

## Becky Hales

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**From:** Tyrer, Bob [bob.tyrer@sunday-times.co.uk]  
**Sent:** 27 April 2010 19:41  
**To:** Becky Hales  
**Cc:** Connell, Angela; Caseby, Richard  
**Subject:** Complaint 100832 Archibald

Dear Becky,

I hope you will pass on my apologies to Ms Archibald for the delays of the past month. As you know, I was away in New Zealand and was then trapped there by the flight ban.

Having researched this matter, I don't accept that the article was incorrect or misleading. On the contrary Dick Girling presented a balanced, accurate and clear account. I have attached a statement from him in which you will see the lengths to which he went to ensure that this was a fair and honest article. He also asked experts in the field to review his draft text for accuracy.

The Complainant draws particular attention to a sentence in which he writes about a Parkinson's patient who "can function near-normally thanks to a technique known as deep brain stimulation, which was pioneered in monkeys". She cites a New Scientist article, The Parkinson's Fix, that suggests that Dr Alim-Louis Benabid pioneered the technique on humans suffering from Parkinson's in 1987. It states: "It was in 1987 while performing [surgery with electrodes] for Parkinson's and other tremor disorders that Benabid's breakthrough came." My researches show that the New Scientist article is misleading.

In the statement that I am sending with this letter, Dick Girling makes the point that he had top-flight sourcing for his assertion about pioneering in monkeys. He includes a note provided by Barbara Davies of Understanding Animal Research, who wrote:

*In 1990 and 1991, groups in Britain and the USA showed that partial destruction of the subthalamic nucleus cured Parkinson's in monkeys, but the risk of causing thrashing movements in patients prevented them from using the method clinically. In 1992, a French group implanted electrodes in a Parkinsonian monkey's brain, stimulating the cells very fast. This effectively turned off the cells and relieved the Parkinsonism – turning off cells is far more acceptable than destroying brain tissue, so the procedure went straight to the clinic with the first clinical study reported in 1993. It rapidly spread around the world. Patients are so improved they only need small amounts of drugs that have no adverse side effects.*

*Here are a couple of references. The first one relates to the French work in macaques, the second to subsequent use of DBS in humans.*

*Benazzouz A, Gross C, Feger J et al (1993) Reversal of rigidity and improvement of motor performance by subthalamic high-frequency stimulation in MPTP-treated monkeys Eur J Neurosci 5(4), 382*

*Limousin P, Krack P, Pollak P et al (1998) Electrical stimulation of the subthalamic nucleus on advanced Parkinson's disease New Engl J Med 339, 1105*

The references are from the European Journal of Neuroscience and the New England Journal of Medicine, both of which carry substantially more scientific authority than New Scientist. Further references can be supplied if required.

Dr Benabid has also written about deep brain stimulation. In the August 2001 edition of Journal of Neurology – see <http://www.springerlink.com/content/vweulf551butjcn9/> - he and his colleagues at Grenoble University Hospital report that they used deep brain stimulation in 1987 on human patients suffering from dystonia, a disability that causes tremors and muscle contractions, but not Parkinson's.

In the December 2003 edition of Current Opinion in Neurobiology. An abstract of it – which can be found at [http://www.sciencedirect.com/science?\\_ob=ArticleURL&\\_udi=B6VS3-4B2D0HN-3&\\_user=10&\\_coverDate=12%2F31%2F2003&\\_rdoc=1&\\_fmt=high&\\_orig=search&\\_sort=d&\\_docanchor=&view=c&\\_searchStrId=1313290351&](http://www.sciencedirect.com/science?_ob=ArticleURL&_udi=B6VS3-4B2D0HN-3&_user=10&_coverDate=12%2F31%2F2003&_rdoc=1&_fmt=high&_orig=search&_sort=d&_docanchor=&view=c&_searchStrId=1313290351&_) – Dr Benabid states that the technique was not used on Parkinson's until a decade later, after animal research:

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*Deep brain stimulation at high frequency was first used in 1997 to replace thalamotomy in treating the characteristic tremor of Parkinson's disease, and has subsequently been applied to the pallidum and the subthalamic nucleus. The subthalamic nucleus is a key node in the functional control of motor activity in the basal ganglia. Its inhibition suppresses symptoms in animal models of Parkinson's disease, and high frequency chronic stimulation does the same in human patients.*

From this it seems clear that New Scientist is open to misinterpretation. It wrongly implies that Deep Brain Stimulation was used to treat Parkinson's in humans from the start.

