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Confession of a climate criminal

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Dear editor—I have just received this letter from a friend. It has serious implications for doctors and I think your readers would be interested in it.

Yours faithfully, Ian Roberts

Dear Ian—next week I am going to turn myself in. I have been on the run for years, flying in the face of reason, but it is just too exhausting. The charges against me include crimes against the planet and two counts of theft. But if I go down for this the medical profession is coming with me. They are saying I am a climate criminal and that for the past five years I have consumed unsustainably large amounts of air travel, pumping into the atmosphere tonnes of carbon dioxide that will continue to warm the planet for more than a century. In the past year I have flown to conferences in Auckland, Tokyo, Milan, and Rome. The charges are serious. According to a report by the World Health Organization my actions have contributed to the deaths of some 150 000 people, mostly in developing countries. What is worse, they have found out that all this air travel was paid for by the public.

It is not as if I am the only doctor who has used more than his fair share of the atmosphere

It is not as if I am the only doctor who has used more than his fair share of the atmosphere. There are thousands of international medical conferences each year. It is not surprising that air travel is the fastest growing source of greenhouse gas emissions with total aviation fuel use projected to increase by around 3% each year. And yes, because aviation emissions occur at altitude, they have around twice the climate impact than the same emissions made at ground level.

My solicitor is going to argue that continuing medical education is essential for patient care and hope that the prosecution have not seen the research evidence showing that conferences are practically useless in terms of improving professional practice. According to the medical education boffins, there are far more effective educational methods than attending conferences. So why did I bother going? Medical conferences are fun. You get to meet your mates, you stay in the best hotels, you get wined and dined, and it costs you zip.

Who pays? Medical conferences are trade fairs for the drug industry. The speakers are paid for by the pharma companies. They decide who talks and what they talk about. Between the talks the delegates wander around the various drug company stalls picking up free pens, compact disc players, and other promotional gizmos. Some of the regular attendees do pay out of their own pockets although many of these are funded by drug company money. Nearly all will have paid leave to attend. It is the general public that pays in the end—either directly, because while at conference the docs are not on the front line, or else through higher pharmaceuticals prices to the health services.

We will argue that it is not nearly that bad and that some speakers do disclose industry connections at the end of their talks. Granted, this is after the audience has been exposed to 20 minutes of company propaganda aimed at influencing their prescribing habits. As you know, last year I worked on a clinical trial of a treatment for trauma. The marketing manager asked if I would present the results at international conferences if they were good for the company. Sure, I said, but what if the results are not good for the company? You're on your own, he said.

This is a first offence and my solicitor says that if I am lucky I might get off with a fine. Apparently there are companies out there that estimate how much carbon dioxide is emitted from your air travel and then bill you for the costs of the energy efficiency measures that would be needed to make up that amount. Something called carbon offsetting. Other companies use the fines to plant trees, which take in carbon dioxide while they are growing. The prosecution, though, will go for a custodial sentence, I am sure, arguing that if every climate criminal was fined we would need forests covering four times the size of the United Kingdom to absorb the emissions. No, I will probably go down for this one, and if the media get hold of it then the medical profession will have to start answering some rather difficult questions too.

Best wishes Bill

Dr B A Miles consultant in intensively priced medicine

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