



Reviews Personal views

My life as a guinea pig

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Kate Mandeville, final year medical student (kate.mandeville@imperial.ac.uk)

Imperial College London

Last week six young men taking part in a phase I trial in London became severely ill after being given a new drug. At least one of the volunteers who ended up in the intensive care unit at Northwick Park Hospital was using the money to pay off debts, press reports said. People in need of extra cash see medical trials as easy money. Medical students, with six years in which to build up debt, find the prospect of a large lump sum alluring. We are also considered excellent trial participants: we are young and healthy, in one place for a long time, and are not scared of hospital environments. Studies are usually advertised on hospital notice boards. They are also advertised in newspapers, with lines such as “make money in comfortable surroundings.” After all, this is not work: you just have a few injections. Word spreads quickly among friends. People tip each other off with comments such as, “You’re a right handed male. Go for this one. It’s great money.”

For about the same wage, trial participation is considerably more interesting than a supermarket job

I have completed 16 studies over my years as a medical student, ranging from a one-off chest radiograph to a multipart trial over several months. I have regressed to childhood under hypnosis, had numerous electroencephalograms, and been told that I have a lovely gastrooesophageal junction.

But when I coughed up blood for the fourth time one morning, I thought: “Why am I doing this to myself?” I had just finished undergoing my first bronchoscopy, as part of a study looking into the effects of the cold virus on people with asthma. For three bronchoscopies and a nasty cold I would receive £500.

However, I dropped out of this study after the first bronchoscopy. I took longer than the expected one day to recover from it, and for a week I couldn’t run without wheezing. I felt that the money offered to me didn’t compensate for three weeks of feeling awful. The doctor running the unit was understanding and did not push me into completing the study. But I still hate the fact that I ended up as the “drop out” in their statistics and feel guilty about the time put into my work up. Would I do another trial with invasive procedures again? Maybe, but next time I would make sure I fully weighed up the benefits of the money against the potential side effects before deciding to take part.

Compensation is only for time and inconvenience, and at my university payments are capped, so that no one is tempted into studies through financial hardship. If you include time spent on travel and

baseline tests, a large trial might work out at only about £5 to £10 an hour. But for about the same wage, trial participation is considerably more interesting than a supermarket job. It is never monotonous, can be written off as revision time near exam periods, and still conveys a sense of wonder about the science. Also, undergoing many of the investigations that I may have to describe to future patients is probably not a bad thing. However, it is well known among medical students that the really good money is to be found in the drug trials run by independent units.

I have never participated in a drug trial. The unknown side effects of an untested product in my body were past the limits even of my entrepreneurial spirit. But thousands of people have bronchoscopies every year. The major complications have occurred enough times that their risk can actually be quantified. The extremely small risk of a perforation during bronchoscopy was one I could objectively weigh up before deciding to take part in that study. However, I would not test the HIV vaccine I saw advertised. The theoretical risk of a new HIV vaccine reverting to wild type is one that I would not be prepared to take.

One of my medical student friends took part in a drug trial for a vaccine against the human papillomavirus. The success of the trial may result in many women being protected from cervical cancer. She entered the trial from a purely altruistic motive, and for her the payment was just a bonus. She is proud that a trial she participated in has yielded such worthwhile results and, despite the potential risk to her health, would consider taking part in another trial. Indeed, many patients have benefited from the volunteers' readiness to take on risk.

From August I will finally be earning a salary, and my career as a serial trial participant will come to an end. And not before time, as my body probably needs a rest from invasive procedures—although, when I told my respiratory consultant, he haughtily informed me that in his day as a student he underwent 29 bronchoscopies for a single study, all without sedative. Perhaps medical students aren't the experimental subjects they used to be. (See News, [p 683](#).)

Footnotes

- *We welcome submissions for the personal view section. These should be no more than 850 words and should be sent electronically via our website. For information on how to submit a personal view online, see <http://bmj.com/cgi/content/full/325/7360/DC1/1>*