

Daniel Olmstead
Brian Deer

March 20, 2011
(via email only)

Dear Mr. Olmstead & Mr. Deer:

I have spoken with both of you regarding my son who may be one of the subjects in the Royal Free Hospital's "research study" on autism summarized in the 1998 Lancet article.

The main reason I am contacting you now is to reiterate to Mr. Olmstead that we wish for our family to stay out of the public eye, and request that in any further discussions of this matter our privacy and the confidentiality of our son's medical history be respected. We appreciate that in published work you, Mr. Deer, did that. My son has not consented to any disclosures regarding his medical history, and I hope that whatever information you disseminate will be shared in a manner that is not personally identifiable.

My second purpose in contacting both of you is to clear up some confusion, albeit generating additional questions which, as I explain below, I do not think are worth pursuing. Mr. Olmstead informed me that he believes that my son is Patient 11 in the Lancet article, a conclusion he seems to have reached due to a violation of doctor patient confidentiality by Dr F. Given Dr. F's distance, so far as I know, from these events, and his current state, it is hard to know what to make of this purported information. Mr. Deer's article appears to assume that my son is Patient 11 as well, describing conversations with a father of "Patient 11" that appears to be me. However, we have no confirmation that Patient 11 is my son. When we got information during the Royal Free's investigation, we were told he was Patient 13. Only 12 patients are reported in the Lancet article. I have no way of knowing how many subjects were excluded from the final report, or whether my son was one of them.

In any event, the description of Patient 11 in the Lancet article is not accurate if, in fact, it refers to my son. The Lancet article indicates that autistic symptoms started at 15 months, a week after the MMR, which is completely inaccurate; my son's autistic behaviors started 2-1/2 to 3 months after the MMR, which was administered to him at 15 months. The Lancet article is a clear misrepresentation of my son's history. Moreover, the Lancet article is not consistent with the Royal Free's discharge summary regarding my son, and both the article and the discharge summary are inaccurate. One of the incorrect statements in my son's discharge report was that autistic symptoms were seen from 13-18 months, while the vaccination was at 15 months. This is clearly inaccurate as his symptoms began several months after the MMR, as reflected in my initial correspondence to the Royal Free requesting my son be included in the research study. Based on the incorrect discharge summary I shared with him, Mr. Deer reasonably inferred that my son's autistic symptoms predated his receipt of the MMR vaccination, which they did not. Mr. Deer's article makes me appear irrational for continuing to believe that the MMR caused difficulties which predated its administration, but until the incorrect dates in the discharge summary were pointed out to me this week, I failed to realize that the discharge summary was inaccurate. While the inaccuracies in the Royal Free discharge summary may be chalked up to sloppy record keeping, if my son really is Patient 11, then the Lancet article is simply an outright

fabrication. My son's autistic behaviors did NOT begin a week after administration of the vaccine, in fact they began several months afterwards, with several medical complications occurring in between.

The bottom line is that, if my son is indeed Patient 11, then the Lancet article made a false assertion that his symptoms set in immediately after the MMR; in service of some attorneys' efforts to prove "causation" that, unbeknownst to me, apparently drove this research. If the sloppy mishandling of patient information and inaccuracies in my own son's records is any indication of how that research was done, then I am very thankful that the Lancet article has been withdrawn and the "research study" discredited. That brings me to my third reason for contacting you, which is to express my hope that we can all move on from this debacle and search for real causes of the current explosion in autism cases. I have been involved in and have supported serious research into the causes of and effective treatments for this illness. We know now that the study reported in the Lancet article was a huge and very costly distraction. I hope that you will join me in looking, with an open mind, at real explanations of the current situation, as well as in advocating for adequate medical care and educational services for the many people affected, so that outcomes can be positive, as they are now proving for my son. While some autism may be a natural part of the human condition, what is happening now requires explanation. We will not get it if we spend time rehashing old debates.

As for the confidentiality issues, I appreciate and rely on your courtesy and discretion.

