

The *MJA* and Gawler: a case of self-censorship?

TO THE EDITOR: An important and controversial article authored by Haines and Lowenthal¹ was recently published in the *Internal Medicine Journal*. The authors conducted evidence used by Ian Gawler on his website (iangawler.com) and in his book² to support meditation and dietary interventions as cancer therapy. Publication of the article was subsequent to initial submission to the *Medical Journal of Australia*, whose editors at first accepted the article but later rejected it on the grounds that Gawler did not consent to publication of the study.³ Could the editors of the *MJA* please inform its readers and authors why they chose to reject the article?

The answer cannot lie in concerns regarding patient confidentiality, as all the information contained in the article was found in the public domain, including in journal articles⁴ and in Gawler's book and on his website. Consequently, there was no privileged patient-doctor relationship and, as Ruth Gawler points out,⁵ the authors did not seek information from Ian Gawler's treating doctors.

Testing anomalous claims of cure and suggesting rational alternative explanations is part of the discourse of science. Should not the role of the journal editor be to support those who contribute rational criticism of untested claims? Can the *MJA* therefore clarify its policy?

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IN REPLY: The article referred to by McBryde was submitted to the *MJA* in 2011. Patient consent was requested, following standard *MJA* practice for all manuscripts containing potentially identifying patient data or images, but this was not provided by the authors. We agree that all the information was already publicly available, and it was for this prime reason that the manuscript was rejected. The manuscript referred to by McBryde presented supposition, but nothing new in the way of facts. The Journal's independent external Content Review Committee made the final decision to reject the manuscript.

The *MJA* has previously published material on the Gawler case, including a challenge to reported aspects of the case history¹ and a critical personal perspective on the Gawler program in the 21 May issue this year.²

Patient consent, accountable editorial processes, and an article's validity, significance and potential to advance medical practice are primary considerations in the *MJA*'s editorial decisions, as our readership rightly expects. These principles were applied in the *MJA*'s final decision not to publish the article.

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