

## Report on Dr. Hatem Abou Hashim's research

### Introduction: Honesty in scientific research:

A quote from Quran talking about the importance of honesty and that cheating is not from Islam.

With the same magnitude that security provides to stabilize nations and communities on the general scale, scientific honesty contributes to the evolution of science by providing the basic principles in scientific and academic research. The first of these principles is trust: researches' trust in each other, and the normal recipients' trust in researchers.

The first level of trust is related to the authenticity of research conduct. Science is based on cumulative knowledge and building on other's grounds, hence the importance of researcher's trust in the previous contributions of other researchers. We mean here the trust that is based on scientific criteria, which does not mean blindly accepting the preceding knowledge and not criticizing and refusing it.

The second level of trust – which is not less important than the first, through which scientific honesty achieves the general and basic aim of science – is knowledge. The knowledge which is available to everyone, that contributes to the heritage and culture of the whole population.

Under the concept of scientific trust, comes a range of warning paths, and taking these paths is considered violation. "Scientific misconduct" as described by Peter Drenth basically involves three main categories: "Fraud", "Deceit", and "Violation of intellectual property rights".

Fraud includes any missing with data integrity from fabrication and falsification and other forms.

Deceit includes deliberately violating the laws of sound methodological analysis and data processing, plus inaccurate translation.

Violation of intellectual property rights includes violating author's copyrights, the best known example is plagiarism

### References:

Drenth PJ. Integrity in Science: A Continuous Concern. ALLEA-is the Federation of 48 Academies of Arts and Sciences in 38 European countries ALLEA-advises her member academies, acts as a platform for her members and offers advises in the fields of science and science policy ALLEA-strongly supports ethic ways of dealing with science, science. 2006:17.  
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No doubt that when one of the staff in our Department and Faculty reaches an international scientific achievement and gets a respectful scientific degree, is considered a pride to the Department, University, and even the whole nation, as this what increases the University's rank on the national and international levels.

In the same magnitude, If it has been proven that one of the members of the Department or the University did any scientific misconduct to the extent of fabrication, falsification, and plagiarism, it would be shameful on everyone including

the researcher, department and university, and this would lead to questioning his scientific honor and would have legal consequences.

On the level of the Department of Obstetrics and Gynaecology, we were all glad that the colleague Prof. Dr. Hatem Abou Hashim had acquired the PhD degree in the same specialty on the basis of the research applied by him to a committee, however we blame him for not informing the department in advance.

As requested by the Dean of the Faculty to revise all the studies conducted by the above mentioned researcher, the Scientific Committee in the Department did revise his works, and chose the most crude of them, and we were extremely surprised of what we found.

Here is a list of the studies that teared and contaminated the purity of “Scientific Honesty” that we – the old professors in the Department and members of the permanent scientific committee that promotes University Staff members in this specialty in the province – give our all interest, and we want to protect the higher research values in our Department, Faculty, University, and the whole nation:

**1- Abu Hashim H, Zayed A, Ghayaty E, El Rakhawy M. LNG-IUS treatment of non-atypical endometrial hyperplasia in perimenopausal women: a randomized controlled trial. Journal of gynecologic oncology. 2013 Apr 1;24(2):128-34.**

This study specifically represents the top of scientific fraud.

When we checked the clinical trials registry in which the researcher registered his project, we found that ;

- The number of participants in the register was 120, while in the published article was 373. We accounted for what is published in the article.
- Study setting: Mansoura University Hospital.
- Study period: from May 2009 until November 2011, meaning 30 months.

The study was done by choosing the most suitable patients who suffered from perimenopausal bleeding. This requires screening all the enrolled (373) women using hysteroscopy and endometrial biopsy, then send the specimen to the pathology laboratory to choose the eligible cases (120) for medical intervention. Sixty one women were given Gestagens, and 59 had the LNG-IUS.

To achieve the eligible number (120) of women, there should have been 373 potentially eligible women who undergone screening, and according to the protocol, 253 women were excluded after hysteroscopy and biopsy. This requires performing 3 procedures at least weekly over 30 months to achieve 373 participants without any stopping for holidays (373 divided by 30 (months), then dividing by 4 (days of operations every week).

When we revised the internal operation records of the four units in the Department during that specific period, we did not find any operation with the same criteria as mentioned in the published paper “hysteroscopically guided D&C”. We found that only 49 diagnostic hysteroscopies were done, and were all for infertile women.

When we contacted the Pathology Department, it appeared that no specimens were received with the name of the researcher or having the same criteria as specified in the abovementioned study.

