web site, dontcha think?), Pfizer Inc, Pharmacia Corporation, Pharmaceutical Research and Manufacturers of America (PhRMA), Schering-Plough Corporation and Serono International S.A. – Switzerland.

The GPAI produces four conferences annually, in the US, London and Ireland, plus one ‘Members Only’ meeting. Some are one-day seminars, while others are held over a two-day period. GPAI’s programmes draw on experts from government, industry, academia and media management.

The themes of the conferences reflect issues in regional markets such as South America, South Asia, or major controversies in science and health, governance and transparency, and the role of public affairs in the new business environment after 9/11.

As well as telling us who the friends of the Science Media Centre are, the conference gives a broad view of both the interests and the concerns of global corporations. All the speakers at the October 2003 conference represented and spoke about either the interests of corporations or the ways in which media might mediate public debate on their behalf. The corporations that were represented at the conference included the ABPI, and vaccine manufacturers Abbott Laboratories, Chiron, Glaxo-SmithKline, Pfizer and Johnson & Johnson.

Science Media Centre director Fiona Fox got up on her hind legs to speak at lunchtime. Other associates of the exRCP Network, speaking at the conference, included Tammy Speers, Cardiff University Journalism Studies, and Vivienne Parry, a writer and broadcaster (see Part Five).

Both Speers and Parry later spoke on vaccination generally, and on MMR in particular, under the heading, 'Issues Arising Out of the Vaccination Program: UK Experience with MMR Vaccination Program' – appropriately, just before the cocktail hour.

Bill Durodié, previously an embedded Communist and Science Research Fellow at King's College, University of London, spoke on 'Bioterrorism and Public Panic: a Major Challenge', on the same platform as Mike Granatt of COBRA,¹ the UK Government's Civil Contingencies Committee, also head of the Government Information and Communications Service (GICS), along with Judy Larkin of risk management consultants Regester Larkin, and Dr Mark Peplow, the original media liaison officer at the SMC.

Subjects for sessions during the conference included the snappily-titled 'New Developments in Medicine in the 21st Century; engaging stakeholders in understanding complex scientific issues – reconciling the interests of the public, policy makers, NGO's, the media and companies in scientific progress'; 'Best Practice in Communicating Scientific Issues GMO's revisited'; 'Accountable to whom? The obligation of companies to engage with the media in public debate on scientific developments'; and 'Risk Communications: The communication and understanding of risk associated with scientific developments'.

Communicating risk to the public so that they understand that scientific developments and corporate profits are worth dying for is clearly a serious contemporary problem for global corporations.

¹ COBRA is activated during circumstances of major civil disturbances. It liaises between the government, the army and the police, including other emergency services.

PART FIVE

- 17 The National Health
Secret Service
Ganging Up on
the Grassroots
The State Plan
- 18 Prime Time For
Another Project
Vivienne Parry
ME/CFS Gets a
MakeOver
The GUS Trust
- 19 PRIME Management
The Research Project
Who's Who in the PRIME
Steering Group
Prime Conclusions
- 20 The Coming Boom
in Mental Illness

CHAPTER SEVENTEEN

The National Health Secret Service

I will argue that ME is simply a belief, the belief that
one has an illness called ME.

*Professor Simon Wessely*¹

Over the past two or three years, the battle has escalated between the psychiatric lobby and those pointing to an organic aetiology of ME and CFS. This struggle might be described as being between the nons(c)i ence of psychiatry and the scientific approach of those who are demanding physical, biomedical research into the illness.

Although the struggle has simmered since the late 1980s and the launch of the Campaign Against Health Fraud, it is now beginning to divide into two clear parts. On the one hand are the psychiatric aetiology camp, who resist scientific investigation of the illness and insist on inappropriate treatments such as anti-depressants, cognitive behavioural therapy and graded exercise, with often disastrous consequences. On the other hand, there are the now-politicised individuals and groups

¹ These words come from the 9th Eliot Slater Lecture given by Prof. Simon Wessely in 1994. Eliot T. Slater (1904-1983), an editor of the *British Journal of Psychiatry*, was also Director of the MRC Psychiatric Genetic Research Unit, Maudsley Hospital, from 1959 to 1965, and a Vice President or Council member of the Eugenics Society almost continuously from 1944 to 1978. Two other individuals, discussed in these pages, are committed members of the Eugenics Society, Steve Jones and Mark Walport.

who argue on every front that proper scientific investigation is the only rational precursor to proper treatment for the illness.

It is relatively easy to identify the gradual development of this increasingly highly-motivated lobby for scientific investigation and to mark its mounting opposition to the Wessely psychiatric school. Foremost, there is the writing of Margaret Williams, whose two volumes of *Denigration by Design*² first gave chapter and verse to Wessely's work, semantics and attitudes. Her continuous output since has provided an ongoing analysis of the assault upon those with ME and some fatigue illnesses.

Then there is the work of Professor Malcolm Hooper,² who linked ME and CFS with Gulf War syndrome, and that of Dr Byron Hyde, who published the major work on the organic aetiology of the illness.³ The first of my books which touched on this subject, *Dirty Medicine*, probably had some influence because it discussed Wessely's role in the Campaign Against Health Fraud and his involvement with Caroline Richmond, that arch advocate of the ME-as-mental-illness hypothesis. My most recent book, *SKEWED*,⁴ was entirely about the underlying motives of the psychiatric lobby, in ME, GWS and MCS.

2 Op. cit. Margaret Williams, page xixn.

All of Professor Hooper's articles can be found on: <http://osiris.sunderland.ac.uk/autism/hooperpg1.htm/>. His two most recent longer works are: *The Most Toxic War in Western Military History*: Select Committee Summary Dec 15 1999, and *Engaging with Myalgic Encephalomyelitis*. Both of which can be obtained from Professor Hooper at: Emeritus Professor of Medicinal Chemistry, School of Health, Natural & Social Sciences, University of Sunderland, Sunderland SR1 3SD, UK. A DVD of *Engaging* can be downloaded at: http://www.satori5.co.uk/1_severe_me/prof_hooper_dvd.html.

3 The Clinical and Scientific Basis of Myalgic Encephalomyelitis / Chronic Fatigue Syndrome. Edited by Byron Hyde, M.D., Nightingale Research Foundation, Ottawa, Canada. A complete list of articles by Byron Hyde can be found at: <http://www.ahummingbirdsguide.com/whyde.htm/>.

4 Op. cit. Walker, *SKEWED*.

The organisation that brought politics to ME/CFS in the most organised and cohesive form has, however, been the One Click campaign and those who have since gathered around it.

Ganging Up on the Grassroots

Since the One Click campaign's inception in 2003, the two women who set it up, Jane Bryant and Angela Kennedy, have faced a vicious onslaught from the psychiatric lobby, its agents and fellow travellers.

Jane and Angela have been insulted, derided, criminalised and ridiculed.⁵ The first person to launch an attack on them was Dr Charles Shepherd, erstwhile HealthWatch member, adviser and trustee to the ME Association as well as adviser to the SMC precursor organisation, the now defunct Ciba Media Services.

Shepherd has run a campaign of criticism so serious against Bryant and Kennedy that they felt bound to make a police complaint.⁶ He wrote letters to the University where Kennedy worked as a lecturer in social science, which raised serious questions about her employment, while a psychologist colleague suggested that the women's children could be taken into care.⁷

A number of attempts have been made to close their web site down. In order to draw attention away from their own invidious campaign, the psychiatric lobby has been using psycop-style black propaganda techniques. One of the strategies is to accuse ME and CFS sufferers of violent campaigns of intimidation.⁸

5 For the full account of this see the One Click campaign site: <http://www.theoneclickgroup.co.uk>

6 The police refused to investigate that complaint. However, in October 2005, Angela Kennedy made another complaint against Shepherd. The One Click group are now waiting for the police to process this.

7 Shepherd also conducted a damaging offensive against Margaret Williams and Professor Malcolm Hooper. For an account of this see *SKEWED*.

8 Op. cit. Walker, *SKEWED*.

Bryant and Kennedy have been to the fore in criticising the persistent attempts to control sufferers of ME and CFS, their carers and their support groups, and have argued forcefully for greater authority to be accorded to the biomedical aetiology of the illness. They have also written and fostered the writing of an exceptional commentary on the fraudulent PACE and FINE trials.

Early in 2005, the One Click campaign found itself in direct competition with a new organisation called the PRIME Project. At their second Steering Committee meeting, this group made an attack on the One Click campaign.

Although it appears that the PRIME project has been set up to help ME/CFS sufferers, its objects are entirely restricted to creating 'a collaboration between patients, carers, researchers and service providers who share a commitment to improving our understanding of ME/CFS'. Of course, to anyone who is aware of what has gone on in the world of ME over the past ten years, this goal seems risible. It is on the whole, researchers who have done most to make living with ME the Kafkaesque nightmare that it has become. The theoretical paradigm of cause, diagnosis and treatment that has been constructed by the psychiatric lobby has influenced GPs and service providers. It has gradually edged ME and CFS into the classification of mental illness and away from the internationally-accepted classification of a neurological disease.

Despite an energetic campaign and some of the best analytical writing about politics and medicine, ME/CFS sufferers have lost ground to a massively more powerful campaign waged by the NHS, the Dti, the Medical Research Council (MRC) and a collection of psychiatrists and psychologists. What began as a straightforward confrontation is now a fully developed and complex psychological war. Nothing said by the establishment about tackling the physical causes of the illness has held true, and all the calumny described by sufferers has proved to be real.

Even if there were to be some movement towards co-operation between patients, researchers and service providers, at this point it would only lead patients ever deeper into the continuum of the psychiatric paradigm of the illness. It is difficult to believe that this was not the initial intention of the PRIME project.

Like the other conflicts approached in this book, the battle between sufferers of the neurological illness myalgic encephalomyelitis (ME) and those who support the psychiatric aetiology of the illness, is a conflict between those demanding proper scientific method and those using the rhetoric of science to disguise a political agenda.⁹

The State Plan

From 1985, until around 1998, the State managed to hold a political line. Supported by all kinds of organisations and agents, it maintained roughly that ME did not exist as an independent organic illness. However, as the numbers of sufferers of ME and serious CFS – now estimated to be between 250,000 and 300,000 in Britain – grew, and as responsible scientists began to report avenues of exploration relating to organic causes, the State's line was forced back, though never breached. Planning a strategy in the heat of battle, the State and its agencies adopted a stance that entailed a 'soft' pretence of agreement on organic aetiology, while in all 'hard' information they pursued only the psychiatric paradigm.¹⁰

9 The exact nature of this political agenda in the case of ME/CFS is hard to discern. In *SKEWED* I concluded that the agenda was probably shaped by the Insurance companies, who would be faced with considerable payments if it were to be shown that ME/CFS had its origins in chemical toxicity. However, there are a number of other propositions about the construction of a political agenda, which should be investigated.

10 This strategy is exemplified in the sayings of Professor Wessely, who is practised at obfuscating. He often couches comments using a conflicting duality, like: physical causes, such as vaccines in GWS, are possibly responsible, while also saying *sotto voce* that psychological fears about the vaccinations, communicated between soldiers, were, however, probably primary.

The heightening of the conflict, and the need for the establishment to defend the psychiatric position while at the same time appearing to pursue science, has backed them into some difficult corners. They entered the Chief Medical Officer's Inquiry, begun in 1998 and ended in 2002, with confidence. Their position was defended by the Linbury Trust, one of Lord Sainsbury's Trusts, which paid for one of their number to sit on the most important committee. However, they finished the Inquiry by withdrawing their participation and walking out collectively in an old-style protest against the consideration given by the Inquiry to the organic aetiology of the illness.

They were again faced with a difficulty when the CMO's Report advised more research funding for ME/CSF. Fearful that such funding might leak into the pockets of those doing real scientific research into ME/CFS, the psychiatric lobby, based now inside the MRC, made sure that every penny went yet again to ruminations about psycho-medical treatments for 'fatigue syndrome' illnesses.

The MRC-funded PACE and FINE trials are underway. Over the next few years they will investigate the relative merits of different approaches to activity management, adjustment and rehabilitation, formally comparing graded exercise therapy (GET), cognitive behavioural therapy (CBT) and adaptive pacing therapy (APT).

The PACE trial is a programme originated by the heavily criticised charity Action for ME (AfME), which took Section 64-government money to promote both trials. It is built on adaptive pacing therapy (APT), a management plan that sets goals and has targets.

FINE is a 'randomised controlled trial of nurse led self-help treatment for patients in primary care with chronic fatigue syndrome (CFS); The nurses act as a 'pragmatic rehabilitation and supportive listening service'. The objective of the FINE trial appears to be for the nurses to go into people's homes so as not

to take up surgery space. Once in the home, the nurse works on a psychological programme with the patient. Both the PACE and the FINE regimes are contraindicated for people with ME/CFS.

The MRC published a Research Strategy for CFS/ME in May 2003, and new services for CFS/ME, funded by an £8.5 million cash injection, were announced on 20 January 2004. This money will see the creation of 12 new CFS/ME centres and 28 local support teams in the next two years.

The NHS moved on the planning of these clinics across the country, which are to treat ME/CFS patients. The clinics were to provide psychologically based 'treatments', the 'need' for which had been lent authority by the PACE and FINE trials. From this point onwards, the whole NHS plan for people with ME and CFS would be organised on the basis of Wessely's irrational assertions that patients suffered not from an organic illness but from wrongheaded illness beliefs.

The clinics are mainly headed by psychologists or psychiatrists, with a few exceptions such as Amolak Bansal, allergist, and Dr Peter Lachman, a specialist child abuse paediatrician. It appears self-evident that the primary role that these clinics will play is to provide human fodder for the PACE and FINE trials, which will have been in operation for at least two years before the National Institute for Clinical Excellence (NICE) guidelines for the treatment of ME/CFS come into being. In the meantime temporary clinical guidelines for the diagnosis and management of Chronic Fatigue Syndrome (CFS)/ME were announced by Health Minister Lord Warner in February 2004. This in itself is arguably illegal, because the NHS clearly has a statutory obligation to treat rather than to experiment upon people with a diagnosed illness.¹¹

¹¹ Published: 23 February 2004. Reference number: 2004/0068 NICE to produce guidelines for the management of CFS/ME.

Not that anyone is holding their breath for the guidelines. There is no reason to suppose that the NICE guidelines will stray from the presently trialled treatments. NICE funds the publication of 'Effective Health Care' bulletins by the department of neurology and psychiatry of the Royal Society of Medicine. One issue proclaimed CBT and GET to be the strategies that have shown the best 'evidence of effectiveness' for the management of CFS/ME.¹²

The clinic teams consist roughly of a specially trained occupational therapist (OT) or physiotherapist, providing activity management and lifestyle guidance, etc., along with a clinical psychologist, counsellor or CBT-trained therapist to help with adjustment and coping for those who need it. Some will have nurses, and/or dieticians, as well.^{13,14} These teams in fact show a considerable resemblance to the teams proposed by Wessely to PRISMA Health, the health provision company that has been touting for contracts in Britain and on whose supervisory board Wessely sits.¹⁵

The regard in which the new centres and multidisciplinary teams are held by those whom they seek to help is evident from the advertisements used to recruit psychologists and others to the teams.

12 Interventions for the Management of CFS/ME: Effective Health Care Bulletin, May 2002:7: (4); RSM reference 43. Cited in Margaret Williams.

13 Editor Theresa Coe interviews Professor Tony Pinching for the February 2005 edition of *InterAction* magazine.

14 'The multi-disciplinary team will comprise of a Consultant Immunologist, Clinical Psychologists, Occupational Therapist, Physiotherapist and Clinical Nurse Specialist amongst others. A Clinical Psychologist with considerable experience of working with patients with chronic conditions is already in post.' Epsom and St Helier NHS Trust. Job title: Highly Specialist Clinical Psychologist in Chronic Fatigue Syndrome Management.

15 Op. cit. Walker, *SKEWED*.

PRISMA (Providing Innovative Service Models and Assessments) Healthcare has become increasingly involved in attempts to rehabilitate patients who suffer from ME/CFS, MCS. But their policies of GET, CBT and pacing, have often proved of little use to patients.

As some clients with CFS may be resistant to working in a psychological framework there may be exposure to verbal aggression.¹⁶

Bloody ingrates! And ...

The CFS Service provides an expert multidisciplinary assessment and management service for people with persistent fatigue for whom medical intervention is no longer appropriate. Patients referred to the service often present with complex medical and psychological problems, are highly distressed and may have difficulty accepting and be hostile to the rationale for adopting a cognitive-behavioural approach to the management of their fatigue.¹⁷

The Investment Steering Group at the DoH, under Professor Tony Pinching, has played a major part in planning and implementing the clinics and their multidisciplinary teams. It devised the process and criteria for setting up the new services, oversaw the assessment of bids and allocated funds. Associate Dean and professor of clinical immunology at the Peninsula Medical School, Pinching is the lead adviser for the DoH on CFS/ME, and one of the 13 clinical champions specialising in the illness across England. He is also Action for ME's (AfME) principal medical adviser. Pinching was chair of the CFS/ME Independent Working Group of the CMO Report of 2002. The Peninsula University is where Professor Edzard Ernst has laid the foundations for evidence based medicine as a firewall against the alternative and complementary medicine that are supposed to be his speciality.¹⁸

16 Copied by the ME/CFS and Fibromyalgia Information Exchange Forum to the CO-CURE@LISTSERV.NODAK.EDU13 Feb 2005. Job vacancy: Employer: Royal Liverpool & Broadgreen University Hospitals NHS Trust Job title: Trainee Clinical Fatigue Therapist.

17 Epsom and St Helier NHS Trust. Job title: Highly Specialist Clinical Psychologist in Chronic Fatigue Syndrome Management.

18 While frequently described as the only Professor of CAM in Britain, Ernst is close to both HealthWatch and CSICOP.

For the two years until the NICE guidelines appear, the psychiatrists and psychologists have the run of the patient population, making up treatments as they go along, and dragooning those they can into the PACE and FINE trials. In the case of children, the worst guidelines presently in use are those from the Royal College of Paediatric and Child Health. We wait to see if NICE comes up with anything better – or worse.

With funding secured and the PACE and FINE trials up and running, there were however, major problems still to be tackled. First, there was the matter of take-up. How was it going to be possible to get those hostile, resistant, aggressive, irrational sufferers into clinics, especially when they understood that this could mean their being labelled as mentally ill? The second, no less serious problem, was how to continue experimenting on people with ME/CFS, without their falling into the hands of real scientific investigators.

The modernised NHS has ways of making you into a pliable patient and to welcome your role as a research subject. Social psychologists have been working on this challenge for the past ten years. These, undoubtedly, were the people to employ to herd the ME/CFS community into the clinics and further trials. Inevitably, the scepticism of the subjects would have to be overcome, and a considerable battle would have to be fought to persuade sufferers that the social engineers and the benefits personnel from the Department of Work and Pensions (DWP), who were about to take on this project, had nothing to do with the psychiatric lobby.

CHAPTER EIGHTEEN

Prime Time for Another Project

The PRIME project was set up by and had initial funding from the GUS (Great Universal Stores) Charitable Trust. It is chaired by Vivienne Parry and managed by Sally Crowe of Crowe Associates, 'specialists in effective people development'. It was parachuted into the ME community with the clear intention of acclimatising sufferers and their carers to the status of research subjects, and preparing the way for them to be cajoled into the national network of psychiatric based clinics.

On November 2, 2004, the PRIME Project held a lunch meeting in order to outline its 'vision'. Journalist Vivienne Parry (on whom more below) suggested that it was a difficult project, especially given the politics in this field. The Trust, she said, felt that distrust was one of the major brakes on future research of the sort that people with ME/CFS wanted. Only collaborative working would bring all parties together and advance research into causes. She might more honestly have said, 'This trust is one of the major brakes on future research of the sort that people with ME/CFS want.'

At the meeting were the management team and a handful of people who had been active in the ME/CFS community over the previous decade. These included the Countess of Mar, Maria Shortis from Action for ME, Jane Colby and Sally Player from the Young ME Sufferers Trust, Charles Shepherd as a representative of the ME Association, and a number of representa-

tives from various ME groups or groups aligned with ME sufferers. After initial introductions, it was reported that one participant said: 'Let's leave the politics at home.'

Left at home with her politics when the PRIME project's steering committee first met on January 24, 2005, was One Click co-founder Jane Bryant. When the PRIME project was first announced, she and Angela Kennedy thought, 'These people sound like thoroughly good eggs!' There were cordial exchanges between Bryant and Crowe, and Jane believed that One Click had been invited on to the steering committee. On September 2, 2004, Crowe emailed, 'Many thanks, Jane. Will be in touch soon re some dates for a first steering group meeting.' With time, however, that invitation dematerialised.

At the steering group meeting of January 24, 2005, Parry claimed, 'People are scared of doing ME research.' She would return to her theme, on June 17 2005 saying, 'We also understood from discussions with researchers – from a very wide range of disciplines – that they were reluctant to enter the field because of what had been seen to happen *to other scientists*. Some people have said that this isn't true. It is. Depressingly, I've heard it from the horse's mouth many, many times.' (Author's italics.)

In the report of the January steering group meeting the sentiment is expressed that, 'We need to discourage some of the "high octane" dialogue between researchers and some voluntary groups that prohibit effective progress'. Why an ostensibly neutral research project was making such highly inflammatory and unattributed statements is not explained.

The second steering group meeting was held on April 27, 2005. It was called by Vivienne Parry and included the management team Sally Crowe, Jude Rogers and Doug Badenoch, and the two PRIME researchers, Carol Edwards and Sophie Staniszewska, both from the Royal College of Nursing Institute

(see below). The meeting was organised like a management group therapy session. Everyone was first asked what they had so far enjoyed about the project. Listed in the minutes are its enthusiasm, honesty and support, and the fact that the project puts ME at the fore (as against talking politics all the time).

The attendees had enjoyed the depth of experience in the ME/CFS community and literature and working together positively. Most of all, of course, the group had felt energised by overcoming antagonism and meeting technical challenges and a whole lot of other quite patronising factors. Next, the PRIME project team presented on progress on the three parts of the project: management, literature review and research interviews, and the e community.

With point two of the first item on the agenda, the presentation of an overview of Project Management and Research Workshops, any notion of 'working together positively' and 'overcoming antagonism' had actually gone out of the window. Sally Crowe launched into a peculiar criticism of the One Click campaign. Members of the steering group, she said, had reported receiving unsolicited emails from the One Click organisation. A request to be removed from One Click's mailing list had been refused. This quickly gave the lie to PRIME's stated desire of working together with all the voluntary groups. If they could not even stomach One Click's news trailer emails, sent out to thousands of interested groups and individuals round the world, how were they going to fit seamlessly into the ME community? Not to fear! The computer programme and web designers who were part of the PRIME's management team showed the group 'how to mark unsolicited emails as spam should they wish to do so'.

Vivienne Parry, Crowe reported, had been doing a bit of research into the One Click campaign. In the style of all good scientists, Parry had carried out a quick straw poll and was happy to share the un-peer-reviewed results.

