

A Personal Statement from Dr Charles Shepherd

October 1st 2005

On Thursday 29th September I made a written statement to the police regarding the relentless series of highly personal attacks that have been made on the oneclick website concerning both my personal life and my professional conduct as a physician. These attacks have become obsessive and highly offensive. They also contain a considerable number of accusations which are both defamatory and untrue. Overall, they now constitute a completely unacceptable level of personal harassment and are clearly designed to violate human dignity.

The offensive material is sent, unsolicited, to the person under attack - even though the UK Privacy and Electronic Communications Regulations state that organisations must not send unsolicited emails to individuals without their consent. It is also sent, unsolicited, to all kinds of other people who may, or may not, believe what is being said.

The oneclick website is under the control of a Ms Jane Bryant (Public Relations consultant) and Dr Angela Kennedy (Lecturer in Sociology at the Open University). There is no right of reply given to people whose professional reputations are repeatedly attacked and undermined on the site. And it is an almost impossible task to obtain the removal of offensive or untrue allegations. Requests to do so in my own case - which now amount to a considerable number of email communications with both Ms Bryant and Dr Kennedy since the start of the year - are simply met with the accusation that I am harassing the people who are actually harassing me.

My decision to make a statement to the police has been taken reluctantly. However, these unprovoked attacks have now gone on for over a year. I have therefore reached the point where I am no longer willing to tolerate this sort of activity. My most recent attempt to have a highly offensive posting removed, which claims that I have a 'psychotic' illness, am 'physically violent', and a 'medical failure' was met with complete refusal and followed up with a nasty attempt to satirise my continuing disabilities that have resulted from a chickenpox encephalitis.

And as readers of the oneclick site will be aware, I am not the only person to come to the conclusion that the only way to deal with this matter is to take some form of legal action.

Freedom of speech is, of course, a vital part of any democratic society and I have no problem with people who wish to engage in constructive criticism in what is a very difficult and uncertain area of medicine. What is not acceptable is turning these criticisms into relentless personal abuse on a public access website, denying any right of reply, and then simply refusing to withdraw highly offensive accusations when it is clear that they are just not true.

This is a personal statement and I do not intend to use it to produce a long list of accusations that I want to see removed from the site or the archives. However, I would like to make it perfectly clear to anyone who has read some of this abuse that:

1 I qualified as a doctor nearly thirty years ago. I care deeply about my patients. I am one of

the few doctors who is still willing to be available day and evening 7 days a week if a patient needs to speak to me. During the past thirty years I have never received a single complaint about the way in which I have treated any of my patients. And neither has the General Medical Council.

2 I have no current or past history of psychotic or mental illness. If Ms Bryant and Dr Kennedy believe this to be the case, then they should send their concerns about my fitness to practice medicine to the General Medical Council. This type of inaccurate and highly damaging claim about a person's health should not be placed on a public website.

3 I am not a 'physically abusive' person and have never carried out, or been charged with, any kind of physical assault. I do not have a criminal record. Unless someone has been charged and found guilty of serious physical assault, this type of accusation should not be made on a public website. If Ms Bryant and Dr Kennedy believe they have evidence that such an assault took place then they should contact the police.

4 If they also believe that I am harming patients by not properly investigating their illnesses, then this is something for the GMC to again investigate. I have informed them that I produce very detailed advice on the assessment, diagnosis and investigation of patients in a publication - 'ME/CFS/PVFS: An exploration of the Key Clinical Issues' - that I have written for doctors in conjunction with a consultant neurologist. Over 6,000 copies of this booklet have been sent to doctors in the UK. I believe that patients with a possible diagnosis of this condition must be properly assessed, examined and investigated before a diagnosis is confirmed. This is what I do with all my patients. And contrary to the misinformation recently published on their website, I have produced detailed guidance in this booklet on how to assess, examine and investigate patients in order that other causes of an ME/CFS like illness can be excluded. This publication also contains a table of 50 such conditions, including specific infections, on page 11. I wonder - do they have any evidence from someone whose health has been damaged as a result of the guidance for doctors that I have produced?

5 If Ms Bryant and Dr Kennedy believe that there is some kind of financial impropriety occurring in relation to my work as a trustee and medical adviser to the ME Association, then they should contact the Charity Commission. The Charity Commission can obtain rapid access to the detailed monthly accounts produced by the charity and information on any payments being made to trustees. I have already informed them that I do the equivalent of two days work per week for the charity pro bono (our Chair and some other trustees do even more) and do not request any payment for the administrative expenses (apart from travel) that this quite demanding work involves. In effect, it means that I do this charity work for a significant financial loss, and I therefore subsidise two days a week of charity time from my other income - most of which is not even related to the subject of ME/CFS.

6 The Charity Commission produces very strict guidelines and regulations on how a charity must administer its affairs. The ME Association trustees and staff all follow Charity Commission guidance. If in doubt, we take their advice. The Charity Commission have no outstanding issues with the way in which we conduct our administrative or constitutional affairs, including the organisation of trustee elections and being quorate for meetings. Despite this fact the oneclick website continues to publish long and complicated allegations concerning a wide variety of actions which would not be allowed under charity or company law. None of these allegations have ever been upheld by the relevant regulatory authorities

that deal with the conduct of charities and with company law.

7 Neither I nor the Board of Trustees have entered into any kind of approach or discussion with any other charity regarding a possible merger. We are not doing so at present. We have no plans to do so. We have no financial or administrative need to do so.

8 The charity has not been trading whilst insolvent. We are not trading whilst insolvent. And full details of our year ending accounts are always made available to members. Last year a complaint from a member of the oneclick group was sent to the Companies Investigation Branch of the Department of Trade and Industry, who obviously monitor the financial affairs of registered companies. The DTI decided that no investigation of our accounts was necessary. As is the case with the Charity Commission, the DTI have no outstanding issues with the charity.

9 Whatever initiative I become involved with that is intended to help people with this illness - from robustly condemning new DWP guidance on ME/CFS for state benefit purposes right through to initiating research into gene function - is invariably met with almost instant denigration on the oneclick website. So it is hardly surprising to find that when one talks to journalists or people in authority who are aware of the output from theoneclick website, that they see this website and the actions that stem from it as some form of endorsement that ME/CFS is a mental health problem and not a physical illness.

Over the past year the oneclick website has published my personal email details in a clear attempt to get people to contact me. Inevitably, this has resulted in some very threatening communications, and even anonymous phone calls (as my telephone number is still in the directory).

However, I sense that things are at long last starting to change and that people who once supported this oneclick 'campaign' no longer wish to have anything to do with it, or the personal harassment that has become a central theme. In fact, following the most recent series of harassing oneclick postings, I received no offensive communications at all after my personal email address was once again published - only messages of support for what I have decided to do.

Not surprisingly, I understand that other people are now prepared to pass on their evidence to the police.

CONCLUSION: POINTS OF INFORMATION AND LAW

Harassment can be defined as words, conduct or actions directed at a specific person, or persons, that persistently annoys, degrades, or violates a person's dignity and creates a hostile, degrading, humiliating or offensive environment for them.

Personal harassment has no role whatsoever to play in a civilised society. Neither does it have any role in the campaign to have this illness properly recognised, researched, investigated and treated.

Harassment of an individual is a criminal offence under the Protection from Harassment Act

1997 and the Crime and Disorder Act 1998. Such harassment can be through emails or bulletin board postings.

If someone believes that they are being harassed on an internet bulletin board, they should ask the police to investigate - as I am now doing.

Dr Charles Shepherd

1st October 2005