

A letter to the Secretary of State for Health & Social Care, the Rt Hon Mr Matt Hancock MP.

18<sup>th</sup> Sept. 2018

Dear Mr Hancock,

Foreseen by no political party, the banking industry brought the whole world economy close to total collapse, the price of which is still being paid today. An even bigger catastrophe now looms, this time from the world of medicine. The Department of Health has been, in our opinion and that of countless others around the world, seemingly bullied by elite vested-interests into applying fraudulent data to precipitate this crisis.

The DoH has announced recent research by the *Specialist Pharmacy Service*<sup>i</sup> to show homeopathy to be a placebo<sup>ii</sup>. This report was derived from other 'research' or the UK Science and Technology Committee 2010 that omitted all positive homeopathy evidence or stated positive evidence as negative<sup>iii</sup>, relying heavily on papers which have been described as 'scientific forgery' (Shang et al<sup>iv</sup>) and an Australian NHMRC review which concluded there to be no robust evidence that homeopathy can treat any disease, after choosing unprecedented criteria of 'robustness' that would have simultaneously negated the vast majority of all pharmaceutical trials<sup>v</sup>. This NHMRC report is currently being investigated for fraudulent misrepresentation by the Commonwealth Ombudsman<sup>vi</sup>.

France has been consistently voted by the WHO as having one of the best healthcare systems in the world; the French public and GPs are amongst the highest users of homeopathy<sup>vii</sup>. As successful homeopathy usage increases ever further worldwide, motivation of the long-waged denigration campaign (homeopathy is 'rubbish', 'a placebo', etc.) becomes ever clearer - as the Indian Government put it, 'Pharma wants a monopoly'. Homeopathy is used by doctors and other healthcare professionals in the millions, not only because it is safe, effective and cost-effective, but because pharmaceutical medicine (Pharma) has no answers to the massive danger of ever growing antimicrobial resistance (AMR): fortunately, homeopathy has plenty of answers, and HINT's submission to the Health and Social Care committee is available online<sup>viii</sup>.

Even the German Pharmaceutical Industry has endorsed homeopathy as a vital factor in combating AMR. They are not solely altruistic. If official predictions of AMR threatening to end all operations, all treatment of infections and of cancer, etc., are only half way correct, how will the pharmaceutical industry survive unless alternatives are used alongside it?

Vancomycin was once claimed to be resistant free, yet resistance emerged soon after large-scale use began, whilst Teixobactin<sup>ix</sup> has been hailed as a miracle drug, even though ineffective against certain bacteria (including E coli), and its durability is yet to be demonstrated.

Doubly worrying, recent research<sup>x</sup> now shows 'drugs from all therapeutic classes impacting gut microbes [and therefore the immune system]. Just last week, the Chief Medical Officer, Dame Sally Davies, told the Health and Social Care Select Committee that the NHS is hiding the true scale of death by AMR<sup>xi</sup>. Previous predictions of 10 million deaths, as well as a cost to the world economy of \$60 to \$100 trillion each year by 2050, would appear now woefully short.

Dr Ben Goldacre describes the global pharmaceutical industry as a '\$600 billion business rife with corruption and greed'; the 'proof' that many drugs work coming from trials funded by the manufacturers. The present UK system seemingly gives doctors financial incentives to prescribe drugs either that don't work (based on fraudulent or otherwise bogus evidence), or even do more harm than good, whilst being incentivized against medicines that evidence shows may have a higher chance of success<sup>xii xiii</sup>.

Fabricated clinical evidence not only presents a huge cost to health and the economy, but is surely in serious breach of the Law<sup>xiv</sup>. *Montgomery v Lanarkshire Health Board (2015)* makes plain a legal obligation to inform the public of legitimate medical alternatives. For example:

- 1) Homeopathy was used to near-eradicate the fatal infectious disease Leptospirosis in Cuba, the death rate falling to zero<sup>xv</sup>, a result never achieved by conventional treatment or vaccine. So were UK citizens to die of Leptospirosis (as has happened), it would seem to us that Wilful Blindness, criminal negligence and manslaughter may all come into consideration.
- 2) The Swiss Health Technology Assessment of homeopathy<sup>xvi</sup> includes a detailed study of homeopathy's success in treating upper respiratory tract infections, an area of significant antibiotic usage. Six out of seven controlled studies showed at least an equivalence with conventional-medical interventions, whilst a further 8 (out of 16) Randomized Control trials showed results from homeopathy treatment that were significantly the superior.

An estimated 10% of the UK population use homeopathy, mainly always self-funded and thus significantly reducing NHS costs. You may claim that local NHS organizations can still make decisions on commissioning and funding homeopathy treatment (even if patients pay for the actual medicines), but with the so-called *Good Thinking Society* threatening Judicial Review against any who do so (and none willing or able to meet such costs), it is unsurprising that every NHS Institution in England has now ceased doing so.

