British Medical Journals Play Politics

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As the fighting between Hamas terrorists and the Israeli army continues, so, too, does the battle launched in a different arena – the international press. Today, it is almost fashionable, intellectual, even "politically correct" to be anti-Israel. This phenomenon does not limit itself to the general media; it has spread to the pages of elite medical journals.

A quick review of Medline shows the trend beginning in earnest in the early to mid-1990s, and centered in the UK, although other countries are not exempt. Over the years, leading British medical journals such as the *BMJ*, the *Lancet* and the *Journal of the Royal College of Medicine* have delighted in publishing political rhetoric disguised as medical articles. The articles have accused Israel and the Israel Medical Association (IMA) of a host of human rights abuses, including occupation, torture and cold-blooded executions of civilians. At the same time, well-respected journals in other countries, such as the *New England Journal of Medicine*, did not have a single anti-Israel article that we were able to find.

The articles detailing human rights abuses seem to focus on Israel in an almost distorted fashion. The website *Honest Reporting*¹ asked Dr. Simon Fishman, a physician, to research PubMed for citations in medical journals relating to victims of international conflicts, including Palestinians, as well as a whole range of genuine health care issues such

as the psychological effects of war on Rwandan, Bosnian and Darfurian children, HIV testing in Rwanda, and other studies that are not necessarily focused on death tolls from such conflicts. Using the casualty figures from a range of conflict zones as a simple judge of scale produced the following results:

Dr. Fishman concluded the following from his figures:

- When Europeans kill Europeans (Bosnia), the BMJ allocates one citation for every 2000 deaths.
- When Africans kill Africans (Rwanda), the BMJ allocates one citation for every 4000 deaths.
- When Muslim Arabs kill Black Africans (Darfur), the BMJ allocates one citation for every (minimum) 7000 Darfurians who are killed.
- When Israelis, in the process of combating terrorists, kill Palestinians, the BMJ allocates one citation for every 13 Palestinians killed (including terrorist combatants).
- When Arab Muslims kill Kurds, the BMJ fails to give this any attention whatsoever.^{2,3}

¹BMJ's Bad Medicine, http://www.honestreporting.com/ articles/45884734/critiques/new/BMJs_Bad_Medicine.asp, accessed 19 March 2009.

²The authors conducted an additional search for references to the conflict in Chechnya and found 41 references in PubMed and 17 in the *BMJ* (often in a laundry list of other conflicts). The number of casualties during the two wars varies wildly between 20,000 and 250,000.

³ Following the piece on honestreporting.com, Fiona Godlee, the editor of the BMJ, published a response in which she stated that the BMJ conducted their own search and found the following: "For Sri Lanka, Iraq, and Myanmar, 1–2% of relevant articles in PubMed had been published in the BMJ. For Palestine, Congo, and Somalia, the figure was 4–6%. For Darfur and Zimbabwe, the rates were 15.8% and 17.4%. Both sets of data are crude. We make no claim that they address the extreme complexities of the political or humanitarian situation in each region, nor do they reflect the number of civilian casualties in each case.

ETHNIC GROUP	YEARS COVERED	NO PEOPLE KILLED	TOTAL CITATIONS IN PUBMED	TOTAL CITATIONS IN BMJ	DEATHS PER BMJ CITATION/YEAR
Palestinians	2000-2004	1508	2,479	29	13
Bosnians	1991-1996	200,000	1,993	20	2,000
Rwandans	1994	800,000	1,267	20	40,000
Sudanese (Darfur)	2002-2006	400,000	121	14	7,143
Kurds (Anfal)	1998	180,000	55	0	Negligible

In addition to the clear slant in the types of articles published in British medical journals, the "facts" of the articles are questionable. This was recently documented in an article posted on the website *Lancet Global Health*, entitled "The Wounds of Gaza." The article, removed from the site shortly after its publication because of "factual inaccuracies," was a piece of fiction at best and slander at worst.

The article/blog entry cited Israeli soldiers pulling women and children out of their homes and shooting them in cold blood, of "silent bombs" that vaporized every living thing in sight, and of 35,000 Egyptian prisoners of war allegedly executed by Israel during the 1967 Six Day War. Even the greatest supporters of anti-Israel diatribe noted that "the factual inaccuracies may detract from the credibility of the rest of the article." In response, four leading Israeli physicians, including Prof. Yehuda Shoenfeld, editor-in-chief of *IMAJ*, Dr. Yoram Blachar, President of the IMA, Prof. Aaron Ciechanover, Nobel laureate in chemistry and Dr. Joshua Shemer, CEO of Maccabi Health Services, wrote a response, which follows that article.4

The lack of proportion is evident also in the skewed reporting of events in the region and their health effects. For eight years, residents of Sderot and the surrounding areas have been subjected to unceasing rocket fire. In addition to those injured and killed, a study by "Natal," the Israel Center for Victims of Terror and War, found that between 75 and 94 percent of Sderot children aged 4–18 exhibit symptoms of post-traumatic stress and 28 percent of adults and 30 percent of children have post-traumatic stress disorder. However, studies of these kinds do not make their way into the pages of the *Lancet* or the *BMJ*.

