24 April 2015  
  
Dear Sir Mark Pepys and signatories  
  
I am aware that Professor Graham Watt and colleagues have already sent  
you a response to your attack on The Lancet editor Dr Richard Horton and  
the signatories to the Manduca et al letter published in The Lancet  
during Operation Protective Edge in Gaza last summer. As one of the  
signatories of that letter I wish to reply on my own account.  
  
An early indication that yours is simply an indiscriminate smear letter  
is the inclusion of entirely irrelevant material- the Lancet publication  
of the Wakefield MMR paper 17 years ago, your highlighting of what one  
signatory might have said in a talk somewhere, what Internet material  
another signatory might have looked at etc.  
  
Our case rests on the substantive evidence base from a range of  
international and regional human rights and documentation centres  
generated by Operation Protective Edge and precedent events like the  
long-running seige of Gaza. The indiscriminate bombardment and mass  
killing of a helpless, trapped civilian population (including the  
killing of hospital patients in their beds, and of health professionals  
on duty) is at the centre of all these accounts. Look at the photo I  
attach. You cannot be unaware of this evidence base but your letter  
ignores it entirely. I attach just one example, an independent medical  
fact-finding report organised by Physicians for Human Rights-Israel and  
other reputable documentation centres. (1)  
  
Your detachment from the human costs of Operation Protective Edge, and  
the medical ethical issues thrown up, was there from the start. I note  
that you, Sir Mark, were quoted in the Telegraph of 22 September 2014 as  
saying on 29 August, at the height of the bombardment, that the Manduca  
et al authors were displaying "most serious, unprofessional and  
unethical errors". Not a word about events on the ground in Gaza, yet  
these were the events which even then the UN, Amnesty International and  
Human Rights Watch were all recording as prima facie evidence of war  
crimes!  Since then The International Criminal Court has opened a  
preliminary examination of war crimes violations during Operation  
Protective Edge.  
  
I would suggest that if a letter of protest with exactly the same  
contents had appeared in The Lancet, but where the State concerned was,  
say, Sudan or Syria, you would have no reason to see as it as  
objectionable or as inappropriate material for a medical journal, and  
might well have applauded such coverage- after all, the medical  
profession has a duty to individual patients, but also a generally  
recognised wider ethical duty to address the social origins of distress  
and disease. So how are we to understand the apparent exceptionalism you  
display? In his classic work "Phenomenology of Sociopolitical Actions: A  
Methodological Approach to Conflict", the sociologist Max Weber  
distinguished between an "ethic of responsibility" and an "ethic of  
conviction". By "ethic of responsibility", Weber meant conformity to  
professional standards and accountability. In our profession this means  
the ethical standards by which doctors should practice, including a  
commitment to factual evidence- standards determined by their peers,  
employers, the General Medical Council and, on the international scene,  
by the World Medical Association. By "ethic of conviction", Weber was  
identifying actions that were inspired by personally valued ideals,  
political or other philosophies, or identities. In my 29 years of  
conflict-related human rights work (23 on Israel-Palestine), I have  
witnessed how regularly an ethic of conviction trumps an ethic of  
responsibility, not least amongst doctors, and this is sadly true of you  
too. The signatories of your letter seem united around a felt connection  
with Israel and a wish to defend it, and this is what counts. In the  
service of this you can dismiss war crimes, seek to bludgeon a medical  
journal into silence, and demand that a letter grounded on so multiply  
documented an evidence base be retracted. This is a flagrant abuse of  
medical ethics. You write as if you had the ethical clarity that would  
attach, say, to your discovery of research fraud in a published paper,  
and your further discovery that the editor of the journal concerned had  
been in knowing collusion with this fraud!  
  
Those signatories who are Israeli are in support of the state of which  
they are citizens; the majority of signatories who reside elsewhere are  
serving the propaganda interests of a foreign power.  
  
Your allegations are defamatory and libellous: that we published  
"deliberately inflammatory falsehoods....abusive  
dishonesty.....unverifiable dishonest 'facts'.....malignant wilful  
disregard of honest and ethical medical authorship and  
editorship.....under the direction of Horton, The Lancet has become a  
vehicle for publication of deliberately false material..." So we - both  
authors and editor- are publishing lies which we know to be lies in a  
famous international medical journal? Few allegations made against a  
doctor could be much graver than this.  
  
I quote from the GMC publication Good Medical Practice (2006).  In the  
section on Working with colleagues, doctors must "respect the skills and  
contributions of your colleagues" (para 41); "you must treat your  
colleagues fairly and with respect.  You must not bully or harass them  
or unfairly discriminate against them by allowing your personal views to  
affect adversely your professional relationship with them.  You should  
challenge colleagues if their behaviour does not comply with this  
guidance" (para 46); "you must not make malicious and unfounded  
criticisms of colleagues that may undermine patients' trust in the care  
or treatment they receive, or in the judgement of those treating them"  
(para 47).  In the section on Probity, the GMC says that "probity means  
being honest and trustworthy, and acting with integrity: this is at the  
heart of medical professionalism" (para 56); "you must make sure that  
your conduct at all times justifies your patients' trust in you and the  
public's trust in the profession" (para 57).  In the section on Writing  
reports, giving evidence etc, the GMC says that "you must do your best  
to make sure that any documents you write or sign are not false or  
misleading. This means that you must take reasonable steps to verify the  
information in the documents, and that you must not deliberately leave  
out relevant information" (para 65); ...you must be honest in all your  
spoken and written statements. You must make clear the limits of your  
knowledge or competence" (para 67).  
  
As one of the signatories whose academic reputation your letter seeks to  
blacken, I am an involved party and I challenge you retract your  
allegations promptly or justify them evidentially. If you fail to do so  
I will look to appropriate action, starting with a formal complaint to  
the General Medical Council naming yourself as lead signatory for a  
start.  
  
  
Yours  
Derek Summerfield  
Honorary Senior Lecturer, Institute of Psychiatry, King's College,  
London  
Consultant Psychiatrist, South London & Maudsley NHS Trust  
Formerly Research Associate, Refugee Studies Centre, University of  
Oxford; Consultant to Oxfam and other humanitarian organisations;  
Principal Psychiatrist, Medical Foundation for Care of Victims of  
Torture.  
  
1.  Gaza 2014. Findings of an independent medical fact-finding mission.  
Physicians for Human Rights-Israel, Al Mezan Center for Human  
Rights-Gaza, Gaza Community Mental Health Programme,  Palestinian Centre  
for Human Rights-Gaza.