ments received; and that later, the investigators should make the results freely available online, with no commentary. The scientific community would then analyse the results, to avoid the conflicts of interest that might influence the trial's investigators and sponsors (15).

Be sceptical

In practice, neither the reputation of a journal nor that of an author is a sufficient guarantee of the quality and reliability of published data. Published articles of all types (clinical trial results, review articles, commentaries) are sometimes just part of a publication plan serving a company's marketing strategy.

Who funds the journal? Who funded the article? Are the authors' conflicts of interest stated in the article? Is the method for evaluating and accepting articles explicitly stated and based on exacting criteria? Does the journal publish corrections and errata? Does the journal publish its annual financial report, specifying how much of its revenue comes from subscriptions and how much from advertising? These are all useful questions to ask yourself when assessing the reliability of a published document and choosing documentation on which to base patient care.

a- In an anonymous article published in the British Medical Journal in June 2012, a former pharmaceutical company employee related his/her experience with key opinion leaders: "In general, the relationship was amicable. We took them to the best hotels and restaurants during our advisory board meetings, and they appeared as authors in our research" (ref 17).

b- The six medical journals selected for this study were: Annals of Internal Medicine, JAMA, The Lancet, Nature Medicine, New England Journal of Medicine, and PLoS Medicine (ref 8).

c- The six medical journals selected for this study were: Annals of Internal Medicine, Archives of Internal Medicine, British Medical Journal, JAMA, The Lancet, and New England Journal of Medicine (ref 14).

d- The seven medical journals selected for this study were: British Medical Journal, Journal of Neurology, Neurosurgery and Psychiatry, Gut, Heart, The Lancet, The Lancet Neurology, and The Lancet Oncology (ref 16).

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Generic bashing: effective but illegal

In 2013, France's Competition Authority fined the drug company Sanofi for "denigrating" generic versions of Plavix° (*clopidogrel*), condemning it as an anticompetitive practice that is costly to society (1).

An organised campaign to discredit generics. In May 2013, the France's Competition Authority fined the pharmaceutical company Sanofi €40.6 million for having implemented a campaign in 2009-2010 to discredit competing generic versions of its drug Plavix° (*clopidogrel*). The company convinced healthcare professionals that competing generics were not equivalent to the originator because they use a different *clopidogrel* salt (a scientifically incorrect assertion), and that they were not approved for one of their drugs' indications (only because it is still under patent protection) (1). The purpose of these allegations was to protect sales of Plavix° and Sanofi's generic version, Clopidogrel Winthrop°, which is the only generic permitted to contain the same *clopidogrel* salt (for patent-related reasons) (1).

Healthcare professionals too easily convinced. Although full responsibility lay with the company, France's Competition Authority pointed out that healthcare professionals had been too easily taken in by the disinformation (our translations): "*The effect of these misleading arguments raised serious concerns among healthcare professionals, particularly since they already harboured a reluctant attitude towards generic drugs, mainly due to their lack of knowledge about marketing authorisation procedures, their poor grasp of the regulatory framework governing generic substitution, and their wish to protect themselves against the risk of civil or criminal legal action*" (1).

The campaign was often very effective in "*(…) convincing doctors to insert "non-substitutable" on the prescription [and] (…) encouraging pharmacists to replace Plavix° with its own generic, Clopidogrel Winthrop°, rather than competing generics*" (1).

Is France an exception? It is perhaps no surprise that a company is trying to undermine its competitors. But *Scrip*, an international journal that reports on the global pharmaceutical industry, condemned Sanofi's behaviour because it tarnishes the image of the entire industry, and expressed surprise that generic bashing was so "in vogue" in France (2).

It bears repeating, in light of the Mediator° disaster and now this incident, that healthcare professionals' initial and continuing education about drugs is still in need of improvement.

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