The administrator of the GUS Charitable Trust is also a high profile medical journalist, and has investigated (sic) the reporting of news items on their web site. She and two colleagues from the national press checked the facts behind five 'news' items chosen at random from the One Click site, going back to source in all cases. All were distorted, four contained two or more significant errors of fact and two were defamatory. One Click could not therefore be considered a reliable source of news.

Also reported were discussions with a number of colleagues representing nine of Britain's national newspaper titles, all of whom said that they ignored any communication from One Click. They did this because 'their stories never check out. They regarded One Click's claims with regard to the media as risible.¹

Like all good journalists and poor scientists, Parry was not about to reveal her sources or her sample group, which, incidentally, she had not set against any kind of control.

PRIME's first stratagem was to offer to quickly draw together the disparate ME sufferers groups, with the apparent intention of building bridges and getting them to pursue a consensus. The most experienced activists knew that any consensus was impossible, and that if one were apparently arrived at, it would be an artifice. The obvious intention of the project was, from the beginning, to gain the trust of ME sufferers, to record their experience in psychiatric terms and to isolate the more politicised campaigners who were calling for scientific inquiries. How else could they sucker thousands of sufferers into the PACE and FINE trials and kick start the first flow through, in the new psychiatrically based networks of clinics?

1 Steering committee meeting of the PRIME project on the Internet.

Vivienne Parry

Vivienne Parry is a writer and broadcaster, and, she says, 'a scientist by training and an enthusiast by nature.' She has presented *Tomorrow's World* and reported for *Panorama*. She is a regular commentator on science for the *Guardian*, has been science editor of *Good Housekeeping* and also writes for the *Mail on Sunday*, *The Sun* and other papers. She was a columnist on Murdoch's *News of the World* for four years.² She has recently written a book entitled *The Truth About Hormones: an up-to-the-minute, highly entertaining guide to those mysteriously powerful things, hormones*. It brims with fascinating facts. For instance, that were Brad Pitt a true Trojan, he would have practised the first known instance of hormone replacement therapy, by eating the glands of his dead conquests. Oh, the warmth, the intellectual erudition and the wit!

In a *Guardian* article Parry chose an already weak subject to launch into a wholesale assault on any kind of precautionary approach. After rubbishing a study that suggests that mobile phones might cause low sperm counts, she went on to discuss why we like to believe in scare stories. After positing intelligent arguments, she moved on to specific corporate products, and almost without thinking, slipped and lost bits of her soul as she fell.

There are several factors that are common to these scares. Anything involving sex: oestrogen therapy and the pill score high because they involve women flaunting their sexual activity beyond menopause or being free of the risk of pregnancy.

If this is post-modern feminist theory, then I'm glad to be counted out. The simplest reason why women should be concerned about the pill or HRT is because, in some women, even light use

² Murdoch is one of the prime supporters of New Labour and his News International has supported the Science Media Centre (SMC).

can lead to serious illness and death. Perhaps Parry hasn't grasped the fact yet, but when you're dead, sex, whether done flauntingly or not, and even without the risk of pregnancy, isn't good.

Parry goes on to lump together all the possible risks of modern life, as if they were urban myths, which had infiltrated our capacity to reason: '... Thus radiation of all kinds is instantly feared, from nuclear power, mobile phones, power lines, transmission towers, microwave ovens and computers'. Of course, this is poppycock. I can't remember the last time I was instantly in fear from an environmental carcinogen.

The fact is, it takes years of reluctant acceptance of technological innovation before we manage to disengage. Few of us actually want to disregard the results of technological progress. Even those of us who have thought long and hard about a particular technology, weighed up the risks, have usually gone on using it long after it has begun to damage us. Few people can actually afford to be instantly fearful of modern technology. And for the poorer sectors even of the developed world, the cheapest most available food options, for example, are usually the most highly processed and most damaging.

Oddly, Parry ends this article giving exactly the kind of advice that she seems to spend her life refuting, when she says: 'It is also useful to find out who is behind the information. Do they have something to sell or an agenda to push? If they do, be doubly suspicious.'³ Well, bless your little cotton socks, Vivienne! We'll make a radical investigative journalist out of you yet.

Perhaps Parry should bring this same spirit of enquiry and double suspicion to bear on the DoH's Joint Committee on Vaccines and Immunisation (JCVI) of which she is one of the

³ Vivienne Parry, the *Guardian*, Sunday, Jul 04, 2004.

few lay members – the vaccine manufacturers meet *Tomorrow's World*. The JCVI is an expert advisory committee, first set up in 1963. Its terms of reference are to advise the Government on vaccination policy: 'The Chair and members of the Committee will play a critical role in ensuring the Committee's continued standing as an internationally recognised leading body in the field of immunisation.'

The JCVI is perhaps the most important committee relating to vaccination in Britain, and determines vaccine policy for the government and the MHRA. Also sitting on it is Brent Taylor, the person responsible for asking Andrew Wakefield to leave the Royal Free Medical School. (See Part Two).

In declaring her vested interests for the JCVI, Parry cited a lecture post with the Royal College of General Practitioners' Leadership Programme. She says the programme was funded by Wyeth, although the RCGP maintains that the present course is actually funded by Roche.^{4,5} In declaring an interest with Wyeth, Parry finds herself in the good company of another six of the 19 committee members who have interests in this particular vaccine and HRT manufacturer.⁶

4 The RCGP Leadership programme has been graced by some important figures in the medical and pharmaceutical world, including Professor Marshall Marinker (who led the MSD Leadership Programme), Professor Nigel Edwards (policy director, NHS Confederation), Dr Fiona Foley (executive vice-president, Global Medicine, Elsevier Health Science), Dr Tariq Mohammed (Time Computers) and Professor Rafael Ramirez (PXG Shell International Ltd and Oxford University.)

5 The Royal College of General Practitioners is also supported by the drug manufacturers Schering-Plough, Janssen-Cilag, Chirus Ltd and Boots.

6 Wyeth is probably the pharmaceutical company closest to New Labour and its plans to 'modernise' the NHS. See op. cit. Walker, *The Ghost Lobby*. at: <http://www.dipmat.unipg.it/~mamone/sci-dem>

Six members of the JCVI have interests of one kind or another in Wyeth, while one member, who works for the new Health Protection Agency, declared no interests while saying vaguely that the HPA is supported by some commercial organisations. He failed to mention that the HPA has a programme of vaccine manufacture in partnership with Wyeth.

Propaganda for the JCVI suggests that, in addition to their work on the committee, members may be called upon by the Secretariat to give advice when matters arise on which their particular expertise may be of assistance to the public service. Members may also from time to time be requested to attend and to contribute to the deliberations of one or other of the panels of the JCVI.

It is, in this case, fortunate that Vivienne is on the board of the Science Media Centre, because she will undoubtedly be able to talk over these important matters with other Board members, including ex-members of the Revolutionary Communist Party. In fact, as the SMC is paid for by, among others, pharmaceutical companies, it seems only right that the SMC should have been listed in Parry's interests.

Vivienne Parry has worked for the GUS Charitable Trust for seven years. The GUS Trust has a policy of entering areas where there is a degree of conflict, or where there is an issue that needs to be brought to the attention of researchers or funders. The Trust did this successfully with prostate cancer.

Parry also ran Birthright for 15 years,⁷ a charity which was ill disposed towards alternative medicine.⁸ This reproductive

7 The aims of Birthright, now WellBeing of Women, include: 1. To promote the sciences of obstetrics and gynaecology and related subjects generally and to advance education therein. 2. To promote study and research work in obstetrics and gynaecology and related subjects and publish the results of all such study and research.

'WellBeing is the fundraising arm of the Royal College of Obstetricians and Gynaecologists and the only national charity funding research into women's health at every stage of life, and that of their babies. For over 35 years, WellBeing has been foremost in the UK in raising money to support pioneering medical and scientific research into obstetric and gynaecological health.'

In 1984, the Birthright Charity helped to set up the Harris Birthright Centre for Foetal Medicine at King's College. This is a private Research Centre which is now funded by the Foetal Medicine Foundation, which receives its money from a number of sources including drug companies.

8 Op. cit. Walker, *Dirty Medicine*.

health charity was replete with pharmaceutical and genome project money. Birthright became WellBeing of Women (WOW), chaired by Sir Victor Blank, also head of the GUS Trust (see below), which now funds research into all aspects of obstetrics and gynaecology. WOW is a member of the Association of Medical Research Charities (AMRC), originally set up by the Wellcome Trust. In the years 2003/2004, WOW awarded grants totalling £1,038,000; its biggest funder is Sainsbury's.

Like her colleague from the Science Media Centre, Simon Wessely, and as her *Guardian* article revealed, Parry is a great defender of the mobile phone. Wessely is the principal investigator at the Mobile Phone Research Unit in the Institute of Psychiatry. This is one of three centres that are trying to show that people who claim they are adversely affected by mobile phones are either imagining it or are the subjects of some idiosyncratic vulnerability.

The SMC supports many of the anti-environmental beliefs of the ex-RCPers, and Parry is happy to encourage the extensive use of mobile phones, the pill and HRT.⁹ *Spiked*, the ex-RCPers web magazine in which Parry sometimes appears, is also more than happy to deny mobile phone health damage. In an article of December 29, 2000, titled 'Mobile Moan', Joe Kaplinsky wrote: 'The leaflet advises, [on the recommendation of the Stewart enquiry] rather predictably, that the best way to reduce any risk from mobile phone use is ... to use the phone less. Unfortunately, since nobody has established that mobile phones are a health risk in the first place, even this obvious advice is unnecessary.'

Parry's working relationship with members of the SMC extends beyond the work of the centre itself. Organising the GUS campaign to bring prostate cancer to public attention, she

9 <http://www.guardian.co.uk/health/story/0,3605,1249399,00.html/>.

had help with the PR work from SMC's head Fiona Fox. While Parry chaired the National Prostate Cancer Conference in November 2004, Fox addressed the conference on *Media Relations – Getting Noticed*.

ME/CFS gets a Makeover

A singular mark of the Projects which have touched Professor Simon Wessely and his associates, however lightly, is that his stratagems resemble nothing so much as psychological intelligence operations carried out by secret state organisations. Whatever motivates Wessely, whatever ruminations push him towards increasing the mental illness quotient for Britain, one aspect of his operation is always transparent, its obfuscation.

The PRIME project was set up to help in the long-term plan to manufacture mental illness on a huge scale. It was, however, vitally important from the beginning that the Project pretended a distance from the psychiatric paradigm and the government. Setting up PRIME with no evident background in the ME/CFS conflict, and maintaining a steely veneer of independence, made it appear at first sight that PRIME was simply helping the ME/CFS community to push forward their case for real treatment.

This apparently positive philanthropic approach got PRIME off to a good start. The propaganda ploy, such as putting the One Click campaign on PRIME's list of acquiescing voluntary groups was a smart move – though no time was wasted in launching a covert campaign to destroy One Click. The inclusion of Charles Shepherd in PRIME's deliberations, meanwhile, guaranteed that no one opposed to the psychiatric lobby would take part.

All the same, it took Jane Bryant some months before she wrote to Vivienne Parry, asking her about the origins of the

organisation and her involvement with the Wessely School.¹⁰ This was anyway, a waste of time. Parry wrote back saying that she has been in the same room as Wessely on only one occasion and then had not spoken to him. 'A link, a link!' she typed, with apparent gleeful sarcasm. Parry, however, seems to have underestimated the famous charm which Wessely has brought to bear on other solid, matronly looking women such as Caroline Richmond and Elaine Showalter. Within six months of this disavowal Simon appeared in a friendly guest appearance on Parry's BBC Radio 4 programme, 'Stressed Out'.¹¹

A more thorough examination of the network surrounding PRIME and its participants shows conclusively that they all share a roughly common philosophy and that none of them is even slightly interested in the scientific research of the organic aetiology of ME or CFS. The one overriding conjunction between all the characters involved is, as stated above, that they are working to a plan that has already been agreed by the DoH, the Dti, the MRC¹² and various outcrops of the Wessely School. The PRIME Project has the acquiescence of a core of politically-motivated psychiatrists and psychologists and a medical establishment that, although it professes evidence-based medicine (EBM), is not much interested in either evidence or science.

The PRIME project consists of two strands, both of which have a similar purpose. First, there is the ongoing project, with the intent of acclimatise sufferers to the incoming psychiatric

10 See PRIME questions on the One Click campaign site.

11 *Stressed Out*, Radio 4, September 8, 2005.

12 Professor Colin Blakemore, the deputy chairman and chief executive of the MRC, is chairman of the Advisory Group of Sense About Science and a Member of Save British Science Society. He is also a leading member of the pro-vivisection Research Defence Society and The Coalition for Medical Progress. Professor Andrew McMichael, another member of the Board of the MRC, is also a Member of Save British Science Society. (Cont.)

treatment programme and to familiarise them with ideas about patient participation in research conducted by psychologists and psychiatrists. There is absolutely nothing in the programme that augers new useful help for ME/CFS sufferers, just the old, tried and mainly failed psychiatric and psychological rehabilitation schemes.

According to its literature, PRIME is aimed at three groups:

- For people living with (or who have recovered from) ME/CFS, it will give voice to their experiences and influence the research agenda.
- For researchers, it will provide better access to a wide range of people with ME/CFS and a shared understanding of their research priorities.
- For service providers (in the clinical network co-ordinating centres and the specialist teams), it will provide a better insight into the experiences and priorities of their service users.

The PRIME Project, its personalities and its context, discussed in more detail in chapter 19, can be reviewed in four parts. First there is Parry's GUS Trust. Second, there is the management of the project, a triumvirate of organisations, referred to as the

(*Cont.*) The MRC has a Neurosciences and Mental Health Board (NMHB), which covers all aspects of research into the neurosciences and mental health. It has a College of experts membership – NMHB Membership. Professor Trudie Chalder, Wessely's right-hand woman at the Dept of Psychological Medicine KCL, is a part of this College of Experts.

Professor Simon Wessely, who was formerly a member of the Neurosciences and Mental Health Board, is now on this small committee, which has refined and restructured the MRC approach to project funding. In 1998, the MRC set up a Monitoring and Evaluating Steering Group (MESG) to assess how all of its research funding schemes were performing. A final report at the end of 2003 led to the restructuring of the grant schemes that the MRC was undertaking at this time.

‘project management’. Third, there are the two academics conducting the research project, which, although it is to be ‘led by patient needs,’ seems to have been outlined and inaugurated by the GUS Trust. Finally, there is the project steering committee, an examination of which gives us a good idea of the project’s direction.

The GUS Trust

In the past, the Wessely school, and therefore the government strategy, has been supported and encouraged by funding from Lord Sainsbury’s Linbury Trust. While the Trusts run by David Sainsbury are temporarily ‘blind’ during his tenure as Minister for Science, they still bear an obvious relationship to the Sainsbury family and therefore to David Sainsbury and his work in defence of ‘science’.

As Science Minister, David Sainsbury is also the head of all the Research Councils, including the Medical Research Council (MRC). It is hardly surprising that the MRC has played a considerable role in promoting the psychiatric aetiology of ME and offering Simon Wessely a base from which to organise and financially refuel.

The Great Universal Stores (GUS) Trust¹³ was chosen to float and finance the PRIME project. The chairman of GUS,¹⁴ Sir

13 The three Trustees are Sir Victor Blank (chairman), Lady Patten of Wincanton, and David Morris (GUS company secretary.) Among the three areas on which the trust focuses when making charitable donations are in the field of medical research. Over the past five years GUS has made contribution to the Trust; 1999: 505,000 / 2000: 458,000 / 2001: 600,000 / 2002: 828,000 / 2003: 963,000.24 / £967,000. Major awards were: A campaign around prostate cancer and research and treatment for Down’s syndrome.

14 GUS is a retail and business services group involved in general merchandise retailing through the Argos Retail Group; information and customer relationship management services through Experian, which is a subsidiary; and luxury goods through a majority shareholding in Burberry Group plc. In 2003 – 2004 GUS had sales of £7.5 billion and profits taxation of £827 million.

Victor Blank is a member of the Financial Reporting Council and of the Council of Oxford University.¹⁵ He is an Honorary Fellow of the Royal College of Obstetricians and Gynaecologists and of St Catherine's College, Oxford. He personally chairs two charities, one of them WellBeing of Women (WOW).¹⁶ The GUS Trust gives generously to medical charities including those researching cancer and Down's syndrome.

There are ten directors on the Board of GUS, only one of whom, John Coombe, has a substantial history with the pharmaceutical industry. In 1986, Coombe joined Glaxo as group financial controller, and, in 1992, he was appointed finance director. He continued in this role through Glaxo's transformational mergers with Wellcome and SmithKline Beecham, becoming chief financial officer of Glaxo-SmithKline plc in 2000. He retired from GSK in March 2005.

¹⁵ Oxford University also houses the publishing company Oxford University Press, which published Michael Fitzpatrick's book on MMR.

¹⁶ One of WellBeing's Trustees is Miriam Stoppard, who has been a drug company director and advocate of HRT.

CHAPTER NINETEEN

PRIME Management

In 2004, Dr Sophie Staniszewska and Dr Carol Edwards, two sociologists from the small academic Institute of the Royal College of Nursing (RCN), whose work focuses on patient participation, were awarded a grant of £127,000 from the GUS Charitable Foundation. Given under the head of Partnerships for Research in ME/CFS Project, the money was to cover a small qualitative research project and the consultancy costs of Crowe Associates and Minervation Ltd. All the grantees lean towards the idea of psycho-social and psychiatric interpretation of patients' presentations.

Minervation is a spin-out company from the Centre for Evidenced-Based Mental Health (CEBMH) in the department of psychiatry at Oxford University. Its business is 'the creation and management of web-based knowledge systems for health-care providers, using the best available evidence from systematic clinical research'.

The two men who developed Minervation beyond the CEBMH, in 2002, André Tomlin and Douglas Badenoch, have similar backgrounds. Both trained in information science and have spent a number of years working in evidence-based health care. Tomlin is the general manager and Badenoch is development manager. Tomlin developed the NHS National electronic Library for Mental Health (NeLMH). All his writing is about

mental health evaluation, such as ‘Answering mental health questions with reliable research evidence’.¹

Minervation is still an affiliate to the CEBMH, along with the National Collaborating Centre for Mental Health (NCCMH), one of seven centres established by the National Institute for Clinical Excellence (NICE) to develop guidance on the appropriate treatment and care of people with specific diseases and conditions within the NHS in England and Wales. Established in 2001, the NCCMH is responsible for developing mental health guidelines, and is a partnership between the Royal College of Psychiatrists and the British Psychological Society.

Crowe Associates, the other grantee, is a husband-and-wife consultancy team. Since 1987, David Crowe worked for blue-chip companies such as British Telecom, Sainsbury’s and Allied Dunbar, in general management and marketing, before specialising in training and development as a consultant during the 1990s.

Sally Crowe, aided by Jude Rogers, is the principal manager of the PRIME project. One of her tasks in managing PRIME has been to develop partnerships with the ME/CFS charities and groups, the ME/CFS research community and people living with or recovered from ME/CFS – to give, in other words, at least an illusion of inclusiveness.

Crowe has worked in the public sector for many years, and she says that her consultancy skills lie particularly in the area of patient/public involvement in the public sector. This has included project management, facilitating partnership workshops and conferences. Crowe Associates has worked over the

1 Tomlin, A., ‘Answering mental health questions with reliable research evidence’, which was published in *Evidence Based Mental Health* 2000 3: 6-7.

past few years for the MRC, Isis Accord Ltd, NICE, Oxford Radcliffe NHS Hospitals Trust and the UK Atomic Energy Authority (UKAEA).

Sally Crowe has substantial experience of working with the MRC. In 2003, she worked as the only private consultant on a consultation project of considerable importance to the MRC and its senior researchers: 'The MRC Response to the MHRA Consultation on draft legislation for the *The medicines for human use (clinical trials) regulations 2003: MLX 287*.'

The consultation centred on the EU Clinical Trials Directive, designed to protect trial participants, to simplify and harmonise trials across Europe, and return to patients rights that have been lost. The MRC claimed, as did the ABPI, that the directive would not be in the interest of the public. The UK DoH and the MRC had invested some energy in steering the European Convention on Bioethics and Human Rights (see chapter twenty-two) through the Council of Europe.² The convention, adopted in 1996 by the British government, eroded the previously complete right to informed consent, and gave doctors 'a green light' to experiment with emergency procedures without consent. It also gave psychiatrists greater powers to detain the mentally ill in institutions.

According to the MRC and the ABPI, trials conducted in the UK were the best in the world, they enhanced the health of the world population, and the proposed legislation would impede publicly-funded trials without improving trial quality or patient safety. Britain having become a safe haven for drugs trials, the MRC, the drugs industry and the government were

² A dummy democratic organisation set up by the CIA and British intelligence organisations in the 1950s to fight Cold War battles. It has nothing to do with the EU. See this author, S. Dumontet and H. Grimme (ed), *Biology, Biologists and Bioethics: Concerns for Scientists, Politicians and Consumers*. Foxwell & Davies, Italia, 2004.

determined that no more regulations or legislations should creep into the system. They had spent two years negotiating with Big Pharma, reassuring it about the continued use of animals in testing, and the right to use unproven techniques on seriously ill people without their informed consent.

Through the MRC consultation, scientists hoped that they could put together a collective case for stopping the directive. Sally Crowe was given a seat on the steering committee because of her previous experience in setting up schemes that got patients into trials. There were eight other people on the committee, all from university departments, including the department of Psychiatry at King's College. Wessely, who had considerable interest in keeping the regulatory scheme of trials just as it was, was one of 19 individuals consulted. He gave evidence alongside nine large institutions, including the Wellcome Trust and the British Heart Foundation. Less than a year later, Sally Crowe was managing the PRIME project, barking the patients in to the PACE trial.

Sally Crowe has also been chosen to chair the James Lind Alliance steering group, which, together with the James Lind Society, the Royal Society of Medicine and INVOLVE,³ have initiated the Alliance so that patients, public and clinician groups can tackle areas of uncertainty in trials and treatments together.

The Research Project

The fear that the PRIME project is yet another push to seek acceptability for the psychiatric lobby is further increased by a look at the second strand of the project, which involves research

3 INVOLVE is run by Sir Nick Partridge (awarded the OBE in 1999) who was running the Terrence Higgins Trust during the AZT trials. The Trust was at the forefront in getting support from the Wellcome Foundation, the manufacturers of AZT, and helped to marshal subjects for the Concorde and other drug trials (see: http://www.posh.uk.org.uk/history/history_rewritten.html) (Cont.)

into attitudes, feelings and presentation of people with ME or CFS. While qualitative research work is very important, it can go no way towards resolving the question of bio-medical research, and real treatments for those suffering from ME and CFS.

Dr Sophie Staniszewska and Dr Carol Edwards have been involved in various communication-between-patients-and-services type projects. Staniszewska, who is also a tutor at the Oxford University department of health sciences, is described as leading 'a programme of research on patient evaluation and involvement in health care'.

