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July 18, 2019

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Journal of the American Heart Association

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Dear Drs. London, Eitzman, Weinberg and Harrington:

We write once again in reference to the recent article in the *Journal of the American Heart Association* entitled “Electronic cigarette use and myocardial infarction among adults in the US Population Assessment of Tobacco and Health” by Dharma N. Bhatta and Stanton A. Glantz (Reference 1).

In our previous letter (2) we described Bhatta and Glantz’s claim that current e-cigarette users were twice as likely as never users to have had a heart attack, based on 38 cases (Abstract, Table 3 and Table S6). But they failed to account for detailed information in that survey on (a) when participants were first told that they had a heart attack and (b) when participants first started using e-cigarettes. **In fact, the majority (3) of the 38 current e-cigarette users were first told that they had a heart attack many years before they first started using e-cigarettes. In this group, the heart attacks preceded first e-cigarette use by almost a decade on average.**

We now raise a second important problem. On page 9 of their article, Bhatta and Glantz said they used the PATH questions relating to age of first heart attack and age at first e-cigarette use in order to “address this problem” of temporality. Their solution was “to select only those people who had their first MIs at or after 2007” (n=16, Table S6).

We also reproduced this secondary analysis. We found that more than one-third (4) of the 16 current e-cigarette users were first told that they had a heart attack years before they first started using e-cigarettes. We conclude that the secondary analysis did not address the problem at all. In fact, it may have misled editors, reviewers and readers.

Their inclusion of a secondary analysis is evidence that Bhatta and Glantz knew that many current e-cigarette users had a heart attack before they started vaping. The results of their secondary analysis confirm that their study results are false

and invalid and that their analysis was an indefensible breach of any reasonable standard for research on association or causation. We urge you once again to take appropriate action on this article, including retraction.

Sincerely,

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References

1. Bhatta DN, Glantz SA. Electronic cigarette use and myocardial infarction among adults in the US Population Assessment of Tobacco and Health. *Journal of the American Heart Association* 2019;8:e012317. DOI: 10.1161/JAHA.119.012317. Published 18 Jun 2019, Available at: <https://www.ahajournals.org/doi/10.1161/JAHA.119.012317>
2. Rodu B, Plurphanswat N. Letter to JAHA editors, AHA president. July 11, 2019.
3. On June 25, 2019 we requested that PATH survey administrators provide an exemption from the policy on releasing raw numbers from restricted datasets, so that we could make public the exact number. We noted that Bhatta and Glantz released far smaller numbers of current vapers who had a heart attack (see Supplemental Table S6 of the published article). As of July 18, no decision has been made.
4. On July 15, we extended our June 25 request to include this number.