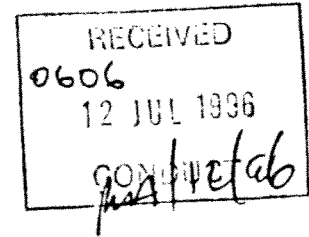




July 11, 1996.

The Conduct Health Standards Department
General Medical Council
178 Great Portland Street
London W1N 6JE.



Dear Sirs,

I would appreciate it if the following letter could be taken into consideration in defence of Dr Gordon Skinner of [redacted], against whom I believe a complaint has been - or is about to be - lodged with the General Medical Council.

I am not certain who will be named as the complainant, but the facts of the case strongly suggest that it will be Dr [redacted], a GP in the practice with which my family and I are currently registered as patients.

The circumstances leading to the complaint are as follows:

[Large redacted area for the details of the complaint]

[redacted] we got to hear of the work of Dr Skinner in the field of hypothyroidism. He has been seeing patients who present with clinical signs and symptoms of the disease, but whose blood test results indicate normal or borderline levels of thyroxine. [redacted], we had been told by our GP practice, fell into the latter category, so we made an appointment to see him privately. About [redacted] ago I drove her down for a consultation with him at a clinic near [redacted]

Dr Skinner examined [redacted] and stated that the diagnosis of hypothyroidism was "indisputable." He prescribed thyroxine, [redacted] she has been on a very low dose of the hormone. The improvement in her condition over this short period of time has been remarkable. Already [redacted] [redacted] she is able to do things that were previously unthinkable. Many other symptoms are also easing, and generally there is a vital spark about her that has been missing for years.

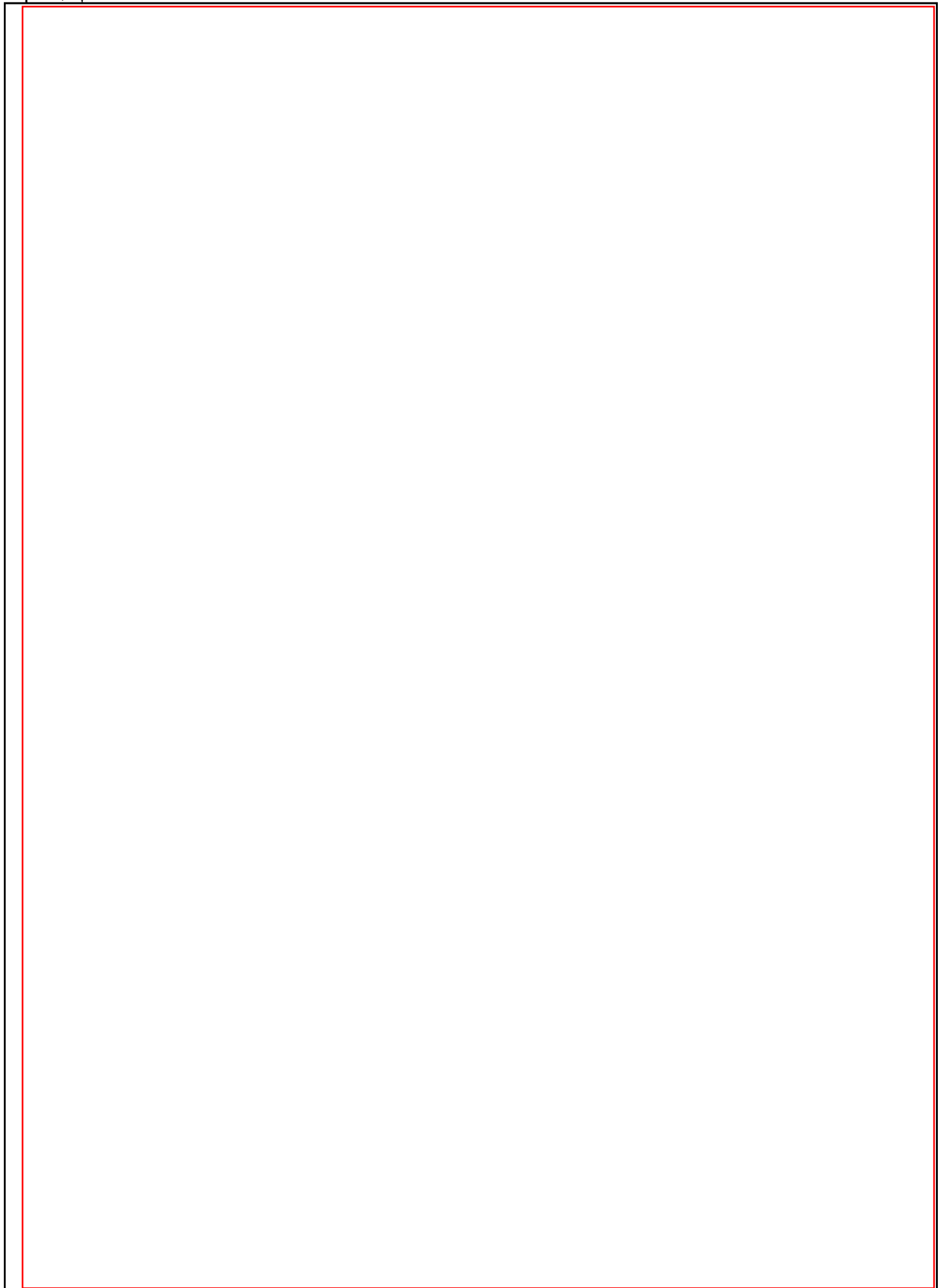
Of course it is far too early to say for certain that Dr Skinner's diagnosis and treatment of my wife has been clinically proven to be correct. [redacted] has been ill for too many years and we have been led down too many blind alleys and suffered too many bitter and heart-wrenching disappointments for us to unreservedly hail this latest development as the definitive breakthrough. However, we will say that we are cautiously optimistic, and the early signs and indications are extremely encouraging.