Over the years, a number of Staniszewska's papers and presentations have been reported on subjects that straddle the divide between sociology and psychology. The work of Dr Carol Edwards, whose first degree was in psychology, has mainly focused upon how patients see themselves and their treatment. 'Carol's main research interests are the experience, interpretation, and behaviour of individuals; and the effective application of qualitative methodology to research questions in this field.' The PRIME study is said to involve a literature review, interviews, and user involvement, in the field of ME/CFS, *to identify research priorities from the patient's perspective.*

All this qualitative, patient-participation work is, of course, valuable when it comes to according patients dignity and value, while affording them proper services within a health

(Cont.) The James Lind Alliance seeks to get people more easily involved in non-pharmaceutical trials and to create consensus groups and agreements on public health programmes. However, one look at these ideas reveals that they all involve a certain amount of coercion of potential participants so that science might do its job properly. And the schemes are still the absolute opposite of community epidemiology, the teaching of which would help local communities to investigate their own environmental threats or to carry out their own trials.

care system that can frequently overlook their needs. But in the case of ME, GWS and conditions of multiple chemical sensitivity such as might be caused by exposure to pesticides, studies of people's perception of their illnesses will invariably get bogged down in issues of depression, pain and lack of mobility, while failing to address epidemiological questions about physical causes and effective treatments. This, considering that the Government has spent eight million pounds on setting up clinics to dispense GET, APT and CBT, more or less against the will of the community, seems an incredible waste of time.

What such studies will rarely examine is the countervailing philosophy of State agencies, doctors and psychiatrists who are actively discouraging scientific discourse, which sufferers desperately want to be laid on the table.

Who's who in the PRIME Steering Group

On September 4, 2004, Sally Crowe emailed Jane Bryant thus:

'Just a quick note to say that the project group met yesterday for the first time and one of the discussion points was the steering group.

We have been inundated with requests to sit on this group, and thus will be developing a fair way to represent the views and experiences of the CFS/ME charities/voluntary groups on this group.

I will be in touch soon when we have worked this up a bit with some more information. We will also be making it more explicit that there are many other ways to contribute to the project.'

There was to be no room, then, for Jane Bryant, Angela Kennedy, or any such "high-octane" campaigners. Heaven forbid that there should be any real discussion! It was to be all Parry and no thrust. So who, from the eager ME community, *did* make it on to the committee?

Apart from individuals in patient groups, others had been selected by some secret managerial process. They included: Diana Elbourne from the London School of Hygiene and Tropical Medicine & the Social Science Research Unit; Elizabeth Mitchell from the MRC; Esther Crawley, Royal United Hospital, Bath; Sarah Perkins of the MRC; and Professor Nicky Britten of the Institute of Clinical Education at the Peninsula Medical School.

The steering group of PRIME has the unlikely task of reconciling disputes between bodies representing views of people with ME/CFS and their carers. The project managers and Vivienne Parry, seemingly without any debate, drafted in seven professionals from outside the ME/CFS community.

One of these, Elizabeth Mitchell, is the external communications manager for the MRC, while another had sat on the Chief Medical Officer's working group and on the ME Association's board of trustees. Another, Professor Nicky Britten, comes from the heart of evidence-based medicine at Peninsula Medical School in Plymouth. Britten is presently working on plans for research with Professor Anthony Pinching (above).

These people come from a restricted set of backgrounds linked to evidence-based medicine and patient research involvement programmes. PRIME, GUS or Parry obviously brought in their best technicians to overcome resistance to PACE and to strip the community of its politics. Having spent its £8 million, the government clearly wanted to get the best use out of the clinical centres and multi-disciplinary teams for its money.

Chair of the steering group, Elisabeth Buggins, also chairs the NHS Birmingham & Black Country Strategic Health Authority. She has worked with the voluntary sector on local, national and European projects that interface with health services. Examples include the IMPACT, QRD and VOICES

Projects, developing skills for users and professionals in how to inform and influence decision-making in both research and NHS services.

The IMPACT, QRD and VOICES research programmes are all ones that attempt to link up research and policy commitments with public participation. In the IMPACT programme, healthcare workers are trained alongside service users, so that each side of the relationship gains an understanding of the other. Unfortunately, the last big IMPACT programme was for the child and adolescent mental health services in Plymouth, and was to enable young people to participate effectively in the development and management of their local young people's mental health services. This should ring alarm bells among people with ME and CFS, because Buggins has been drafted in to use these skills in bringing together ME service providers and users.

Diana Elbourne is professor of health care evaluation at the medical statistics unit of the London School of Hygiene and Tropical Medicine. A randomised controlled trial (RCT) about women holding their own obstetric records formed the basis for her PhD. In 1990, she was appointed deputy director of the Perinatal Trials Service (PTS) in the National Perinatal Epidemiology Unit (NPEU), co-ordinating a series of multi-centred RCTs in the perinatal field, and conducting associated methodological research. She took over as honorary director of the Perinatal Trials Service (PTS) in 1994, joined the medical statistics unit in 1997, and was appointed professor of healthcare evaluation in March 2002.

Diana's main interest is in clinical trials and how you can get people to participate in them. She has a deep involvement with the International Cochrane Collaboration, the Campbell Collaboration, and latterly at the Evidence for Policy and Practice Information and Coordination Centre in the Institute of Education. She is also a member of the steering committee for

the newly-established Centre for the Evaluation of Public Health Interventions.

Elizabeth Mitchell is external communications manager for the MRC Corporate Communication, responsible for managing the MRC's public communications initiatives with all stakeholders and partners other than media.

Dr Esther Crawley works within specialised services for children and young people with CFS/ME in the south-west, and is part of the Clinical Network Centres Collaboration. She is also a member of the senior academic staff at Great Ormond Street Hospital and the Institute of Child Illness, one of the trial centres for the Health Protection Agency's testing of vaccines.

Professor Nicky Britten's research interests include 'concordance', a phenomenon by which patients actively engage in their own treatment, which might also be seen, by some, as patients' active compliance/ acquiescence in undergoing treatment.

Prime Conclusions

One of the main strategies of the psychiatric lobby has always been to destroy and disperse independent patient groups, while using its own covertly-led groups as sounding boards. The MRC's own 'PACE Trial Identifier' documentation openly states their assumption that 'membership of a self-help group and access to sickness benefit prolongs illness'. Wessely has often expressed the view that illnesses such as GWS are communicated to new sufferers when they discuss their health problems with others.

The PRIME project has entered the ME community as a well-managed insurgency campaign. Having lumped together all the illnesses that make up CF syndromes, they now want to separate all the patient groups from any political leadership

that has emerged. They have sent in their best operators to pacify the patient population, and pursued them to acquiesce in an expensive series of useless trials, which will enable the State to erect a minimal system of services provision, through which thousands of designated mentally ill individuals can be cared for 'in the community'. These individuals will also be studied in relation to any psychological manifestations of their illness.

Medical and psychiatric consultancy companies will make a fortune. Within a very short time, Wessely's recommendations for the prescription of anti-depressants and other drugs, as advised in his consultancy to PRISMA, will be standard practice.

From this point forward, the chance to pursue a proper discussion about the aetiology of the illness, its research and treatment, will be massively diminished.

CHAPTER TWENTY

The Coming Boom in Mental Illness

What concerns people more is the 'medicalisation of normalcy', with the implicit fear that redefinition of what is normal, will bring with it some form of compulsion to treat perceived deviations from the norm.¹

In May 1993, William Waldegrave, the chancellor of the Duchy of Lancaster, launched the Conservative government's White Paper, 'Realising our Potential - A Strategy for Science, Engineering and Technology'. In this paper, the Conservative government emphasised the importance of science, engineering and technology to wealth creation and the quality of life. The White Paper indicated that the government would launch a Technology Foresight Programme, led by the chief scientific adviser. The aim would be to ensure closer interaction between scientists, industry and government, through a programme that sought to identify future opportunities and threats for science, engineering and technology.

The Foresight Programme is a kind of rolling Royal Commission on Problems and Innovation in Science which appear on the horizon. Its aim, as well as to weld together

1 A subsidiary report, 'Perspectives of the Pharmaceutical Industry', published by the OST as part of 'Drugs Futures 2025' Foresight Programme Report of July 2005. The quote cites the Conference, 'Connecting Brains and Society' 2004, organised by the King Baudouin Foundation and the Rathenau Institute.

industry and government, is to create value for science and technology development – although its web site describes its function ‘both as a driver of change and as a response to the needs of society’. It is open to debate, whether or not the programme has ever effectively responded to ‘the needs of society’, if by ‘society’ we mean the public. The Foresight Programme conducts opinion surveys and runs focus groups, while at the same time seeking the involvement of all kinds of science institutions, but it never actually takes any of its projects out into the dangerous world of open public debate.

In 2000, Lord Sainsbury, the Science Minister, announced a review of the Foresight Programme. The key findings of the review were that the programme needed to refocus on science and technology; to be more flexible, to take account of emerging developments; and to focus resources more clearly on where they would best add value. In order to allow new issues to be targeted and picked up quickly, a new, fluid, rolling programme of projects was established in April 2002. The Foresight Programme has so far been through two rounds and is in the middle of its third.²

In July 2005, the Foresight Programme brought out its report ‘Drugs Futures 2025’. To produce the Report, Foresight drew together teams of interested parties to discuss and make recommendations for future directions. The report was organised under the auspices of the Department of Trade and Industry. The panel that organised the discussion was chaired by the chief scientific adviser to the Government and Sense About Science scientific adviser Dr David King. With King on the co-ordinating committee of the report was another Sense About Science scientific adviser, Professor Colin Blakemore, the vivisector and executive head of the Medical Research Council.

2 1st Round of Foresight (1994 – 1999), 2nd Round of Foresight (1999 – 2002), Current Phase of Foresight (2002 –).

In very summary fashion, the line of development of the pharmaceutical industry discussed by the Foresight Committee might be stated as this. 'Except in certain notable areas, we have come to the end of the line in producing chemical drugs for specific illnesses. The future lies in the development of biogenetic pharmaceuticals, particularly those that affect cognitive perception. The widest use for these new drugs is in the area of mental health. In the future, more subtle corrective biopharmaceuticals should be available to alter patients' perception of their mental – or physical – states.'

The main body of the report discusses a relatively wide range of problems, including some around cognitive enhancement drugs, which are truly scary. Discussing the use of psychoactive drugs in social control, it postulates for discussion, the future possibility of public order offenders being handed over by the police to psychiatrists who would treat the culprits with, among other things, vaccines to end their addiction problems.^{3,4}

This report is an expertly-written pointer to the future for the pharmaceutical industry. In the most positive and understated terms, the industry lays its heavy head in the lap of science and asks society to stroke its back. The industry has fallen on hard times and is now under constant attack. Some of this is our own fault – for example, in the case of trials, which need better regulation. But in the present climate, it is going to be difficult to move directly onto the development and production of the psychoactive and psychiatric drugs that everyone might

3 The pharmaceutical companies that contributed to their report, were sceptical about such uses of drugs and expressed their opinion that there might be ethical problems attached.

4 Under pressure from the food and drink industry, New Labour has done its best with the creation of 24 hour drinking to introduce more people to alcohol addiction.

want. Regulatory processes make for long lead-up times to launching drugs; they will be difficult to test and trial, firstly because, with the current legislation, we are not sure if we can use animals, and secondly because trialling such drugs on voluntary subjects could be difficult. As well, critics have claimed that we make up mental illnesses just to create markets for drugs.

A subsidiary report, within the Foresight report from the Pharmaceutical Industry, entitled 'Perspectives of the Pharmaceutical Industry', published by the Office of Science and Technology,⁵ makes this point about the advancing reliance of the industry on psychiatrists and other mental-health evaluators. The report was actually put together by Dr Ian Ragan of CIR Consulting Ltd, 'to find out the views of the pharmaceutical industry on the use of psychoactive substances in the future'. The consultancy sent a questionnaire to biotech and pharma companies, including, Amgen, GSK, Lilly, Merck, Neurocrine, Pharmidex, Pfizer, Roche, and Xenova. A number of these companies are funders of Sense About Science.

The report discusses attention deficit hyperactivity disorder (ADHD) and compulsory treatment in North America, where children diagnosed with the disorder are not allowed into school without pharmaceutical treatment. The market for cognition enhancers is clearly enormous, the report says. The testing of such drugs, the ultimate use of which does not come entirely within the boundaries of 'medical human use', is difficult under the present legislation on animal testing.⁶

5 'While the Office of Science and Technology commissioned this report, the views are those of the authors, are independent of Government and do not constitute Government Policy.'

6 In September 2005, researchers at King's College Hospital found that children diagnosed with ADHD often had brain lesions. This finding is clearly of massive consequence, not least to the pharmaceutical companies, in terms of the narrowing choices of suitable treatments. In North America the (*cont.*)

In the paragraphs that precede the discussion about the ethics and development of mood-altering drugs to improve cognitive function in mental health, there is the following sentence.

Western society at least expects to have effective treatments for mental health conditions that are increasingly accepted as real illnesses.

There were problems, this report suggested, with cognitive enhancement drugs – with clinical trials, for example. Although not stated, this might mean *human rights* problems. The report looked forward to the task of creating preventive treatments for schizophrenia. In relation to general problems of mental health, its authors had the following to say about the relationship between the pharmaceutical industry and psychiatrists.

The industry believes that new diagnostic descriptions, definitions and sub divisions of mental illnesses will arrive within ten years, based perhaps on a better understanding of the pathophysiology and genetic basis of the disease, but more likely on treatment responsiveness. Lack of progress in this area could impede the proper understanding and use of genomic information in disease treatment. New drugs based on new definitions (of psychiatric illness) will follow with a 5-10 year lag.⁷

In the section of the industry report relating to psychoactive substances for non-medical use, the report suggests that it is hard to imagine the industry embarking upon the development of mood-altering drugs for recreational use, especially because

(cont.) prescription of Ritalin has become the most common treatment for ADHD and some schools refuse to let children with this type of problem attend unless they are drugged.

7 *Drugs Futures 2025, Perspectives of the Pharmaceutical Industry*, Executive Summary, July 2005, published by the Department of Trade and Industry.

of the problems of misuse that might arise.⁸ More plausible is the idea that the boundary between medical and non-medical use will shift as a result of greater social acceptance of pharmacological intervention.

⁸ Just as with the tobacco companies, however, one can envisage a thriving 'black market' in such substances, which might be organised in part by the pharmaceutical companies.

PART SIX

21 You Take the Risk,
We'll Take the Money

The Magic of Science, Making
the Evidence Disappear

21st Century Political Science

Who Wants Risk Free,
We Just Want the Truth

22 The Corruption of Science

European Convention on
Bioethics and Human Rights

23 What the Corporations
Are Covering Up

24 From Political Party to
Corporate Science Lobby

Anti Science or Real Science

CHAPTER TWENTY-ONE

You Take the Risk, We'll Take the Money

An analysis of 252 published studies world-wide on cellular radio frequencies out of the University of Washington, obtained by the *Toronto Star*, shows a clear difference in results between independent research and studies directly funded by industry. Among the peer-reviewed, published studies with no direct industry funding, biological effects from cell phone frequencies were noted 81 per cent of the time, according to researcher Dr. Henry Lai. When corporate money is directly funding the science, effects are noted only 19 per cent of the time.

Independent studies showing biological effects, or hinting at possible health effects, have faced a similar barrage of industry criticism. Such studies are typically dismissed as anomalies among an 'overwhelming' body of evidence showing no health risks.

'There's so much money involved, that the only thing industry sees is the money,' says Dr. Jerry Phillips, a well-known cell phone researcher in the US with dozens of peer-reviewed papers published under his name. 'They couldn't give a damn about basic science.'

*Robert Cribb and Tyler Hamilton*¹

¹ Robert Cribb and Tyler Hamilton, staff reporters, *Toronto Star*, 'Is Her Cellphone Safe?' *Toronto Star*, 12 July 2005.

The quotes above come from a story in the *Toronto Star* about cell phone research. They make the first point in any discussion about risk in post-industrial society: industry funded science regularly lies. Starting from this point, it becomes increasingly difficult to assess real risk for individual products and processes, let alone hundreds of interacting risk trajectories.

Mobile phones are a partially-exceptional and extremely good illustration of how corporate science could, in the long term, do the most immense damage to human health. Never in the history of the human race has a new technology used by the individual been distributed over such a wide market, within such a short space of time, without any understanding of long-term effects. In such circumstances, the 'precautionary principle' should so obviously have been applied. Instead, public health concerns have been trampled underfoot in the unbridled rush to profit.²

What the risk experts would say in the case of mobile communications, is that people can make their own choices. This, however, discounts advertising, peer pressure and most typically, the imperfect information manipulated by corporate interests, which distorts the individual's ability to make choices about risk. It also discounts the risk of phone masts, which could affect the health of those who have chosen not to use mobile phones. And it discounts the risk to those on, for instance, a crowded bus or train, who, though choosing not to have a cell phone, may be exposed to something far more pernicious than mindless, loud voiced chatter.

Risk assessment, and its dumbed-down text messages to the public, is of immense importance to global corporations. It is the principle defensive argument, which protects the whole structure of profitability. If the future project of capitalism, tech-

2 Dr George Carlo and Martin Schram, *Cell Phones: Invisible Hazards in the Wireless Age*, Carroll & Graf Publishers Inc, New York 2001.

nology and science development is to be pursued, corporations must be assured of continuing profitability. For this, risk must be downplayed by whatever means.

The Magic of Science: Making the Evidence Disappear

If you make it part of public policy not to consider adverse health reactions from advancing technology, you have to have a fallback position for those who present with illnesses. Fallbacks in the past have appeared piecemeal, crude and elementary.

Sir Richard Doll's disputation of the cause of leukaemia clusters around nuclear installations centred on new *X-Files*-type theories of viruses brought into 'clean'³ communities surrounding nuclear power plants by 'incomers' who came to work there.

The outbreak of *pesticide contamination* in Spain in the spring of 1982, led to the deaths of 700 people, with another 25,000 affected. This deadly epidemic was put down to corrupted oil peddled by itinerant traders, a number of whom served long terms of imprisonment. There was a slight problem with this theory and that was that a number of the victims had not touched the 'contaminated oil', and, naturally, there were those who had used it and who suffered no side effects.⁴

3 These communities were 'clean' because, as they were made up of nuclear workers, they and their families were used to conditions of scrupulous hygiene, whereas 'incomers' were dirty. No wonder Sir Richard Doll was lauded as the world's greatest epidemiologist.

4 Sir Richard Doll was also called in on this case by the CDC. Having worked for the American Chemical Association and been on a retainer from Monsanto for a number of years, Sir Richard was flown out to Spain to put the stamp of approval on the 'cover up' for the US chemical companies. Much to the dismay of the well-trained Spanish government epidemiologists, who had quickly lost their jobs when they concluded that it was a chemicals contamination, and not the oil, which had caused the epidemic. See Gudrun Greunke y Jorg Heimbrecht, *El Montaje del Síndrome Tóxico*, Ediciones Obelisco, Barcelona 1988.

In 1988, a water supply company worker mistakenly tipped 20 tons of a chemical cocktail into the water supply of the small Cornish town of Camelford.⁵ The first health consequences were symptoms such as vomiting and diarrhoea. As time went by, people suffered personality changes, loss of short-term memory, irritability and sensitivity to a large number of other chemicals. The incident caused an unknown number of human deaths. The authorities did everything possible to avoid a serious inquiry, and to avoid any legal claims coming to court.

Ten years after the incident, when the government and the water suppliers had slipped the hawser of any kind of responsibility, Bernard Dixon wrote assessing a Wessely and David paper about Camelford. Dixon, a member of the British branch of the Committee for the Scientific Investigation of Claims of the Paranormal (CSICOP), which helped to set up the Campaign Against Health Fraud (CAHF), stated with sublime irrationality that ‘mass hysteria was largely responsible for the furore’.⁶ In a masterpiece of Wesselyspeak, the Professor himself said, in 1995, that symptoms of ill health in Camelford could have been due to ‘*heightened perception of normal and benign somatic symptoms by both subjects and health professionals ... and attributed to an external cause such as poisoning*’.⁷ Read that again and then let’s have a workshop on it; it’s the work of a semantic wizard.

When you deny the existence of illnesses presented by patients, you also have to deny the mental health of those patients. So much more so is this the case with environmental illnesses, where the psychiatrist can first attack the very mind

5 Op. cit. Walker, *SKEWED*.

6 Bernard Dixon, ‘Still Waters,’ *BMJ*, Volume 311, 5 August 1995.

7 Anthony David and Simon Wessely, ‘The legend of Camelford: medical consequences of a water pollution accident.’ *Journal of Psychosomatic Research*, Vol. 39, No. 1, pp. 1-9, 1995.

frame of both patient and alternative therapists. In a rational world, the subject who is affected by invisible rays from mobile phones or computer screens can be made to appear mentally unbalanced. If you can see the cause, then it is the job of crisis management, psychiatry, psychology or PR, either to convince everyone that is not there, or to disguise it as something else.

As the stakes get higher and the crack in the floodgates widens, more subtle plans have to be drafted. These are plans that start at the beginning by defining as mentally ill those who believe that modern technology can produce chronic health damage. Mental illness is undoubtedly the best fallback position for those responsible for creating environmental illness. And so it is that psychiatrists become part of the front line troops in defence of the State and its corporate partners.

21st Century Political Science

Professor John Adams is one of Britain's top risk experts. He is related to a number of humanist and conservative libertarian organisations, including the Institute of Economic Affairs. He is also a member of the Board of Sense About Science. Either because of this, or because it's a good example, he sometimes includes in his explanations, questions relating to vaccination.

In seeking to manage the *risks in our lives* we are confronted by a form of turbulence unknown to natural science, in which every particle is trying to second guess the behaviour of every other. Will the vendor accept less in a falling market? Will the approaching car yield the right of way? Will enough other parents opt for vaccination so that my child can enjoy the benefits of herd immunity while avoiding the risks of vaccination? (Author's italics.)

Perhaps you can notice the peculiar lack of logic in the last question. Unlike the other two, the assessment of which leads to positive choices and hopefully a definite decision, the last question is mainly to do with other people's sense of social responsibility, and how this affects the subject. The subject's decision not to have their child vaccinated has already been made, while relying selfishly on others to create herd immunity.

The only real question implicit in this example, asked by the mother about, let us say, MMR, is, 'How great is the risk of adverse reaction when weighed against the risk of my child getting a seriously injurious infection of mumps, measles or rubella?' In Britain a second question relating to risk is relevant: 'Is there a greater risk of adverse reaction from the combined MMR vaccine than from single vaccines?'

Looking closely at this throwaway question about vaccination and risk leads us to wonder if we can risk trusting risk experts. If they feel unable to even use the words *adverse reactions* or *iatrogenic damage*, even idiopathic, in a theoretical example in relation to vaccines, what does this tell us?

The work of Professor Adams, like that of other risk experts, tends to concentrate on those areas of risk where it is possible for people to enlarge their ambit of freedom, taking on or declining more risk as they wish. The difficulty with this approach is that it does not cover the multiplicity of risks that are 'forced', sometimes covertly, on the population, against which they can take little or no evasive action. The use of pesticides on most foodstuffs, the use of food additives, the feeding of laying hens with antibiotics and the introduction of GM soya to many imported food products, the sighting of mobile phone masts in urban areas ... These risks are complex and the individuals' decisions about them might be approached with something only resembling perfect information.

Risk experts invariably portray a world in which all information is available to everyone, thus enabling those who are capable, to make completely rational decisions. According to Professor Adams, there are 'three categories of the subject matter of risk perception and management to be considered'.