From all that, it is evident that this study was not conducted in the mentioned setting or the mentioned methodology. "Scientific Fraud, or Fabrication"

## 2- Trials on clomiphene-resistant PCOS

On revising the group of studies related to (Clomiphene-resistant PCOS) (Table 1) we found 6 clinical trials on a total of 1371 women conducted in the period from September 2005 and March 2009, (45 months).

This means that to recruit this number of women with Clomiphene-resistant PCOS, there should have been 6855 women with PCOS (assuming that the studied cases represent 20% of women with PCOS). When this number is divided by 45 months, it means that 152 women with PCOS should have been present each month, and that necessarily required the screening of 602 infertile cases monthly with a total number of 27420 infertile cases in the whole study period. This was not available by any means (assuming that PCOS represents 25% of infertility by most estimates).

From the records of outpatient clinics (Table 2) during the study period, these were the rates of infertile cases recorded in the clinic records:

The total number of infertile cases in the 45-month period was 6278. Thus, women with PCOS was about 25% of that number (1569), and Clomiphene-resistant PCOS women =  $1569/5 = 313$ , which is only fifth the number mentioned in the paper (1371), which means that there is defect of 1058 women who did not exist

- Considering that the records are for all women coming to the clinic (including those with re-visits), and that makes the true number of new cases much less.
- The researcher might respond that some cases were followed-up in the Obstetric outpatient clinic, but that is not possible, as there is no vaginal probe in the ultrasound machine in the obstetric clinics.

## 3- Trials on laparoscopic drilling

There were 366 laparoscopic drilling over 45 months in two studies (No. 4 and 6 in Table 1), which means performing 8 operations per months as 2 operations weekly. However all the cases in the 45-month period in the operation records were only 94, and if we assume that all these cases were performed by this researcher only (the truth is that this number includes patients performed by all surgeons in all department units, so that performed by the researcher would be much less), there would be a defect of 200 women.

### **Conclusion:**

From the previous, we can conclude with complete certainty:

- 1- The first study (LNG-IUS treatment of non-atypical endometrial hyperplasia in perimenopausal women: a randomized controlled trial) has all the criteria of fraud (completely fabricated) and does not exist.

- 2- The group of studies about clomiphene-resistant PCOS has the criteria of (deceit) in numbers as it was not possible to recruit the numbers mentioned in the studies in that setting during the specified period.
- 3- There is no excuse for the researcher' misconduct (fabricating imaginary data and studies not done at all, or studies with doubtful cases not in records)
- 4- We deny any relationship with this work, and we want to rise with the scientific school in the department of obstetrics and gynaecology and construct a base for the future generations to build on, so that studies will be accepted in the international journals with complete trust in its neutrality, integrity, and scientific accuracy which are the fundamentals of acceptance of research results.
- 5- Finally, the wok of one researcher or in one department or in one university that is proved to be fraudulent, fabricated and deceitful, is sufficient to contaminate the purity of scientific research as a whole everywhere.

Signed below the following professors (listed alphabetically), five of them are members of the permanent scientific committee to promote staff members in the speciality (except the first professor):

1. Prof. Dr. El-Said Abdel Hady MRCOG , PH D , email: [Elsaidhady@yahoo.co.uk](mailto:Elsaidhady@yahoo.co.uk)
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Find signatures in the Arabic version of the report

Date :2014

**Table 1: RCTs on PCOS**

جدول رقم ١ الأبحاث المتعلقة بتكيس المبايض RCT

Serial n	title	Start-conclusion dates	Number enrolled	location	published
1	N-acetyl Cysteine and Clomiphene Citrate or Metformin and Clomiphene Citrate for Women With CC Resistant Polycystic Ovary Syndrome (PCOS)	April 2007 – June 2009	192	Mansoura University Hospitals,OB/GYN department	Womens health 2010:19:2043
2	Letrozole or Combined Metformin Clomiphene Citrate (CC) for Women With CC Resistant Polycystic Ovary Syndrome	June 2006- January 2009	250	Mansoura University Hospitals,OB/GYN department	Fertile.steril. 2010.94:1405
3	Combined Metformin and Clomiphene Citrate (CC) or Laparoscopic Ovarian Diathermy for Women With CC Resistant Polycystic Ovary Syndrome (PCOS)	September 2005- February 2009	282	Mansoura University Hospitals, OB/GYN department	Obstet gynec res 2011,37:169
4	Letrozole or Laparoscopic Ovarian Diathermy for Women With CC Resistant Polycystic Ovary Syndrome.	August 2006- March 2009	260	Mansoura University Hospitals,OB/GYN department	Arch gynecol obstet 2010 282:567