

## REFERENCE

1. Paterson C, Taylor RS, Griffiths P, *et al*. Acupuncture for 'frequent attenders' with medically unexplained symptoms: a randomised controlled trial (CACTUS study). *Br J Gen Pract* 2011; DOI: 10.3399/bjgp11X572689.

DOI: 10.3399/bjgp11X588312

I read with alarm the article by Paterson *et al* published in your journal last month.

This is the paper that, in its conclusions, claims an effect for acupuncture even though the data in the paper show no effect at all.

I cannot understand how this has happened. All the published data in the medical literature to date show no or insignificant effects for acupuncture. Given that, it seems all the more important to examine claims to the contrary with scientific rigour.

Indeed, the College expects that of any scientific paper. In my opinion you should withdraw the paper and admit an error was made. *The Lancet* did just that over the immunisation paper.

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I was dismayed to see the headline on the front of the *BJGP* claiming that 'Acupuncture: effective in a randomised trial for patients with unexplained symptoms'.<sup>1</sup> Alas, this is the kind of handling I would expect from the tabloid press.

The study did not take account of recent systematic reviews that sham acupuncture is as good as 'real' acupuncture, and that the effect in any case was 'to lack clinical relevance and cannot be clearly distinguished from bias'.<sup>2</sup> To know this, and not to account for it, is a major design flaw and one that infers that this research paper wasted resources. Second, the paper showed marginal effects from a ratings scale not established out with 'complementary' medicines, and an

increased attendance rate at general practices in the intervention group compared with the control group. Yet the authors concluded that acupuncture is effective and GPs should offer it. If a pharmaceutical company presented the same findings in support of a drug we would rightly ignore it.

This kind of research is damaging. It promotes false ideas, fails to take account of previous findings, and places expectations with patients who then have to be let down by GPs who wish to practice evidence-based and compassionate health care.

I would ask that the paper is withdrawn and the headline retracted. To learn and move on, the peer reviews made of the paper should be published. In future, if the *BJGP* makes an error in press releasing and headlining a research project, then the entire article should be made immediately free to view to all online, so that we can make our own judgments even before letters of dissent in the journal are eventually published.

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2. Vested Madsen M, Gøtzsche PC, Hróbjartsson A. Acupuncture treatment for pain: systematic review of randomised clinical trials with acupuncture, placebo acupuncture, and no acupuncture groups. *BMJ* 2009; **338**: a3115.  
<http://www.bmj.com/content/338/bmj.a3115.full> [accessed 11 Jul 2011].

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The June issue of the *BJGP* was noteworthy for several reasons. Most strikingly was the beautiful redesign and compelling headline, 'Acupuncture: effective in a randomised trial for patients with unexplained symptoms'.<sup>1</sup> Fantastic, I thought — groundbreaking research! So, it was with much anticipation that I removed the last shreds of cellophane to delve into your esteemed tome.

Sadly, it was wholly disappointing and somewhat incensing to read the actual acupuncture research. Heralded by you as 'positive results' from a 'randomised controlled trial' revealing 'significant and sustained benefit (for patients) who

frequently attend (GP clinics) with medically unexplained symptoms'.<sup>2</sup> I fear these comments were more than liberal with the truth.

As a medically trained doctor who now works in education, part of my remit is to teach the scientific method to 16 and 17 year olds. I dare say that the methodological flaws present in the acupuncture trials would have been obvious even to them. The research used a very poorly defined patient group (medically unexplained symptoms), had numerous patient selection biases and had failed to use a true placebo. This only scratches the surface; an internet search for 'acupuncture; *BJGP*' will present you numerous articles that report the articles' failings in great depth.

In an age where peer-reviewed journals are coming under increasing scrutiny, I do not envy your position. In part, I can sympathise with the pressures of being a periodical editor having recently undertaken the role of editing a popular science magazine myself. However, your periodical has a very unique audience: time-harassed GPs seeking the best evidence-based practice, many of whom will barely have the time to read past the editorial and abstracts. The high quality reader-friendly redesign is definitely a step forward, but it is imperative that content is to the same standard.

So it was with much surprise on receiving this month's (July) edition of *BJGP* to find no mention of the controversial acupuncture trials in either the letters section or the editorial. In all humility, I strongly urge you to reconsider your unequivocal praise for this research. At the very least, please engage in discussion with your readers about the merits/failings of this research. June's edition of the *BJGP* has been ridiculed as 'tabloid medical journalism'; for the sake of the profession's reputation and, most importantly, patient welfare, take action now and set the record straight.

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