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Dr. Heikki Pälve, MD, PhD
Chief Executive Officer
Finnish Medical Association

and

Chairperson
Medical Ethics Committee
World Medical Association (WMA)

Inappropriate rejection of an already accepted article in Suomen Lääkärilehti (Finnish Medical Journal)

Dear Dr. Heikki Pälve,

In your capacity of the CEO of the Finnish Medical Association (the publisher of Suomen Lääkärilehti) and the Chair of the Medical Ethics Committee of the World Medical Association, I herewith appeal a rejection of an already accepted article in Suomen Lääkärilehti. In my view, the rejection is not only inappropriate; it also constitutes editorial misconduct.

Please see extracts of my e-mail correspondence with the Journal in chronological order in the following.

On 25 November, I wrote to editor Päivi Hietanen that antidepressants increase the risk of suicide in all ages and attached a paper we had just published (in English):

“Jussi Valtonen suggested that a paper I published earlier this month might be of interest for your journal. I summarise important findings in relation to suicide, incl. two important reviews we published in October and November this year. Jussi offered to translate the paper into Finnish. We are the first to show that the increased risk of suicide with antidepressants is not limited to children and adolescents, but that there seems to be no upper age limit. This is incredibly important knowledge, also for Finnish physicians.”

The paper I published earlier is this one: Peter Gøtzsche. Antidepressants Increase the Risk of Suicide and Violence at All Ages. November 16, 2016. <https://www.madinamerica.com/2016/11/antidepressants-increase-risk-suicide-violence-ages/>.

On 5 December, Pertti Saloheimo, Co-Editor-in-Chief (Medicine), MD, PhD, responded that Päivi Hietanen had retired as the Medical Editor-in-Chief and furthermore wrote:

“We could publish your article translated into Finnish in our Point of View section. In that section, we publish articles with a strong message, with references. A permission to republish is of course required from the original publisher. When translating, the article should also be shortened: maximum length in that section is 5000 marks, and Finnish is a lengthy language compared with English.”

I submitted my paper in Finnish according to this advice (I had permission to republish in Finnish from the original publisher).

On 5 January, Jussi Valtonen and I received this email from Saloheimo:

“After reconsideration with the Editor-in-Chief we decided not to publish your article in the Finnish Medical Journal. The main reason is that it has been published elsewhere. I am very sorry that I gave you a promise that showed to be false and translating the article became wasted work.”

On 6 January, I wrote to Saloheimo:

“You write that ‘After reconsideration with the Editor-in-Chief we decided not to publish your article in the Finnish Medical Journal. The main reason is that it has been published elsewhere.’

I kindly ask you to reconsider your position, for several reasons.

Firstly, you had already accepted my article, which we had shortened according to your guidelines, and you knew that it had been published elsewhere when you accepted it. According to the COPE (Committee on Publication Ethics) guidelines, ‘3.2. Editors should not reverse decisions to accept submissions unless serious problems are identified with the submission.’

Secondly, allow me to ask if your journal has introduced new guidelines recently for publishing material in Finnish, which has been published in another language before? In 2012, I published a paper in your journal, which contained material I had published elsewhere in English, and I also published it in Swedish at the same time, which your journal knew about and accepted, and there were no problems with this. This is a tradition we have had for a long time in the Nordic medical journals. The article is this one:

Jørgensen KJ, Gøtzsche PC. Dödligheten i bröstcancer minskar - men inte tack vare screening: Dags att slopa mammografiscreening [Mortality in breast cancer is decreasing - but not because of screening. Time to abolish the mammography screening]. *Läkartidningen* 2012;109:690-2.

Jørgensen KJ, Gøtzsche PC. Rintasyöpäkuolleisuus vähenee, muttei seulonnan ansiosta. *Suomen Lääkärilehti* 2012;11:856-8.

According to what seems to be your current instructions for authors, while generally the material needs to be original, a research report published previously in an international journal can be published in the Finnish Medical Journal if the dissemination of this information to the readership of the journal is seen as particularly important:

http://www.laakarilehti.fi/site/assets/files/156782/kirjoitusohjeet_2013.pdf

I believe the information I convey in the article is very, very important for Finnish doctors to know about. They don't know that antidepressants increase the risk of suicide and violence at all ages. Since you accepted my article, I conclude that you also found it important.

I therefore believe that your journal is obliged to publish my paper. It would be a tremendous service to Finnish doctors and patients to publish my paper, as it would undoubtedly lead to a much needed discussion about the value of antidepressants, which are massively overprescribed in Finland, as in all other western countries.”

On 10 January, Editor-in-Chief, Pekka Nykänen, wrote to me, Valtonen and Saloheimo:

“I deeply apologize the inconvenience concerning your article about antidepressants. I take full responsibility of the hassle, the cause is totally mine. Reversing decisions is not good journalistic practise, I totally agree. In spite of that I have decided not to publish the article. This does not mean that we would not be interested to publish your original texts in *Lääkärilehti* in the future.”

Nykänen's e-mail was a stand-alone e-mail. It did not include my previous e-mail. I therefore wrote, also on 10 January:

“Today, 10 January, you send me the short message just below. As my complaint to your journal, which I sent to Pertti Saloheimo, your Co-Editor-in-Chief (Medicine), was not included in your reply to me, I have inserted it below your reply for ease of reference and have highlighted in red the most important bits.

Since you did not respond to my questions and observations, I kindly ask you to do this now.

Furthermore, I would like to know to whom I may complain over the way you have handled this paper?

Does your journal have an ethical board?

