

“Follow the Science” — Part I

The problem is not primarily with science, but with “scientism”

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Ever since the outbreak of the worldwide Covid epidemic, our solons have been advocating that we just “follow the science.” Calls for following the science did not, however, begin with Covid. They have been a feature of those who fancy themselves to be the best and the brightest for a long time. Thus President Barak Obama declared his intent to restore “science to its proper place,” in his 2009 inaugural address.

Unfortunately, those most prone to hectoring the public about “following the science” are themselves often scientifically naïve. They imagine, or would portray, for their purposes, science as a pristine realm, inhabited only by objective truth-seekers, completely removed from all normal human venality, such as the desire for wealth and/or fame.

In addition, the proponents of following the science frequently overstate the degree to which science speaks with a uniform voice, or anything approaching it. And they fail to recognize the extent to which even the best “science” cannot translate to easy policy choices, as policymaking involves balancing a multitude of competing, and often conflicting, goals.

The *British Medical Journal* blog of July 5 carried a post by Richard Smith entitled “Time to assume that health research is fraudulent until proven otherwise?” Smith is the former editor of BMJ and the longtime chair of the Cochrane Library Oversight Committee, whose reviews of research on health care interventions are considered to be the gold standard.

Smith quotes one expert who places the percentage of falsified published studies as high as 20 percent. He relates, for instance, how Ian Roberts, a professor of epidemiology, was shocked to be to be asked by a colleague whether he knew that his systematic review of trials of the drug mannitol on traumatic brain injuries was based on trials that had never taken place, by a lead author from a nonexistent university, and whose co-authors were unaware that they were listed on the trials pre-publication. Many of those fraudulent trials were published in leading neurosurgery journals.

In a Cochrane Collaboration webinar, Barbara Redman, author of *Research Misconduct Policy in Biomedicine: Beyond the Bad Apples Approach*, argued that the problem was not bad apples, but bad barrels, if not rotten orchards.

The system provides incentives to fraudulent research, she charged, without adequate regulatory processes.

One of the most shocking examples of faked research — one with immense consequences — was recently exposed in a six-month investigation by *Science*. Alzheimer's is one of the major killers of older people worldwide, and the subject of an immense amount of research. The field has long been dominated by the hypothesis that deposits of plaques of amyloid beta protein in the brain are responsible for the loss of cognitive functioning.

A 2006 article in *Nature* purported to take that hypothesis a step further by directly linking the injection of a soluble oligomer labeled amyloid beta star 56 into the brains of transgenic mice, with the mice forgetting previously learned tasks.

That article has been cited 2,300 times, and in its wake, NIH funding of research on oligomers increased to \$287 million from almost nothing. The focus of drug companies has been on drugs that combat the oligomers.

But Vanderbilt University neuroscientist Matthew Schrag decided to look at the images of bandwidths of protein distribution in the original *Nature* article and 17 other publications by Dr. Sylvain Lesne, one of the lead authors of the *Nature* article. He found evidence that the bandwidth images had been altered, and those altered images used in multiple articles. One Harvard team reported that it could not even find the amyloid beta star 56 oligomers in human tissue samples.

For 16 years, then, research on a devastating disease affecting millions worldwide has been led down a blind alley by fraudulent publications. As

Dr. Schrag puts it, “You can cheat to get a grant. You can’t cheat to cure a disease.”

EVEN WERE SCIENCE a pure realm, immune from all normal human motivations and biases, the magical belief in the incantatory power of science to offer solutions to every problem, so on display during the Covid crisis, is dangerous.

In a recent *Spectator* interview, Rishi Sunak, chancellor of the exchequer in Boris Johnson’s Cabinet, pointed to three distinct weaknesses in the British government’s Covid response. First, the government dramatically overstated the degree of scientific consensus on a host of issues. That should have been clear in the US, in any event, from the frequent shifts of the information provided by health authorities — e.g., “masks are not useful” morphed to “all masks provide benefit,” which in turn morphed to “some masks are useful.” Moreover, the goalposts kept shifting. Initially, two-week lockdowns were justified by the need to “lower the curve” and keep hospitals from being overwhelmed. And yet they kept being extended for well over a year in many states.

