

## JAMA's editor fired over sex article

Janice Hopkins Tanne, *New York*

Dr George Lundberg was fired last week from his post as editor of *JAMA* (the journal of the American Medical Association) and editorial director of its 54 journals and electronic products. He was dismissed because he "fast tracked" the publication of an article indicating that American university students did not think that oral sex was real sex. This coincided with the impeachment trial of President Clinton.

The executive vice president of the American Medical Association, Dr Ratcliffe Anderson Jr, criticised Dr Lundberg's speedy publication of an article entitled "Would you say you 'had sex' if...?" (*JAMA* 1999;281:275-7). The article was written by the former director of the Kinsey Institute for Research in Sex,

Gender and Reproduction at Indiana University, June Machover Reinisch, and her colleague Stephanie Sanders. It was based on unpublished data gathered in a 1991 survey of 599 students at a large mid-Western university.

The article was not solicited and was submitted in September 1998. It was revised, passed the usual peer review, and was accepted by the journal in December. Journalists were alerted to the article on 13 January, a week before publication, by the journal's regular press release. The embargo on publication until 20 January was broken by a US website, leading to a press conference at the American Medical Association's Chicago headquarters on the morning of 15 January.

"The current public debate regarding whether oral sex constitutes having 'had sex' or sexual relations has suffered from a lack of empirical data on how Americans as a population define these terms," the authors wrote. Their survey showed that 60% of students did not consider

oral-genital sex to be real sex: "almost everyone agreed that penile-vaginal intercourse would qualify as having 'had sex.'"

A statement from Dr Anderson explaining the firing of the editor said that Dr Lundberg had threatened the historic tradition and integrity of *JAMA* by "inappropriately and inexcusably interjecting [the American Medical Association] into a major political debate that has nothing to do with science or medicine." He added that this was "unacceptable." Dr Anderson apologised to readers, contributors, and others who felt that "*JAMA* has been misused in the midst of the most important Congressional debates of this century." He said: "*JAMA*'s hard earned reputation is based on its editorial independence and integrity, and we intend to keep it that way."

Medical editors and others from around the world have criticised the sacking of Dr Lundberg. Iain Chalmers, Director of the UK Cochrane Centre and member of *JAMA*'s editorial board said: "Dr Anderson's action is outrageous and a slur

not only on the integrity of Dr Lundberg but also on the integrity of all those, like me, who have accepted Dr Lundberg's invitation to work with him for the benefit of *JAMA*. Dr Anderson has succeeded in making crystal clear to *JAMA*'s readers and contributors that the Journal does not have complete editorial independence. His action has put *JAMA*'s excellent reputation under the dark cloud of heavy handed censorship."

Magne Nylenna, editor of the journal of the Norwegian Medical Association, said: "This is a very sad event for editorial freedom in general and for medical journals worldwide in particular. The fight for integrity must go on... I suggest that the global community of medical journal editors establish an award for editorial integrity and name it the George D Lundberg award."

Dr Lundberg's lawyer, William M Walsh, said: "Through its actions today, the AMA has inappropriately intruded into the historically inviolable ground of editorial independence in scientific journalism. (See p 210) □

## UK study reveals double the risk of ill health in Gulf war veterans

Susan Mayor, *BMJ*

British soldiers who served in the 1991 Gulf war have reported twice the rate of illness as control groups who served elsewhere, according to the largest epidemiological study into the issue (*Lancet* 1999;353:169-78, 179-82). But the range of symptoms reported—including headache, fatigue, asthma, and arthritis—was similar between the groups, leading researchers to conclude that going to the Gulf did not lead to a specific illness.

The study compared responses to detailed questionnaires that were sent to 4250 servicemen who served in the Gulf war with those from two other samples of the same size: soldiers who went to Bosnia on peace keeping duties and military personnel who did not serve in the Gulf or Bosnia (called Era). Outcome measures included physical health, functional capacity (SF-36), a general health questionnaire, and the

multisymptom criteria for Gulf war illness and post-traumatic stress reactions used by the Centers for Disease Control and Prevention. The response rate was 65%; an inability to locate the randomly selected study subjects was the main reason for non-response.

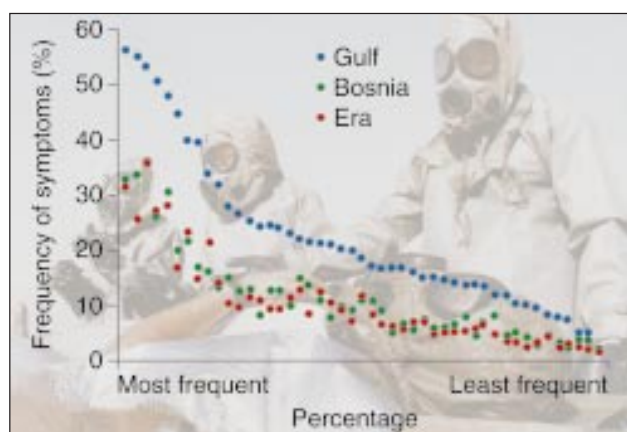
Analysis of the results showed that Gulf veterans reported twice the rate of a range of symptoms, which included fatigue, back pain, poor sleep, headaches, memory loss, joint pains, asthma, and arthritis. They were two to three times more likely than other groups to report symptoms of post-traumatic stress or psychological distress. There was no significant difference between results from the Bosnia group and the group not deployed.

The risk of illness correlated significantly with exposure to

potentially harmful factors in all three groups. In particular, vaccination against plague and anthrax and administration of multiple routine vaccinations before deployment to the Gulf were highly correlated with illness.

Professor Simon Wessely, one of the research team from the Gulf War Illness Research Unit at King's College, London, said: "Our study provides the first clear proof that going to the Gulf has affected the health of our soldiers, even if we cannot identify any specific illness or specific cause." He suggested that service in the Gulf war was associated with more health problems than was deployment elsewhere; however, the underlying cause may be shared by soldiers deployed elsewhere.

In an accompanying editorial, Stephen Straus, from the National Institute of Allergy and Infectious Diseases at the National Institutes of Health, commented: "These data verify in British troops what had been reported previously in Canadian and US veterans—namely that service in the Gulf war posed an exceptionally high risk of a long illness." (*Lancet* 1999;353:162-3). □



UK Gulf veterans had more symptoms than those not deployed to the Gulf (Era) or soldiers serving in Bosnia (*Lancet* 1999;353:169-78)