Dear Dr. Dodson:

Re: Retraction request

Your reply to our retraction request included three points. Our responses to each point are below.

1. The author properly disclosed his conflict of interest at the time his paper was submitted.
2. The there is no evidence of academic misconduct that rises to the level of retracting this publication.
3. Your comments would have been best addressed in the form of a Letter to the Editor, but the time limit to submit a letter has long expired.

Reponse #1: Looking more closely, we found the disclosure that “Dr Tatch owns shareof the StellaLife Company.” We believe this is not enough. Conflict of interest disclosures are intended to reveal financial or other personal considerations that may compromise an investigator's professional judgment in conducting or reporting research so readers can take them into account in judging an article’s credibility. Dr. Tatch doesn’t merely own shares. He owns the patent and is a director of the company. And his wife is an officer of the company. Does Dr. Tatch also get royalties? Do his wife or any other family members own shares? Do he or his wife get a salary from the company? Does he (or do they) own a controlling interest in the company? Is it, in essence, his company? Does he have millions of dollars at stake? In our opinion, these other things should have been addressed prior to publication.

Response #2: You say that there is “no evidence of academic misconduct.” We said nothing about academic misconduct. This paper should not have been published. Dr. Tatch claims that the protocol caused the number of filled opioid prescription to drop from 58% before the protocol to 44% in the following year (OPY1) and 19% in the year after that (OPY2). If the protocol and products in OPY1 and OPY2 were the same, the percentages of patients filling prescriptions should be similar. But your peer reviewers failed to detect this problem and demand an explanation. They also missed other flaws but this one is so egregious that it renders the study meaningless.

Response #3. You say that our comments would have been best addressed in the form of a letter but it is too late to do that. We understand the need for time limits on letters. But we do not believe there should be a time limit on *ethical* violations. Our request for retraction is not based merely on the article’s poor quality but the fact that it is being used for marketing. No homeopathic product has ever been proven effective for treating any condition. [See: [NHMRC Information Paper: Evidence on the effectiveness of homeopathy for treating health conditions](http://www.homeowatch.org/research/nhmrc_2015.pdf). National Health and Medical Research Council. 2015. Canberra: National Health and Medical Research Council; March 2015]

The article we are challenging is a centerpiece of a marketing campaign that claims that Dr. Tatch’s homeopathic kit speeds healing and is effective in reducing pain after dental surgery. We believe you have a moral obligation to stop the article’s use in this manner. StellaLife’s website admits that claims for its products are “based on traditional homeopathic practice, not accepted medical evidence.” But the article you published suggests otherwise.

Did you consider the substance of what we said or simply dismiss our complaint as untimely? There is precedent for our request. In 1990, *The New England Journal of Medicine* published a study that attracted mainstream media attention. The study involved 12 men, aged 61 to 81, who were apparently healthy but had IGF-I levels below those found in normal young men. The 12 men were given growth hormone injections three times a week for six months and compared with 9 men who received no treatment. The treatment resulted in a decrease in fatty tissue and increases in muscle mass and lumbar spine density. An accompanying editorial warned that some of the subjects had experienced side effects and that the long-range effects of administering HGH to healthy adults were unknown. It also warned that the hormone shots were expensive and that the study had not examined whether the men who received the hormone had substantially improved their muscle strength, mobility, or quality of life. Despite the warning, the study stimulated the formation of an entire industry devoted to the marketing of actual hormone; alleged HGH releasers; alleged oral hormone products, and “homeopathic HGH” products.

In March 2003, the New England Journal of Medicine denounced the misuse of Rudman’s 1990 article. The full text of the article was placed online so readers could see for themselves what it actually said; and editorials pointed out that subsequent reports provide no reason to be optimistic. As noted by Editor-in-Chief Jeffrey M. Drazen, M.D.:

Although the findings of the study were biologically interesting, the duration of treatment was so short that side effects were unlikely to have emerged, and it was clear that the results were not sufficient to serve as a basis for treatment recommendations. . . . Indeed, Mary Lee Vance of the University of Virginia said in an accompanying editorial, “Because there are so many unanswered questions about the use of growth hormone in the elderly and in adults with growth hormone deficiency, its general use now or in the immediate future is not justified.” Dr. Vance restates her views on the study in this issue of the *Journal*; they remain fundamentally unchanged. . . .

We are especially concerned because the promotional e-mails are apparently sending readers to our Web site; the 1990 article by Rudman et al. receives as many “hits” in a week as other 1990 articles do in a year. If people are induced to buy a “human growth hormone releaser” on the basis of research published in the Journal, they are being misled. In order to warn those who visit our Web site for this reason, this Perspective article and Dr. Vance’s commentaries will from now on appear with the article by Rudman et al. each time it is downloaded.

This editorial pushback took place 13 years after the article was published. The article was perfectly legitimate and was a significant contribution to the scientific literature. But when NEJM’s editors saw how it was being misused, they issued a warning.

Two other cases are relevant:

# In 2017, NEJM’s editors expressed concern that a letter published in 1980 had been “heavily and uncritically cited” as evidence that addiction is rare with opioid therapy. Since that time, the downloadable article has been accompanied by a warning note. [[See NEJM issues unusual warning for readers about 1980 letter on opioid addiction](https://retractionwatch.com/2017/06/02/nejm-issues-unusual-warning-readers-1980-letter-opioid-addiction/). Retraction Watch, June 2, 2017]

* In 2020 and 2021, Dove Press retracted a total of twenty articles that were being used to promote a dubious treatment for Parkinson’s disease. The articles had been published between 2009 and 2014. The retraction came in response to a complaint by one of us that the author had failed to fully disclose his conflicts of interest and was falsely suggesting that the articles proved that the supplements he promoted were effective. [See Barrett S. [Dove Press retracts Dr. Marty Hinz’s articles.](https://quackwatch.org/11ind/dove-press-retracts-dr-marty-hinzs-articles/) Quackwatch, March 3, 2021.]

Dr. Tatch’s article does not represent sound evidence. We believe you have an ethical obligation to curb its misuse.

Thank you for your kind reconsideration.

Stephen Barrett, MD

Quackwatch

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