Second, the British government used fear tactics to secure citizen obedience — a tactic typical of totalitarian regimes. And not only the government. While tech platforms regularly censored any questioning of the wisdom of governmental Covid responses as “disinformation,” even when the questions were raised by highly credentialed professors at Oxford, Harvard, and Stanford, no predictions were ever censored for being overly alarmist.

Clearly, many of those who imposed the most stringent restrictions did not quite believe their own propaganda. The governors of California, Michigan

and New York, and the British prime minister, for instance, all ignored their own restrictions to party, dine out, and travel.

Finally, and perhaps most serious, according to Sunak, the government ignored the collateral impacts of its policy, and barely discussed them. It abdicated to the scientists decisions that are not ultimately scientific, but political: How to weigh the costs and benefits of different policies in multiple realms? Who bears the primary burden of those policies?

“The scientists said it was not their job to think about the social and economic implications of their advice,” writes Lord Jonathan Sumption in the *Times*. “They were right about that. The problem was that it turned out to be no one else’s job.”

England and Wales have experienced 1,000 unexpected, non-Covid deaths per week in 14 out of 15 recent weeks. In America, life expectancy went from 79 to 76 between 2019 and the present — an unprecedentedly rapid decline not explicable by Covid deaths alone — due to undiagnosed or untreated cancer and heart disease, and so-called deaths of despair — suicide, opioid overdoses, and alcoholism.

Schoolchildren missed more than a year of in-person schooling, which has led to plummeting test results and a teen mental health crisis. For many, in particular the least affluent, those educational deficits will never be recaptured.

The UK’s GDP declined by 10 percent in 2020, the largest decline in a century; 460,000 people left the workforce, never to return; and the government has spent £6,000 on every man, woman or child in compensation for not working or lost business.

And for what? A February headline in the *Washington Post* read, “Mask mandates didn’t make much difference anyway.” The next month, the *New York Times* declared, “Do Covid restrictions work? Yes, but they didn’t make much of a difference.” Given the enormous costs of those restrictions and mandates, Virginia Hume archly observed, these headlines were not exactly the equivalent of “Eating carrots won’t help your eyesight.”

During Covid, “follow the science” became a crusaders’ banner under which to march in proof of one’s sophistication and moral virtue, even as the dictates of “science” shifted rapidly or produced such absurdities as masking toddlers (while much older adults went without), or exempting the demonstrations and rioting following the death of George Floyd from any public health concerns.

The problem is not primarily with science, but with “scientism,” the widespread elite belief in technocracy and perfectionism, write Rutgers law professors Jacob Hale Russell and Dennis Patterson. That mentality “wrongly framed issues that involved complex judgments by suggesting the existence of a singular, oracular science that could dispassionately decide complex policy issues which invoked nonscientific domains.”

Even worse than pretending that elites had all the answers, they state, is the quasi-religious belief that all problems have solutions, and that if everyone just followed the rules, Covid could be eliminated. That was never in the cards for an airborne, highly contagious respiratory virus, with many asymptomatic carriers.

In the process, academics’ epidemiological models, which often leave out such crucial factors as human responses, and which may be no more reality-based than Michael Mann’s “hockey stick graph” of climate change, but

which offer the illusion of omniscient gazing into the future, swept aside decades of public health plans for a pandemic — none of which, incidentally, called for widespread and lengthy school closures, even for diseases a lot more threatening to the young than Covid, and which were at least based on attempts to weigh multiple factors.

The Covid response proves that President Obama was right about the need to “restore science to its proper place” — i.e., as an indispensable tool for expanding human knowledge, not as crystal ball for solving all life’s complexities and trade-offs.

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