

Professor Simon Wessely says he is misunderstood

Margaret Williams 27th November 2012

On his up-dated website ("Misunderstandings and Misperceptions" <http://www.simonwessely.com/misund.html>) Simon Wessely writes about the BMJ 2002 poll of "non-diseases" and states: *"I had nothing to do with the poll or choice of subject, nor did I suggest ME or CFS as a non disease"*. It was, however, commonly understood at the time from sources close to him that he was involved with the BMJ poll and, given his own record, it may not be unreasonable to believe that he was involved with it.

He certainly wrote in support of the poll (BMJ 27th February 2002): *"The BMJ's decision to extend participatory democracy to the question of disease – legitimate or otherwise, is important not so much for the results (which along with bags under the eyes, freckles, big ears and gap teeth, included ME/CFS in the BMJ's list of suggested non-diseases best left medically untreated) but because it happened at all"*.

Wessely went on to discuss: *"how professions control and define their authority"*, asking *"why the outrage exhibited by so many of the correspondents?"*.

He continued: *"I suspect it comes from a failure to recognise different concepts of illness and disease....Let us take the example of chronic fatigue syndrome...Few now could question that CFS is indeed an illness....But is it a disease?...Is CFS a disease?...Not yet....Previously apparently sound entities lose their disease status under the cold light of scientific scrutiny....Crudely handled, medicalisation can perpetuate disability"*.

On 17th June 2002 The Times (online) published an article quoting Wessely: *"Many of the conditions recognised today were unheard of in the past, from allergies to chronic fatigue syndrome. 'People are increasingly likely to see their symptoms as representing some potentially serious and certainly biomedical process' says Wessely, who believes that this can be misleading at best and dangerous at worst"*.

From the above, it is difficult not to conclude that Wessely agreed with the poll's findings in relation to ME/CFS, especially as he is on record as arguing that ME is merely *"a believ"* that one has a

disease called ME and that it is “*part of the world of myth*” (9th Eliot Slater Memorial Lecture, 12th May 1994).

In an article in the Independent in Sunday calling for him to be stripped of the inaugural John Maddox Prize (ME: bitterest row yet in long saga; 25th November 2012), Wessely stated: “*I have never said that CFS is all in the mind. I do not believe that, and have never written that*”.

Given this clarification from Wessely himself, it is curious that Wessely gave the keynote lecture at “The International Congress on Somatisation Disorders – New Approaches and Treatment” in Marburg, Germany held on 21-24 February 2002, and that his lecture (on 23rd February 2002) was entitled “The chronic fatigue syndrome and the ‘S word’”. The definition of somatoform disorder is “emotional distress experienced as physical symptoms”. At that same congress, on 21st February 2002 Professor Michael Sharpe spoke on “Management of somatoform syndromes in primary care”, describing them as “*somatic symptoms without evidence of disease*”.

It is even more curious that on 10th April 2002, in written answers to questions put to him by Trevor Wainwright (one being why he classified (ME)CFS as a somatoform disorder when ICD-10 classifies it as a neurological disorder), Wessely wrote: “*I don’t classify CFS as a somatoform disorder*”.

Certainly Wessely’s colleagues are on record stating that Wessely regards ME/CFS as “*somatisation par excellence*” (J Psychosom Res 1994:38:2:89-98).

It will be remembered that the original PACE Trial CBT Manual for Therapists of June 2002 (of which Wessely was a co-author) says: “*CBT is based on a cognitive behavioural model of CFS. According to the model the symptoms and disability of CFS are perpetuated predominantly by dysfunctional illness beliefs and coping behaviours. These beliefs and behaviours interact with the patient’s emotional and physiological state and interpersonal situation to form self-perpetuating vicious circles of fatigue and disability*”.

It would be hard to find a better description of a somatoform disorder.

In answer to another question posed by Trevor Wainwright (“How do you manage to manipulate the broadsheet press to perpetuate your views even when the Chief Medical Officer won’t support

(them)?”, Wessely said: *“What a question... The real scandal is that most of the coverage of CFS/ME is the usual junk science and exaggerated claims made by people with financial interests”*.

On 19th December 2002 one internationally known psychiatrist wrote about Wessely’s discrepant statements about the same issue: *“Considering the thrust of his views there seems to me to be deception hiding behind semantics”* (personal communication).

Who could argue with that?