From: Kenneth S. Kendler [mailto:kendler@vcu.edu]
Sent: Tuesday, April 12, 2011 3:07 PM
To: Ed Pigott
Cc: Jill Opalesky; Robin.murray@iop.kcl.ac.uk
Subject: Re: Request for the Retraction of the McClintock et al. article

Dr Pigott,

With my staff, we have reviewed the material you sent and do not find any justification to withdraw this article. If you wish to write a letter to the editor, summarizing your concerns, we would be willing to consider it for publication using normal procedures (e.g. rigorous peer review). Our standard limit is 500 words and 10 references. The letter needs to focus on the research issues involved and avoid ad hominem attacks. It should also focus on issues specific to this article as you have published other work generally critical of the Star*D study. If your letter is accepted, we routinely ask the authors if they want to submit a response. K Kendler

On 4/6/2011 2:37 PM, Ed Pigott wrote:
Dear Drs. Kendler and Murray:

I am writing to request that you investigate the Nierenberg et al. 2010 article and consider retracting it from your journal. Please find attached:

- My letter describing the basis for this request;
- Two articles that I have published in the past year documenting substantial researcher bias in the analysis and reporting of STAR*D's results;
- The McClintock et al. 2011 article published in the **Journal of Clinical Psychopharmacology** that has several of the same factual misrepresentations contained in the Nierenberg et al. paper; and
- STAR*D's 2004 Controlled Clinical Trials article that I cite in my letter proving Nierenberg et al's misrepresentations.

Other primary source documents cited in my letter (i.e., STAR*D's NIMH-approved Research Protocol, Clinical Procedures Manual, and Patient Education Manual) are available for download at my blog's website:
http://www.madinamerica.com/madinamerica.com/STARD%20Documents.html

This request is not something that I make lightly. As documented in the letter, the Nierenberg et al. article contains information that is likely harmful to patient care by minimizing the risk of suicidality that was associated with citalopram/Celexa treatment. This minimization of suicidality is directly related to the authors' factual misrepresentations and substandard research in this paper as well as their failure to report the countervailing findings from their own prior articles.

Given this article's potential to mislead your readers and thereby harm patient care, I expect for you to conduct this investigation promptly. As noted in the letter, it is easy to validate Nierenberg et al's factual misrepresentations.

Please confirm that you received this email and the attachments. I look forward to your prompt reply and please do not hesitate to contact me if you have any questions.

Sincerely,

Ed Pigott, Ph.D.

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