

**Telephone Enquiries;
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Our Ref: hoskins/DBJ/letters95

Date: 01 December 1999

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Dear [REDACTED]

Thank you for your letter of 13 September.

We are sorry if you find our earlier response inadequate, but wonder whether you are in fact expecting more of us than is within our power to deliver. In this context, there are a number of issues we think it would be helpful to clarify.

First, we should emphasise that the Trust (which is part of the UK's National Health Service) and the University (an independent corporation established by Royal Charter) are – in practice as well as formally - separate organisations, albeit that they co-operate closely in patient care and in medical education and research.

Secondly, we should explain that Professor Cunliffe is an employee of the Trust, not of the University. He does however hold the University title 'Professor' on an honorary basis.

Thirdly, neither the Trust (as Professor Cunliffe's employer) nor the University (as an organisation which has awarded him an honorary title) has *complete* jurisdiction over Professor Cunliffe's activities. There are traditions of clinical and academic freedom which have to be respected. In the case of academic work in particular, all academics have freedom *under the law* to articulate and profess their own scientific judgements and opinions, and to offer them up (in practice by means of articles in learned journals and contributions to scientific conferences) for critical scrutiny by their scientific peers. There is nothing which the Trust or the University can, or should, do to interfere in that process – unless, that is, it has reason to suspect that there is some misconduct or impropriety. Definitions of 'misconduct' and 'impropriety' vary, but we tend to take them as covering piracy, plagiarism, misrepresentation and fraud.

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Trust Headquarters

St James's University Hospital, Beckett Street, LEEDS LS9 7TF

Incorporating: Chapel Allerton Hospital · Cookridge Hospital · Leeds Chest Clinic · Leeds Dental Institute · Seacroft Hospital · St James's University Hospital
The General Infirmary at Leeds · Wharfedale Hospital



01 December 1999

Both the Trust and the University recognise the gravity of your concerns, and have accordingly taken them seriously, co-operating to ensure that you receive a co-ordinated response under a procedure agreed for the purpose. However, against the background described above, they can in this case consider only questions of possible misconduct or impropriety. You call into question the efficacy and safety of roaccutane, but that is a matter on which the appropriate licensing agencies must determine a view; it is not a question which lies within the jurisdiction of the Trust or the University. You also seem to be calling into question Professor Cunliffe's scientific judgement; you are entitled to do so but, given the conventions of academic freedom to which we refer above, it would not be appropriate for either the Trust or the University to take a corporate stance (whether positive or negative) on the use of roaccutane, any more than it would be appropriate for us to take a corporate stance on other contemporary academic or scientific questions. What we *can* do, however, and what we have therefore done, is to look into the allegations you seem to be making that Professor Cunliffe is guilty of misconduct or impropriety (for example, deliberately suppressing or misrepresenting data). This was the basis on which we initiated the screening process.

As we explained in our letter of 5 August, the conclusion of the screening process was that there were no *prima facie* grounds for considering that Professor Cunliffe has committed any scientific misconduct. We should however add that, as an additional measure, the Trust has asked its internal auditors to examine a number of financial matters which have been highlighted in your correspondence. The Trust will write to you again when that exercise is completed.

We are, as we say, sorry that you remain concerned that the Trust and University have not answered your concerns satisfactorily; and we note that in your last letter you refer to some information which appears not to have been raised before, as well as alluding to some further possible allegations against other scientists in Leeds (without providing full details). In all the circumstances, and in particular to avoid any possible confusion, it seems to us that the best way forward is for us to invite you to provide a written list of any specific questions which you consider remain unanswered and which lie within the jurisdiction of the University or the Trust (or both).

In extending this invitation, we must make it clear that, for the reasons explained above, we can consider only questions of misconduct or impropriety: you should, in other words, confine your questions to matters which fall within our jurisdiction. We must also make it clear that you should provide full evidence for any allegations you make or any concerns you raise; and, for the avoidance of doubt, we would add that material submitted by you might be made available by us to any person against whom you are making allegations or about whose actions you are raising questions. Such persons may wish to respond to you directly as well as through us. Finally, we should emphasise that you should raise at this stage **all** questions which you consider we need to address: we are prepared to look at any unresolved issues, but we must do so in a comprehensive fashion, in a way which avoids an endless dialogue or series of allegations.

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