

Drug makers still secretive about trial results

A year after medical journals demanded that drug makers be more forthcoming about results of clinical drug trials, some pharmaceutical companies are still withholding important information from the public, according to a report published in December.

In September 2004, the International Committee of Medical Journal Editors said it would not publish results from any trial that had not been registered on a public database such as the US government registry, which is dubbed [clinicaltrials.gov](http://www.clinicaltrials.gov). The committee gave companies one year to update the registries.

Since the editors' mandate, companies have registered more of their clinical trials on the federal website but have withheld the names of drugs and the primary outcomes of trials, according to the report. The study was led by the director of [clinicaltrials.gov](http://www.clinicaltrials.gov) (*N. Engl. J. Med.*, 353, 2779; 2005). An accompanying editorial in the journal urged doctors and patients to boycott trials not fully registered on public databases. The study's publication coincides with news that Scios, a subsidiary of Johnson & Johnson, omitted the deaths of two individuals from the report of a clinical trial of its heart-failure drug Natreacor.

Terrorist attack spooks Indian scientists

A terrorist attack in late December at a prestigious scientific institute in southern India that claimed the life of one scientist has shaken the country's research community. The following week, police in a second city arrested two men suspected of planning suicide bombings on science and technology companies.

On 28 December, a gunman shot and killed Manish Chandra Puri, a retired mathematics professor, and wounded four others during a conference at the Bangalore-based Indian Institute of Science, the country's premier scientific institute (*Nature* 436, 492; 2005).

Bangalore and Hyderabad are India's major hubs for science and technology. The companies targeted in the planned bombings are located in Hyderabad's 'Hi-Tech City,' known for its dense concentration of technology companies. Indian authorities say the terrorists singled out research institutes because of the country's advances in science.

Hyderabad police heightened security at the Indian Science Congress, the country's biggest meeting of scientists.

Norway set to push law to punish scientific fraud

Health officials in Norway promised in January to speed up the enactment of a new law that would punish scientists who falsify research. The announcement followed news that a Norwegian cancer researcher had fabricated a study he published in *The Lancet*.

The law would bring criminal charges to researchers who fake their work and place more responsibility for catching fraud on the researchers' institutions.

Scientists who falsify research rarely face criminal charges. In the US, researchers are more likely to be punished for making false claims to the government, such as lying on a grant application. But recent scandals, such as that over South Korean researcher Woo-Suk Hwang, have prompted more scrutiny.

Norway's announcement came after Jon Sudbø of the Radium Hospital in Oslo admitted that he had invented more than 900 subjects for a study he published in October (*Lancet* 366, 1359; 2005). Sudbø's paper claims to analyze a public-health database to show that long-term use of anti-inflammatory painkillers is associated with a lower risk of oral cancer. The hospital has assigned an independent committee to investigate all of his papers.

Intermittent AIDS therapy is dangerous, trial shows

Halfway through a major international AIDS study, the US government in January halted the trial after researchers reported a significantly higher risk of death for half of the participants. Individuals infected with HIV do better when they take medication continuously rather than intermittently, the researchers concluded.

The effectiveness of antiretroviral therapies wanes over time as HIV becomes resistant to them. The treatment also causes side effects such as nausea and diarrhea. Researchers anticipated that periodically starting and stopping the medication would minimize these effects.

But results from the study showed that taking the drugs intermittently doubles the risk of developing clinical AIDS or dying. The treatment strategy also increases the risk of cardiovascular, kidney and liver diseases, the researchers found.

The trial, known as Strategies for Management of Anti-Retroviral Therapy, or SMART, had enrolled more than 5,000 people in 33 countries since it began in 2002. Half of the participants took antiretroviral therapy continuously. The other half took the medication only when their levels of CD4⁺ immune cells dropped, and stopped treatment when their immune cell counts rose again. Researchers had planned to follow participants for up to nine years of treatment.

Depression drugs safe, says new study

Reopening the debate on the safety of antidepressants, scientists announced in January that the drugs do not increase the risk of suicide. Controversy has surrounded antidepressants since studies three years ago suggested the drugs increase the risk of suicide in adolescents.

Researchers at the nonprofit insurance company Group Health Cooperative combed through the death certificates and hospital records of more than 65,000 people who had taken antidepressants. The risk of suicide is higher before an individual starts taking the medication and falls by more than one-half in the month after, they found (*Am. J. Psych.* 163, 41; 2006).

Reports of teenagers committing suicide after taking antidepressants prompted the US Food and Drug Administration in March 2004 to issue a warning on the drugs. Since then, antidepressant prescriptions have dropped up to 25%, according to market-research firms.

In a separate study published in January, Nobel Laureate Paul Greengard and colleagues reported a gene that may increase a person's susceptibility to depression. The gene, p11, appears to help regulate how the brain responds to the neurotransmitter serotonin (*Science* 311, 77; 2006). The findings support a long-suspected idea that serotonin is linked to depression, the scientific basis for many antidepressants. The researchers say the discovery could lead to a new class of drugs for depression.



Death knell: Sales of antidepressants fell after reports in 2003 linked them to a risk of suicide.

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