Dr. Harvey is a researcher and professor of child psychiatry at Northern University, an esteemed academic institution. Dr. Harvey is a very prestigious researcher. Dr. Harvey is paid $100,000 a year by Biopsychiatric Pharmaceuticals, Inc., a pharmaceutical company that makes the antidepressant Serovux. For this $100,000 a year, Dr. Harvey consults with the company and gives talks to medical doctors about Serovux.

Dr. Harvey recently participated in a study of Serovux for children. Dr. Harvey treated some of the patients in this study.

This study was written up by Biopsychiatric Pharmaceuticals, Inc., the company that makes Serovux. The marketing department did not want to list company employees as the only authors, because readers may notice that all of the authors work directly for the company that makes Serovux. So, Biopsychiatric Pharmaceuticals, Inc. sent Dr. Harvey a pre-written manuscript, authored by employees of the company, and asked Dr. Harvey to be listed as first author. Although he did not write the manuscript, Dr. Harvey agreed to be listed as the primary author of the study.

Dr. Harvey submitted the manuscript to a prominent medical journal, as if he had written it himself. The journal reviewed it and agreed to publish it.

Speaking at a press conference about the study, Dr. Harvey said:

“Childhood and adolescent depression is a major health problem, and we need to find effective treatments. So, we did a randomized trial of Serovux- the most rigorous kind of experiment you can do.

We took 200 depressed children, and we randomly prescribed them either Serovux or sugar pills (placebo). The sugar pills looked just like Serovux pills. Neither the children, the parents, or the doctors knew what the child was taking.

We followed the children for eight weeks, and then assessed the children several times. We did clinical interviews to see if they were still depressed, and if so, how severe it was. We used the Children’s Depression Rating Scale (C-DRS) which is a scientifically valid way of assessing depression in children.

We found that 62% of the children who were taking Serovux were rated as “much improved” or “very much improved,” compared to 34% of children taking placebo. 46% of children taking Serovux had complete remission of their depression, as did 21% of children taking placebo.

We found that side effects were rare- less than 10% of the children experienced any significant side effects.

We conclude that Serovux is a well-tolerated and effective treatment for child and adolescent depression.”