To the Editor—Antibiotic treatment for serious methicillin-resistant 
Staphylococcus aureus (MRSA) infections is inadequate. Most probably still consider 
vancomycin the gold standard—and no alternative has proven itself superior in 
clinical trials—but there are drawbacks nonetheless and newer agents are available. In a recent issue of 
Clinical Infectious Diseases (CID), an invited article suggested that alternative therapies have 
been shown to be more effective than vancomycin for MRSA bacteremia [1], a claim that was disputed in a subsequent 
correspondence [2]. One of the concerns was the obvious conflict of interest inherent in the fact that the authors of that article, and some of the literature cited to support it, were in many cases employed by or receiving compensation from Cubist Pharmaceuticals, the makers of daptomycin. In a more recent issue of CID, another invited article appeared, which discussed the potential role of telavancin for treatment of S. aureus [3]. Telavancin is made by Theravance, Inc, which funded the article, provided financial support to all of the authors as scientific advisors or consultants, and employs one of them. Although I realize that these potential conflicts of interest were disclosed and are there for all to see and judge, would it not be better for CID to invite reviews from authors who are not so obviously in conflict, and who would be more likely to write a balanced article that seeks to inform rather than to advertise? Would not the readers of CID, the patients we care for, and in the end, CID itself, be better off if we were to do so? Some might argue that those most competent to write such reviews are inevitably in conflict. I think this is simply not true.

Note

Potential conflict of interest. Author certifies no potential conflicts of interest.
The author has submitted the ICMJE Form for Disclosure of Potential Conflicts of Interest. Conflicts that the editors consider relevant to the content of the manuscript have been disclosed.

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References


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