The danger from AMR has been equated with that of terrorism. Would your Government allow terrorists to attempt a Judicial Review to close down or impede MI5? We hope not. Yet our letter evidences the DoH's hitherto capitulation to homeopathy denialists to lead to –

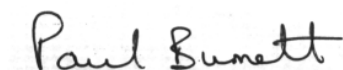
- 1) Denial of solutions that homeopathy can offer to antimicrobial resistance.  
But even if the AMR crisis is solved by pharmaceutical means, there remains -
- 2) Massive waste of taxpayers' money<sup>xvii</sup>;
- 3) Damage to health resulting from decisions based on bogus evidence in relation both to Homeopathy and to pharmaceutical medicine, and potential legal consequences.

Were the *Good Thinking Society* to begin a Judicial Review, you might not be sure how to defend the case. But we would, as would also numerous distinguished professors worldwide so disgusted with UK homeopathy denialists' behaviour that they might be delighted for the opportunity to demolish them in court, and demonstrate how homeopathy is contributing to the health of their country: at which point the now *Even Better Thinking Society* might wish they had stayed at home.

For the DoH to accept a report (or allow NHS England to do so) which stands accused on several counts of flagrant illegality surely opens the door to suggestions of Wilful Blindness, in the light of prospective consequences to the lives, and deaths, of numerous UK citizens, to say nothing of the public purse. We call on you as a legal necessity to renounce unequivocally the *Specialist Pharmacy* homeopathy report, to reverse all claims by the DoH of homeopathy being a placebo effect, and to enshrine the unencumbered right of homeopathic treatment to those who choose it.

We look forward to hearing from you what precise actions you propose to take.

Yours sincerely,



Paul Burnett, Lead Team Communication, Homeopathy International.

## Attachment:

Professor Robert Hahn - Homeopathy, Ernst and Shang

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<sup>i</sup> The *Specialist Pharmacy Service* not only used bogus ‘research’, but justified itself in leaving out important homeopathy evidence as being ‘of the wrong kind’. Was perhaps anything not in Pharma’s financial interests ‘the wrong kind’? Is the clue not in the title *Specialist Pharmacy Service*, as opposed to a *Health Service*?

<sup>ii</sup> Mr Simon Stevens, Head of NHS England, is also quoted as saying that homeopathy is ‘at best placebo’, Others have said variously it is ‘rubbish’, ‘nonsense on stilts’, ‘witchcraft’, etc. The Department of Health has claimed recent research to show homeopathy to be a placebo, whilst having no information on why it should accept the findings of a patently biased report by the *Specialist Pharmacy Service*, derived from:

- The House of Commons Science & Technology committee of 2010, which ‘concluded’ homeopathy to be a placebo after omitting all evidence to the contrary or stating positive evidence as negative, and relying heavily on Shang, which Professor Robert Hahn shows to be a ‘scientific forgery’. The principle advocate for the *homeopathy is a placebo* theory, Professor Edzard Ernst, had already personally proved his own testimony to be false.
- A few handpicked papers, any data positive for homeopathy excluded.
- The 2015 Australian NHMRC review, which concluded there to be no robust evidence that homeopathy can treat any disease, after choosing unprecedented criteria of ‘robustness’ that would have simultaneously negated the vast majority of all pharmaceutical trials.

<sup>iii</sup> A Swiss Health Technology Assessment found homeopathy to be effective, safe and cost-effective, after which homeopathy was placed in Switzerland on equal status with pharma medicine. The HTA showed the results of homeopathy RCTs to be both superior, and the trials of higher quality, than pharmaceutical RCT trials in Upper Respiratory Tract infections, an area of significant antibiotic use.

<sup>iv</sup> Shang A, Huwiler-Münterer K, Nartey L, Jüni P, Dörig S, Sterne JA, Egger M. Are the clinical effects of homeopathy placebo effects? Comparative study of placebo-controlled trials of homeopathy and allopathy. *Lancet* 2005; 366:726–32.

<sup>v</sup> Professor Robert Hahn shows “Only by omitting 98% of the evidence can you ‘prove’ homeopathy to be ineffective”: its denigrators are therefore either “very bad scientists”, or else telling lies.

<sup>vi</sup> The techniques used against homeopathy include omitting swathes of positive homeopathic RCT evidence (‘Efficacy’), also of real-life effectiveness (otherwise it would become clear just how effective homeopathy so often is).

<sup>vii</sup> As noted by US homeopathy practitioner and writer Dana Ullmann, a total of 120,110 French healthcare professionals (HCPs) prescribed at least one homeopathic drug or preparation in the studied 12 month period, representing nearly 95% of general practitioners, dermatologists and paediatricians. Available at: <https://www.ncbi.nlm.nih.gov/pubmed/25921648>

<sup>viii</sup> <http://data.parliament.uk/writtenevidence/committeeevidence.svc/evidencedocument/health-and-social-care-committee/antimicrobial-resistance/written/86063.html>

<sup>ix</sup> [www.antibiotics-info.org/teixobactin.html](http://www.antibiotics-info.org/teixobactin.html) accessed 5<sup>th</sup> September 2018.

