



*Or how to get the  
results you want from a  
trial provided you have  
no scruples at all*

Imagine you work for a pharmaceutical company who has a new drug. It was very expensive to develop, so lots of pressure to show it works & is safe

**Step this way to 'encourage' positive results....**





How many  
scruples  
can you  
lose  
today?!

INTEGRITY  
*is doing the*  
RIGHT THING  
—  
*even when*  
NO ONE IS  
WATCHING

# Gameshow questions

1. **What type of participants to should I use?**
2. What to give your control group (comparison drug)
3. When to stop your trial
4. Should you publish the results?
5. **What to do about drop-outs? People are probably getting side effects**
6. Would cleaning up your data help? What about outliers?
7. Use a different statistical test
8. The results are still looking bad for the new drug – what now?
9. **Where to publish?**



## 1. What type of participants to should I use?

- a. Random bunch of people
- b. Bunch of people most likely to respond well to the drug even if they aren't the ones it is aimed at e.g. young, healthy
- c. Bunch of old people (after all, they're cheap & have plenty of free time to do the study, don't worry about their polypharmacy and co-morbidities)
- d. Bunch of people who've already tried the regular treatment & failed to respond





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Now the trial is over – results are in.  
It's not looking good for the new drug,  
but do not despair – there are more tricks to try!



## 5. What to do about drop-outs? People are probably getting side effects:

- a. Ignore everyone who dropped out, only do per-protocol analyses (count those who were still there at the end)
- b. Think about mentioning drop outs if they were getting the comparison treatment as it makes that drug look bad – otherwise 'forget' them
- c. Carry out intention to treat analyses (do your stats based on the number you intended to treat) and acknowledge drop outs, also account for everyone who took part and their reasons for dropping out



## 9. Where to publish?

- a. The most prestigious, widely read, peer reviewed journal you can find (although they'll probably spot you mucked about with the data and will not publish. But then again, Andrew Wakefield.)
- b. The most obscure journal you can find, that way fewer people will read it (and lots of them won't read past the abstract...)
- c. Whack it on a pre-print server where nothing is peer reviewed. Then “forget” to submit the manuscript to an actual journal.



# Write for Northern Lights!

What about ...

your best bits from today / new services / old services evaluated / co-operative ventures / outreach into new departments / sessions you've run / INCdocs has changed your life / funny things your users have said....literally anything that you think might be of interest to fellow health library staff

And while you are thinking about that,  
why not join t'committee?

Northern Lights  
needs you!

On behalf of Northern Lights Editorial Group





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