will go further and state that Dr Skinner is the kindest, warmest, most caring doctor either of

us has ever encountered. Several of the medical personnel [redacted] has seen over the years have fallen far short of this ideal. [redacted]

Dr Skinner, however, is, I believe, the first doctor to truly listen to what [redacted] has to say. He was the first to palpate her thyroid gland. When he speaks, it is to comfort, soothe and reassure her, not berate her as others have done. He has telephoned her three times since her consultation to ask her how she is feeling. No doctor has ever done that before. The obvious and genuine concern he has for his patients positively radiates from him.

I have spoken to others who come into contact with him professionally and they have nothing but praise for his unstinting and selfless devotion to his patients. Medicine is, I believe, immensely the richer for his presence among the ranks of hard pressed doctors currently serving the beleaguered NHS. Whatever the eventual long-term outcome of his treatment of [redacted], she is certainly the richer so far for having placed herself in his hands, a step which, in view of some of her past painful experiences, took great courage on her part. We can only pray that her present good progress will continue.



[Redacted]

[Redacted]

[Redacted] I hope he has done so and I hope even more fervently that Dr [Redacted] has perhaps decided as a result not to proceed with his action against Dr Skinner.

If, however, he has already done so, then I commend to the council for their consideration the foregoing statement, which I make in the belief that it is, to the best of my knowledge, an accurate account of events material to the case in hand. It is my earnest wish that any complaint lodged against Dr Skinner is not upheld.

Yours sincerely,

[Redacted]

Sam Jordan
Fitness to Practice Directorate
General Medical Council
5th Floor
St. James's Buildings
79 Oxford Street
Manchester
M1 6FQ

13th Jan, 2005

Dear Sam Jordan,

I am writing this letter as a patient of Dr. Gordon R. B. Skinner of [redacted], [redacted]. I have been receiving treatment from Dr. Skinner for hypothyroidism for approximately [redacted] years now, and feel compelled to write and let you know what Dr. Skinner does for his patients. He is one of the best doctors I have had the pleasure of being treated by.

[redacted]

I started to do my own thorough research into the matter [redacted]. I found that although thyroid lab values may be within the 'normal range' that this did not necessarily mean that I was receiving the optimal dosage of thyroid medication, or that T4 alone was the answer. It was also important for the physician to treat the whole person, and not to just rely solely on lab reports. I found this information through several peer-reviewed journals, such as the BMJ, and US journals such as Metabolism. This is when I decided to find a doctor who would treat the patient, and who would also listen well, and treat my symptoms that continued to persist.

I was fortunate enough to enlist the services of Dr. Skinner, which I discussed with my GP. I found him to be extremely knowledgeable in hypothyroidism. He also listened very well, and never dismissed my symptoms as being unrelated to my hypothyroidism. He gave me hope for the first time in years, telling me that we would get to the bottom of my problems. He was the first doctor to date (and I've seen many over the years) who actually believed what I was telling him. Now, for a patient this is extremely important, many patients feel this is no longer a service offered by physicians nowadays, and it is so fundamental in providing the patient with the best possible care.

