September 26, 2019

Christine Laine, MD, MPH

Editor in Chief, Annals of Internal Medicine

Re:

Embargoed for release until 5:00 p.m. ET on Monday September 30 2019 Annals of Internal Medicine Tip Sheet

@Annalsofim

Below please find summaries of new articles that will be published in the next issue of *Annals of Internal Medicine*. The summaries are not intended to substitute for the full articles as a source of information.

1. New guidelines: No need to reduce red or processed meat consumption for good health A rigorous series of reviews of the evidence found little to no health benefits for reducing red or processed meat consumption

Dear Dr. Laine:

Those of us who wrote before appreciate your decision to revise the press release referenced above. We do note, respectfully, that we have yet to receive the revised releaseand if it was revised, but not re-issued to all original recipients, it is of no remedial value. We are unable to find a revised release.

We write now- a larger group, as indicated by the signatures below- to request and recommend that the Annals pre-emptively retract publication of these papers pending further review by your office. We do so on the basis of grave concerns about the potential for damage to public understanding, and public health.

In brief, we note that the allegedly "systematic" reviews in this cluster omitted prominent trials that appear to satisfy fully the stated inclusion criteria, PREDIMED and the Diabetes Prevention Program (DPP) among them. We note further that qualifying cohort studiessome by signatories below- were overlooked as well, again, for reasons inexplicable to us.

We note further that across the expanse of papers there is a consistent pattern in the data of net, statistically significant harm regarding all outcomes- mortality, cardiovascular disease, cancer, and diabetes- with higher intake of meat and processed meat. The "guidelines" slated for publication are thus at odds not only with the vast weight of prior evidence, much of it omitted from these "systematic" reviews- but at odds with the very data on which they claim to be based. That the authors contend "very low certainty" in their own findings is in no way a logical or even rational basis to recommend…the opposite. (If uncertain about what the data DO show, how much more so about what they

do NOT?) This is, simply, an overt misrepresentation. Such distortion is a direct threat to public understanding, and public health.

As your office likely already knows, several highly qualified peer reviewers recommended these papers be rejected based on the above concerns, along with others. We learned this as a byproduct of exchanging our concerns with one another. This may or may not be a process anomaly, but seems especially germane given the issues above, and the controversial public health guidance being promulgated.

Finally, please note that among the signatories below is one of the study authors- who along with the rest of us, disagrees with the conclusions and "guidance" being attributed to this body of work.

For the sake of public understanding and public health, we the undersigned call upon you to withhold publication of potentially damaging misinformation pending all due and appropriate review of the matter by your office.

Respectfully, and with appreciation –

David L. Katz, MD, MPH, FACP President, The True Health Initiative Founding Director, Yale University Prevention Research Center

Neal Barnard, MD, FACC President, Physicians Committee for Responsible Medicine

Richard Carmona, MD, MPH, FACS 17th Surgeon General of The United States Distinguished Professor, University of Arizona

Christopher Gardner, PhD Professor, Research Stanford University Prevention Research Center

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^{*}signatories added by request after the original submission of the letter