Involvement of industry in review articles published in Annals of the Rheumatic Diseases

Specifically, I refer to the Review Article on IL-17A by McGonagle et al. The article is excellent and reads very well, and the authors are highly acknowledged scientists and clinicians, some of them I know personally—nice colleagues and friends. Yet, I was puzzled to find out that the article was written by a professional medical writer sponsored by a company. Although all this information on funding and involvement of medical writers is transparantly provided in the article in the sections on acknowledgements, contributors and funding, and all manuscripts on clinical trial data are usually prepared by professional writers, paid by a company which manufactures a drug approved for a disease that is discussed in such an article.

Clinician rheumatologists are often involved in clinical trials, and all manuscripts on clinical trial data are usually prepared by professional writers hired by the companies, with authors commenting, often substantially, as the manuscript develops. Such a procedure is generally accepted by the scientific community, and it is also understandable since the data of the trial are in fact owned by the company. The situation with Review Articles, however, is strikingly different: if the motivation of such articles is driven by (economic) interests of a third party (industry), such an article gets a certain ‘flavour’.

Apart from the principal concerns I have with Review Articles in ARD written by professional medical writers sponsored by industry, I provide a precise example from the article demonstrating potential risks: in figure 4 of the article on p1172, it is stated by a simple symbol that secukinumab is effective in many disease domains and manifestations including structural progression in the approved indications psoriasis, psoriatic arthritis (PsA) and ankylosing spondylitis (AS). Although this aspect (structural progression) is not further discussed, neither in the main text nor in the legend of figure 4, the message from figure 4 for the reader is crystal clear: secukinumab inhibits structural progression in both PsA and in AS! As of to date, however, there is only indirect circumstantial and very limited information on potential effects of IL-17 blockade on structural progression in AS, similar to the limited and circumstantial evidence of anti-tumour necrosis factor (TNF) agents on inhibition of AS structural progression. The reported structural progression in AS patients treated with secukinumab over 2 and 4 years, respectively, was indeed low, but there was no comparator group in this trial (uncontrolled data).

In another paper on radiographic progression after 2 years of secukinumab treatment as compared with historical data from AS patients treated with non-steroidal anti-inflammatory drugs (NSAIDs) only, there was only a statistically non-significant trend for less progression in secukinumab-treated patients as compared with the historical cohort. A head-to-head study on the effects of secukinumab on radiographic progression in AS with adalimumab as a comparator is ongoing but the results are not available yet. Accordingly, the current evidence on inhibition of structural progression by IL-17 is weak, yet figure 4 in the Review Article suggests a clear inhibitory effect in both PsA and AS. This single example illustrates how apparent subtleties introduced intentionally or by mistake by professional medical writers may dramatically impact on the content and message of such Review Article.

I suggest to the editor and to the editorial board of the Annals of the Rheumatic Diseases to reconsider their policy of acceptance of Review Articles written by professional medical writers sponsored by industry.

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REFERENCES


