

# Lies: The Cruelty of Scientific and Clinical Dishonesty

The findings were more than promising—they were revolutionary. Other than smoking cessation, all attempts to identify means of preventing oral cancer had proven fruitless. Then, in a study of 454 Norwegian patients with oral cancer enrolled among 9,241 patients in the Cohort of Norway (CONOR) study, Sudbo et al<sup>1</sup> concluded that “*Long-term use of NSAIDs is associated with a reduced incidence of oral cancer (including in active smokers).*”

Finally, the opportunity to prevent cancer in patients who are unable to quit smoking offered new hope in defeating the one malignancy for which there has been no improvement in survival in the past decades. The buzz in the cancer community was palpable with Sudbo’s finding of a whopping 50% reduction in cancer risk. Even more targeted studies were being designed by investigators seeking greater knowledge along this new and highly promising path. Patients with premalignant disease were informed of these remarkable findings as well.

Also impressed apparently was Camilla Stoltenberg of the Norwegian Institute of Public Health, the agency responsible for CONOR. As she caught up on reading over the Christmas holidays she noted that the health behavior information cited in the study was not available in CONOR. She informed the press that the study was a fake.

*The Lancet*’s editor published an “Expression of Concern,” indicating that the press had reported the information in the paper was entirely fabricated and the research had not been performed.<sup>2</sup> On February 4, 2006, *The Lancet* published a full retraction of the paper. Sudbo’s thirteen co-authors and the National Institutes of Health, which funded the study, add an additionally disturbing complexity to this very sad story.

Perhaps the reader of clinical science is right to be worried over the Sudbo incident. As a fellow editor, I have great sympathy for the editor of *The Lancet*, who accepted this article in good faith. The readers of *JOMS* should know that I too have discovered plagiarism and fabricated research prior to publication, resulting in the rejection of the papers in question and the banning of the authors. What I cannot tell the reader is if there are papers already in print that have altered data or stolen text.

In an alarming investigation supporting my editorial concern, the editors of *The Journal of Cell Biology* evaluated the digital images in articles accepted by their journal. They found that 25% of all figures were “manipulated in ways that violate the journal’s guidelines”<sup>3</sup> and that 1% of cases represented fraud.

Our society is clearly undergoing similar stresses under the burden of lies. A bestselling nonfiction author on “Oprah” described in excruciating detail how he was subjected to root canal therapy without a local anesthetic. A complete lie! Senior public officials resign over undisclosed behavior or fabrication of their resumes. News organizations confess to fabricating vivid heart wrenching “true to life” stories.

The cruelty of these lies is that we lose trust in those things we must trust if we are to succeed as a society; the honesty of our scientists, the integrity of fact publishing, and the trustworthiness of our leaders. That loss of trust invokes misdirection of resources, paralysis and cynicism.

Because this topic is so overwhelming in its scope, I leave you with some random musings on this subject.

## There Is a Difference Between the Nuances of Truth and Lying

Do not be too quick to brand a lie what is only a nuance that serves the interests of the speaker. That is the core of advertising. We all should know what is advertising and what is news.

## Caveat Emptor

It is best to consider the motivations of the messenger when deciding whether to buy into an idea.

## Be Truthful and Provide Full Disclosure Even When It Is Painful

Our society eventually usually finds a way to love the confessor.

## As a Reader, You Must Be a Student of Lies

They are often subtle or not consciously intended. In science as well as other endeavors I have observed:

The lie of omission  
The lie of obfuscation (sleight of hand)  
The lie of deception  
The lie of blind advocacy  
The lie of secondary gain  
The lie of self-promotion

### **The Carnage of Lies Embodies Its Cruelty**

Often wonder how authors rationalize their deception. It is done most principally by refusing to accept the full actualization of the lie and the harm it does to those who depend on the truth. They depend on the truth for their very lives. Lying to oneself (self-deception) may be the cruelest of lies. A lie is a loss of

confidence in the one who knows and loves you best. . .you.

LEON A. ASSAEL, DMD

### **References**

1. Sudbo J, Lee JJ, Lippman SM, et al: Non-steroidal anti-inflammatory drugs and the risk of oral cancer: A nested case-control study. *Lancet* 366:1359, 2005.
2. Horton R: Expression of concern: Non-steroidal anti-inflammatory drugs and the risk of oral cancer. *Lancet* 367:196, 2006.
3. Wade N: It may look authentic; here's how to tell it isn't. *New York Times*, January 24, 2006. Available at <http://nytimes.com/2006/01/24/science/24frau.html>. Accessed February 23, 2006

---

© 2006 American Association of Oral and Maxillofacial Surgeons  
doi:10.1016/j.joms.2006.02.002