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News

Emasculating hypothetical oddities?

Geoff Watts

¹ London

When Bruce Charlton recently proposed giving space in his journal to AIDS denier Peter Duesberg, Elsevier decided to look at the journal's future. Geoff Watts asks if change would be for the better

With postal deliveries comprising mainly junk mail, the monthly arrival of the journal *Medical Hypotheses* is a treat. But for how long? If a group set up to advise the journal's publishers have their way, what makes it so distinctive may in due course wither. The group, which includes medical editors and others with an interest in editorial affairs, is advising Elsevier that the editorial decisions currently made by one man, Dr Bruce Charlton, should be overseen (and often, no doubt, over-ridden) by peer reviewers. Subject to the constraints of an unfamiliar orthodoxy, the bright and sometimes highly coloured plumage of *Medical Hypotheses* would surely suffer a fade to grey.

Bruce Charlton—who combines his role as editor with those of reader in evolutionary psychiatry at Newcastle University and what he calls a "virtual professorship" at the University of Buckingham—has been in charge at *Medical Hypotheses* for some seven years. The journal was founded in 1975 by David Horrobin, another Newcastle doctor whose unconventional career was backed by a capacity for controversial and unorthodox thinking. Horrobin started it as a forum for new ideas because he believed that, compared with other sciences, medicine was short on good theorising with which to

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Bruce Charlton—who combines his role as editor with those of reader in evolutionary psychiatry at Newcastle University and what he calls a "virtual professorship" at the University of Buckingham—has been in charge at *Medical Hypotheses* for some seven years. The journal was founded in 1975 by David Horrobin, another Newcastle doctor whose unconventional career was backed by a capacity for controversial and unorthodox thinking. Horrobin started it as a forum for new ideas because he believed that, compared with other sciences, medicine was short on good theorising with which to underpin its experimental work. He also saw the peer review process as intrinsically biased against any new idea, let alone a revolutionary one. Although peer review might be appropriate for assessing experimental work, this didn't necessarily make it equally suitable for judging theoretical speculation, he thought.

Charlton became a member of the *Medical Hypotheses* advisory board in the late 1990s and took over as editor after Horrobin's death in 2003. "I think he'd sized me up and decided I would be the person to take over. When he realised he was going to die he began giving me briefings, even on the ward while he was receiving chemo." Charlton clearly feels the weight of his inheritance; he talks not only of his own fears for the journal's future, but how his deceased mentor would have felt about the proposed changes.

By his own admission, Charlton's somewhat erratic career—a stint in neuroendocrinology followed by an MA in literature and philosophy and then by successive attachment to university departments of physiology, anatomy, epidemiology, and finally psychology—is evidence of rapidly changing interests. "But this was my qualification for *Medical Hypotheses* because it's a journal that covers the whole of medicine." I asked how he would respond to the label "libertarian radical" as a shorthand means of describing the outlook that emerges from his editorials. He says this would have been right five years ago, and is still in his temperament. But he's since moved, surprisingly perhaps, towards religion. Perhaps one shouldn't make too much of it, but there is a whiff of the Old Testament about his views on contemporary science. He talks of corruption and dishonesty, of hype, and spin, of "impression management," of the loss of individual integrity. He can muster little enthusiasm for the managerial arrangements that increasingly govern science. "I'm quite creative but not very good at working on other people's projects. I have an abrasive side to my personality. I'm not a team player."

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Part of the fascination of *Medical Hypotheses* stems from the individuality of some of its editor's decisions. "If I've been stimulated into thinking about something in a way I consider constructive," he says, "even if the paper itself is almost certainly not correct, I think it can be a valuable contribution to the scientific literature." That may be how some of the more exceptional papers find their way into the journal. In accounting for some of these off-the-wall contributions to *Medical Hypotheses* (a public health danger posed by showers, for example, or the effect of jet lag on mental illness, or the use of cashew nuts to cure tooth abscesses) he quotes Marc Abrahams, the man behind the annual Ignoble awards. "First they make you laugh, then they make you think." An academic publishing world in which all editors worked by these principles would be impossibly chaotic; one in which none is permitted to act in this manner would surely be the poorer.

Charlton is well aware that his emphasis on the role of editor as sole arbiter of what goes into the journal attracts charges of arrogance. "People do say this. It's extraordinary how individual responsibility is nowadays regarded in that light, as if committee decisions are intrinsically superior. But nobody can place any responsibility on to anyone in a committee."

What prompted Elsevier to set about a rethink of its journal was Charlton's intention to publish two papers which, so Elsevier claim, undermine the current understanding of AIDS. One of them, by the Stanford virologist Peter Duesberg, certainly tries to do this. He uses the instance of South Africa to argue against the HIV virus as the cause of the disease. One might suggest that Duesberg is a tiresome man and that Charlton's intention to give him more space in which to argue his already familiar case was ill conceived. But is this sufficient reason to revamp the entire basis of the journal's editorial selection procedure?

Even odder is the case of the other banned paper. Submitted by a group based in Florence it seems not to deny the viral origin of HIV, but to tease the Italian health authorities for the incompetence of their bureaucracy and procedures by suggesting that those authorities themselves behave as if they are "AIDS deniers." Whoever made the decision at Elsevier either hasn't read it or didn't understand it.

The future of *Medical Hypotheses* remains, for the moment, in limbo. The journal is currently profitable, with a good impact factor, and a board that includes many worthy and several celebrated academics. If Elsevier does follow its advisory group's recommendations it may lose some or all of the above—to say nothing of its editor.

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Henry H. Bauer (8 February 2010)

Editorial judgments

8 February 2010



Henry H. Bauer,
Emeritus
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s

Editors use their judgment, whether a journal is peer-reviewed or not. Everyone who has published in scientific journals ought to know that acceptance or rejection of a manuscript is decided in practice by the editorial choice of "peer" reviewers. Any experienced editor can deliberately choose reviewers who will OK a MS, and others who will turn thumbs down. Moreover, editors can decide whether or not to accept the advice given by the reviewers, they are not obliged to accept it. They can always ask for further reviews, too. One indication of the ever-present danger of bias and lack of objectivity in peer review is the attempt by some journals to use "blind" reviewing, taking authors' names off MSs before review, a usually quite ineffective device given that reviewers are familiar with the work of other researchers and given the inferences that can be drawn from the references cited in the MS. Some journals allow authors to suggest potential reviewers, and some even allow them to give names of individuals who should NOT be reviewers; and editors, of course and inevitably, decide whether or not to heed such suggestions. The greatest deficiency in peer reviewing is the typical practice that reviewers' names are not revealed to the MS authors. By being anonymous, reviewers may be less careful than otherwise in how they judge and especially the terms in which they express their judgments. (Imagine how dysfunctional the legal system would be if witnesses could testify anonymously.) At any rate, Bruce Charlton is not the only editor whose decisions determine acceptance or rejection: that's so with ALL editors, albeit not always as openly and directly.

Competing interests: Co-author of the Duesberg article in Medical Hypotheses

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