March 4, 2011

To our readers:

Landesärztekammer Rheinland-Pfalz (“LÄK-RLP”), the State Medical Association of Rheinland-Pfalz, Germany serves as the Institutional Review Board (IRB) for clinical research at Klinikum Ludwigshafen, where Dr. Joachim Boldt’s recent research was conducted. On February 25, 2011, LÄK-RLP provided the involved journals with the results of their evaluation of the status of IRB approval for research conducted by Dr. Boldt dating back to 1999. LÄK-RLP determined, to the best of its ability, the status of IRB approval for 102 articles published by Dr. Boldt.

Table 1 lists 88 articles for which LÄK-RLP was unable to verify IRB approval. Table 2 lists 12 articles for which LÄK-RLP was able to verify IRB approval. Table 3 lists 2 articles for which LÄK-RLP determined that IRB approval was not necessary.

The undersigned Editors-in-Chief of medical journals affected by these findings will retract the articles in our respective journals that are listed in table 1. Formal retraction notices will appear in each journal.

The retraction of the articles in Table 1 for lack of IRB approval means that the research was unethical, and that IRB approval for the research was misrepresented in the published article. It does not mean that the research results *per se* are fraudulent. Klinikum Ludwigshafen has commissioned an investigating committee to systematically assess the veracity of the findings presented in Dr. Boldt’s articles against patient and laboratory records. We will communicate to our readers any finding of data fabrication, falsification, or misrepresentation identified by the investigating committee at Klinikum Ludwigshafen.

We, the undersigned Editors-in-Chief, on behalf of our Editorial Boards, affiliated societies, and publishers, extend our appreciation to LÄK-RLP for their review of the status of IRB approval for Dr. Boldt’s research and to the investigating committee at Klinikum Ludwigshafen for their ongoing review of his research findings.

Amendments:

1. March 4, 2011: LÄK-RLP has verified IRB approval for Boldt J, Schöllhorn T, Münchbach J, Pabsdorf M. A total balanced volume replacement strategy using a new balanced hydroxyethyl starch preparation (6% HES 130/0.42) in patients undergoing major abdominal surgery. Eur J Anaesthesiol. 2007;24:267-75. This article was moved from table 1 (articles without documented IRB approval) to table 2 (articles with documented IRB approval).
On behalf of our respective journals,

Lars S. Rasmussen  
Editor-in-Chief, *Acta Anaesthesiologica Scandinavica*

Steven M. Yentis  
Editor-in-Chief, *Anaesthesia*

Hugo Van Aken  
On behalf of the Editorial Board, *Anästhesiolgie Intensivmedizin Notfallmedizin Schmerztherapie*

Steven L. Shafer  
Editor-in-Chief, *Anesthesia & Analgesia*

James C. Eisenach  
Editor-in-Chief, *Anesthesiology*

Charles S. Reilly  
Editor-in-Chief, *British Journal of Anaesthesia*

Donald R. Miller  
Editor-in-Chief, *Canadian Journal of Anesthesia/Journal canadien d'anesthésie*

Joseph E. Parrillo  
Editor-in-Chief, *Critical Care Medicine*

Bernd Zwissler  
On behalf of the Editorial Board and his CoEditor-in-Chief, Rolf Rossaint, *Der Anästhesist*
March 4, 2011

EIC Joint Statement

Martin R. Trautner
Editor-in-Chief, European Journal of Anaesthesiology

Massimo Antonelli
Editor-in-Chief, Intensive Care Medicine

Joel A. Kaplan
Editor-in-Chief, Journal of Cardiothoracic and Vascular Anesthesia

Jörg Wiltfang
Editor-in-Chief, Journal of Cranio-Maxillo-Facial Surgery

George B. Stefano
Editor-in-Chief, Medical Science Monitor

Davide Chiumello
Editor-in-Chief, Minerva Anesthesiologica

Wolfgang R. Mayer
Editor-in-Chief, Vox Sanguinis
Table 1: Articles without evidence of IRB approval as determined by LÄK-RLP

**Acta Anaesthesiologica Scandinavica**

**Anaesthesia**

**Anästhesiologie Intensivmedizin Notfallmedizin Schmerztherapie**
- Triem JG, Röhm KD, Boldt J, Piper SN. [Comparison of a propofol-based anesthesia regimen using optimized-target-controlled-infusion (OTCI) and manually-controlled infusion (MCI) technique]. Anasthesiol Intensivmed Notfallmed Schmerzther. 2006;41:150-5

**Anesthesia & Analgesia**
Boldt J, Brosch Ch, Röhm K, Lehmann A, Mengistu A, Suttner S. Is albumin administration in hypoalbuminemic elderly cardiac surgery patients of benefit with regard to inflammation, endothelial activation, and long-term kidney function? Anesth Analg. 2008;107:1496-503


Anesthesiology

Annals of Thoracic Surgery


British Journal of Anaesthesia


Boldt J, Suttner S, Brosch C, Lehmann A, Mengistu A. Influence on coagulation of a potato-derived hydroxyethylstarch (HES 130/0.4) and a maize-derived hydroxyethylstarch (HES 130/0.4) in patients undergoing cardiac surgery. Br J Anaesth. 2009;102:191-7


Piper SN, Röhm KD, Boldt J, Faust KL, Maleck WH, Kranke P, Suttner SW. Inspired oxygen fraction of 0.8 compared with 0.4 does not further reduce postoperative nausea and vomiting in dolasetron-treated patients undergoing laparoscopic cholecystectomy. Br J Anaesth. 2006;97:647-53


Canadian Journal of Anesthesia/Journal canadien d'anesthésie


**Critical Care Medicine**


**Der Anästhesist**


**European Journal of Anaesthesiology**


**Intensive Care Medicine**


Journal of Cardiothoracic and Vascular Anesthesia


Journal of Cranio-Maxillo-Facial Surgery


Medical Science Monitor


Minerva Anesthesiologica

The Thoracic and Cardiovascular Surgeon

Vox Sanguinis
Table 2: Articles with IRB approval verified by LÄK-RLP


Table 3: Articles that do not require IRB approval as determined by LÄK-RLP
