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Critique • Post-Publication Review • Journal Editing • Research Methodology • Medical Education

## Educational Errors in "Effect of Vitamin D and Omega-3 Fatty Acid Supplementation on Kidney Function in Patients with Type 2 Diabetes" published in JAMA 2019

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### Context

Major medical journals publish bogus pro-drug and anti-nutrition research in order to 1) groom medical audiences for pharmaceutical purchases, 2) defend and please their pharmaceutical advertisers (who—in addition to spending hundreds of millions of dollars on advertising—commonly purchase article reprints for millions of dollars/\$, euros/€, pounds/£<sup>1</sup>), 3) maintain the financial and sociopolitical dominance of the medical profession, 4) deter the general public from seeking and using nonmedical treatments, and 5) misinform politicians and policymakers so that laws, public funds, policies, and research monies will be directed in favor of the medical profession, including medical schools (that produce consecutive generations of pharmaceutically indoctrinated and nutritionally illiterate clones) and drug researchers who use public funds to create privatized drugs that escalate profit of the pharmaceutical industry. While such has always been the inherent bias of the medical publishing industry, some of us noted a new wave of remarkable exacerbations of this bias including overt deceptions and ethical departures published in the biomedical research starting in 2018.<sup>2,3</sup> The cyclical-reciprocal feeding of misinformation from medical journals and drug companies to medical students, physicians, policymakers, the media (e.g., television, magazines, and newspapers—all of which receive millions of \$/€/£ in drug company advertising) creates the pro-pharma “echo chamber” which—when *repetition* becomes *consensus* becomes *practice* becomes *sales* becomes *profit for bribing politicians to write pro-*

*pharma laws forcing the population to receive mandatory drugs*<sup>4</sup>—becomes the pro-pharma “power vortex” with each aspect reinforcing the other, ultimately leading to medical profiteering, political dominance, censorship of information, blockade of criticism, and restriction of free speech, including banning of books, blockade of documentary films, censorship of individuals, and aggressive and structured attacks against medical professionals to “destroy, neutralize, discredit” them.<sup>5</sup>

Headline-making newspapers, magazines, and television programs re-publish pro-drug information to the delight of their drug advertisers. Positive news about drugs and vaccines is headlined and featured, while actionable information about nutrition is unavailable or tainted with controversy. Medicine-positive television features “medical heroes” reinforcing medical authority, medical dependency, and the drugs-as-salvation paradigms. News stories highlighting fear of infectious diseases serve to maintain constant fear, medical dependency, and xenophobia (eg, “Africanized” bees, Zika, El Niño, Asian flu, Xenophobia: Ebola Stigma, Discrimination for Africans Associated with Disease. *Time Magazine* October 29, 2014). Many of these stories are revealed as lies after they have served their political purposes. *PolitifACT* named the panicked US response to Ebola as the 2014 “Lie of the Year”. *Time Magazine* Dec 15, 2014

Medical journals/organizations publish pro-drug research which becomes paid advertising when the drug companies buy reprints or direct advertising for millions of dollars (Smith. *PLoS Medicine* 2005)

Drug companies infiltrate media, television shows, education, and public policy. Defunding public science forces schools and journals to rely on pharma funding.

Drug companies pay “researchers”, professors, and editors to publish and teach information favorable to the drug paradigm and products. Medical schools love to receive funding from drug companies. Medical students and doctors are kept insanely busy, exhausted, suicidally depressed/stressed, and fearfully compliant, anyone who questions the drug paradigm, especially vaccines, is a target for censure, expulsion. US medical physicians have the highest rates of suicide. Physicians Experience Highest Suicide Rate of Any Profession. *Medscape* May 07, 2018

Science and popular media become an echo chamber of biased pro-drug propaganda. Drug companies pay US politicians to promote pro-drug laws (eg, mandatory vaccinations), protect drug companies from liability (eg, National Childhood Vaccine Injury Act of 1986), and promote international expansion of US drugs. US politicians gag and censor free speech on topics related to medical dangers by pressuring bookstores and social media to burn books and ban documentary films.

Anti-vaccine movies disappear from Amazon after CNN Business report. *CNN Business*, March 1, 2019. Drug companies become more profitable and therefore more powerful than governments. Drug companies utilize US political and military power by influencing international trade agreements, eg, enforcing mandatory drug/vaccine policies, dismantling consumer protections, replicating US’s healthcare bureaucracy, expense, risk; note the Orwellian description of vaccines as “weapons of mass protection” (Milstien et al. *Health Affairs* 2006) and the deployment of military forces under the banner of humanitarian health aid (National armies for global health? *Lancet* 2014 Oct 25)<sup>6</sup>