First, Adams explains, there are *directly perceptible risks* – climbing a tree, crossing a road, riding a bicycle. Second, many risks have become perceptible with the help of science. For instance, with the use of a microscope, previously unseen risks are now identified and labelled.⁸ The third category of risk, or risk perception, or risk management, involves what Adams identifies as 'virtual risk'; that is, risk produced by human activity, about which science has nothing conclusive to say – because it does not come within its purview, or, according to many scientists, does not exist. These risks include those which accrue to food additives, pesticides, low-level radiation, electromagnetic fields and global warming.

But where the science is inconclusive we are thrown back on judgement. We are in the realm of virtual risk. These risks are culturally constructed – when the science is inconclusive people are liberated to argue from, and act upon, pre-established beliefs, convictions, prejudices and superstitions. Such risks may or may not be real but they have real consequences.

8 Professor Adams is clearly favouring science, attempting to maintain the argument that science diminishes risk by identifying it. Does this mean that, prior to being seen through a microscope, these risks were much higher because people didn't know they were there? That an identified risk is somehow a less risky risk? That viruses, before they were visible to the eye, were 'virtual' viruses? As for science making them public, well, yes and no. The cause, and it could be said the risk, of cholera in London was first recorded after an epidemiological survey, which identified a water pump as the source. The epidemiologists were ahead of scientists in white coats, in identifying the source of the problem, though the actual pathogen remained unseen – which is maybe why today's risk experts eschew epidemiology as being the accountancy of the devil. Obviously these people have got to make it appear that science is the great illuminator of risk and its causes.

The use of the categorisation 'virtual' is ominous, because it means – *to all intents and purposes* but not in reality. In his review for the *Journal of Forensic Psychiatry*⁹ of *The Politics of Risk Society*,¹⁰ a book which deals almost solely with the kind of 'virtual' risks of modern technology that might worry citizens or consumers, Adams wonders about those who believe in his category of 'virtual' risk. Such people, he suggests, without a jot of evidence, also believe in a romanticised safer past. They can, he says, reasonably be contrasted with another group who believe that constant technological progress will inevitably make the world a less risky place. Here, Adams is putting the case for the ex-RCP Network.

Adams's definition of 'virtual' risk is indeed culturally constructed, mainly because scientists play a large part in refusing investigation into a massive range of subjects. If, for example, medical scientists really did their job and constructed information about the risk of adverse reactions to all prescription drugs, the doctor's surgery would be a much safer place. They don't because the whole 'science' of risk perception depends upon them denouncing as deranged those who see environmental health damage in modern production.

The perception of virtual risk can come close to hallucination – defined as '*perception in the absence of external stimuli*'. This is territory worthy of exploration by psychiatrists. For those inclined to accept the challenge, this book can be recommended as a good introduction to the intellectual foundations of a syndrome that Furedi has dubbed 'the culture of fear'.

So there we have it! Those who believe in 'virtual risk', that created by advancing technology, which cannot immediately be seen, measured or attached to a material cause, are living with-

9 *Journal of Forensic Psychiatry*, Vol. 10, No 1, 1999.

10 Jane Franklin (ed.), *The Politics of Risk Society*. Polity, London 1998.

in and perpetuating 'a state of fear'. And, of course, this fear is not just a matter of individual neurosis or personal health, it is worrying to politicians because it is the harbinger of hysteria in society. Such hysteria will have to be dealt with by political, medical, juridical or military means.¹¹

Who wants risk free? We just want the truth

In March 2000, a week-long conference, 'Science, Risk and the Regulation of New Technologies', was held at Merton College, Oxford. Most of the speakers came from a humanist/rationalist background and many of them spoke from the point of view of corporate science. Professor John Adams gave a paper entitled 'Worlds apart: risk, rationality and political culture', while his colleague, Dr Frank Furedi, of Kent University, gave one on 'The future for science in the risk society'. Other members of the Sense About Science and the Science Media Centre fellow travellers gave such papers as, 'Responding to public anxieties: government', by Professor Derek Burke. A paper on the 'absolute safety culture', for which everyone is apparently looking, 'The absolute safety culture and its dangers', was given by Bruno Porro, the head of risk and reinsurance, at Swiss Re, Zurich, a company that has been less than keen to pay out for insured ME sufferers.

On the matter of commercialised science, the conference organisers took care to present a balanced approach. Arguing for 'Science driven by commerce – can it be trusted?' was Dr John Hammond of Aventis Crop Science UK Ltd. And presumably arguing against it was Dr Douglas Parr, chief scientific adviser to Greenpeace. Personally, I can't see why he bothered.

¹¹ This is the case put by Elaine Showalter in her miserable excuse for a book, *Hysterics*, which was written with the help of Professor Simon Wessely. Op. cit. Walker, *SKEWED*.

Risk experts who defend, even nominally, corporate interests, consistently appear to miss the point. They point accusing, rationalist fingers at suggested tree-hugging hippies, whom they accuse of asking for the romantic idyll of a *risk free* world. They never present any evidence that this group exists or has demanded 'risk free' as part of a philosophical or political platform or a social contract. As most intelligent people understand, a 'risk free' life is death.

And, anyway, it's an intellectually barren accusation. People generally are not that interested in the risk involved in those things that they have already integrated into their life. Driving a car, for instance, is done by most drivers without constant and pressing consideration of risk. You know where you are with a car. You've seen the crash dummies. And you are, after all, or you hope to be, in control. Where risk becomes a crucial issue is in relation to the unknown, with which we need confidence to cope.

Increasingly, what most people expect, in situations of new technology or unknown chemicals, is, first of all, some kind of democratic participation in the implementing of technologies. Second, despite having been lied to endlessly, they want the truth about research into risk. Where the degree of risk is presently unknown, they expect experts and others to be cautious on their behalf. They expect health to be a primary consideration and profit to be secondary, while between these two they expect to be able to monitor progress with a collective weather eye.

Where people do need real information from scientists about risk, is where they are being expected to trust others they don't know and who might have vested interests. This is why interest conflicts are now one of the most serious issues. When a mother asks the State about the possibility of vaccine damage, she is not asking if it is possible for either her or her child to live in a world free of illness. Principally, she is asking for the truth,

and in British society she won't get it, because risk experts who side with corporate government spend their whole lives disguising and spinning risk for the 'dumb' consumer.

On matters of public health, since the Second World War, it has clearly not been possible for the people to trust corporate scientists. What is of even greater concern is that the mistrust is growing. This is not because people are becoming increasingly ignorant of scientific matters – which is the premise of the exRCP Network – but because corporate science has gradually detached itself from any base in society. It is now, in the main, a political practice, which is communicated to the public as a *fait accompli* by schills and spin doctors whose only concerns are profit and the defence of a powerful status quo.

CHAPTER TWENTY-TWO

The Corruption of Science

The result is scientific advisory panels stacked with industry hacks, agencies ignoring credible panel recommendations and concerted efforts to undermine basic environmental and conservation biology science.

*Tim Montague*¹

While the United States has often been the progenitor of problems brought to modern society by huge corporations, the Americans' fierce sense of individualism and progressive ideas about the freedom of the individual often point the way to dealing constructively with these same problems. This is primarily why North Americans have fared better with the law than their British counterparts. In Britain, citizens seem to have accepted their role in corporate serfdom with equanimity.

For concerned, honest scientists, who have been cast in the role of insurgents fighting the corporate corruption of science, the way out of the morass has been evident for some time now. They have to develop their own organisations, which can regulate science without reference to corporations or other funders.

¹ Tim Montague, *Honest Science Under Siege: Conflicts of interest, 'seeding results' and a broken monitoring system erode the public's trust*. Internews, July 22, 2005. Citing 'Scientific Integrity In Policymaking; Investigation Into The Bush Administration's Misuse Of Science' (Cambridge, Mass.: Union of Concerned Scientists, February 2004.) And 'Scientific Integrity In Policymaking; Further Investigation' (Cambridge, Mass.: Union of Concerned Scientists, July 2004), both available at: www.ucsusa.org/global_environment/rsi/index.cfm/.

In Britain, few scientists grasp that any of this is happening, and those who do are way too timid and strait-laced to mount a political challenge to corruption. In North America, however, there is now a substantial body of political opposition within science to its lack of democracy.

Pushed into responding to the politicisation and corruption of science, US scientists have set up the Union of Concerned Scientists (UCS). In 2004, 6,000 scientists, including 48 Nobel laureates, 62 National Medal of Science recipients, and 135 members of the National Academy of Science signed the Union of Concerned Scientists' (UCS) statement, 'Restoring scientific integrity in policy making'.

The actions by the Bush administration threaten to undermine the morale and compromise the integrity of scientists working for and advising America's world-class governmental research institutions and agencies... To do so carries serious implications for the health, safety, and environment of all Americans.²

While these scientists have all realised that the Bush administration has ideologically corrupted science, British scientists seem, on the whole, to be blissfully unaware of the trans-Atlantic nature of the problem. They are blind to the manner in which Blair's military partnership with Bush, and the propaganda that accompanies it, is mirrored by his tacit and active support for global corporations. Although some scientists and groups on the fringe in Britain have a political analysis that could launch a combative group of ethically-concerned scientists, the spirit generally within science is weak.³

² Op. cit. Montague.

³ General articles on the politics of science in English can be found on the Institute of Science in Society web site at: <http://www.i-sis.org.uk/index.php>

These include the excellent; ISIS Press Release 04/04/05. 'Science versus Democracy? Professor Peter Saunders uncovers some uncomfortable (*cont.*)

With respect to the public discourse around science, the new corporate science lobby groups have gained considerable control over both information and public forums. They are utterly opposed to disputation. Few things in contemporary Britain could be more important than the organisation of genuinely open public debate, free from corporate interests, about the important issues in science.

In the 1990s, German activists from different fields organised one of the most effective campaign against corporate interests in biotechnology seen in contemporary Europe. This battle was especially interesting because the issue at the centre of it was the product of Anglo-American science and politics, the Convention on Bioethics and Human Rights.

The objectives of the Convention, as recited in the Preamble are merely a rhetorical trick to smokescreen the real intentions of the undertaking: maximum freedom for research and the industry behind it and access to funds, human material and data and limitation of the rights of the individual. The provision which prohibits the discrimination of persons but not of human beings, the provision which allows research on in-vitro embryos and nevertheless claims the 'adequate protec-



(cont.) truths about those who oppose democracy in science'. ISIS Press Release 16/07/04. 'Collusion and corruption in GM policy. Claire Robinson uncovers some uncomfortable truths about the machinations of the pro-GM establishment in Britain.'

Also, writing by Les Levidow of the Centre for Technology Strategy, Open University, 'Unsound science? Transatlantic regulatory disputes over GM crops,' Les Levidow, Susan Carr. *International Journal of Biotechnology* 2000 – Vol. 2, No.1/2/3 pp. 257-273. On the wider issues of science and democracy, the Independent Science Panel (ISP) is a panel of scientists from many disciplines, committed to the promotion of science for the public good. They can be found at: <http://www.indsp.org/about.php>. This site gives access to a wide range of articles about independent science, politics and democracy.

The *Scienza e Democrazia* (Science and Democracy) International Conference, supported by the Istituto Italiano per gli Studi Filosofici has been held (cont.)

tion' of that embryo, the outrageous wording of the provisions designed to make incapacitated persons available for non-therapeutic research can only be understood as openly derivative of the public, their elected representatives in parliament and their constitution.

Wilma Kobusch⁴

The Convention on Bioethics and Human Rights⁵

The Convention on Bioethics and Human Rights was presented to the European nations by the Council of Europe in the mid-1990s.⁶ The Convention quietly swept away the absolute right to informed consent for anyone chosen as a subject in a clinical trial or used for medical experimentation. The signing of the Convention was followed by a Psychiatric White Paper, which suggested the depletion of informed consent and other losses of human rights for involuntarily incarcerated psychiatric patients.

With no public discussion or participation, during secret committee meetings, the Convention formulated clauses that would give doctors and scientists the legal rights to



(cont.) have been held in the past two years. The third, in October 2005, has been held in Naples, organised by Stefano Dumontet, Antonio Gargano and Marco Mamone Capria.

'The Union of Concerned Scientists (UCS): Citizens and scientists for environmental solutions: <http://www.ucsusa.org/>. UCS is an independent non-profit alliance of more than 100,000 concerned citizens and scientists. We augment rigorous scientific analysis with innovative thinking and committed citizen advocacy to build a cleaner, healthier environment and a safer world.'

4 Founder member of the 1994 International Initiative Against The Planned Bio Ethics Convention with Erika Feyeraabend, Jobst Paul and Ursel Fox.

5 This summary is taken from an essay by the author, 'Biotechnology, ethics and vested interests: The European Convention on Bioethics and (cont.)

experiment on patients without gaining their permission or informing them of the details of the research. So clear were the rights awarded in it to the scientific research industry, and so weak the liberties offered to citizens, that in many countries it stirred up massive opposition.

Drafting of the European Council's Convention on Biotechnology and Human Rights began in October 1991. To draft the Convention, the Council set up a Steering Committee on Bioethics (CDBI), chaired by Dr. Elaine Gadd, a senior medical officer from the Department of Health. The steering group drew together working groups on specialised subjects and specific protocols. The membership of this steering group was, from the beginning, secret.

European Science Foundation (ESF) is the union of over 60 European Research Councils and their associated commercial companies. It was created in 1974 by the Council of Europe. The ESF had a big input into the direction and content of the Convention when it intervened in the discussions of the CDBI.

In a bizarre passage in the ESF Annual Report for 1997, explaining their intervention, the ESF suggests that individuals often put their own interests above those of soci-



(cont.) Human Rights,' published in shorter form in S. Dumontet and H. Grimme (ed). *Biology, Biologists and Bioethics: Concerns for scientists, politicians and consumers*. Foxwell & Davies, Italia-Scientific Publisher 2004. Available in longer form from Slingshot Publications, BM Box 8314, London WC1N 3XX, England.

6 The Council of Europe is an unelected body set up by North America and its European Allies in 1949, 'to defend a free, democratic Europe against the totalitarian threat posed by Communist rule. NATO was set up to act by military means, the Council through civilian measures.'

ety, and for this reason might not wish to participate as research subjects. The ESF thought that ways of overriding this selfishness should be found.

Organised resistance to the convention in Germany is instructive. The International Initiative Against the Planned Bio-Ethics Convention and the European Bioethical Network was created in 1994 by Erika Feyerabend, Jobst Paul, Ursel Fox and Wilma Kobusch. The Initiative engaged in a monumental campaign involving thousands of citizens, working groups, round tables, rallies, even industrial companies, all supported by the media. The Initiative managed to obtain statements critical of the Convention from hundreds of organisations, newspapers, television programmes, and public groups.

The Initiative ensured that an analysis of the Convention was presented publicly to the German people. In 1996, the German Bundestag voted against the Convention. One of the principle objections to it held by the German parliament was that it could well re-introduce non-therapeutic research without consent back into Europe. □

CHAPTER TWENTY-THREE

What the Corporations are Covering up

Theories of science must be judged on the basis of facts
and reasoning, and not by the authority of dogma.

Thomas Huxley, 1860

To think that the Science Media Centre and Sense About Science have developed quite separately from the prolonged negotiations between Government, the drugs and bio-science industries would be naive. Both SAS and the SMC, with the *Guidelines on Science and Health Communication*, appear to be the structures that are now creating the policy negotiated between government and industry over a four-year period in the Pharmaceutical Industry Competitive Task Force (PICTF), Ministerial (Pharmaceutical) Industry Strategy Group (MISG), the Bioscience Innovation and Growth Team (BIGT) and the Bioscience Leadership Council (BLC). They are part and parcel of the competitive protection afforded by the Government to the pharmaceutical and bio-pharma industries.

These groups have the involvement of senior civil servants, government policy advisers and high-ranking personnel from the bioscience and pharmaceutical industries, the most experienced crisis management experts and the State's favourite psychiatrist. In effect, New Labour has returned to the dirty tricks

of the Cold War. This time, however, the State is represented by corporate science while the subversives are those who question science policy.

The ultimate authority of these front groups lies with Lord Sainsbury in the Dti and behind him the Cabinet Office and the Policy Unit of the New Labour Government. The operational and administrative responsibility for the groups was given to Lord Taverne, who has advanced them with the help of the ex-RCP Network, his cronies in the Liberal Alliance and extreme libertarian groups from North America. None of these matters has ever come close to that aged animal a constituent or a voter, still less to the wider general public.

The ex-RCP Network has sworn to give no ground to the victims of industrial science. To them there is no post-industrial proletariat or poor. In their world, the healthy and financially robust are the only ones involved in controlling the power that flows from corporate science. Those who question corporate science are seen as 'moaning Minnies', 'self-obsessed wingers', believers in 'virtual risk' and sufferers with 'wrong illness beliefs'.

For the citizen, there is no access to the debate. For the 1,500 British children who have, their parents believe, been damaged by MMR, there is no scientific examination. In fact, these people are not even recognised. There is no mechanism of complaint for the minimally estimated 20,000 cases of breast cancer brought on by the taking of HRT in the decade between 1990 and 2000. There is no voice or recognition for the 240,000 children and adults suffering from ME, or those suffering from chemical sensitivity and Gulf War syndrome. And the Government has introduced new police powers to deal with people who want to make clear their opposition to vivisection and animal testing.

The lack of democratic institutions in this time of post industrial revolution mirrors in many respects the social organisation that accompanied the development of the earlier industrial revolution. Corporate science and scientists are gaining power in society because they own the means of production. The class of scientists and the government refuse absolutely to subject developing science to public debate or plebiscite.

In the case of many industrial processes or techniques of corporate science, the human health effects are so subtle and pervasive that it is impossible for lay groups or community researchers to record the damage. The debates about such things as the effects of mobile phones, mobile phone masts, global warming, fluoridation and health damage from dioxins go on at a high academic level, where research is dominated by corporate interests and inevitably reaches conclusions sympathetic to those interests. The involved and impassioned common population, especially those whose health is affected, are becoming increasingly active in opposing the undemocratic power of science.

In a clever gambit, corporate science has moved over the past decade to contain epidemiology and qualitative research, judging it not up to standard for measuring health damage in the community. Small-scale studies have also been dismissed. Using very large data bases, corporate science is increasingly employing the study review as the sole measurement tool of health damage. The large-scale reviews level out the data and make previously significant localised findings insignificant.¹

In respect of those things that can be researched and are examined by groups not so heavily biased towards corporate

1 This is a matter that Dr Andrew Wakefield brings up in a slightly different light in his paper 'Through A Glass Darkly,' when looking at the way in which MMR was first tested. A. J. Wakefield, S. M. Montgomery, 'Measles, mumps, rubella vaccine: through a glass darkly,' *Adverse Drug React. Toxicol.* 2000 Rev. 19(3) 1-2. Oxford University Press, 2000.

interests, the health damage that corporate science is causing in the Brave New World of Zero Risk appears to be considerable.

- There is no record of the number of deaths or the scale of illness already created by food products which contain genetically-modified constituents.² However, despite the Zero Risk campaign run by industry and government, some facts do come to light. Thirty-seven people died, 1,535 were permanently disabled, and at least 5,000 more suffered illness in 1989, after a Japanese company produced a contaminated GM food supplement, tryptophan. The Department of Health in Britain and the FDA in America reacted to cover up this tragedy by claiming that conventionally manufactured tryptophan, used by millions as an anti-depressant, was highly toxic and banning it.³
- Likewise, there are no complete figures for deaths and adverse reactions to GM vaccines. However, one vaccination expert in North America, speaking about Hepatitis B vaccine in 1999, said that the FDA adverse reaction list reported over 24,000 individuals with severe adverse

2 Personally, I am against animal studies or the use of information gleaned from them in any scientific discourse, so I will not quote from recent studies that have shown consistent damage to animals after they have been fed GM food. I would add that I think in the long tradition of scientific research, all producers and propagandists of GM products should make themselves available for trials of those products. In fact, I think it should be mandatory. I am citing the case below because it casts light on the fact that, even in animal studies, companies such as Monsanto feel the need to dissemble and cheat on their 'science'. When a German court ordered Monsanto to make public a controversial 90-day rat study on June 20, 2005, the data upheld claims by prominent scientists that animals fed genetically-modified (GM) corn developed extensive health effects in the blood, kidneys and liver, and that humans eating the corn might be at risk. The 1,139-page research paper on Monsanto's 'Mon 863' variety also revealed that European regulators accepted the company's assurances that their corn was safe, in spite of the unscientific and contradictory rationale that was used to dismiss significant problems. (*cont.*)

effects from the vaccine. The head of the FDA indicated that this figure is only about one percent of the total numbers of adverse reactions.⁴

- A study by Europe's leading specialists in food sensitivity at the York Nutritional Laboratory, in 1999, found that health complaints caused by soya – the ingredient most associated with GM foods – had increased from 10 in 100 patients to 15 in 100 over the previous year. The findings were sent to Health Secretary in March 1999. A spokesman for the York laboratory said: 'We believe this raises serious new questions about the safety of GM foods.' Researchers tested 4,500 people for allergic reactions to vegetables, including soya. Among the range of chronic illnesses allergy caused were irritable bowel syndrome, digestion problems and skin complaints including acne and eczema. People also reported suffering neurological problems, with chronic fatigue syndrome, headaches and lethargy. Soya is found in 60 per cent of all processed foods sold in the UK – from bread to baby food, ready-to-eat curries and vegetarian lasagne.⁵

(cont.) In addition, the study is so full of flaws and omissions, that critics say it wouldn't qualify for publication in most journals, and yet it is the primary document used to evaluate health impacts. (Taken from Jeffrey Smith, July 16, 2005 NewsWithViews.com; www.seedsofdeception.com).

3 Op. cit. Walker, *Dirty Medicine*.

4 Stated by Bonnie Dunbar in a radio interview March 12, 1999, with Mr. Robert D. Crider, Director Immunization Division, Texas Department of Health. Bonnie Dunbar is a research scientist and medical professor who has worked in the areas of autoimmunity and vaccine development for over twenty-five years. Dunbar was honored by the National Institutes of Health in Washington D.C. as the "First Margaret Pittman" lecturer for her pioneering work in vaccine development. She has worked extensively with the US Agency for International Development and the World Health Organization programs.

5 Mark Townsend, 'Why soya is a hidden destroyer,' the *Daily Express*, 12 March 1999.

- A herd of cows in Woelfersheim, Germany, died after eating GM maize fodder. Syngenta, the giant British-Swiss biotechnology corporation, paid the farmer €40,000 in compensation.
- Hundreds of deaths and tens of thousands of adverse reactions followed the taking of GM insulin. The adverse reactions included side-effects such as anaemia, memory loss, seizures, coma and permanent brain damage.
- In relation to illness not clearly created by GM products, information is more extensive. In 2003, the conservative Royal College of Physicians published its report, *Allergy: The unmet need, a blueprint for better patient care*,⁶ which revealed that over 18 million people in the UK have at some point been diagnosed as having an allergic illness. In any one year, over 20% of the population are likely to be receiving treatment for allergy. The UK has the highest prevalence of allergy in Europe and ranks among the highest in the world. Among the UK child population, 160,000 are allergic to peanuts. Two of the greatest and increasing causes of allergy are food and pharmaceuticals. In both cases such allergies were rare in the 1950s and Sixties.

