



Mike Mew &lt;mikemew@gmail.com&gt;

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**Please find attached**

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Mike Mew &lt;mikemew@gmail.com&gt;

19 June 2010 at 16:38

To: [REDACTED]

Dear [REDACTED]

Thank you very much for your letter and the time and effort that you have been to in regard to this matter. There does however seem to be some confusion. The subject of my concern was in no way related to the provision or practice of orthotropics, discussion of different forms of treatment, or the moderating of views in this regard. It seems strange that this confusion has occurred again since this was the only point that I managed to clarify in the limited exchange that occurred with Mr R [REDACTED], at the end of last year. You should have these letters on record. The only times that I mention orthotropics is to exclude it from the concerns that I raise with the Council.

My concern is that the profession is in a state of "group thought" in thinking that malocclusion is of genetic origin, and are ignoring the evidence that it may be due to environmental factors. This suggests that we are treating symptoms, not the causative factors and the practice of orthodontics in this country is not evidence based. All efforts to bring this to the attention of the profession have been ignored and there appears to be no channel through which I can raise my concerns.

I sincerely believe that this is a real and far reaching problem. It is my professional duty to report such an issue to you. If you would like to meet me I think that I can put forward a proper and scientifically sound case to support what I say. However, if I am unable to meet you I cannot put this forward and you cannot assess whether I have a substantive point or not. Since there is always a possibility that I could be right then is the Council not duty bound to hear me out?

As a lawyer you rightly quote the legal responsibilities of the GDC stating that you "no longer prescribes on clinical issues" and your role does "not include the discussion of different forms of treatment, or the moderating of views in this regard". This is quite understandable such, scientific forays are for the pages of journals and meeting. However if we are to remain a self governing profession we must recognise and act, when a monopoly of thought has arisen to the point of preventing scientific enquiry and open discussion. Especially when this effects the treatment provided to patients.

That you quote the classic sentiment of an establishment "The GDC would advise you that it is more likely that you will receive recognition of orthotropics as an alternative treatment to jaw surgery and extractions by the production of well researched data; with proven clinical trials; with learned papers and research from independence sources (peer review) who have investigated and analysed your methods. If, as you suggest, this evidence is available, I would suggest that it can then be placed before the relevant bodies. Interestingly in itself, I call this the "prove it" philosophy. While this seems a sound philosophy, Karl [REDACTED] pointed to the flaws in such an approach. For much of science little can be proved with certainty, as he showed in his argument the Black Swan. He suggested that we should aim not to prove but to disprove, and develop the null hypotheses, which is a corner stone of all modern research including Orthodontics, even if the main drive of his ideas are ignored. Although as I mentioned it is not my aim to further orthotropics with my interactions with you.

We have a situation in orthodontics where we know surprisingly little. No one has much good evidence, so it is unlikely that a small group can produce the evidence that has eluded the entire profession for 100 years. Hence the argument of "prove it" can be used to maintain the status quo. Poppers philosophy is similar in a way to the modern legal tenants in law, that every man is considered innocent until proven guilty.

The one area where hard evidence is available is the cause of malocclusion, the aetiology. You note this and suggest that this evidence, if it exists, should be "placed before the relevant bodies". I have tried every body possible, and approach you as the last port of call. I feel that there is a natural conspiracy against change that is preventing the truth from being sort as it would require change, and I feel that it is the responsibility of the GDC to see that this is heard.

I do not sound negative but previous to this letter I have sent three to Alison [redacted] one letter to Mr M [redacted] and three letters to Mr R [redacted]. This is an ethical issue which the GDC in it's efforts to "Protect Patients" should investigate further.

I sincerely hope that we can stop this futile exchange and engage on the real issue. How do you think that the public would judge us if they knew that we did not know the causes of a problem that we are treating and are not interested in finding out?

Best wishes,

Mike Mew

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**From:** [redacted]  
**Sent:** 07 June 2010 15:38  
**To:** [mikemew@gmail.com](mailto:mikemew@gmail.com)  
**Subject:** Please find attached

[Quoted text hidden]

No virus found in this incoming message.

Checked by AVG - [www.avg.com](http://www.avg.com)

Version: 8.5.437 / Virus Database: 271.1.1/2921 - Release Date: 06/07/10 06:35:00