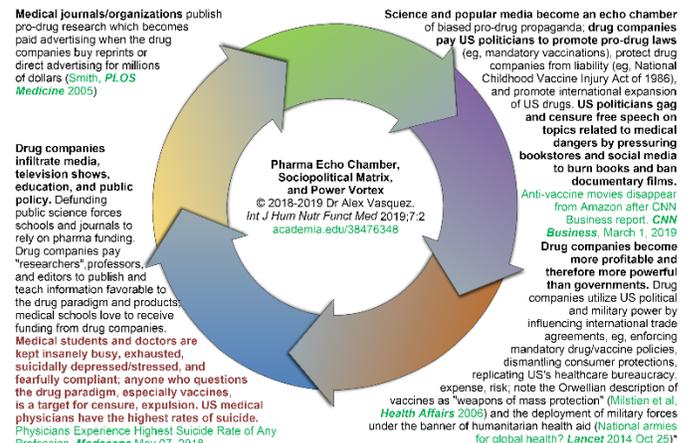


Illustration from: Pharma Echo Chamber, Sociopolitical Matrix, and Power Vortex. *IJHNF* 2019 [academia.edu/38476348](http://academia.edu/38476348) See also<sup>2,3</sup>

### Critique en breve

On November 8 of 2019, *JAMA—Journal of the American Medical Association* published “Effect of

Vitamin D and Omega-3 Fatty Acid Supplementation on Kidney Function in Patients With Type 2 Diabetes” (doi:10.1001/jama.2019.17380); this is yet another pathetic “nutrition study” which was so poorly designed and misrepresentative of the practice of clinical nutrition that it was sure to provide the desired “negative” results for *JAMA*’s medical audience and the resulting headlining news distributed to millions of professionals, policymakers, and patients. As a matter of course, the story was rapidly echoed by pro-pharma *Medscape* (and numerous other medial magazines) in the expected uniformed and adolescent commentary.<sup>6</sup> My initial critiques of this publication are as follows

1. **Authors and Editors failed integrate previous data:** In order for science to advance and avoid repeating the same errors and wasting misappropriated effort (i.e., repeatedly *recreating the wheel in the age of air and space travel*), research authors and journal editors have the responsibility to competently maintain awareness of the current *state of the art* so that research and publications reflect advancement in the field. Clearly in the case of this publication, neither the authors nor the editors represented the current state of the art in nutritional management the conditions discussed herein.<sup>7</sup> The numerous nutritional interventions previously shown to provide positive benefit for this condition were ignored in this publication to support what appears to have been the predetermined conclusion and goal.
2. **Nobody really thinks this would work:** This investigation was mostly a wild goose chase, a strawman fallacy. No Naturopathic or Clinical Nutrition student would intervene in such a complex condition as diabetes with pending renal insufficiency by *solely* using *underdosed* fish oil and *underdosed* vitamin D; as such this intervention represents clinical incompetence more so than the competent clinical practice of Nutrition and any of its related variants (e.g., Functional Medicine, Naturopathic Medicine, Functional Inflammology, etc).
3. **The investigators used inadequate doses of both nutrients in order to ensure failure of the intervention:** The authors used <50% of the proper dose of vitamin D for healthy patients<sup>8,9</sup>, let alone a proper dose for diabetic patients which is more commonly in the range of 10,000 IU per day.<sup>10,11</sup> The authors used 44% of the proper dose of EPA+DHA; obviously, under-dosing the treatments is expected to lead to lackluster results and *much ado about nothing*.
4. **The investigators intentionally hid the identity of the placebo so that readers would not know what really happened:** The authors failed to provide the identity of the “placebo” so that doctors and policymakers would not know that they used olive oil as the placebo in order to undercut the perception of

any clinical benefit; olive oil is one of the most potent antiinflammatory and cardioprotective oils known to biomedical science. Using olive oil as a “placebo” is inappropriate in an intervention testing the efficacy of a cardioprotective and renoprotective intervention.

5. **This study does not represent the modern practice of Clinical Nutrition:** Half-baked ideas presented as reasonable intervention are still half-baked ideas; this study is inappropriate in its design, implementation, and reporting. This study does nothing to inform the practice of Medicine, and—in fact by misrepresenting a flawed study as a legitimate study—this publication simply misleads healthcare professionals, policymakers, and the general public.
6. **As expected, this low-quality research was repeated throughout the pro-pharma echo chamber:** The inaccurate summary of this meaningless publication resounded via various pro-medical and pro-drug websites internationally. The commentary published by *Medscape* concluded, “This was a high quality trial that tells us that we don’t need to focus our energies here [on using vitamin D and fish oil]. Only a novice or ignoramus would consider this “a high quality [sic] trial” and describing it as such does more than mislead the reader about this particular topic but also by extension about the very nature of clinical research, ethics, and investigational study design.