This latest assault was but one of many keeping Israeli physicians busy in the international arena. Through the years,

the Israel Medical Association, the representative organization of Israeli physicians (of all religions and ethnicities) has tried to remain politically neutral while still looking out for the health of innocent civilians. We have held meetings with government and army officials, with human rights organizations, with the International Red Cross and the WHO, in an effort to determine what can be done to improve the situation. We have investigated reports of alleged torture brought to our attention (and found no basis for the claims). We have responded to hundreds of letters and articles, time that could have been better spent making an active difference.

In 2002, following Operation Defensive Shield, the IMA set up a committee comprising representatives of the entire political spectrum to grapple with difficult moral and ethical issues concerning the provision of medical and health services to the Palestinian population in the West Bank and Gaza Strip, and the apparent conflict between the security and defense needs of the State of Israel and the free and unhindered provision of these services. The committee met with representatives of the International Committee of the Red Cross, with representatives of the organization Physicians for Human Rights, with General Amos Gilad, the then coordinator of civilian activities in the territories, the Chief Medical Officer and a representative of the Chief Military Advocate. The committee drafted a 14 point paper that was then adopted by the IMA as its official position on the assurance of health services during armed conflict.6 The World Medical Association (WMA) and the European Forum of Medical Associations (EFMA) later adopted statements similar to that of the IMA.

The IMA also conducted, at the time, a course for medical officers in the Israel Defense Forces on human rights and medical ethics. More recently, we opened a hotline where physicians in any context could call to get ethical advice regarding morally questionable situations that might arise.

In addition, Israeli physicians have always been, and continue to be, active in health care and humanitarian aid. Israel regularly treats Palestinian patients in its hospitals, often absorbing the cost of doing so. Israeli doctors and humanitarian organizations make regular forays into the West Bank (and previously, into Gaza) in order to provide medical assistance to the population. In the recent Operation Cast Lead, Israel was fully prepared to accept any and all wounded Palestinians into its hospitals, and Magen David Adom (Israeli emergency services) even set up a field hospital on the border; however, the vast majority of Palestinians were not permitted by their leaders to take advantage of either option.

The responsibility of the Palestinian leadership for the current situation cannot be glossed over. Israel withdrew from the Gaza strip two years ago, in accordance with Palestinian

However, we believe they show no evidence of bias against Israel either in our selection of research articles or in our coverage of conflict zones over the past five years." However, another rapid response noted that Godlee had failed to use the word "Israel" as a search term and doing so would have produced far more results. Godlee noted that adding Israel as a search term would reduce the proportion of PubMed articles on the Israel-Palestinian conflict published in the BMJ from 5.7% to 2.3%.

⁴ http://www.thelancetglobalhealthnetwork.com/archives/611

⁵ http://www.natal.org.il/English/?CategoryID=244&ArticleID=282, accessed 19 March 2009

⁶ http://www.ima.org.il/EN/CategoryIn.asp?cat1=18&cat2=20&id=20&tbl=tblInternationalRelation2004&level=3.

wishes and at great economic and emotional expense to its own population, many of whom are without jobs, homes or stability to this day. In response, Hamas seized control of Gaza in 2007 and imposed a reign of terror, including torture and public executions of other Palestinians. They have reportedly stolen money and humanitarian aid⁷ meant for rehabilitation of infrastructure and the health and well being of their constituents. They have used homes, schools, ambulances⁸ and children⁹ as shields, and mosques as warehouses for ammunitions and as spots from which to launch missiles and rockets at Israeli cities. We have been witness in the past to terrorists using ambulances¹⁰ and medical clearances¹¹ to perpetuate terror, causing hardship to ill people who must then be delayed at roadblocks or subject to searches.