Deaths caused by various contemporary drugs are available at the time they cause adverse reactions but the industry has developed a black hole technique of wiping out the longer historical record. While the news has been full recently of Vioxx, who remembers Tambocor? Responsible in the United States for the largest (at that time) drug disaster. In the 1980's, Tambocor, a drug meant to prevent cardiac arrest, killed 50,000 people by creating heart arrest.⁷

6 'Allergy, the unmet need: A blueprint for better patient care,' Royal College of Physicians, 2003.

7 Thomas J. Moore, *Deadly Medicine: Why tens of thousands of heart patients died in America's worst drug disaster*. Simon & Schuster, New York 1995.

- The number of deaths from anti-arthritis drug Vioxx, a COX-2 specific inhibitor, has not yet settled after the drugs were prescribed between 1999 and 2003, but the FDA estimates that around 28,000 heart attacks and sudden deaths occurred as a consequence of the drug.
- The AMA reported in 1994 that between 76,000 and 137,000 North Americans had died from drug side effects – drugs that were all first tested on animals. By this reckoning, drug-induced adverse reaction deaths were the 4th-6th leading cause of death in the US.
- More shocking statistical evidence is cited by Gary Null, PhD, *et al*, whose paper in 2003⁸ draws in further categories of iatrogenic incidents. This study concluded that the total number of annual iatrogenic deaths in North America is now around 783,936. From this the authors deduced that the North American medical system is the *leading* cause of death and injury in the United States. The 2001 heart disease annual death rate was 699,697, while the annual cancer death rate is around 553,251.
- The death toll in Britain for asbestos induced lung diseases of various kinds is expected to reach between five and 10,000 annually by the year 2020. This is despite the fact that asbestos production no longer takes place in Britain and the fact that the renowned corporate epidemiologist Sir Richard Doll assured government, unions and the public that there was absolutely no danger from off-site asbestos already embedded in buildings.⁹

8 Gary Null, PhD, Caroly Dean, MD ND, Martin Feldman, MD, Debora Rasio, MD and Dorothy Smith, PhD, in their recent paper, *Death by Medicine*, October 2003, released by the Nutrition Institute of America.

9 See, Geoffrey Tweedale, *Magic Mineral to Killer Dust: Turner & Newall and the asbestos hazard*. Oxford University Press. Oxford 2000.

- Environmental pollution and degradation causes 40% of deaths world-wide, according to a Cornell study published in *BioScience* journal of September 30, 1998. An estimated 40% of world deaths could be attributed to various environmental factors, especially organic and chemical pollutants, the study concluded.
- Production of the gasoline carcinogen benzene, which causes leukaemia even at low dosages, is constantly rising. The number of motor vehicles is increasing three times faster than the rate of population growth.
- The global use of agricultural pesticides rose from about 50 million kilograms a year in 1945, to current application rates of approximately 2.5 billion kilograms per year. Most modern pesticides are more than 10 times as toxic to living organisms as those used in the 1950s.
- Of the 80,000 pesticides and other chemicals in use today, 10% are recognised as carcinogens. Cancer-related deaths in the United States increased from 331,000 in 1970 to 521,000 in 1992, with an estimated 30,000 deaths directly attributed to chemical exposure.
- Dealing with the matter of truthful reporting and death, it also seems right to mention deaths of laboratory animals used in testing. The Research Defence Society (RDS) and others who support these practices have always said that deaths of animals are kept to an absolute minimum and the use of animals is carefully regulated. However, an article by Uncaged!, the anti-vivisection organisation, says that while the Home Office figures in Britain show that in 1998 a total of 2,593,587 animals were killed in experiments, the true death toll in British vivisection laboratories could be as high as 11.6 million. The organisation cites an August 1998 *The Independent on Sunday* article, which published the findings of an investigation by

the British Union for the Abolition of Vivisection (BUAV), revealing that a staggering 6.5 million mice and 2.4 million rats were destroyed outside experiments because too many of the animals were bred. Tens of thousands of monkeys, pigs, dogs, rabbits and guinea pigs were also exterminated – outside of experiments.¹⁰

- During a 2001 search for the West Nile virus in the bodies of birds in the Five Rivers Environmental Center outside Albany, New York, around 250 post-mortems were conducted daily on already dead birds. Vets found that, in the previous year, 1,953 birds had died of toxins from pesticides such as Dursban, and Diazinon. Lead poisoning was the cause in some cases, and some deaths arose from chemicals overused on lawns and in buildings. The majority, however, were the result of birds eating smaller prey with high levels of the material.¹¹

Most of the above matters are dealt with, in one form or another, by the American Council on Science and Health (ACSH), an organisation to which the Science Media Centre and Sense About Science are linked on their web sites and which they would obviously like to emulate. In every case, in disputes of this kind, like its aligned think tank organisations, ACSH has come down heavily against corporate responsibility for human and animal health and environmental damage. Perhaps more importantly, in some cases they have reported outright denials of the existence of these recorded health damages.¹²

10 The BBC, a frequent partner in science supporters projects, seems to have learned greatly from groups such as the SMC. Take its view on vivisection and animal experimentation for instance. The Hot Topics pages contain the most precise scientific presentation of the issue. 'Few animals feel any pain as they are killed'; www.bbc.co.uk/science/hottopics/animalexperiments/.

11 Michael Gormley, 'Toxins Killing Birds,' June 3, 2000, *The Record*, Troy, NY.

12 One of the reports advertised on the ACSH site gives a good idea of the conflicts in which they are currently involved: 'The Top Ten Unfounded (*cont.*)

These 'positive' messages about corporate science are, however, only one half of the picture. The science-supporting PR groups have cultivated since the mid-1980s, a quackbusting arm whose propaganda is negative and who spend their waking hours assaulting anything that might suggest a threat or an alternative to corporate products or corporate philosophy.

One of the leading quackbusters is Stephen Barrett, a founder member of ACHF and a member of CSICOP. Barrett is a non-practising psychiatrist and it comes as no surprise that he and other quackbusters, including some members of the British HealthWatch and science lobby groups, generally appear to agree on many of the following issues.

- There is no such thing as multiple chemical sensitivity (MCS).
- ME is substantially a problem of patient perception.
- People who say that they are suffering from MCS are probably suffering from mental health problems.¹³
- Parents who suggest that their children have ME or MCS are probably suffering from Munchausen's syndrome by proxy – ie, causing their children's illness in order to seek attention for themselves.

(*cont.*) Health Scares of 2004,' by Ruth Kava, PhD, RD, Aubrey Noelle Stimola, Rivka Weiser, Lynnea Mills, December 13, 2004. The section headings include, 'Pediatric Vaccines and Autism,' 'Cell Phones Cause Brain Tumors,' 'Chemicals in Cosmetics,' 'Cheeseburgers and Cardiovascular Disease,' 'Teflon Causes Health Problems in Humans,' 'Plastics Cause Cancer.'

13 Because the Chemical Companies are so adept at propaganda of health and controlling the media (see this author's *SKEWED*), this ludicrously unscientific view is still peddled by even the best literature on chemicals. In 'Chemicals in Products: Safeguarding the environment and human health,' the report of the Royal Commission on Environmental Pollution (published by the Stationery Office 2003), readers are presented, after 40 pages of information about how chemicals leak into the environment and are found in human tissue, with a half-page box, which includes the information: 'MCS (*cont.*)

- There is no such thing as Gulf War syndrome.
- Agent Orange did not cause any illness to US or Australian forces personnel, or the Vietnamese people during the war against Vietnam.
- Vaccinations cannot damage children.
- Vehicle exhaust emissions do not harm health.
- Low-level radiation is not a threat to health.
- There is no such thing as environmental illness.
- Electromagnetic fields are not a threat to health.
- High-voltage electricity cables do not pose a danger to human health.
- Vitamins are mainly toxic when taken in health-effective quantities unless they are included in processed food products by large corporations.
- People who complain about pharmaceutical adverse reactions are suffering either from other specific undiagnosed illnesses or from false illness beliefs.
- There is no such thing as a conflict of interest except when it involves someone critical of industry.
- Only oncologists can treat cancer.
- Psychiatry is a science.
- There are no extra benefits at all from organic food.

(*cont.*) ... is an acquired disorder associated with environmental chemicals in low concentrations *that are otherwise well tolerated by the majority of the people.*' A detailed assessment of 264 ... cases of MCS, revealed that psychiatric disorder, somatic condition, or a combination of the two provided sufficient explanation of the symptom.' Bornschein, S, Hausteiner, C, Zilker, T, and Forstl, H. (2002b): 'Psychiatric and somatic disorders and multiple chemical sensitivity (MCS) in 264 "environmental patients" ', *Psychological Medicine*, 32(8), 1387-1394.

- GM anything is 100% safe.
- Individual sacrifice is inevitable in order to secure the future of civilisation.
- Corporate lobby groups and aligned organisations always tell the truth, and those who don't believe them are conspiracy-theorists with mental health problems.

These Cold War science warriors are insistent that we live in an age where the individual should be courageous and face up to the risks taken on his or her behalf by the scientists of multinational corporations. They support a science that is out of control, a science without regulation or democratic accountability.

The continuous transmission of such a fractured philosophy can only, *will* only, work, however, as long as it is accompanied by the big lie that science can do no wrong. And that scientists have an automatic right to expect the acquiescence of citizens in scientific experiments and an automatic right to power because they control the means of production.

CHAPTER TWENTY-FOUR

*From Political Party
to Corporate Science Lobby*

They are very dangerous people, people who put trees and flowers before people, you can't reason with them.¹

The third industrial revolution will be knowledge-driven, science-driven and enterprise-driven. In this new world, we will need the Parliamentary and Scientific Committee as never before, to bring together the scientists who open up the possibilities of the future, the men of enterprise who harness their discoveries and the legislators who must enable both to flourish for the betterment of the people.

*Margaret Thatcher*²

Ex-RCPers, now clearly believe, to the letter, what Margaret Thatcher said. But the policies of neo-liberalism as enacted by Thatcher, while clearly in support of progressive, fast-developing, national high-technology industry, also dismantled many of the organs and institutions of representative democracy.

In both Britain and America, the corruption of science has come as a direct result of policies that have privatised much of

1 The sardonic CIA agent Jedburgh, describing environmentalists in *Edge of Darkness*, the BBC thriller directed by Martin Campbell, written by Troy Kennedy Martin and starring Bob Peck.

2 Margaret Thatcher, speaking at the 50th Anniversary Lecture of the Parliamentary and Scientific Committee, December 6, 1989.

society, handing over its administration and giving unfettered rights to corporations.³ While it might be possible to argue about the economics of these strategies, and while there clearly are alternatives to big government wielding huge public spending deficits, the curtailment of public involvement and the cauterisation of a public discourse has had a deadly effect on the health of democracy.

One of the consequences of the gradual dissolution of the civil service and government departments in the UK has been the formation of non-governmental groups, which discuss and feed policy into the Government. While these quangos, focus and lobby groups appear to open up the democratic process by providing a wide range of extra-government forums for consultation, they have actually concentrated policy discussion and the policy implementation process in the hands of an elite network of individuals and organisations, which are completely dominated by corporate interests.

In science this process is particularly noticeable, principally because science has never come within the ambit of popular or local authority democracy in the same manner that education, apprenticeships or parks and gardens might do now or have done in the past. The Department of Trade and Industry itself, in concert with the Policy Unit and the Cabinet Office in Downing Street, are now running with science policy-making which is, as far as citizens are concerned, almost completely untouched by public hands. It seems astounding that, in dealing with the most important issue of the 21st century, New Labour has handed over policy to the corporations involved.

3 This privatisation is epitomised by the claim of individual scientists and companies to have patent rights over new 'life' forms such as GM plants. Scientists have gone much further than their historical counterparts, the industrial bourgeoisie, in that they claim ownership over a multiplicity of life forms, not just the physical body of the worker.

In the area of health, the pharmaceutical industry and the new bio-pharmaceutical industry represent the key government partners. Doctors and other representatives of the medical profession, or for that matter those in the field of alternative health, are consulted less and less. The older, more traditional approaches to mapping illness epidemiologically and then providing local services to fit community needs, have been replaced by a multi-billion-pound discourse, which looks to the future needs of the pharmaceutical industry and its political projections.⁴

So, for instance, in the field of public health, interdisciplinary discourses about poverty, housing, family size and nutrition have been replaced by discussions about combined multiple vaccines and the eradication of infectious diseases, some of which have not even reached our shores. This switch in the determination of health policy and its influence by corporate science has been effected very quickly.

Various science organisations have tried for years, in a relatively laid-back manner, to introduce science to the general population. Their experience has been swept aside and New Labour has done nothing to erect any form of democratic or popular structures within which the major advances in science can be debated. Worse, in fact, New Labour has whored its powers, granting 'major stakeholder' concessions to corporations and lobby organisations with political and financial vested interests in the future of science and health.

4 This is not to say simply that these corporations are planning this future solely to make a profit from it. Those who administer these corporations do have a model of a future society in mind, it's just that this model might be a thousand miles from that which the public desires or envisages.

Anti-Science or Real Science

The assault upon environmentalists, sufferers from environmentally-induced illness and those doctors and therapists who treated these conditions, was a major platform of the early Campaign Against Health Fraud. This platform led the CAHF to deny the existence of any environmentally-created illnesses, including allergy, chemical sensitivity, ME and pesticide exposure.

When the CAHF was at its most prominent, its principle figures manipulated information, which went into reports, news stories and other media, to deny the existence of environmental illnesses and ME. 'Expert witnesses' associated with the campaign gave evidence in a number of legal cases.⁵ Since the mid-Nineties, a great deal of 'official' information has been produced, which gives credence to environmentally-induced illness, adverse reactions to pharmaceuticals and various dangers from developing technology. But health fraud campaigners, ex-RCPers and other skeptics have perversely refused to report any of this.

To argue obsessively that there are no detrimental health effects consequent upon remaining industrial and new post-industrial means of production is clearly, for scientists and physicians, scientific misconduct. However, as always when people who are part of the establishment offend against professional rules, they are not investigated. While Arpad Pusztai and Andrew Wakefield suffer personal vilification, and while thousands of ME sufferers have been abused over the past decade, those experts who create these intricate campaigns walk away unquestioned, with the support of scientific organisations and government agencies. And while this situation continues, more

5 Op. cit. Walker, *Dirty Medicine*.

and more ordinary citizens and consumers suffer the consequences.

The ‘campaigners for science’ quoted in this book consider high levels of ‘collateral’ damage to be a fair price to pay for the survival of unhampered scientific production. This is a clear sign that they have drifted into some kind of anti-social ideology, which they are pursuing with a criminal disregard for public health. We have moved within the space of a few decades, from a position where there were always a few industrial companies who endangered the public health, to a position where there is now an incessant war on many levels between the people and global corporations.

When members of the Revolutionary Communist Party took on the news media with their assertions that ITN journalists had manipulated the image of a Serbian transit camp, whether they were ultimately right or wrong, they took on people who were powerful enough to strike back. When they besmirched the whole environmental movement and manipulated its spokespersons, Channel 4 had to issue an apology and the film-makers’ wrongdoing was made public. When, however, the subjects of their mendacity are research workers, ME sufferers and parents of autistic children, they can win hands down, because all these maligned people are powerless in contemporary society.

* * *

The front that corporate science has organised to protect its financial interests is as complex as a serial killer’s alibi. But at the heart of its disinformation campaign is the basic lie of all propagandists, that ‘Science, because it’s science, is inevitably right’. As the cracks begin to widen, with the dust kicked up by pharmaceutical science and the global epidemic of death and disease that it is fostering, the scientific stalwarts need to resort more and more frequently to spin.

The professionalisation of medical research, its policy implications and its reporting, all take us nearer to a society where the individual ceases to have ownership of his or her own body. The number of people who could be said to be 'against science' per se could probably be counted on the fingers of one hand. The number of people who have serious and rational arguments about the damage done by corporate science, in terms of both health and democracy, in the developed and developing world, is growing daily.

Although groups such as the Science Media Centre and Sense About Science maintain that they are struggling to explain science, they are actually apologists for bad industrial science, supporting insupportable arguments against the common people, who are not anti-science but who are critical in varying degrees of the corporate exploitation of science and its politicisation.

The recent social conflicts around MMR have not actually been about the use, benefits and risks or even the science of vaccination. They were from the beginning about how the *scientific community* should deal with research that disclosed critical aspects of the combined triple vaccine of measles, mumps and rubella. There are well laid-down procedures for dealing with new research results. Other scientists working in the same field are asked to replicate the original research. Why was this not done in the case of Dr Andrew Wakefield's work?

The conflict that has been created by the refusal of the medical establishment to review research into ME and CFS is even more pointedly not a row between hysterical sufferers and rational, humane physicians; it can be specifically described as a conflict between those who believe in scientific inquiry into the bio-medical causes of disease, and psychiatrists aligned with the corporate economy, who have hidden designs. There is, in this case, the question of 'experts' and the matter of whether or not psychiatry should even be included under the heading of 'science'.

There is less and less reality to the order in which we live. Take, for instance, the *Guidelines on Science and Health Communication*. These are apparently predicated on the notion that a large number of journalists are writing critical articles about pharmaceutical companies, physicians, GM crops, MMR and HRT. In fact, quite the opposite is the case. The number of good investigative journalists in the press and other media has gradually fallen to an all-time low. Important investigative questions of vested interests and corruption have been replaced by investigations into roofers who rip off consumers. Very few news journalists ever bother to research powerful conflicts of interests.

At a time when dissidents and those with alternative views find themselves up against the forces of global corporatism, there are fewer and fewer outlets for their voice. At the centre of this almost surgical censorship, which has developed like a cancer in society, are working scientists. On questions of science, it is imperative that scientists themselves wise up to the way in which they and their work is being manipulated.

There have to be two immediate goals for scientists. First they must fight to maintain their integrity in the face of the 'we can buy anything' culture of the corporations. They must put energy into creating their own critical forums, which discuss and plan the regulation of their own work. Clearly, many of their former representative organisations and professional bodies have been bought up, so it's time to form new ones. Scientists themselves, working in industry, need to grasp the nettle, to understand that they are scientists first and company hacks second. Or, indeed, that they are human beings first, scientists second, and company hacks a very distant third.

Secondly, scientists have to take the discussion about important developments into society. We have seen that science lobby groups and politicians cannot be trusted. Working scientists, with academics and others, have to introduce all the con-

tentious subjects of their work to the community in forums and debates. The doors to these events have to be locked against corporate interests. The object of discussions and debates at community level has to be the framing of policy at the level of local democracy.

The organisations that need to be set up must not be part of New Labour's attempt to sanitise democracy and to railroad us into the science-future, but organisations of scientists that are truly inclusive, encouraging open debate, first about science policy, and, second, about the adverse results, not simply of pharmaceutical drugs, but of contemporary products such as mobile phones and phone masts, computers, processed foods, and pesticides. Scientists should drag back from industry, from PR, from spin companies and faceless consultants, their own area of knowledge production, gain control of their own science and re-establish their own community rules.

While science is a perfectly useful tool for measuring and restructuring material reality, as a life belief system it has nothing to offer and is positively dangerous to the human condition. While people who have respect and love for animals are a positive boon to our social culture, those who base their social relationships upon complete rationality without feelings or empathy, are usually called psychopaths and are a positive danger to the development of human society.

Britain and the United States seem, however, to have slipped into a period of democratic darkness. There is no progressive thinking about social models among the most powerful. We are led by cohorts of cultural incompetents. Everything is shrouded in the murky and stagnant air of spin and conspiracy; all concessions to social participation are rejected as if they generated disease. This has to change.

Index

A

- Abbott Laboratories, 88, 190, 217-8.
- Academy of Medical Sciences, 148, 166, 194.
- Academy of Pharmaceutical Sciences, APS, 146.
- Action for ME, AfME, 57, 228, 231, 233.
- Acupuncture, 10, 62.
- Adams, John, 145, 269-73, 271*n*.
- Adams, Mark OBE, 129*n*.
- Adaptive pacing therapy, APT, 228, 230*n*, 252.
- Addiscott, Tom, 165*n*.
- Adonis, Andrew, 84.
- Adprotech, 148, 177.
- Advent Venture Partners, 197, 198*n*.
- Advertising Standards Authority, 135.
- Advisory Committee for Business & Environment, 174*n*.
- Advisory Committee on Novel Foods and Processes, Government, ACNFP, 141, 154, 157.
- Advisory Committee on Releases to Environment, ACRE, 141, 175, 175*n*.
- Advisory Committee on Science and Technology, ACOST, 18, 208, 211.
- Advisory Group for Genetics Research, UK, 149.
- Advisory Panel to the All Party Group on Health, 207.
- Against Nature*, 38*n*, 74, 99-107.
- Agent Orange, 122, 293.
- AgrEvo UK Ltd., 155.
- Agricultural and Environment Biotechnology Commission, AEBC, 157.
- Agricultural Biotechnology Council, ABC, 81, 166.
- Aids, 2, 12-3, 125, 136, 143, 163, 163*n*.
- Alberti, Sir George, 211-2.
- ALCAN Inc., 217.
- All Party Parliamentary Group on Autism, 158.
- Allergy, 143, 287-8, 298.
Food, 59, 100.
- Allergy business, The*, 100-1.
- Allergy: The unmet need, a blueprint for better patient care*, 288, 288*n*.
- Alliance for America, 108.
- AlphaGalileo, 182.
- Alternative medicine, 6-10, 17, 39, 59-62, 66-7, 92, 117, 146, 146*n*, 240.
- Alzheimer's disease, 161, 215.
- Amarant Book of Hormone Replacement Therapy, The*, 100.
- American Association for the Advancement of Science, 190.
- American Chemical Association, 267*n*.
- American Council on Science and Health, ACSH, xxii, 14-16, 15*n*, 88, 109*n*, 110, 291, 291*n*.
- American Enterprise Institute, 16*n*.
- American Medical Association, AMA, 5*n*, 289.
Journal of the, JAMA, 5, 5*n*.
- Amersham plc, 18*n*, 166.
Biosciences plc, 38.
- Amgen, 260.
- Anderson, Roy, 18.
- Andrew W. Mellon Foundation, 176.
- Anglo-American relations, 69, 71*n*, 79, 140, 278-9.
Alliance, 78.
see also United States of America.
- Anti-capitalism, 92.
- Anti-depressants, 55, 59, 206, 223, 256, 286.
- Anti-globalisation, xii, 33, 92.
- Anti-vivisection, 3, 13, 102, 157, 284, 290.
group, 157.
- APCO, 140.
- Ardana Ltd., 200*n*.

