Elsevier to Editor: Change Controversial Journal or Resign

The editor of the journal Medical Hypotheses—an oddity in the world of scientific publishing because it does not practice peer review—will apparently lose his job over the publication last summer of a paper that says HIV does not cause AIDS. Publishing powerhouse Elsevier this week told Editor-in-Chief Bruce Charlton that it won’t renew his contract, which expires at the end of 2010, and it asked that Charlton resign immediately or implement a series of changes in his editorial policy, including putting a system of peer review in place. Charlton, who teaches evolutionary psychology at Newcastle University in the United Kingdom, says he will do neither, and some on the editorial advisory board say they may resign in protest if he is fired.

Elsevier’s move is the latest in an 8-month battle over the journal; it comes after a panel convened by Elsevier recommended drastic changes to the journal’s course, and five scientists reviewed the controversial paper and unanimously panned it.

Medical Hypotheses, which says it “will consider radical, speculative and non-mainstream scientific ideas” is the only Elsevier journal not to practice peer review. Scientist, entrepreneur, and author David Horrobin, who founded the journal in 1975, believed reviewers tend to dislike what lies outside the scientific mainstream. Charlton, who succeeded Horrobin in 2003, decides what gets published on his own—although he occasionally will consult another scientist—and manuscripts are edited only very lightly.

It’s a policy that leads to occasional wild and wacky papers—a 2009 article for which the author studied his own navel lint became an instant classic—but the journal is also a “unique and excellent” venue for airing new ideas, says neuroscientist Vilayanur Ramachandran of the University of California (UC), San Diego, who published in the journal 15 times himself and sits on its editorial advisory board. “There are ideas that may seem implausible but which are very important if true,” Ramachandran says. “This is the only place you can get them published.”

But the journal got in hot water in July after Charlton accepted a paper, previously rejected by the Journal of Acquired Immune Deficiency Syndromes, in which molecular virologist Peter Duesberg of UC Berkeley and colleagues assert that HIV does not cause AIDS and that medical statistics and demographic data do not support the existence of a massive AIDS epidemic in South Africa. Duesberg, a so-called AIDS deni­al­ist, has disputed the link between HIV and AIDS since the 1980s.

Charlton says he is “agnostic” on the question of whether HIV causes AIDS but adds that even papers that are wrong can make interesting points that make the reader think. “If he believes that, he should have a great big health warning on every page saying, ‘This may be rubbish,’” says Nicoli Nattrass, an economist at the University of Cape Town who has studied the effects of AIDS denialism in her country. “This is not just some stupid academic debate. Many people in South Africa still don’t believe HIV causes AIDS because there are scientists who say so. And they are dying because of it.”

After the paper’s publication, prominent HIV scientists John Moore of Weil Cornell Medical College in New York City and Nobelist Françoise Barré-Sinoussi of the Pasteur Institute in Paris wrote Elsevier to ask that the paper be withdrawn. Others asked the National Library of Medicine to delist Medical Hypotheses from the MEDLINE database of biomedical literature, and called on scientists to urge their librarians to cancel the journal. (They also took aim at a second AIDS paper by molecular biologist Marco Ruggiero of the University of Florence, which they say was denialist in nature as well.)

Following the advice of a private external panel, Elsevier told Charlton on 22 January that Medical Hypotheses would have to become a peer-reviewed journal. Potentially controversial papers should receive careful scrutiny, the publisher said, and some topics—including “hypotheses that could be interpreted as supporting racism”—should be off limits.

Elsevier also had its flagship medical journal, The Lancet, organize a review of the two papers by five anonymous experts. The reviews, which have been obtained by Science, were unanimously negative; they said that the Duesberg paper was riddled with errors and misinterpretations. “It does not belong in a scientific journal,” one reviewer wrote. On 24 February, Elsevier wrote Duesberg that his paper—which had not yet been printed and which the publisher had pulled from the journal’s Web site in August—would be “permanently withdrawn.” Ruggiero received a similar letter.

Charlton calls the review a “show trial” and says the publisher had no right to override his editorial decision. On his Web site, he has published a selection of more than 150 letters from Medical Hypotheses authors who support him. And on 12 February, 13 of the 19 board members wrote Elsevier to demand that the papers be returned to the journal’s Web site and to reject the proposed changes to its editorial policies. Not having peer review “is an integral part of our identity, indeed our very raison d’être,” the group wrote. But board member Antonio Damasio, head of the University of Southern California’s Brain and Creativity Institute in Los Angeles, didn’t know of the letter and now says that the paper should never have been published. The signatories don’t all love the paper either, says board member David Healy of Cardiff University School of Medicine in the United Kingdom. “It’s a defense of Bruce, not of the Duesberg paper,” he says.

Duesberg says Elsevier’s measures are an example of “censorship” imposed by the “AIDS establishment.” But Medical Hypotheses’ critics applaud the publisher’s latest step. “It seems clear that Elsevier has come to realize that there is a problem with Medical Hypotheses and that they are doing what they can to rectify it,” says Moore.

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