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x Research paper by Dr Nassos Typas et al published in *Nature* volume 555, pages 623–628. 29<sup>th</sup> March 2018. antipsychotics, antihypertensives, anti-cancer drugs, proton-pump inhibitors, antihistamines, painkillers and contraceptives' were the most prominent drugs.

<sup>xi</sup> <https://www.telegraph.co.uk/news/2018/09/04/nhs-hides-true-scale-superbug-deaths-fear-looking-like-failing/>; accessed 10 Sept 2018.

<sup>xii</sup> As reported in *The Lancet*, 2018; 388: 268-74, and by *What Doctors Don't Tell You*, UK and US doctors are given cash pay-outs to prescribe more drugs for e.g. heart disease, high blood pressure, stroke, diabetes and kidney disease. UK doctors receive up to 20 per cent of their annual income from these incentives, the idea being that this will lessen hospital costs. But the drugs seem largely not to work: "Extensive research into pay-for-performance programmes has yet to show clear patient benefits," the researchers said.

Doctors' salaries are not a matter for present discussion; we are concerned rather with the present financial incentives to prescribe other than in patients' best interests. This programme is costing UK taxpayers c. £1 billion per year, yet the drugs are mostly obvious placebos. The researchers noted, "evidence from clinical trials might not translate into patient benefits in the real world." This is unsurprising:

- The 'proof' that many drugs work comes from trials funded by the manufacturers.
- The highly distinguished Dr Peter Gøtzsche writes: 'Big Pharma means big crime ..... The mob bribes politicians and others, and so does the drug industry'.
- Professor John Ioannou's research finds up to 90% of trials' results to be false or fraudulent.

Dr Goldacre further states: '[Pharmaceutical] medicine is broken..... Drugs are tested by the people who manufacture them, in poorly designed trials, on hopelessly small numbers of weird, unrepresentative patients, and analysed using techniques which are flawed by design, in such a way that they exaggerate benefits of treatments..... The true scale of this **murderous** [our emphasis] disaster only fully reveals itself when the details are untangled.

<sup>xiii</sup> As revealed by the BMJ in 2010, only 11% of the 3,000 most commonly used treatments in the NHS were proven to be effective, over 50% with no evidence of effectiveness whatever. We are surprised though that neither the DoH nor NHS England hold knowledge of which of these are still in use today (DoH Ref. FOI 1128468; 15<sup>th</sup> May 2018).

<sup>xiv</sup> **Section 2 - Fraud by false representation**

(1) A person is in breach of this section if he—

- (a) **dishonestly makes a false representation, and**
- (b) **intends, by making the representation—**

- (i) to make a gain for himself or another, or
- (ii) **to cause loss to another or to expose another to a risk of loss.**

(2) A representation is false if—

- (a) it is untrue or misleading, and
- (b) **the person making it knows that it is, or might be, untrue or misleading.**

**Section 4 - Fraud by abuse of position**

(1) A person is in breach of this section if he—

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- (a) occupies a position in which he is expected to safeguard, or not to act against, the financial interests of another person,
  - (b) dishonestly abuses that position, and
  - (c) intends, by means of the abuse of that position—
    - (i) to make a gain for himself or another, or
    - (ii) to cause loss to another or to expose another to a risk of loss.

(2) A person may be regarded as having abused his position even though his conduct consisted of an omission rather than an act.

<sup>xv</sup> The medical scientists involved in the project highly respected in the conventional vaccine world and working at the WHO designated Finlay Institute. The homeopathy was first administered only in the high-risk areas, where within two weeks a 90% decrease in incidence of the disease was observed, whereas the disease incidence continued to rise in the low risk areas which had not yet received the homeopathy. When the homeopathy treatment was extended to everyone on the island, the result was near-eradication of the disease, the death rate falling to zero.

<sup>xvi</sup> Gudrun Bornhöft and Peter F. Matthiessen (eds); *Homeopathy in Healthcare – Effectiveness, Appropriateness, Safety, Costs*. An HTA report on homeopathy as part of the Swiss Complementary Medicine Evaluation Programme, trans from the German by Margaret M Saar (Berlin, heidelberg, New York: Springer-verlag, 2011). ISBN 978-3-642-20637-5

<sup>xvii</sup> The DoH carried out no cost-analysis studies of the effect of dropping homeopathy treatment or prescriptions from the NHS. Yet a cost-analysis study in France showed potential savings to a National Health budget of up to 20% through use of homeopathy, with no loss of clinical results. See: *Economic impact of homeopathic practice in general medicine in France*; Aurélie Colas, Karine Danno, Cynthia Tabar, Jenifer Ehreth and Gérard Duru; *Health Economics Review* (2015) 5:18 DOI 10.1186/s13561-015-0055-5.