- Arizona Biodesign Institute, 200*n*.
 Arthur Koestler Chair in Parapsychology, 212.
 Asbestos, xii, 12, 99, 289.
 Associate Parliamentary Health Group, 41*n*.
 Association for Science Education, 147.
 Association of British Pharmaceutical Industry, ABPI, 7, 19, 38, 47, 60, 62, 129, 137, 148-9, 149*n*, 157, 187, 194-5, 195*n*, 218, 249.
 Association of Medical Research Charities, AMRC, 157, 168-169, 241.
 Association of the European Self-Medication Industry, 197*n*.
 Astra pharmaceuticals, 17.
 AstraZeneca plc, 38, 107, 132, 134, 146-7, 173, 176, 190, 194, 212.
 Atkins, Peter, 212.
 Atlantic Bridge, 140.
 Atomic Energy Authority, UK, UKAEA, 211, 249.
 Attention deficit hyperactivity disorder, ADHD, 260, 260-1*n*.
 Audiovox corporation, 134.
 Australian Royal Commission Inquiry into Agent Orange, 122.
 Autism Awareness Campaign UK, 158.
 Aventis
 Foundation, 176.
 Pharma, 115.
 CropScience, 166.
 UK Ltd., 273.
 Avery, Dennis, 16*n*, 109-10, 203.
 Ayre, Richard, 145.
 AZT, 13, 13*n*, 18-19, 149, 250*n*.
- B**
 Badenoch, Douglas, 234, 247.
 Bagnall, Guri, 3, 5.
 Bainbridge, Janet, 140-1.
 Baliunas, Sallie, 165*n*.
 Bansal, Amolak, 229.
 BAP, *see* British American Project for the Successor Generation.
 Barclay's Bank, 84, 128.
 Barrett, Jack, 165*n*.
 Barrett, Stephen, 16*n*, 143, 292.
 BASF, 166.
 Bayer, 82-3, 132, 134, 205, 212.
 UK, 77.
 AG, 88.
 BBC, 101, 106*n*, 112, 115, 122, 132, 135, 144-6, 190, 291*n*, 295*n*.
 News, 112, 135, 145-6, 157, 190.
 Radio, 117, 151, 151*n*, 243.
 4, 243.
 3, 215.
 Science correspondent, 140, 180.
 Science radio, 112.
 2, 212.
 Brain Story, 214.
 Bechtel,
 Enterprises, 114*n*.
 Group, 115*n*.
 International, 218.
 Riley P., 115*n*.
 Bell, Peter, 112, 146.
 Benn, Tony, 70*n*.
 Benveniste, Jacques, 20-2, 20-21*n*, 143.
 Beringer, John, 19*n*, 175.
 Berry, Sir Colin, 150, 165*n*.
 Best, Simon, 200*n*.
 Bialy, Harvey, 2*n*.
 Bianchini, Martina, 134.
Big Issue, The, 79*n*.
 Bilderberg, 79*n*, 84, 127-8, 127*n*, 138.
 Biogen, 177.
 BioIndustry Association, BIA, 131, 135, 197, 197*n*.
 Biological Sciences, School of, 173.
 Bioscience Futures Forum, BFF, 200.
 Bioscience Innovation and Growth Team, BIGT, 197, 283.
BioScience journal, 290.
 Bioscience Leadership Council, BLC, 199-200, 283.
 BioScience Managers Limited, 200*n*.
 Bioscience Risk Assessment Forum, 200.
 Biotechnology, xiv, 11, 24, 32, 74-75, 91, 130*n*, 138, 140, 145, 148, 157, 165-6, 173, 175-6, 180*n*, 194, 198, 202, 214, 279, 288.
 Biotechnology and Biological Sciences Research Council, BBSRC, 11, 155, 164, 173, 202.
Biotechnology, ethics and vested interests: The European Convention on Bioethics and Human Rights, 280*n*.
 Biotechnology Industry Organization, Bio, 218.
 Bishop, Julian, 135.
 Bithell, Claire, 189.

- Birmingham & Black Country Strategic Health Authority, NHS, 253.
 Birmingham, University of, 217.
 Birthright, 240-1, 240*n*.
 Charity, 240*n*.
 Birrane, Lis, 207*n*, 208.
 Blackstone, Baroness, 194.
 Blair, Tony, 31, 46, 69, 71*n*, 74-5, 82-84, 84*n*, 128, 129*n*, 135, 154, 196, 199, 201, 278.
 Blairite, 74, 88.
Blair Revolution, The, 69, 74.
 Blakemore, Colin, 139, 150-1, 151*n*, 154, 243*n*, 258.
 Blank, Sir Victor, 241, 246.
 Boateng, Paul, 195*n*.
 Bodmer, Sir Walter, 19, 19*n*.
 Boehmer-Christiansen, Sonja, 165*n*.
 Boots, 239*n*.
 Bovine Growth Hormone, rBST, 214.
 Bowden, Rebecca, 173-182.
 Branson, Richard, 135.
 Bret Biomedical Research Education Trust, 140.
 Brink, Anthony, 13*n*.
 Bristol Cancer Help Centre, 19, 19*n*, 101, 101*n*, 105*n*.
 Bristol-Myers Squibb, 155, 205, 217.
 British American Project for the Successor Generation, BAP, 78-9, 78-9*n*.
 British Association for the Advancement of Science, 19, 194.
 British and American Tobacco, BAT, 79.
 British Crop Protection Council, 203.
 British Heart Foundation, 250.
British Journal of Psychiatry, 223*n*.
British Medical Journal, BMJ, 1, 1*n*, 3-4, 44, 93, 93*n*, 268*n*.
 British Nuclear Fuels, BNFL, 73, 132, 134.
 British Petroleum, BP, plc, 147, 176, 217.
 British Psychological Society, 248.
 British Telecom, BT, 135, 200*n*, 248.
 British Union for the Abolition of Vivisection, BUAV, 291.
 Britten, Nicky, 253, 255.
 Broadcasting Complaints Commission, 104.
 Brohn, Penny, 105*n*.
 Brown, Gordon, 72*n*, 82.
 Brown, Tracey, 37*n*, 38, 88, 88*n*, 90, 136, 165.
 Bryant, Jane, 225-6, 234, 242, 252.
 BskyB, 77.
 BSE, 10, 14, 213.
 BST, *see* Bovine Growth Hormone.
 Buggins, Elisabeth, 253-4.
 Burgess, Adam, 90.
 Burke, Derek C., 154-6, 161, 164, 174*n*, 177, 194, 201, 273.
 Burroughs Wellcome, 18.
 Fund, 88.
 Burson-Marsteller, 81*n*, 82, 217.
 Bush, George W., 102, 206, 277*n*, 278.
 Business Planning and Research International consultancy, BPRI, 158, 158*n*.
 Byrne, Colin, 82.
- C**
- Cabinet, 46, 82-3, 195.
 Committee on Biotechnology, 180*n*, 181*n*.
 Office, xxiii, 84, 179*n*, 180-1, 180-1*n*, 190, 208, 284, 296.
 Cable & Wireless, 132.
 Callaghan, James, 70*n*, 83.
 Calman, Sir Kenneth, 41-2, 41*n*, 206-7.
 Cambridge Environmental Research Consultants Ltd, 147.
 Camelford, 54, 268, 268*n*.
 Campaign Against Health Fraud, CAHF, xviii, xxii, 17-9, 17*n*, 19*n*, 20, 22-3, 52-3, 100-1, 105*n*, 204, 223-4, 268, 298.
 Campbell Collaboration, 254.
 Carlo, George, 266*n*.
 Carson, Rachel, 15*n*, 108.
 Cato, Institute, 108-9, 109*n*.
 Science and Risk Program, 108.
 Cell phones, *see* Mobile phones.
 Cellnet, 134.
 Celltech, 146, 157, 198.
 Central Intelligence Agency, CIA, 16, 83, 182, 249*n*, 295*n*.
 Centre for Evidenced-Based Mental Health, CEBMH, 247-8.
 Centre for Healthy Ageing, 159-60, 159*n*.
 Centre for Technology Strategy, 279*n*.

- Centre for the Evaluation of Public Health Interventions, 255.
- Chalder, Trudie, 244*n*.
- Charities, 79, 113, 128, 150, 152, 157, 164, 168, 228, 240-1, 240*n*, 246, 248, 252.
- Commission, 168-169.
- Commissioners, 168-169.
- Chatham House, 79.
- Chemical companies, 22, 53, 122, 188, 190, 218.
- USA, 22, 267*n*.
- Chemical Industry Association, 19*n*, 190.
- Chemistry Leadership Council, 41*n*.
- Chief Medical Officer's, CMO, 41, 41*n*, 55, 206, 253.
- Inquiry into ME/CFS, 41*n*, 206, 228.
- Report, 56-7, 206, 228, 231.
- Chief Scientific Adviser, 176, 180-1*n*, 208, 257-8.
- Committee, CSAC, 179, 181*n*.
- Chiron, 190, 197*n*, 218.
- Chirus Ltd., 239*n*.
- Chronic fatigue syndrome, CFS, 13, 19, 51-3, 53*n*, 55-7, 59, 151-3, 191, 203-4, 206, 223-33, 224*n*, 227*n*, 229*n*, 230*n*, 231*n*, 235, 242-4, 247-8, 251-5, 287, 300.
- see also* Myalgic Encephalomyelitis.
- CIA, *see* Central Intelligence Agency.
- Ciba,
- Foundation, 20.
- Media Services, 225.
- Ciba Geigy, 20.
- CIR Consulting Ltd., 260.
- Citigroup Asset Management, 139*n*.
- Clark, Michael, 112.
- Clinical Evidence*, 44.
- Clinical Network Centres Collaboration, 255.
- Clinical Trials Directive, EU, 249.
- Coalition for Medical Progress, 243*n*.
- COBRA, 219.
- Coca-Cola Enterprises Inc., 79, 82-3, 218.
- Cochrane, Peter, 200*n*.
- Codex Alimentarius, 6, 6*n*, 25.
- Coggins, John, 156.
- Cognitive behavioural therapy, CBT, 9, 54-6, 58-9, 223, 228, 230, 230*n*, 252.
- Cohen, Deborah, 207*n*.
- Colby, Jane, 233.
- Cold War, 141, 182, 249*n*, 284, 294.
- Commission on Intellectual Property Rights, Innovation and Public Health, CIPIH, 149.
- Committee for the Scientific Investigation of Claims of the Paranormal, CSICOP, xxii, 16-8, 20-2, 21*n*, 88, 143-4, 144*n*, 231*n*, 268, 292.
- Council of, 12*n*.
- Committee of the Biochemical Society, 201.
- Committee on the Public Understanding of Science, COPUS, 19.
- Committee on the Use of Animals in Scientific Procedures, 89.
- Common Market, 71.
- see also* European Union.
- Commonwealth Fund, 146.
- Competitive Enterprise Institute, 174*n*.
- Concorde trial, 18, 250*n*.
- Connect Public Affairs, 81.
- Connor, Steve, 112, 163*n*.
- Conroy, John, 174*n*.
- Conservative Government, 70*n*.
- Cope, David, 189.
- Cooksey, Sir David, 197, 198*n*.
- Coombe, John, 246.
- Cooper, Penny, 78.
- COPUS, *see* Committee on the Public Understanding of Science.
- Corporate Citizenship, 84.
- Corporate Watch, 132.
- Cotgreave, Peter, 189.
- Council for Science & Technology, 19*n*, 174*n*.
- Council of Europe, 182, 249, 280-1, 281*n*.
- Countrywide Porter Novelli, 166.
- COX-2, 289.
- Craddock, Neville, 177.
- Craig, Senator Larry, 107.
- Craven, Michael, 81.
- Crawley, Esther, 253, 255.
- Crawdson, John, 12*n*, 121, 121*n*.
- Crohn's disease, xvii-xviii, 40-1, 64.
- Crop Protection Association, 166.
- CropGen, 165-6.
- Crowe Associates, 233-4, 247-8.
- Crowe, David, 248.
- Crowe, Sally, 233, 235, 248-50, 252.

CSAC, *see* Chief Scientific Adviser's Committee.
 CSICOP, *see* Committee for the Scientific Investigation of Claims of the Paranormal.
 Curnock Cook, Jeremy, 200*n*.

D

Daily Express, the, 287*n*.
Daily Mail, the, 151, 154.
Daily Telegraph, *The*, 67, 151, 154, 200*n*, 215-6, 215*n*.
 Dale, Philip, 154, 156, 175, 177.
 Dart, Ed, 177.
 Darwin, Charles, 145, 215.
 Datapharm Communications, 149, 149*n*.
 David, Anthony, 268, 268*n*.
 DDT, 87-88, 99, 203.
Deadly Medicine: Why tens of thousands of heart patients died in America's worst drug disaster, 288*n*.
 Dean, Carolyn, 6*n*.
Death by Medicine, 6*n*, 289*n*.
 Debenham, Paul, 139.
 Deer, Brian, 45-46, 45-6*n*, 50.
 Defeat Autism Now!, DAN!, 50-1.
 Demos, 116.
Denigration by Design, xix*n*, 224.
 Department for Environment, Food and Rural Affairs, DEFRA, 175.
 Department of Agriculture and Environmental Science, 174.
 Department of Health, DoH, xviii, 19*n*, 23, 41, 51, 117, 149-51, 158-61, 180, 194-6, 212, 231, 238, 243, 249, 281, 286.
 Joint Committee on Vaccines and Immunisation, JCVI, 238-9, 239*n*.
 Department of Psychological Medicine KCL, 244*n*.
 Department of the Environment, 174.
 Department of Trade and Industry, Dti, 9*n*, 23-5, 75, 84, 131, 131*n*, 135-6, 176, 180*n*, 182, 195, 197, 199, 226, 243, 258, 261*n*, 284, 296.
 Department of Work and Pensions, DWP, 232.
 Dexter, Michael, 167.
 Diamond, John, 60-61, 60*n*.
 Diazinon, 291.

Dirty Medicine: Science, big business and the assault on natural health care, xix-xx*n*, xx, 13*n*, 15*n*, 16*n*, 18, 19-20*n*, 22-3*n*, 101*n*, 105*n*, 224, 240*n*, 287*n*, 298*n*.
Dispatches, 46, 46*n*.
Dispossessed, The, 36, 36*n*.
 Ditchley Foundation, 79.
 Dixon, Bernard, 268, 268*n*.
 Doll, Sir Richard, 12, 16*n*, 121-2, 150, 267, 267*n*, 289.
 Donaldson, Sir Liam, 55.
Doomsday Syndrome, The, 143, 143*n*.
 Dow Chemicals, 134, 218.
 AgroSciences, 166.
 Europe, 134.
 Downing Street, 46*n*, 83, 296.
 Doyle, Peter, 155, 202.
 Draper, Derek, 74, 79-80, 80*n*.
Drugs Futures 2025, Perspectives of the Pharmaceutical Industry, 257*n*, 258, 261*n*.
 see also Foresight Programme.
 Duesberg, Peter, 2, 12, 125, 143, 145.
 Dumontet, Stefano, 249*n*, 280-1*n*.
 DuPont, 166.
 Durkin, Martin, 37*n*, 105-6.
 Durodié, Bill, 37*n*, 165, 165*n*, 219.
 Dursban, 291.

E

Earnshaw, David, 80*n*.
 Earnshaw, Martin, 38*n*.
 Easterbrook, Gregg, 108.
 Easton, Graham, 112, 117, 146.
 Easton, T., 74*n*.
 EASY-Care, 159-60.
 Eaton Corporation, 217.
 ECHO, 134.
Ecologist, The, xxi*n*, 15*n*.
 Economic Social and Research Council, 150.
Economist, The, 90*n*, 138.
 Eczema, 287.
Edge of Darkness, 295*n*.
 Edwards, Carol, 234, 247, 251.
 Ekbohm, Anders, 41.
 Elbourne, Diana, 253-4.
 El Feki, Shereen, 138-40.
 Eli Lilly, 190, 212, 260.
 Elsevier, 190.
 Health Science, 239*n*.

- Enron Corporation, 218.
Environmentalism, 92, 103*n*, 280*n*, 295*n*.
Epidemiology, 12, 17, 54, 134, 150-1, 198, 251*n*, 252, 254, 271*n*, 285, 297.
epidemiologists, xii, 43, 267*n*, 271*n*, 289.
Ernst, Edzard, 146, 231, 231*n*.
Esso UK, 176.
EU Science Journalists' Association, EUSJA, 182.
Eugenics Education Society, 215.
Eugenics Society, 215, 223*n*.
European
 Commission, 73, 83*n*, 182.
 Commissioner, 83*n*.
 Community, 71.
 Government Affairs and Public Policy, 134.
 Movement, 83.
 Union, EU, 69, 71, 71*n*, 78, 216, 216*n*, 249*n*.
European Bioethical Network, 282.
European Commissioners for Enterprise and Consumer Protection, 197*n*.
European Convention on Bioethics and Human Rights, 249, 279-80.
European Federation of Pharmaceutical Industries and Associations, EFPIA, 148, 196*n*.
European Generic Medicines Association, 197*n*.
European Process Industries Competitiveness, 140.
European Science Foundation, ESF, 182, 281.
Evidence-based medicine, 231, 243, 247, 253.
Evidence Based Mental Health, 248*n*.
Express, The, 80.
exRCPers, exRCP Network, xxi, xxii, xxiii, 7, 31-2, 34-35, 37, 37*n*, 48, 57, 67, 74, 89-90, 92, 99-100, 106-7, 116, 129, 129-30*n*, 136-8, 174, 181, 185, 214, 218, 240-1, 272, 275, 284, 298.
 see also Revolutionary Communist Party.
Exxon, 107, 109.
Mobil, 217.
- F**
- FDA, *see* Food and Drug Administration.
Fekuda, Keiji, 53, 53*n*.
Fellner, Peter, 198.
Feminine For Ever, 100.
Festing, Simon, 157.
Feyerabend, Erika, iii*n*, 280*n*, 282.
Fibromyalgia, 59, 231.
Fields of the Future, 89, 165.
Financial Times, 90*n*.
FINE trial, 226, 228-9, 232, 236.
Firbank, Les, 174*n*.
Firestone, 136.
Fitzpatrick, Michael, 35-67, 38*n*, 48*n*, 60*n*, 112, 119, 138, 150, 184-5, 187, 246*n*.
Five-Year Freeze Campaign, 93.
Fleishman-Hillard, 79-80.
Foetal Medicine Foundation, 204*n*.
Food and Drink Federation, 155.
Food and Drug Administration, FDA, 286-7, 289.
Food Standards Agency, 39*n*, 113, 145-6, 157, 213.
Foot, Michael, 70-1*n*.
Ford, 136.
Ford Motor Company, Fund, 109.
Forensic Psychiatry, Journal of, 272.
Foresight, Communications, Ltd., 129*n*, 165.
Steering Group, 174*n*.
Foresight Programme (Technology Foresight Programme), 155, 257-8, 257-8*n*.
Committee, 259.
Foundation for Science and Technology, 147.
Fox, Claire, 38*n*.
Fox, Fiona, 38*n*, 139, 179-81, 185, 189, 218, 242.
Fox, Kate, 113, 116-7.
Fox, Liam MP, 140.
Fox, Robin, 116.
Fox, Ursel, iii*n*, 280*n*, 282.
Friends of the Earth, 93.
Fullagar, Bill, 195.
Fuller, Mick, 165*n*.

Fund for the Replacement of Animals in Medical Experiments, FRAME, 158.
 Furedi, Frank, 7, 29, 37*n*, 38*n*, 96, 104, 106-7, 136, 272-3.
 Furedi, Ann, 38*n*.

G

Gairdner Foundation, 166.
 Garnier J.P., 195.
 Gale, Mike, 161, 177.
 Gallo, Robert, 12, 12*n*, 121, 121*n*.
 Galton, Francis, 215.
 Galton Institute, 215-6.
 Gang of four, The, 71, 71*n*.
 Gargano, Antonio, 280*n*.
 Garner, Ian, 175.
 Garnham, Diana, 138.
 Gates Vaccine Institute, 18*n*.
 Gatsby Charitable Foundation, 176.
 Gearin Tosh, Michael, 61, 61*n*.
 GEC Marconi, 78.
 Gelletly, William, 207*n*.
 General Medical Council, GMC, xviii, 46*n*, 47, 150, 212.
 Genetically modified, GM, xviii*n*, xxi, 8-9, 87, 89, 89*n*, 92*n*, 93, 105, 131, 148*n*, 154, 156, 163, 165, 173-6, 177*n*, 180*n*, 201-2, 214*n*, 288, 294.
 animal fed, feed, 131, 286*n*.
 maize fodder, 288.
 anything, 173, 294.
 companies, 202.
 corn, 286*n*.
 crops, xx, xxi, xxi*n*, 9, 81, 87-8, 91, 93, 100, 123, 131, 142, 154-5, 164-6, 174*n*, 178, 201, 214, 279*n*, 301.
 food, 87, 154, 177, 286-7, 286*n*.
 contaminated, 286.
 industry, 191, 214.
 insulin, 288.
 issues, xxiii, 46, 163, 175, 179.
 lobby, 163, 176.
 pharmaceuticals, 43, 163.
 plants, 162-3, 163*n*, 176, 296*n*.
 policy, 175, 279*n*.
 potatoes, 147, 177, 214.
 produce, 175, 191, 213.
 scientists, 89, 176.
 soya, 270.
 vaccines, xiii, 40, 286.

Genetically modified crops: the social and ethical issues, 156.
 Genetically Modified Organisms, GMOs, 131, 175, 219.
Genetically Modified Plants for Food Use, 156, 176, 201.
 German, Lindsey, 73*n*, 82*n*.
 Geron Biomed, 148.
 Gerson, Therapy, 61*n*, 62.
 Ghosh, Pallab, 140, 180.
Ghost Lobby, The, 25*n*, 40-1*n*, 207*n*, 239*n*.
 Gibson, Ian MP, 139.
 Gilland, Tony, 38*n*, 130*n*, 132, 174*n*.
 Gilligan, Chris, 38*n*.
 Gillot, John, 38*n*, 107.
 Glaxo, 193, 246.
 -SmithKline, GSK, 38, 80*n*, 132, 139*n*, 140, 146, 156-7, 190, 193, 195, 195-6*n*, 201*n*, 205, 212, 218, 246.
 -Wellcome, 73, 134, 176, 193, 206.
 Global Futures, 37*n*, 38, 38*n*.
 Global Healthcare Equity Research, 139*n*.
 Global Medicine, 239*n*.
 Global Public Affairs Institute, GPAI, 217-8.
 Global warming, 10, 102, 107, 143, 191, 271, 285.
 GM, *see* Genetically modified.
 GM Policy Division, 175.
 GM Policy, Science and Regulation Unit, 175.
 GM Science Review Panel, 157, 202.
 GM Watch, xxi*n*, 37-8*n*, 166*n*, 176*n*, 173, 178, 202*n*.
 GMC, *see* General Medical Council.
 GMOs, *see* Genetically Modified Organisms.
Good Housekeeping, 237.
 Gorman, Teresa, 100.
 Gosling, Tony, 127*n*.
 Gotts, Ronald, 16*n*.
 Gough, Michael, 108-9.
 Government Affairs and Public Policy, EU, 134, 140.
 Government Information and Communications Service, GICS, 219.
 GPC, 77, 79-81, 80*n*, 84, 128.