On these grounds, I ask the Commission to reject the complaint.

Yours,

Bob

## **Response by Richard Girling to complaints to the PCC about his article on animal testing in The Sunday Times Magazine**

This was essentially a piece about animal welfare, not the efficacy of animal testing *per se*. Its starting points, taken as read, were as follows:

1 Animal procedures on pharmaceuticals and many other products are required by law. Like it or not, publicly-funded research institutes and commercial companies are bound to carry them out. Because of changes in EU legislation, the amount of legally-required testing is likely to increase.

2 There are serious and sensible arguments about whether or not the cost to animals used in laboratory procedures is justified by the benefit to humans. There is an absolute consensus among responsible scientists that the animals' suffering should be minimised, and agreement among all but total abolitionists that benefit to humans does accrue.

3 It is self-evident that animals – even primates – are not perfect proxies for human beings, but this does not mean there is no significant benefit from the tests conducted on them.

My research was guided initially by the Fund for the Replacement of Animals in Medical Experiments (FRAME - a long-established and responsible campaign group run by science professionals), and later by the Medical Research Council (MRC) and the National Centre for the Replacement, Refinement and Reduction of Animals in Research (NC3Rs – a government-funded independent body set up to help minimise the number of animals used in British laboratories). I also received help from Understanding Animal Research, the Parkinson's Disease Society, the Wellcome Trust, the universities of Nottingham and Newcastle, and the RSPCA.

During the course of that research I made visits to four scientific institutions – the MRC's macaque breeding unit, a leading academic research unit, the FRAME animal replacement laboratory and the contract research company Huntingdon Life Sciences. I accurately reported what I saw and heard in these places, and gave an honest account of my feelings and opinions. It should also be noted that I had some prior knowledge of the subject and had visited other laboratories in the past. None of what I wrote therefore can be characterised as “conjecture” or “inaccurate”.

To ensure accuracy, I arranged for the draft text to be checked by three well-qualified expert readers, from the NC3Rs and Nottingham and Newcastle universities. All attested to its accuracy, and several other authorities, including the MRC, Science Media Centre and Understanding Animal Research, wrote to me appreciatively after the piece was published.

The complainant raises just one point of substance, on the testing and development of deep brain stimulation. Here is a note provided for me by Barbara Davies of Understanding Animal Research. Further references can be supplied if required.

In 1990 and 1991, groups in Britain and the USA showed that partial destruction of the subthalamic nucleus cured Parkinson's in monkeys, but the risk of causing thrashing movements in patients prevented them from using the method clinically. In 1992, a French group implanted electrodes in a Parkinsonian monkey's brain, stimulating the cells very fast. This effectively turned off the cells and relieved the Parkinsonism – turning off cells is far more acceptable than destroying brain tissue, so the procedure went straight to the clinic with the first clinical study reported in 1993. It rapidly spread around the world. Patients are so improved they only need small amounts of drugs that have no adverse side effects.

Here are a couple of references. The first one relates to the French work in macaques, the second to subsequent use of DBS in humans. If you would like me to find the 1990 and 1991 references too, please let me know.

Benazzouz A, Gross C, Feger J et al (1993) Reversal of rigidity and improvement of motor performance by subthalamic high-frequency stimulation in MPTP-treated monkeys *Eur J Neurosci* 5(4), 382

Limousin P, Krack P, Pollak P et al (1998) Electrical stimulation of the subthalamic nucleus on advanced Parkinson's disease *New Engl J Med* 339, 1105

The experts who responded to the piece, both before and after publication, all commented on its fairness and balance. This correspondence is available to view if required.

## Becky Hales

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**From:** Tyrer, Bob [bob.tyrer@sunday-times.co.uk]

**Sent:** 27 April 2010 17:04

**To:** Becky Hales

**Subject:** 100435

Dear Becky,

Further to our conversation this afternoon, Dick Girling is not content with a clarification. He can demonstrate that Deep Brain Stimulation was pioneered in monkeys. I will send you a formal letter shortly and then draft a response to Ms Archibald.

Best

Bob