Jay, thank you for the inquiry--we do not specialize in such matters, there are more appropriate psychopharmacological journals with the requisite expertise, in the designing of such studies, particularly the statistical aspects--journal of clinical psychiatry may be another possible outlet

## Hagop S. Akiskal, MD (AΩA), h.c. (Lisbon, Aristotle U), DLFAPA, FACPsych, MRCPsych(hon,UK)

Distinguished Professor of Psychiatry University of California at San Diego Director of International Mood Center Editor-in-Chief, Journal of Affective Disorders

## Address:

Hagop S. Akiskal, MD University of California at San Diego 9500 Gilman Drive #0737 La Jolla, CA 92093-0737, USA

From: Enopath@aol.com [Enopath@aol.com]
Sent: Sunday, November 30, 2014 10:24 AM
To: Akiskal, Hagop
Cc: leemonmchenry@gmail.com; Jon.Jureidini@health.sa.gov.au; enopath@aol.com
Subject: Manuscript submission inquiry

## **Dear Hagop:**

I am writing to enquire whether the *Journal of Affective Disorders* would be willing to consider the peer review and possible publication of an original research / review manuscript on the deconstruction of a previously published psychopharmacology clinical trial report with a marketed antidepressant (Am J Psychiatry 2004).

This deconstruction manuscript would rely upon 1,000s of court documents made public as part of a recent Civil litigation in which

a pharmaceutical company was found guilty of having manipulated the result data, misrepresented the outcome findings, ghostwrote a published article in which a clearly 'negative' study was claimed to be 'positive', appended the names of several academic opinion leaders (uninvolved in the data assessment and manuscript preparation) to the published article byline, and used the fraudulent study data and published article to gain FDA regulatory approval for a treatment indication (for which the medication showed no efficacy versus placebo).

All of the documents that will be presented in our deconstruction paper will be in the public domain and available for scrutiny on the web.

We believe that it is important to make these all-to-common *sub rosa* practices transparent to the medical community who are usually unaware of these issues, and may be prescribing antidepressant therapy that is no better than placebo – and may be disadvantageous to their patients.

By way of example, I am attaching a recently published deconstruction article of ours on another fraudulent antidepressant claim that recently came to public scrutiny and was published in the IJRSM (see attached).

We hope that you will be willing to consider our planned manuscript for peer review and possible publication, and look forward to your positive response in the very near future.

Sincerely, Jay

Jay D. Amsterdam MD Professor University of Pennsylvania Perelman School of Medicine jamsterd@mail.med.upenn.edu