Is your journal a member of COPE?

Whether or not it is, I might decide to complain to COPE, as it is pretty clear that you cannot reject my paper after your Co-Editor-in-Chief has accepted it. This is a very serious breach of good editorial practice that many people would be interested in knowing about. I have previously been treated badly by a medical journal, and that case was also brought to COPE. I attach a copy of the article I published in the Lancet about the affair [Gøtzsche PC, Mæhlen J, Zahl P-H. What is publication? Lancet 2006;368:1854-5].”

On 12 January, Nykänen replied and copied Saloheimo:

“I can inform you that I was fully aware of your correspondence with Pertti.

I want to stress one thing. We are not talking about scientific research publishing here. From the beginning our aim was to publish your article in our section Näkökulma, which could be translated as ‘Point of view’. It is an opinion based section.

Therefore we feel your references to Cope etc. do not apply.

As I told, I do deeply apologize the hassle. But as editor-in-chief it is my job to assess what we publish and what not. In this case I have made a decision not to publish the text. I am sorry to say, but on our part the case is now closed.”

On 12 January, I replied:

“You have not had the courtesy to reply to the relevant questions I have sent to you twice. You have not even told me whether your journal has an ethical board; whether it is a member of COPE; or to whom I may complain over the way you have handled this paper?

Furthermore, you are wrong when you postulate that COPE would not be interested in this case because you call our submission a ‘Personal Opinion.’ Publication ethics does not depend on the type of article that is involved, and what I describe in my paper is research based on systematic reviews. This is science. This is not just an opinion.

Would you please respond to my questions? And also tell me why you have rejected my paper after your deputy had accepted it, as you have not given any plausible explanation.”

Nykänen has not replied to my e-mail from 12 January.

I was very surprised that Nykänen did not appear to be the least concerned about editorial ethics and international guidelines in relation to this. I therefore asked one of my Finnish friends to look up information about Editor Nykänen. It seems that Nykänen is the editor in charge, since his title is editor-in-chief, and he is listed first on the journal’s homepage, <https://www.laakariliitto.fi/yhteystiedot/toimisto/#section7>.

Given that Nykänen had overruled the decision about acceptance of my paper by the medical co-editor-in-chief, Dr. Pertti Saloheimo, I assumed that Nykänen had academic credentials within

medicine but that seems not to be the case. According to the information I have, Nykänen is an engineer by training and used to work in Kauppalehti, a business magazine. He is a business journalist and all his tweets are about business, technology and politics.

I do not understand how it is possible that a person with no medical background can reject an important paper that his medical co-editor-in-chief, who is an MD and a PhD, has accepted. Finnish doctors need to know that antidepressant drugs increase the risk of suicide and violence at all ages. They do not know this, and very likely think that antidepressants protect against suicide. For example, the European Psychiatric Association stated as late as in 2012 in their guidance on suicide treatment and prevention that antidepressants decrease suicidality (Wasserman D, Rihmer Z, Rujescu D, et al. The European Psychiatric Association (EPA) guidance on suicide treatment and prevention. *Eur Psychiatry* 2012;27:129-141).

I also note that, according to the journal's own instructions for authors, "Näkökulma" (point-of-view) articles do not seem to be any less "scientific" (relevant to COPE) than any other type of article in the Journal: http://www.laakarilehti.fi/site/assets/files/156782/kirjoitusohjeet_2013.pdf.

My conclusion

I cannot know what made Mr. Nykänen behave inappropriately. He has not provided any plausible explanations for his behaviour, which I consider editorial misconduct. The Finnish Medical Journal was represented early on in the International Committee of Medical Journal Editors, whose guidelines say about Integrity (<http://www.icmje.org/recommendations/browse/roles-and-responsibilities/responsibilities-in-the-submission-and-peer-review-process.html>):

"Editorial decisions should be based on the relevance of a manuscript to the journal and on the manuscript's originality, quality, and contribution to evidence about important questions. Those decisions should not be influenced by commercial interests, personal relationships or agendas, or findings that are negative or that credibly challenge accepted wisdom ... Journals should clearly state their appeals process and should have a system for responding to appeals and complaints."

Allow me also to point out again that, according to the COPE (Committee on Publication Ethics) guidelines, '3.2. Editors should not reverse decisions to accept submissions unless serious problems are identified with the submission.' There are no serious problems with my paper, quite the contrary. In it, I quote three very important systematic reviews we published in January, October and November 2016, in *BMJ*, *Journal of the Royal Society of Medicine* and the *Canadian Medical Association Journal*, respectively, which are all highly respected.

As I have not heard from Mr. Nykänen or other members of the Editorial board of Suomen Lääkärilehti, I could not come up with any other option but to contact you, Dr. Pälve, as the publisher of the journal. I believe editorial misconduct can be equally serious as scientific misconduct and should not be tolerated. I would like to ask for your careful consideration of this case. I am of course willing to discuss the matter with you on the phone if you feel this is needed.

I hope to hear from you soon and look forward to a satisfactory resolution.

I attach the paper Nykänen rejected, both in Finnish and English.

Sincerely,



Peter C Gøtzsche, DrMedSci, MSc
Director of the Nordic Cochrane Centre, Rigshospitalet
Professor, University of Copenhagen

Cc: Pekka Nykänen, Editor-in-Chief (Suomen Lääkärilehti)
Pertti Saloheimo, Current Editor-in-Chief (Medicine)
Päivi Hietanen, Former Editor-in-Chief (Medicine)
Jussi Valtonen, PhD (translator of the abbreviated article in question)