- International, 140.
Market Access, 77, 79-81, 80*n*.
Connect, 81.
Graded exercise therapy, GET, 55-6, 223, 228, 230, 230*n*, 252.
Granatt, Mike, 219.
Grand Metropolitan Retail, 113.
Gray, Alan, 154, 157, 174*n*, 175.
Gray, Nicola, 146, 146-7*n*.
Great Universal Stores, GUS, 245-6, 245*n*, 253.
campaign, 241.
Charitable Foundation, 247.
Charitable Trust, 190, 233, 236, 240-1, 244-6.
Greenfield, Baroness Susan, 39*n*, 112, 116, 130*n*, 212, 214.
Greenpeace, xxi, 87, 91, 273.
Guide to anti-environmental organisations, 109*n*.
Greunke, Gudrun, 267*n*.
Griffin, Andrew, 130*n*.
Grimme, H., 249*n*, 281*n*.
Grimshaw, Chris, 132.
Grove-White, Robin, 174*n*.
Guardian, the, xxii*n*, 56, 136*n*, 148, 148*n*, 177-8, 177*n*, 237, 238*n*, 241, 241*n*.
Guidelines on Science and Health Communication, 39, 111, 118, 123, 125, 183, 214, 283, 301.
Guldberg, Helene, 130*n*.
Gulf War, 54, 115*n*.
Syndrome, xix, 13, 191, 204-5, 224, 227*n*, 252, 284, 293.
Gulf War Research Unit, 203.
GUS, *see* Great Universal Stores.
Guy's Hospital Dental School, 162, 164.
- H**
- Hammond, John, 273.
Hardell, Lennard, 121-2.
Harding, Philip, 112, 146.
Harkin, James, 116.
Harlan UK, 157.
Harlan Sprague Dawley Inc, 157.
Harris Birthright Centre for Foetal Medicine, 240*n*.
Hayek, Friedrich A., 29, 29*n*.
Hayward, Steve, 104.
Heads of Medical Schools, 166.
Health and Science Communications Trust, 113.
Health Protection Agency, HPA, 117, 207-8, 239*n*, 255.
testing of vaccines, 255.
HealthWatch, xviii, 17, 24-25, 39, 225, 231*n*, 292.
Healy, Dennis, 71*n*.
Heap, Sir Brian, 138, 141, 161, 177.
Heartfield, James, 38*n*.
Heimbrecht, Jorg, 267*n*.
Hennessey, Janice, 87.
see also Taverne, Janice.
Henshaw, David, 101.
Hicks, Rachel, 135.
Highfield, Roger, 200*n*.
Hill and Knowlton, 32, 38, 51, 82-83, 129, 134.
Hill, Julie, 175.
HIV, 2, 12-3, 121, 125, 143, 162.
Ho, Mae-Wan, 105.
Hodge, Jeremy, 165*n*.
Hodge, Margaret, 195*n*.
Hoescht Marion Roussel, 205.
Hoffmann-La Roche, 134, 198, 212, 239, 260.
Holme, Lord Richard, 77-9, 77-8*n*.
Homeopathy, 4, 6, 10, 21, 61-2, 67, 92, 120.
Hooper, Malcolm, 224, 224-5*n*.
Hormone Replacement Therapy, HRT, xi, 100, 114-6, 217, 237, 239, 241, 284, 301.
Horton, Richard, 147, 177-8.
Hotung Chair for Molecular Immunology, 162.
House of Lords, 77, 83-4, 89, 112.
Select Committee Science and Technology, 9, 89, 112, 211.
Report, 121-3.
HRT, *see* Hormone Replacement Therapy.
HRT Aware, 114-5.
Hudson, 110.
Institute, 109-10.
Center for Global Food Issues, 110.
Hume, Mick, 38*n*.
Hunt of Chesterton, Lord Julian, *or* Julian Ma, 147, 154, 162-4.
Hunt of King's Heath, Lord, 194-7.
Huntingdon Life Sciences, 13, 140.

Hutton, John, xxiii.
Huxley, Thomas, 283.
Hyde, Byron, 224, 224*n*.

I

IBD, *see* Inflammatory Bowel Disorders.
IBM, 132.
ICI, 147.
Illich, Ivan, 1, 4-5, 44-45.
IMPACT programme, project, 253-4.
Imperial College of Science, Technology & Medicine, 174*n*, 184, 193.
Incepta Group, 114*n*.
Independent, The, 23*n*, 112, 163*n*.
on Sunday, 290.
Independent Science Panel, ISP, 279*n*.
Inflammatory Bowel Disorders, IBD, xvii-iii, 11, 40-2, 44-5, 44*n*.
Inserm, 21, 143.
Institute for Laboratory Animal Research, ILAR, 158.
Institute for Fiscal Studies, 72*n*, 95.
Institute of Biomedical and Life Sciences, 156.
Institute of Child Illness, 255.
Institute of Clinical Education, 253.
Institute of Education, 254.
Institute of Food Research, IFR, 155, 164.
Food Advisory Committee, 164.
Institute of Ideas, Iol, 37, 37-8*n*, 39, 129, 130*n*, 132, 174*n*.
Institute of Psychiatry, 139, 204, 241.
see Mobile Phone Research Unit.
InterAction magazine, 230*n*.
International Centre for Life, 139, 166-7.
International Cochrane Collaboration, 254.
International Diabetes Federation, IDF, 212.
International Federation of Pharmaceutical Manufacturers Association, IFPMA, 148.
International Initiative Against The Planned Bio Ethics Convention, *iiin*, 280*n*, 282.
International Journal of Biotechnology, 279*n*.
Interpublic, 83.
Interrogating the precautionary principle, 130*n*.

Investment Steering Group, 231.
INVOLVE, 250, 250*n*.
Irvine, Sir Donald, 197.
Irwin, Judith, 165*n*.
Issue Management Council, 132.
ISIS Press, 278*n*, 279*n*.
ITN, 32, 299.

J

JABS, 42.
JAMA, *see* American Medical Association, *Journal of the*.
James Lind, Alliance, 250, 251*n*.
Society, 250.
Janssen-Cilag, 239*n*.
Japan, 41.
Japanese Government, 41, 47, 50.
JCVI, *see* Department of Health.
Jenkin, Charles Patrick Fleming, Baron of Roding, 147.
Jenkins, Eve Tiffany, 38*n*.
Jenkins, Lord Roy, 71*n*, 73, 82-84.
Jesus College Oxford, 213.
John Innes, Agriculture, 202.
Bioprospects Ltd, 202.
Centre, JIC, 19*n*, 156, 177, 201*n*, 202.
Foundation, 202.
Johnson, Hillary, 52*n*.
Johnson & Johnson, 77, 115, 140, 217-8.
Jones, Steve, 215-6, 223*n*.
Jones Trevor, 18-9, 148-9, 195.
Juniper, Tony, 93.

K

Karolinska Institute, 41.
Kaye, Eve, 38*n*, 106.
Kaye, Pandora, 38*n*.
Kelloggs, 115.
Kennedy, Angela, 225-6, 234, 252.
Kennedy, Ian, 81.
Kent, University of, 7, 29, 37*n*, 63, 106, 136, 273.
Kinderlerer, Julian, 175.
King, Sir David, 19*n*, 208, 258.
King's College's, Centre for Risk Management, KCRM, 133-5, 204.

Department of Psychiatry, 250.
Hospital, 203, 260*n*.
Science Research Fellow, 219.
see also Harris Birthright Centre for Foetal Medicine.
King's European Centre for Risk and Risk Communication, 200*n*.
Kinnock, Neil, 30, 71*n*, 72.
Klug, Aaron, 177-8.
Kobusch, Wilma, iii, iiii*n*, 280, 282.
Krebs, Sir John, 39*n*, 113, 147, 157, 213-4.
Kurtz, Paul, 16-17, 20.

L

Labour Party, xx*n*, xx*in*, 30-31, 69-72, 70-1*n*, 75, 77, 79*n*, 81-3, 128, 196.
see also New Labour.
Lachman, Dr Peter, 229.
Lachmann, Sir Peter, 147-8, 148*n*, 154, 177-8.
Ladyman MP, Stephen, 158-60.
Lancaster University, 174*n*.
Lancet, The, 42-3, 42*n*, 45, 101, 106*n*, 147, 177-8, 190.
Lang, Serge, v, xi*n*, 121*n*.
Larkin, Judy, 129, 130*n*, 132-4, 136, 219.
Laughton, Michael, 165*n*.
Lauritsen, John, 13*n*.
Lawton, Vincent, 195, 195*n*.
Leape, Lucian L., 5*n*.
Leaver, Christopher J., 138, 154, 157, 177, 201-203, 202*n*.
Legal aid, 45, 93-4.
Le Guinn, Ursula, 36*n*.
Lehman Brothers, 139*n*.
Leith, Pru, OBE, 161.
Lever Brothers, 115.
Levidow, Les, 279*n*.
Lexington Communications, 81, 165-6.
Libel action, 32.
Liberal,
Alliance, xx, xx*in*, 74-5, 78*n*, 84, 284.
Party, 73, 78, 83.
politics, 33, 74, 77, 80, 82-4.
Liberal Social Democratic, 82-83.
Party, xxi, 70*n*, 73, 82-3.
politics, 69, 81, 84, 112.
Liddle, Roger, 69, 72, 74, 74*n*, 78, 83, 83*n*.
Lilly Industries Ltd., 205.
Linbury, 128*n*.
Trust, Lord Sainsbury's, 228, 245.

Lisa, P. J., 15*n*.
Livermore, Martin, 165*n*.
Liverpool, University of, 173.
Living Marxism, 31, 37*n*, 38, 105, 165-6.
see also LM.
Llewellyn-Smith, Chris, 211.
LM, xx*in*, xxi*in*, 31-32, 37*n*, 38, 38*n*, 107, 189.
Lobbygate, 74*n*, 80-81, 84.
Lobby Watch, xxi*n*.
Lofstedt, Ragnar, 200*n*.
London School of Hygiene and Tropical Medicine, 253-4.
London, University of, 148-50, 162, 164, 211, 219.
Long-term Medical Conditions Alliance, LMCA, 161.
Lonza Group Ltd., 194.
Lovell-Badge, Robin, 162.
Low-level radiation, 271, 293.

M

Ma, Julian, *see* Hunt of Chesterton, Lord Julian.
MacLeod, John, 175.
Maddox, Sir John, 12*n*, 20-21, 21*n*, 143-4, 143-4*n*.
Maguire, Kevin, xxi*in*.
Mail on Sunday, 237.
Malaria,
Foundation International, MFI, 87-88.
Project, 88.
Malcolm, Alan, 164, 177.
Mamone Capria, Marco, v, 280*n*.
Mandelson, Peter, 23, 69, 72-75, 77-78, 79*n*, 82-83, 83*n*.
Mar, Countess of, xix*n*, 233.
Marantelli, Bernard, 81.
March of Unreason, The, 90-1.
Margetts, Rob, 19*n*, 173*n*.
Marks, Vincent, 17, 101*n*, 105-6*n*.
Mars Confectionery, 113.
Marsh, Peter, 113, 117, 138.
Marshall, Eileen, xix*n*.
Martin, Paul, 189.
Marx, Karl, 34-5.
Marxism, Marxist, 7, 16, 31, 33, 35, 65, 105-6, 179.
analysis, 61.
see *Living Marxism*, LM.

- Matfield, Mark, 138.
 Matthews, Jonathan, xxiin.
 Maverick, 47, 187-8, 188*n*, 215.
 scientists, 188.
 May, Lord, 147.
 May, Sir Robert, 123, 180*n*.
 Mayo, Simon, 151, 151*n*.
 MCA, *see* Medicines Control Agency.
 McConnell, Edward, 207*n*.
 McDonald's, 64, 115, 190.
 McKillop, Tom, 194-5.
 MCM, 113.
 Research, 113, 117.
 McMichael, Andrew, 243*n*.
 McNally, Lord Tom, 83.
 McQuaid, Jim, 207*n*.
 McVie, Gordon, 19*n*, 91.
 ME, *see* Myalgic Encephalomyelitis.
 ME Association, 20, 225, 233, 253.
 Measles, 43, 49, 91, 111, 151, 270.
 vaccine, 45, 187.
 virus, xviii, 40-1.
 see also MMR.
Measles, mumps, rubella vaccine: Through a glass darkly, 285*n*.
 Media Resources Service, MRS, 20.
 Medical Research Council, MRC, 21, 24-25, 42-3, 56, 75, 137, 139, 150, 152-3, 158, 161-2, 182, 190, 206, 226, 228-9, 243, 243*n*, 244*n*, 245, 249-50, 253, 255, 258.
 Corporate Communication, 255.
 Psychiatric Genetic Research Unit, 223*n*.
 public communications, 255.
 Medicines Commission, 19, 149.
 Medicines Control Agency,
 MCA/MHRA, 25, 149, 187, 239, 249.
 Medicines for Malaria Venture, MMV, 149.
 Merck, 260.
 & Co. Inc., 139*n*, 197*n*.
 USA, 88.
 Institute, 18*n*, 166.
 Sharp & Dohme, 134, 156, 190, 195, 195*n*, 212.
 Leadership Programme, 239*n*.
 Merlin Fund LP, 149.
 MHRA, *see* Medicines Control Agency.
 Miller, Elizabeth, 117.
 Mills, Heather, xviii*n*, 43*n*.
 Miners' strike, 30, 32-3, 71.
 Minervation Ltd., 247-8.
 Minister for Science, 11, 23, 75, 155, 176, 178, 245, 258.
 see Sainsbury, Lord David.
 Ministerial Committee on Science
 Policy, SCI, 179, 179*n*.
 Ministerial (Pharmaceutical) Industry
 Strategy Group, MISG, 195-6, 283.
 Ministerial Science Group, MSG, 180-1*n*.
 Ministerial Sub-Committee on
 Biotechnology, SCI-BIO, 179*n*.
 Ministry of Defence, MoD, 113, 135, 181, 205.
 Mitchell, Elizabeth, 253, 255.
 MMR, xvii-xviii, xviii*n*, xix-xxi, 11, 40-4, 43-4*n*, 45-7, 49-51, 50*n*, 94, 101*n*, 117, 119, 136, 150, 185-7, 184*n*, 191, 206, 219, 246*n*, 270, 284, 300-1.
 and autism, 44, 51.
 argument, 48, 93.
 vaccine, 34, 43, 49, 92-3, 111, 129, 150-1, 219, 270, 300.
MMR and Autism, 48-9.
MMR and the Media: Learning the Lessons, 184.
 Mobil Oil, 108.
 Mobile Phone Research Unit, 241.
 Mobile phones, cell phones, xiii, 10, 24, 54, 89*n*, 116, 133-6, 237-8, 241, 265-6, 265-6*n*, 269-70, 285, 292*n*, 302.
 communications, 133, 266.
Modified Truth – The rise and fall of GM, 105.
 Moffit, Terrie, 139.
Moment on the Earth, A, 108.
 Monbiot, George, xxiin, 11*n*, 100, 105, 136*n*, 178, 202, 214*n*.
 Monitoring and Evaluating Steering
 Group, MESG, 244*n*.
 Monro, Jean, 22, 100-1.
 Monsanto, 11, 16, 16*n*, 78-79, 81-83, 109, 122, 131, 166, 205, 214, 267*n*, 286*n*.
 Montagnier, Luc, 12, 12*n*.
 Montague, Tim, iiii*n*, 277, 277-8*n*.
 Montgomery, Scott, 43, 285*n*.

- Moon, Reverend Sun Myung, 107.
 Moore, Thomas J., 288*n*.
 Morelle, Becky, 189.
 Morgan Chase, J. P. 115*n*.
 Morgan, Ken, 195.
 Morris, Robert, 212.
 Moseley, Bev, 175.
 Moses, Vivian, 154, 164, 165*n*.
 MRC, *see* Medical Research Council.
 MSD, *see* Merck, Sharp & Dohme.
 Multiple Chemical Sensitivity, MCS, xix, 13, 59, 117, 191, 224, 230*n*, 252, 292, 292-3*n*.
 Munchausen's syndrome by proxy, 4, 292.
 Murdoch, Rupert, 69, 77, 78*n*, 190, 237, 237*n*.
 Murray, Noreen, 177.
 Murray, Sir Kenneth, 177.
 Murphy, Michael, 207*n*.
 Myalgic Encephalomyelitis, ME, xvii-xix, xix*n*, xx-i, 3, 13, 19-20, 25, 39, 51-56, 58-9, 54*n*, 57, 117, 151-4, 191, 203-4, 206, 223-262, 224*n*, 227*n*, 229-31*n*, 292, 298, 300.
 sufferers, xix, 128*n*, 152-3, 223, 225-7, 229, 230*n*, 232-4, 236, 244, 251, 252-5, 273, 284, 298, 299.
- N**
 Nanotechnology, 136.
 National Academy of Science, 158, 178, 278.
 National Collaborating Centre for Mental Health, NCCMH, 248.
 National Council Against Health Fraud, NCAHF, 15-6, 39.
 National electronic Library for Mental Health (NHS), NeLMH, 247.
 National Grid Transco plc, 176.
 National Health Service, NHS, 25, 47, 65-6, 149*n*, 150, 158, 160-1, 166, 195-9, 197*n*, 212, 226, 229, 230-1*n*, 232, 247-9, 253-4.
 Confederation, 239*n*.
 National Institute for Clinical Excellence, NICE, 139, 229, 229*n*, 248.
 National Institute for Medical Research, NIMR, 162.
 National Perinatal Epidemiology Unit, NPEU, 254.
 National Radiological Protection Board, NRPB, 207.
 National Research Council, 150, 158.
 National Service Frameworks, NSFs, 160-1.
 NATO, 79*n*, 141, 205, 281*n*.
 Science Committee, 141, 177.
 Natural Environment Research Council, UK, NERC, 173-4, 173-4*n*, 213.
Nature, 12, 20-21, 21*n*, 74, 89, 89*n*, 143-4.
 NCAHF, *see* National Council Against Health Fraud.
 NERC, *see* Natural Environment Research Council.
 Nestlé, 155, 177.
 Neurocrine, 260.
 Neurosciences and Mental Health Board, NMHB, 244*n*.
New Humanist, 212.
 New Labour, xx-i, xx*n*, 13, 23-25, 31, 40, 47, 69, 74-75, 74*n*, 77, 79, 81-84, 104, 125, 129, 136-7, 179, 190, 193, 199, 237*n*, 239*n*, 259*n*, 283, 296-7, 302.
 Government, 40, 43, 47, 77, 78*n*, 79-80, 284.
 Policy Unit, 284.
 see also Labour Party and Liberal Alliance.
New Science of Life, A, 144.
 Newby, Lord, 84.
 News International, 77, 190, 237*n*.
News of the World, 237.
 NHS, *see* National Health Service.
 Norfolk Genetic Information Network, NGIN, 213*n*.
 North America, *see* United States of America.
 Northbank Communication, 129-30*n*.
 Novartis, 18*n*, 20, 77, 82-3, 115, 134, 140, 195, 205, 212.
 Seeds, 166.
 Novo Nordisk, 38*n*, 82-3, 134, 139*n*, 212, 217.
 NPS Pharmaceuticals, 205.
 Nuffield Council on Bioethics, 156, 161.
 Nuffield Foundation, 161.
 Null, Gary, 6*n*.
 et al, 289, 289*n*.
 NUM, 30.
 Nutrition Institute of America, 289*n*.

O

Observer, The, 80, 101.
 Office of Science and Technology, OST,
 24, 41*n*, 75, 84, 157, 176-7, 179-81,
 179-81*n*, 182, 189, 198, 208, 257*n*,
 260, 260*n*.
 Ogilvie, Dame Bridget, 138, 148, 154.
 Omnicom, 81.
 One Click Group, Campaign, *The*, xx*n*,
 225-6, 225*n*, 243*n*, 234-6, 242.
 O'Neill, Paul, 49, 55*n*.
 Onions, David, 175.
 Organic farming, 33, 92.
 Organisation for Economic Co-operation
 and Development, OECD, 214.
Osler's web, 52*n*.
 O'Sullivan, Marion, 174.
 Oswaldo Cruz Foundation, 139*n*.
 Owen, Sir David, 71*n*, 128.
 Oxford Forestry Institute, 202.
 Oxford Glycoscience, 157.
 Oxford Radcliffe NHS Hospitals Trust,
 249.
 Oxford University, 24, 52, 79, 113, 140,
 189, 201, 207*n*, 213, 215, 239*n*,
 246-7, 246*n*, 273.
 Council of, 246.
 Department of Health Sciences, 251.
 Press, 47, 48*n*, 90*n*, 246*n*, 285*n*, 289*n*.
Ozone, 36, 36*n*.

P

PACE Trial, 206, 226, 229, 232, 236, 250,
 253, 255.
 Identifier, 255.
 Palast, Greg, 80.
 Pallister, David, xxi*n*.
Panorama, 237.
 Parke Davis, 134.
 Parkinson's disease, 215.
 Parliamentary and Scientific Committee,
 295, 295*n*.
 Parliamentary Office of Science and
 Technology, POST, 189.
 Parr, Douglas, 273.
 Parry, Vivienne, 190, 218-9, 233-6, 237-
 247, 238*n*, 252-3.
 Partridge, Sir Nick, 250*n*.
 Pasteur, Institute, 12*n*.
 Paterson, George, 214.

Paul, Jobst, iii*n*, 280*n*, 282.
 Paxman, Jeremy, 79*n*.
 Peacock, Christie, 138.
 Pearson, David, 53.
 Peiser, Benny, 165*n*.
 Peninsula Medical School, 231, 253.
 Peplow, Mark, 189, 219.
 Perinatal Trials Service, PTS, 254.
 Perkins, Sarah, 253.
Perspectives of the Pharmaceutical Industry,
 257*n*, 260.
 Peters, Mike, 74*n*.
 Peters, Sir Keith, 166.
 Pfizer, 37, 39, 77, 130, 134, 139, 146, 159,
 161, 159*n*, 190, 195, 200-1*n*, 205,
 218, 260.
 Division of Central Research, 158.
 Global Research and Development,
 134, 140.
 Inc., 88, 218.
 plc, 38.
 UK, 212.
 Pharma Futures, 139, 139*n*.
 Pharmaceutical industry, companies,
 xxiii, 25, 82, 91, 136, 138-40, 161,
 168, 191, 193, 195-7, 246, 259-261,
 259*n*, 262*n*, 283, 297.
 Pharmaceutical Industry Competitive
 Task Force, PICFT, 158, 194, 283.
 Pharmaceutical Research and
 Manufacturers of America,
 PhRMA, 218.
 Pharmacia Corporation, 218.
 Pharmacrops, 162.
see also Genetically Modified.
 Pharmidex, 260.
 Philip Morris, 78-9, 109.
 Management Corporation, 132.
 Phillips, Trevor, 184.
 Picker Institute, 197.
 Pidgeon, Nick, 207*n*.
 Pilger, John, 69*n*.
 Pinching, Anthony, 230*n*, 231, 253.
 Planned Bio Ethics Convention, *The*,
 280*n*, 282.
 Player, Sally, 233.
 Plumb, Lord, 138.
 Policy Network, 84*n*.
Politics of Risk Society, The, 272, 272*n*.
 Poole, Nigel, 175.
 Porro, Bruno, 273.
 Porter Novelli, 82, 166.

