



16 November 2015

Memorandum

To: Trialists

Fr: Curtis Meinert

Re: Superlatives

Back in the Midwest where I grew up, the only superlatives I knew were "not too bad", "OK", and "OK!". People who talked like Texas used car sales people by effusive use of superlatives like "outstanding", "extraordinary", "fantastic", and "awesome", were seen as being from "away".

Long before I left the farm I learned from my mother to not "toot my own horn".

When I went off to the University to become a researcher, I was taught to avoid words like "original", "novel", and "unique" by being reminded that there are not many things under the sun that are new.

Definitive is a term I have deleted from my vocabulary. As a trialist it did not take me long to learn that it was presumptuous and short-sighted to label trials as to be definitive when still on the drawing board.

"Definitive" in relation to trials is usually a characterization applied by others long after the trial is done.

Having been reared and trained to have a wariness for superlatives, I was intrigued by a letter published in *JAMA Oncology* 29 October 2015 entitled *The use of superlatives in cancer research*; called to my attention by Kay Dickersin, a colleague of my mine here at Hopkins.

The authors used Google news search to identify news reports between 21 and 25 June 2015 on cancer drugs containing the words "breakthrough", "game changer", "miracle", "cure", "home run", "revolutionary", "transformative", "life saver", "groundbreaking", or "marvel". The authors identified 94 news articles over the time period covered containing 97 superlatives. Over 55% of the uses were by authors of papers containing the results being referenced.

It is apparent that there are more Texas used car sales people doing trials than I imagined. Is it possible that Trump has introduced a new norm for bragging that has spread to trialists? I hope not.