A lesson to be learned from Karl Marx: smoking triggers hidradenitis suppurativa: reply from author

SIR, Pleased though I am with the interest now being taken in Marx’s hidradenitis suppurativa (HS) and its possible effects on his work,1 Happle and König go well beyond what is permissible from the evidence. All that has been found is that the percentage of hospital patients with HS who smoke is greater than that reported for the population at large2,3 and than in paired controls where the difference is much less. But this does not allow the presumption of causality: that requires a relationship to onset, offset and dose-response, none of which has been demonstrated (the study of nicotine in tissue culture4 is preliminary, unspecific and irrelevant). Of the 63 patients in the study by König et al.,3 only 32 started smoking before their HS (taking on average 10 long years to achieve its alleged malign effect); worse still, 10 patients were allowed to bulge the causal statistic, although they started smoking only after the onset of the HS! Surely, then, the reasonable conclusion must be that what ‘triggers’ HS is not so much the smoking, as the possibility that an individual may take to smoking in the future! While a smoking trigger makes an interesting variant on the smoking gun, the notion that smoking fires HS is a totally unsubstantiated allegation.

But if the general case disperses at first puff, it disappears completely in its specific application to Marx. Apart from the lack of evidence for a temporal or dose relationship, there is a failure to understand that the significance of Marx’s smoking must depend on the prevalence of smoking at the time, by people of his age, sex and social circle: if most of his confreres smoked, Marx’s smoking habit would have no statistical significance. From written accounts, Marx made tobacco available to his visitors, with the expectation that most, if not all, smoked; he characterized the meetings of his group of ‘socialist workers’ by their ‘smoking, eating and drinking’; Engels, Marx’s closest collaborator, wallowed in cigar smoke; so did Marx’s fellow journalists who worked in a ‘room concealed in such a thick cloud of tobacco smoke that it was impossible to see a newcomer...’. Nevertheless, despite the many accounts and anecdotes suggesting that most of Marx’s peer group were smokers, we don’t know its true prevalence, and cannot therefore play games of significance with the simple, single statistic of his being a smoker.

Unlike Happle and König I do not complain that the smoking trigger ‘concept is not generally accepted’: it is ignored for good reason, and must stay that way unless something more substantial is revealed behind their smoke screen. But I can only agree that this story is indeed a ‘textbook case’; but not of ‘the close relationship between smoking and HS’, of which there isn’t a whiff of evidence – but of the increasingly common misapplication of associative epidemiological statistics to aetiology. Causal mechanics is something it cannot do, and the frequent, inappropriate attempts serve only to produce the daily horror stories and lists of unsubstantiated associations that clog our journals and newspapers. Use of this bastard epidemiological substitute for science has spread like a cancer; it is doing much damage to genuine research, and has done much harm to the public’s belief in medical science. Old Marx was a tough thinker, very keen on a scientific rationalism, and he would have hated this development. But he also had a wicked sense of humour, and would have laughed it out of court – between bouts of his smoker’s cough.

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References

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