**“A red herring is something that misleads or distracts from a relevant or important question. It may be either a logical fallacy or a literary device that leads readers or audiences toward a false conclusion.”** from *Wikipedia*

### Conclusion

This publication “Effect of Vitamin D and Omega-3 Fatty Acid Supplementation on Kidney Function in Patients with Type 2 Diabetes” published in *JAMA* 2019 is a disservice to physicians, policymakers, and patients and should be retracted from the biomedical record. This investigation intentionally underdosed both interventions, withheld the identity of the placebo, and attempted to apply these interventions in an inappropriate manner that was unlikely to benefit patients and was nearly ensured to produce negative results which would then be inappropriately generalized in news and other media outlets; as such this publication is a *red herring*—a *piece of information which is or is intended to be misleading or distracting*. Journal editors and trial authors should consult with legitimate nutrition experts prior to the design and publication of research outside their scope of training, knowledge, and experience. ❌

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## **About the author and presenter: Alex Kennerly Vasquez DO ND DC (USA), Fellow of the American College of Nutrition (FACN), Overseas Fellow of the Royal Society of Medicine:**

An award-winning clinician-scholar and founding Program Director of the world's first fully-accredited university-based graduate program in Human Nutrition and Functional Medicine, Dr Alex Vasquez is recognized internationally for his high intellectual and academic standards and for his expertise spanning and interconnecting many topics in medicine and nutrition. Dr Vasquez holds three doctoral degrees as a graduate of University of Western States (Doctor of Chiropractic, 1996), Bastyr University (Doctor of Naturopathic Medicine, 1999), and University of North Texas Health Science Center, Texas College of Osteopathic Medicine (Doctor of Osteopathic Medicine, 2010). Dr Vasquez has completed hundreds of hours of post-graduate and continuing education in subjects including Obstetrics, Pediatrics, Basic and Advanced Disaster Life Support, Nutrition and Functional Medicine; while in the final year of medical school, Dr Vasquez completed a Pre-Doctoral Research Fellowship in Complementary and Alternative Medicine Research hosted by the US National Institutes of Health (NIH). Dr Vasquez is the author of many textbooks, including *Integrative Orthopedics* (2004, 2007 2012), *Functional Medicine Rheumatology* (Third Edition, 2014), *Musculoskeletal Pain: Expanded Clinical Strategies* (commissioned and published by Institute for Functional Medicine, 2008), *Chiropractic and Naturopathic Mastery of Common Clinical Disorders* (2009), *Integrative Medicine and Functional Medicine for Chronic Hypertension* (2011), *Brain Inflammation in Migraine and Fibromyalgia* (2016), *Mitochondrial Nutrition and Endoplasmic Reticulum Stress in Primary Care, 2<sup>nd</sup> Edition* (2014), *Antiviral Strategies and Immune Nutrition* (2014), *Mastering mTOR* (2015), *Autism, Dysbiosis, and the Gut-Brain Axis* (2017) and the 1200-page *Inflammation Mastery 4<sup>th</sup> Edition* (2016) also published as a two-volume set titled *Textbook of Clinical Nutrition and Functional Medicine*. "DrV" has also written approximately 100 letters and articles for professional magazines and medical journals such as *TheLancet.com*, *British Medical Journal* (BMJ), *Annals of Pharmacotherapy*, *Nutritional Perspectives*, *Journal of Manipulative and Physiological Therapeutics* (JMPT), *Journal of the American Medical Association* (JAMA), *Original Internist*, *Integrative Medicine*, *Holistic Primary Care*, *Alternative Therapies in Health and Medicine*, *Journal of the American Osteopathic Association* (JAOA), *Dynamic Chiropractic*, *Journal of Clinical Endocrinology and Metabolism*, *Current Asthma and Allergy Reports*, *Complementary Therapies in Clinical Practice*, *Nature Reviews Rheumatology*, *Annals of the New York Academy of Sciences*, and *Arthritis & Rheumatism*, the Official Journal of the American College of Rheumatology. Dr Vasquez lectures internationally to healthcare professionals and has a consulting practice and service for doctors and patients. DrV has served as a consultant, product designer, writer and lecturer for Biotics Research Corporation since 2004. Having served on the Review Boards for *Journal of Pain Research*, *Autoimmune Diseases*, *PLOS One*, *Alternative Therapies in Health and Medicine*, *Neuropeptides*, *International Journal of Clinical Medicine*, *Journal of Inflammation Research*, *BMC Complementary and Alternative Medicine* (all PubMed/Medline indexed), *Integrated Blood Pressure Control*, *Journal of Biological Physics and Chemistry*, and *Journal of Naturopathic Medicine* and as the founding Editor of *Naturopathy Digest*, Dr Vasquez is currently the [Editor \(2013-\) of International Journal of Human Nutrition and Functional Medicine](#) and [Editor \(2018-present\) of Journal of Orthomolecular Medicine](#), published for more than 50 consecutive years by the International Society for Orthomolecular Medicine.