It is incumbent upon the Palestinian leadership to ensure the health care services of its population there. Nonetheless, in cases where necessary health care was unavailable in either Gaza or the West Bank, Israel has frequently taken it upon itself to provide these services, often at its own expense. According to data provided to us by the Coordination and Liaison Administration in Gaza, in 2008, 11,700 Palestinians and accompanying persons were given clearances for medical treatment in Israel. According to data provided to us by the Ministry of Health in 2004, Palestinian Authority debts to Israeli hospitals totaling NIS 36,645,507 (approximately 8,143,446 U.S. Dollars at the time) were forgiven that year. The IMA has intervened on occasions where a patient was about to be evicted from an Israeli hospital for lack of funds, and has petitioned the High Court of Justice in situations where Palestinian patients, physicians or medical students

 $\overline{^{7}}$ UN: Hamas stole from Gaza warehouse. *Jerusalem Post*, online edition 4 February 2009,

http://www.jpost.com/servlet/Satellite?pagename=JPost%2FJPArticle%2FShowFull&cid=1233304681684, accessed 23 March 2009, UNWRA suspends aid to Gaza after Hamas again steals supplies, Jerusalem Post online edition, 6 February 2009, http://www.jpost.com/servlet/Satellite?cid=1233304705842&pagename=JPost%2FJPArticle%2FShowFull, accessed 23 March 2009.

encountered difficulties at Israeli checkpoints. In one case, a joint IMA-PHR (Physicians for Human Rights-Israel) petition to the High Court of Justice regarding patients in need of life-saving treatment resulted in a settlement. In another, regarding an entry permit for an AIDS patient, the petition was dismissed when the Court found that there was a legitimate security interest in disallowing his entry.

Despite the inherent tension, the IMA has, at several points in the past, attempted to meet with its Palestinian counterparts in an effort to foster mutual cooperation and better understanding, including the release of a joint statement. Almost none of these meetings have taken place, because of refusal on the Palestinian side. Nonetheless, among the rank and file, such cooperation occurs on a regular basis. Israeli doctors learn and work side by side with their Arab colleagues, treating both Jewish and Arab patients, Israeli and Palestinian. (Sometimes these very same dedicated physicians meet their death at the hands of terrorists, leaving their Palestinian patients to wonder who will care for them.)

There are also numerous Israeli-Palestinian collaborative health care initiatives taking place at any time. The First International Congress on Chronic Disorders in Children was attended in Jerusalem in 2007 by 300 Israeli and 100 Palestinian doctors, and that same year the First Middle East Symposium on Dental Medicine represented a further expression of the relationship between the Hebrew University of Jerusalem and Al-Quds University. 12 Under the Israeli program "Save a Child's Heart," doctors at Wolfson Hospital repair congenital heart defects for children from the Palestinian territories, Iraq, Jordan and Africa; more than 1000 children, about half from the West Bank and Gaza, have been helped so far by the program. This sentiment of the medical field as a platform for cooperation has been echoed by those in the Arab world as well. 13

Israel and its institutions are not perfect, nor do we pretend to be. There is much to be done to improve the lot of Palestinians in the West Bank and Gaza. This is the common desire of most of civilized humanity in the Middle East. This will be accomplished by mutual initiatives, by the triumph over corruption, by financing and by the cessation of violence. It will not be accomplished on the pages of the *BMJ*.

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 $^{^{\}rm 8}$ See, e.g., "Hamas tried to hijack ambulances during Gaza war, The Sydney Morning Herald, 26 January 2009,

http://www.smh.com.au/news/world/hamas-tried-to-hijack-ambulances-during-gaza-war/2009/01/25/1232818246374.html?page=fullpage#contentSwap1.

⁹ See, e.g., http://www.mfa.gov.il/MFA/Terrorism-+Obstacle+to+Peace/ Hamas+war+against+Israel/Hamas+exploitation+of+civilians+as+huma n+shields+-+Photographic+evidence.htm.

¹⁰ See, e.g., http://www.youtube.com/watch?v=iCsMI-_vogk, http://www.mfa.gov.il/MFA/MFAArchive/2000_2009/2003/12/The+Palestinian+use+of+ambulances+and+medical+mate.htm, http://www.israelnews-agency.com/palestinianambulancesterrorism1009.html.

¹¹ One example is the 2005 case of Wafa al-Bas who took advantage of a humanitarian medical clearance granted to her by Israel to attempt a suicide bombing at Israel's Soroka University Medical Center, the very hospital in which she was hospitalized for over a month earlier that year while doctors worked to save her life after she was severely burned in an accident at home.

¹² See, e.g., http://video.aol.com/video-detail/first-middle-east-sympo-sium-on-dental-medicine/2328014292?icid=acvsv4, Israeli Palestinian partnership in dentistry, British Dental Journal 2007; 202: 7, Published online: 13 January 2007 | doi:10.1038/bdj.2007.6, http://www.nature.com/bdj/journal/v202/n1/full/bdj.2007.6.html

¹³ See, e.g., Can science transcend the Israeli-Palestinian conflict? 10 May 2002,

http://www.islamonline.net/servlet/Satellite?c=Article_C&cid=1158 321448327&pagename=Zone-English-HealthScience%2FHSELayout, accessed 23 March 2009.