

women, advised by their doctors, began using HRT for longer because of claims of these and other extra benefits. However, the basis of these claims was very shaky.

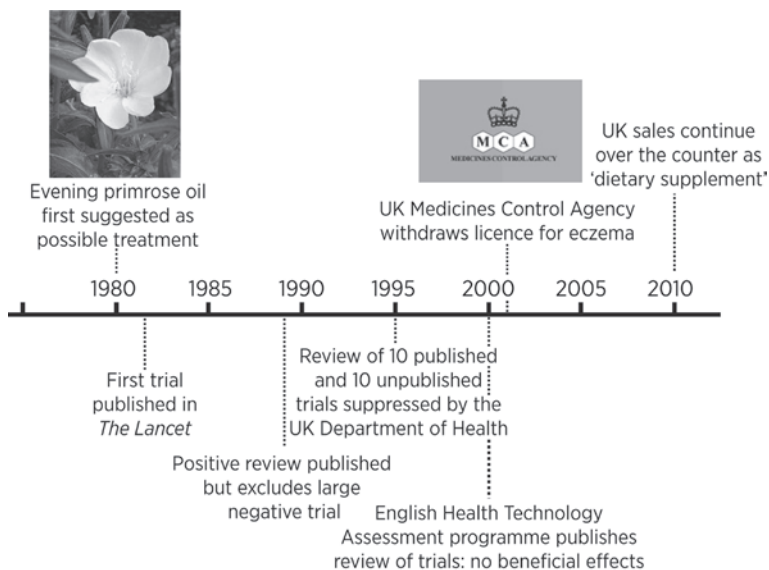
Take heart attacks alone. For over 20 years, women were told that HRT would reduce their risk of this serious condition – in fact the advice was based on the results of biased (unfair) studies (see Chapter 1 and Chapter 6). Then, in 1997, there was a warning that the advice might be wrong: researchers from Finland and the UK reviewed, systematically, the results of well-conducted studies.⁸ They found that, far from reducing heart disease, HRT might actually increase it. Some prominent commentators dismissed this conclusion, but its tentative result has now been confirmed by two large well-conducted trials. Had the effects of HRT been assessed properly when it was first introduced, women would not have been misinformed and many of them would not have died prematurely. To make matters worse, we now know that HRT increases the risk of stroke and of developing breast cancer.⁹

Overall, HRT continues to be a valuable treatment for women with menopausal symptoms.¹⁰ However, it is tragic that it was so heavily promoted specifically as a way of reducing heart attacks and stroke. Although the increased chance of these serious conditions is modest, the total number of women affected is very large indeed because HRT has been so widely prescribed.

EVENING PRIMROSE OIL FOR ECZEMA

Even if inadequately assessed treatments do not kill or harm, they can waste money. Eczema is a distressing skin complaint affecting both children and adults. The skin lesions are both unsightly and very itchy. Although the use of steroid creams helps in this condition, there were concerns about the side-effects of these treatments, such as thinning of the skin. In the early 1980s a natural plant oil extract – evening primrose oil – emerged as a possible alternative with few side-effects.¹¹ Evening primrose oil contains an essential fatty acid called gamma-linolenic acid (GLA) and there were plausible reasons for using it. One suggestion, for example, was that the way in which GLA was transformed within

2 HOPED-FOR EFFECTS THAT DON'T MATERIALIZE



Timeline for evidence about and use of evening primrose oil in eczema.

the body (metabolized) was impaired in patients with eczema. So, theoretically, giving GLA supplements should help. Borage oil, also known as starflower oil, contains even higher amounts of GLA and this was also recommended for eczema.

GLA was believed to be safe but was it effective? Numerous studies were done to find out but they gave conflicting results. And the published evidence was heavily influenced by studies sponsored by the companies making the supplements. In 1995, the Department of Health in the UK requested researchers unconnected with the manufacturers of evening primrose oil to review 20 published and unpublished studies. No evidence of benefit was found. The Department never made the report public because the manufacturers of the drug objected. But five years later another systematic review of both evening primrose oil and borage oil by the same researchers – this time it was published – showed that in the largest and most complete studies there was no convincing evidence that these treatments worked.¹²

There was one unturned stone – perhaps GLA only worked in very high doses. In 2003, even this claim was knocked on

the head by a carefully conducted fair test.¹³ Ironically, by the time these results were published, the UK Medicines Control Agency (MCA, which subsequently became the Medicines and Healthcare products Regulatory Agency, MHRA) had finally, in October 2002, withdrawn the product licences for two major evening primrose oil preparations because there was no evidence that they worked.

Nevertheless, since no concerns were expressed about the safety of evening primrose oil, it is still widely available over the counter as a 'dietary supplement' for various conditions. Regarding its use for eczema, claims of effectiveness are couched in vague terms such as 'people with eczema may find relief', 'may be helpful' and 'has certain medicinal properties that may act as an anti-inflammatory for conditions such as eczema'.

KEY POINTS

- Neither theory nor professional opinion is a reliable guide to safe, effective treatments
- Just because a treatment is 'established' does not mean it does more good than harm
- Even if patients do not suffer from inadequately tested treatments, using them can waste individual and community resources