Poste, George, 200*n*.
 Powerject Pharmaceuticals, 157.
 PPL Therapeutics, 157.
 PPP, 17.
 Precautionary principle, 88-9, 92, 130*n*,
 148, 266.
 Prescott, John, MP, 81.
 PRIMA, 74-5, 77, 79-81.
 Europe, 72-4, 77, 80*n*, 128.
 PRIME,
 Project, 226-7, 231, 234-6, 236*n*, 242-5,
 247-8, 250-1, 253, 255.
 Steering Group, Committee, 234,
 236*n*, 252.
 Prime Minister's, 46, 154, 164, 174*n*, 194,
 208-9.
 Office, 198.
 Policy Unit, 129, 136, 195.
 Prince of Wales, 154.
 Principal Medical Officer for
 Communicable Diseases and
 Immunisation, 41, 117.
 Prior, Jim, 128.
 PRISMA, Providing Innovative Service
 Models and Assessments, 206,
 230*n*, 256.
 Health, 205, 230.
Private Eye, xviii*n*, 43*n*, 122.
 Procter & Gamble, 114*n*.
 Fund, 109.
Progress, 74.
 Progress Educational Trust, 107.
Prospect, 87-8*n*, 88-9, 90*n*.
 Prozac, 190, 205.
 Psychiatric,
 aetiology, 154, 191, 204, 206, 223, 227,
 245.
 diagnosis, 3.
 lobby, 54*n*, 55-7, 223-6, 228, 242, 250,
 255.
 paradigm, 224, 227, 242.
 position, 228, 247.
 Psychiatry, 139, 203, 223, 230, 247, 250,
 269, 272, 293, 300.
 Psycop, 225.
 Public Health Services Laboratory,
 PHSL, 196.
 Purvis, Becky, 189.
 Pusztai, Arpad, xx-i, 11, 105, 118, 131,
 147-8, 177-8, 202, 214, 298.
 PXG Shell International Ltd., 239*n*.

Q

QRD project, 253-4.
 Quack, 45, 47, 89*n*, 90.
 Quackbusters, quackbusting, xx, xxii, 15,
 16*n*, 17-18, 18*n*, 39, 55, 60-1, 88,
 92, 143, 201, 292.

R

Radiation, Risk and Society Advisory
 Group, R, RSAG, 207-8, 207*n*.
 Ragan, Ian, 260.
 Ralph, Stephen, 151.
 Rampton, Sheldon, 104*n*.
 Ramsay, Mary, 117.
 Ramsden, Sara, 106.
 Randi, James, 21*n*, 143, 144*n*.
 Raphael, Ellen, 38, 38*n*, 136.
 Rath Health Foundation, Dr, 6*n*.
 Rational Press Association, 212.
 Rawlins, Michael, 139.
 Raynsford, Nick, 194.
 Raytheon, 78.
 RCP, *see* Revolutionary Communist
 Party.
 Reagan, Ronald, 31, 78*n*.
*Realising our Potential – A Strategy for
 Science, Engineering and
 Technology*, 257.
Reason, 16*n*.
 Red Consultancy, 114-5.
 Red Front, 30.
 Regester Larkin, RL, 129-31, 131-2, 131*n*,
 135-7, 219.
 Regester, Mike, 129, 132.
 Reith Lecture, 215.
 ReNeuron, 149.
 Research Councils, 24, 75, 180, 245.
 Research Defence Society, RDS, 89, 150,
 169, 243*n*, 290.
 Revolutionary Communist Group, RCG,
 29, 37.
 Revolutionary Communist Party, RCP,
 xxi-ii, xxin, 7, 29-35, 37-8, 48, 74,
 92, 99, 104, 106, 122, 137, 168,
 174, 181, 187-9, 201, 212, 240, 299.
see also exRCPers.
 Rhône Poulenc, 134, 156, 176, 202.
 Richmond, Caroline, xix, 17, 19, 204, 224,
 243.

Ridley, Matt, 139, 166-7.
 Riley, Pete, 93.
 Ringrose, Peter, 155.
 Rio Tinto, RTZ, 19*n*, 73, 77, 194.
 –CRA, 79.
Risk Communications: The communication and understanding of risk associated with scientific developments, 219.
 Risk Group Ltd, 147.
Risk Issues and Crisis Management, 132.
 Risk perception, 130, 133, 135, 188, 204, 219, 271-2.
 see also Virtual risk.
 Ritalin, 261*n*.
 Robertson, George, 79*n*.
 Robinson, David, 175.
 Roche, *see* Hoffmann–La Roche.
 Rodgers, William, 71*n*.
 Rogers, Jude, 234, 248.
 Roll of Ipsden, Lord, 128.
 Rollens, Rick, 50.
 Rowatt Institute, 11.
 Rowell, Andy, xxi*n*, 178.
 Royal Academy, 142.
 Royal Academy of Engineering and Institution of Chemical Engineers, 174*n*, 207*n*.
 Royal College of General Practitioners, 239, 239*n*.
 Royal College of Nursing, 247.
 Institute, 234.
 Royal College of Obstetricians and Gynaecologists, 240*n*, 246.
 Royal College of Paediatric and Child Health, 232.
 Royal College of Physicians, 194, 211, 288, 288*n*.
 Royal College of Psychiatrists, 248.
 Royal Free Hospital, xviii, 42, 117.
 Royal Free Medical School, xviii, 41, 43-4, 48, 239.
 Royal Institute of International Affairs, RIIA, 78-9.
 Royal Institution, The, RI, 39, 39*n*, 111-2, 111*n*, 116, 119, 122, 129, 130*n*, 132, 136, 138, 179-80, 183, 185, 189, 214.
 Royal Society, RS, 111-2, 118-20, 122, 129, 147-8, 156, 176-8, 176*n*, 180, 183, 194, 199, 201, 211, 213.
 Royal Society of Edinburgh, 156.

Royal Society of Medicine, 117, 230, 250.
 Royal United Hospital, Bath, 253.
 Russell, Nick, 184.

S

Saatchi & Saatchi, 79, 79*n*.
 Sachs, Goldman, 128.
 Safeway's, 161.
 Sainsbury of Preston Candover, Lord John, 11, 23, 72, 127-8, 128*n*.
 Sainsbury of Turville, Lord David, 41*n*, 72, 75, 77-8, 84, 128, 155, 173, 176, 178, 180*n*, 181, 189, 194, 195*n*, 197-9, 202, 208, 228, 241, 245, 248, 258, 284.
 see also Office of Science and Technology.
 Sainsbury's Trusts, 128, 228.
 Salisbury, David, 41, 72, 75, 117.
 Samuels, Gill, CBE, 200*n*.
 Sandell, Robert, 50-1, 50*n*.
 Sankyo Co. Ltd., 139*n*.
 Sanofi-Aventis, 212.
 Sarah Scaife Foundation, 109.
 Saunders, Peter, 278*n*.
 Save British Science, 123, 189, 243*n*.
Saving the planet with pesticides and plastics, 110, 203.
 Scheibner, Viera, 3, 4*n*, 5-6.
 Schering-Plough Corporation, 218, 239*n*.
 SchNEWS, 78*n*.
 Schram, Martin, 266*n*.
 Schroeder, Peter, 155.
 Schultz, Jack C., 108.
 SCL, *see* Ministerial Committees on Science Policy.
 Science, 9, 15, 23, 35, 36*n*, 89*n*, 92*n*, 93, 103-4*n*, 123, 127, 129, 129-30*n*, 142, 144-5, 156*n*, 179-80*n*, 183, 199, 200*n*, 240*n*, 267, 269, 271*n*, 277, 277-9*n*, 286*n*, 291*n*, 295, 298-9, 302.
 policy, 179, 181, 302.
 see also Scientists.
 Science Advice Section, 176.
 Science Advisory Panel, Group, 110, 191.
 Science and Environmental Policy Project, SEPP, 107.
Science and Society, 9, 9*n*, 112, 112*n*.
 Science Council, 164.

- Science Media Centre, SMC, 20, 32, 37, 37*n*, 44, 46, 122, 132, 139-40, 147, 154, 179, 181, 183-91, 183-4*n*, 201, 209, 217-9, 225, 237*n*, 240-2, 273, 283, 291*n*, 300.
- Science, Risk and the Regulation of New Technologies, 273.
- Scientific Advisory, Boards, 148-9, 166. Committees, 180-1. Panel, 277.
- Scientific Alliance, 89, 129*n*, 165, 165-6*n*. Advisory Forum, 165.
- Scientists, xix*n*, 3, 7, 9-11, 13, 16, 17*n*, 20-1, 35, 52, 61, 87-88, 94, 103-4, 113, 116-9, 121, 123, 123*n*, 125, 130*n*, 141-2, 148, 148*n*, 151, 153, 158, 163, 166, 175-8, 177*n*, 183-8, 191, 201, 211-2, 214, 216, 227, 234-7, 250, 257, 271-2, 271*n*, 274-5, 277-8, 279-80*n*, 280, 285, 286-7*n*, 294-5, 296*n*, 298, 300-2.
- Scientists and the Media: Guidelines for scientists working with the media and comments on a press code of practice*, 112, 112*n*, 118-20.
- Scienza e Democrazia, International Conference, 279*n*. 3rd, 2005, 25*n*.
- Scott, Derek, 84.
- Scott, Dominic, 201*n*.
- Scottish Power, 77.
- Scottish Science Advisory Committee, 156.
- Scripps Research Institute, 162.
- Searle, 198.
- Seeds of Deception*, 287*n*.
- Select Committee on Science and Technology, House of Commons, 111*n*, 112-3, 139. House of Lords, 9*n*, 84, 89, 112, 112*n*, 128, 211. see also *Science and Society*.
- Sense About Science, SAS, 7, 12*n*, 37, 37*n*, 38, 39*n*, 46, 79, 85, 88-89, 95, 95*n*, 112, 116, 122, 127-9, 136-8, 142, 145, 147-8, 150, 154, 157, 165, 168, 174*n*, 175, 177, 180, 201-2, 258, 260, 273, 283, 291, 300. Advisory Group, 139-40, 243*n*. Association, 79. Board of, 269.
- Seroxat, 205.
- Shandwick, Consultants, 82. Public Relations, 83. see also Weber Shandwick.
- Sharpe, Michael, 53.
- Shearman & Sterling, 205-6.
- Sheffield Institute for Studies on Ageing, SISA, 159-60.
- Sheldrake, Richard, 144-5, 144*n*.
- Shell, 107, 132, 135, 147.
- Shepherd, Charles, xix, 19-20, 225, 225*n*, 233, 242.
- Shepherd, Sir Alfred, 18.
- Shire Health Group, 159.
- Shire Pharmaceuticals, 157.
- Shortis, Maria, 233.
- Showalter, Elaine, 204, 243, 273*n*.
- Silent Spring*, 15, 108.
- Simon, Julian, 109.
- Singer, Fred, 107.
- Single Assessment Process, SAP, 159-61.
- Skeptic magazine*, 16*n*.
- Skeptics, 16-17, 20, 144-5, 212, 298.
- Skewed: Psychiatric hegemony and the manufacture of mental illness in Multiple Chemical Sensitivity, Gulf War Syndrome, Myalgic Encephalomyelitis and Chronic Fatigue Syndrome*, xix*n*, 23*n*, 51*n*, 55-6*n*, 102*n*, 109*n*, 224, 224-5*n*, 227*n*, 230*n*, 268*n*, 273*n*, 292*n*.
- Skingle, Malcolm, 201*n*.
- Slater, Eliot T., 223*n*.
- Slavin, David, 134, 201*n*.
- Slipman, Sue, 78.
- Smith, Jeffrey, 287*n*.
- Smith, John, 30-31, 71*n*.
- SmithKline Beecham, 18*n*, 77, 79, 80*n*, 88, 122, 148, 156, 205-6, 212, 246.
- Snowdon, Claire, 135.
- Social Democratic Party, SDP, see also Liberal Social Democratic Party, 71-5, 71*n*, 78, 83, 128.
- Social Issues Research Centre, SIRC, 39, 39*n*, 111-7, 111*n*, 146, 180, 214-5. Joint Forum of the, 39, 112, 215.
- Social Science Research Unit, 253.
- Socialist Workers Party, 38*n*.
- SPEAK, 157, 157*n*.

Speers, Tammy, 218-9.
Spiked, 32, 37-9, 37*n*, 51, 56, 105, 116, 129, 166, 174, 174*n*, 241.
 Health, 60*n*.
 SpinWatch, 72*n*, 165*n*.
 Squibb Institute for Medical Research, 193.
 Staniszevska, Sophie, 234, 247, 251.
 Stauber, John, 104*n*.
 Stewart, Walter, 21, 21*n*.
 Stone, Lord Andrew, 190.
 Straw, Jack, MP, 82.
Stressed Out, 243, 243*n*.
 Sugar Bureau, 113.
Sun, *the*, 237.
 Sun Oil, 107.
Sunday Telegraph, *The*, 67, 67*n*, 91, 91-2*n*, 93.
Sunday Times, *The*, 45-46, 45-6*n*, 47.
 Magazine, 50, 50*n*.
 Swan, Harry, 131-132.
 Swiss Re, 273.
 Sykes, Sir, Richard, 154, 193-201, 195*n*.
 Synaptica, 215.
 Syngenta, 155, 166, 190, 202, 288.

T

Taaffe, Paul, 82.
 Tallis, Raymond, 1-3, 5, 7, 93, 145.
 Tambocor, 288.
 Taverne, Janice, 87-8.
 see also Hennessey, Janice.
 Taverne, Lord Dick, 39*n*, 47, 70, 69-75, 77-9, 81, 84-5, 87-95, 87-9*n*, 90*n*, 96, 112, 127-9, 129*n*, 137-8, 146, 165, 214, 284.
 Taylor, Brent, 48, 51, 117, 239.
 Taylor, Martin, 84, 128, 239.
 Taylor, Richard, 134.
 Technology Foresight, 155, 257.
 Terrence Higgins Trust, 250*n*.
 Thalidomide, 99.
 Thatcher, Margaret, 30-2, 70*n*, 295, 295*n*.
 Thatcherism, 24, 31.
 thatcherite, 69.
 The Centre for Genetic Anthropology, TCGA, 164.
 Theroux, Paul, 36*n*.
 Thoma, George F., 205.
 Thomson, Caroline, 83.
 Thomson, Lord, 73, 83.

3M, 82-3, 132.
 Healthcare, 146.
Times, *The*, 89, 148, 148*n*.
 Timms, Stephen MP, 194.
 Tizzard, Juliet, 38*n*, 107.
 Tobacco,
 industry, 10, 16, 262*n*.
 products, 99, 164.
 Tomlin, André, 247, 248*n*.
Tomorrow's World, 237, 239.
Toronto Star, 265-6, 265*n*.
 Total, 135.
 Treasury, HM, 71, 198.
 Trewavas, Anthony, 154, 165*n*.
 Trilateral Commission, 73, 73*n*, 128, 138.
 Trotsky, Leon, 29, 29*n*, 37.
 trotskyists, trotskyites, xxi, 29, 33, 39*n*, 59, 71.
 Tryptophan, 286.
 Tweedale, Geoffrey, 289*n*.

U

Uncaged!, 290.
 Under Secretary of State for Science and Innovation, 75.
 Unilever, 73, 79, 155, 205.
 Research, 155.
 Union of Concerned Scientists, UCS, iii, 277*n*, 278, 280*n*.
 United States of America, North America, 4-5, 13, 16, 52-3, 69-71, 74, 85, 87-8, 92, 102, 108, 122, 128, 132-3, 140, 143, 155, 158, 164, 205, 217-8, 260*n*, 265, 267*n*, 277-8, 281*n*, 284, 286, 288-90, 293, 295, 302.
 see also Anglo-American relations.
 University College London, UCL, 87, 147-8, 164, 201*n*, 215.
Unquiet Voice of 'Silent spring': The legacy of Rachel Carson, *The*, 15*n*, 99*n*.

V

Vaccine-damaged children, 2, 41, 46*n*, 93, 137, 292*n*.
 Vaccines, vaccinations, jabs, xiii, xvii-iii, 4, 10-2, 38-43, 45-6, 46*n*, 48-51, 48*n*, 92-4, 111, 119, 122, 125, 129, 136-7, 150, 159, 163-4, 163*n*, 186-7, 190, 196, 196-7*n*, 151, 197, 207,

- 218-9, 227*n*, 239, 255, 259, 269-70, 274, 286-7, 287*n*, 293, 297, 300.
hepatitis B, 197*n*, 286.
manufacture, 239*n*.
meningitis, 196, 197*n*.
see also MMR and Measles and Genetically modified.
- Vallance, Patrick, 201*n*.
Van Klaveren, Adrian, 190.
Vehicle exhaust emissions, 293.
Venables, Katherine, 175.
Vidal, John, *xxiin*.
Vioxx, 288-9.
Virtual risk, 271-2, 284.
Vitamin B6, 180.
Vodafone, 132.
VOICES Project, 253-4.
- W**
- Wakefield, Andrew, *xvii-xviii*, 2, 11, 40-51, 42*n*, 44*n*, 46*n*, 117-8, 117*n*, 136-7, 145, 185-8, 206, 215, 239, 285*n*, 298, 300.
Waldegrave, William, 23, 257.
Walker, Guy, 155.
Walker, Hilary, 207*n*.
Walker, Martin J., 13*n*, 15-6*n*, 22-3*n*, 25*n*, 40*n*, 51*n*, 55*n*, 99*n*, 101-2*n*, 105*n*, 207*n*, 224*n*, 230*n*, 239-40*n*, 249*n*, 268*n*, 273*n*, 280*n*, 287*n*, 292*n*, 298*n*.
Walport, Mark, 18*n*, 147, 223*n*.
Warner, Lord, 229.
Warren, Lynda, 207*n*.
Washington Institute for Values in Public Policy, 107.
Watson, Julia, 73*n*.
Weber Shandwick Communications, 82-3.
WellBeing of Women, WOW, 240*n*, 241, 246, 246*n*.
Wellcome, 13, 149, 193, 246.
Foundation, 18, 250*n*.
Trust, 18, 18-9*n*, 161, 167-8, 176, 198*n*, 241, 250.
Public Engagement Strategic Advisory Group, 116.
Wessely, Simon, *xix*, *xxin*, 16*n*, 19, 25, 53-54, 101*n*, 128*n*, 133, 141, 153, 191, 203-208, 223-4, 227*n*, 229-30, 241-3, 244*n*, 245, 250, 255-6, 268, 268*n*, 273*n*.
in 1994, 223*n*.
school, 52, 224, 243, 245.
wesselyites, *xxin*, 56.
wesselyspeak, 268.
West, Caitlin, 135.
White, Jon, 217.
White, Robert, 103.
Whitehead, Malcolm, 100.
Widgery, David, 39*n*.
Wilkinson, William, 165*n*.
Williams, Ingrid, 175.
Williams, Margaret, *xixn*, 224, 225*n*, 230*n*.
Williams, Shirley, 71*n*, 78.
Wilsdon, James, 90*n*.
Wilson, Harold, 70*n*.
Wilson, Michael, 165*n*.
Wilson, Richard, 99-100.
Winfrey, Oprah, 13-4, 14*n*.
Winston, Lord Robert, 154, 211, 216.
Wise Use movement, 107-9, 108*n*.
Wolpert, Lewis, 144*n*, 154.
Women's Health Initiative Study, 100, 114.
World Health Organisation, WHO, *xixn*, 52, 149, 152, 160, 287*n*.
WPP plc, 158-9.
Wrigglesworth, Sir Ian, 73, 80, 84.
Wyeth, 100, 114-5, 114*n*, 190, 196, 205, 239, 239*n*.
- X**
- Xenova, 260.
- Y**
- Yarwood, Joanna, 117.
York Nutritional Laboratory, 287.
Young ME Sufferers Trust, 233.
- Z**
- Zeneca, 155-6, 205.
Agrochemicals, 134.
Seeds, 177.
Zovirax, 149.



www.zero-risk.org



Zero Risk? Group

The Zero Risk? Group has been set up specifically to distribute Martin J Walker's book *Brave New World of Zero Risk: Covert strategies in British science policy*. We believe that there should be widespread public debate about many contemporary scientific issues, including that of genetic modification. This book is an important part of such a debate and should be widely read. You can download it for free from the site above and we hope that you will pass it on to others who will include it in their email newsletters and put it up on their sites.

Donations

This book is being distributed free because we think it is important to get the information out there and we are tired of having to organise within the economic restraints on information, imposed by commerce. Hard copy books on this type of subject, are difficult and costly to distribute and they often end up reaching very small audiences.

A group of people have given their time and professional knowledge to produce the book. If you want to help cover the costs of the production of the book please make a contribution through the pay pal account on the Zero Risk site. Any money paid into this account will be paid directly to Martin J Walker and used to pay for the book's production and distribution.

There are many other organisations doing valuable work on this subject, which are mentioned in the book. If you wish to make donations to any of these groups, you might start by considering those below:



Corporate Watch, GM Watch, Greenpeace, JABS,
Lobby Watch, One Click Group, SpinWatch, Uncaged!



www.slingshotpublications.com

Slingshot Publications

Slingshot Publications was set up in 1993 by Martin J Walker, to publish his book *Dirty Medicine: Science, big business and the assault on natural health care*. This book, which was sold by mail order, went out of print in 1998 after selling 7,000 copies. Since *Dirty Medicine*, Slingshot has published *Loic Le Ribault's Resistance*, *A Cat in Hell's Chance*, republished Hans Ruesch's book *Slaughter of the Innocent* and published Martin Walker's book *SKEWED*.

Slingshot Publications, BM Box 8314, London WC1N 3XX
England

Martin J Walker

Martin J. Walker was born in 1947 and trained as a graphic designer. He has written books and articles while being an activist, political poster artist, investigator and a research worker.

Zero Risk is his eighth book. *SKEWED*, his previous book, looked at chemical, insurance and pharmaceutical company involvement in ME, GWS and MCS. His book *Dirty Medicine: Science, big business and the assault on natural health care*, was about the 'health fraud' movement in Britain and North America. His other books include, *With Extreme Prejudice: A study of police vigilantism in Manchester*; with Geoff Coggan, *Frightened for my Life: An account of deaths in British prisons*; with Jim Coulter and Susan Miller, *State of Siege: politics and policing in the coalfields, the miners strike 1984*.

Brave New World of Zero Risk

In 1997, New Labour brought to power a strange brew of liberalism, anti-socialism, public relations and corporate lobbying. While Thatcher had encouraged the pharmaceutical industry, Blair made it a partner in government. The National Health Service, set up originally to provide health care to the British people regardless of income, has been sold off bit by bit, mainly to pharmaceutical interests. The most serious consequence of ceding to corporate interests responsibility for science, medicine and health, is that the independence of science and any possible independence of health care has been sacrificed. Corporate lobby groups, in bed with Big Pharma, insurance companies and New Labour, now press for the least expensive and the most profitable health care solutions. They attack alternative medicine and campaign for animal testing and vivisection. They have politicised science and now control its methodology and its research results. Using spin, lies and propaganda they harass and isolate anyone who comes to conclusions critical of new technology or pharma-science. They preach zero risk and claim that new technologies can cause no harm.

This book examines the contemporary corporate politics of science in two areas, that of MMR (mumps, measles and rubella) vaccination and the illness ME (myalgic encephalomyelitis). It shows how those who have fought for independent science have been bullied, attacked and discredited, using political strategies that have nothing to do with science and everything to do with power and profit.