Dr. Skinner has many patients who feel the same way, as I have met quite a few while waiting for my appointments, we often found ourselves discussing how fortunate we were to have such a good, caring doctor. Since being treated by Dr. Skinner I have resumed optimal health, something I was told would never happen. Well, I finally have my life back!

Doctors need to realise how hypothyroidism can affect patients, not just taking stock in lab values, as I was one such patient who now knows better.

[Redacted]

So I have more than just my health to 'Thank' Dr. Skinner for.

[Redacted]

Well I wanted to write to let you know what a great doctor, Dr. Gordon R. B. Skinner really is. He cares very much about his patient's well being, and I am but one of many he has helped to regain both their dignity and good health.

[Redacted], and I will miss my doctor dearly. He is one of those very few extraordinary people you get to meet once in a lifetime. I am thankful I met him in mine.

Yours Sincerely,

[Redacted]

COPY

Adam Elliott
Interim Orders Panel
General Medical Council
350, Euston Road
London
NW1 3JN



18 June 2005

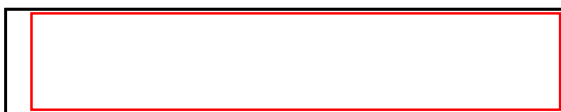
GORDON R. B. SKINNER MD, DSc, FRCOG, FRCPath

I understand that Dr Gordon Skinner is the subject of a complaint about his prescribing protocol for levothyroxine, tri-iodothyronine and Armour Thyroid, and I am writing to express my support for him.

I consulted Dr Skinner about my own health in [redacted] after NHS treatment did not fully relieve my hypothyroidism. After an extensive consultation, Dr Skinner prescribed Armour to be added to my levothyroxine, and confirmed his clinical opinion with blood tests. I regained full health after a few months treatment and I have remained well since. I provide Dr Skinner with the results of my annual blood tests, and he advises me by mail.

I have found him to be amongst the most intelligent, astute, caring and humane of all the medical practitioners I have met, and having [redacted]
[redacted] I have met many, good, bad and indifferent. I trust him implicitly and consider that it would be a great blow to decent medical practice if Dr Skinner were prevented from continuing his work in hypothyroidism.

Yours faithfully



Dear Mr Adam Elliott,

I am writing to you about the forthcoming case of Dr Gordon Skinner, who is to appear before the Interim Order Panel on the 29th June 2005. I wish to strongly protest your current investigation into Dr Skinner. For me, and I know for many others, he caused miracles to happen.

When I first met Dr Skinner (from the suggestion of a friend who saw that I was rapidly deteriorating and guessed the cause) I was in bed. Through the months I was cautiously started on thyroid, I watched many of my symptoms disappear. [redacted]

I do not want to go back to that mode of existence. From my research into the history of thyroid diagnosis and treatment I know it is all too possible. All that would have to happen would be for my thyroid medication to end.

If this does happen, I will hold the GMC personally responsible and I will do this in public.

Yours sincerely,

Ceri Floyd (0161 923 6411)

From: Ebony Gayle (020 7189 5428)
Sent: 20 Jun 2005 15:19
To: Ceri Floyd (0161 923 6411)
Subject: FW: In support of Dr Gordon Skinner

Hi Ceri, please see below letter sent to me in support of Dr Skinner. I thought I'd pass this on to you as you are the case worker.

Kind regards

Ebony

-----Original Message-----

From: [REDACTED]
Sent: 20 Jun 2005 13:18
To: egayle@gmc-uk.org
Subject: In support of Dr Gordon Skinner



20th June 2005

Dear Sir / Madam,

It has come to my attention that Dr Gordon Skinner MD (Hons) DSc. FRCP Path. FRCOG of [REDACTED] is to be brought before a hearing at the GMC on 29th June 2005. I understand that he has been asked to answer complaints, which have been received, from other doctors and patients about his treatment protocol of thyroid disease.

As a patient of Dr Skinner I am appalled at the treatment that he is receiving, having been given only two weeks to prepare his case and not being allowed to speak on his own behalf at his hearing. He This seems to be little more than a "Kangaroo Court", where his fate has already been decided.

Had it not been for Dr Skinner and his thyroid treatment protocol, my life would be unbearable. I would be terribly unwell and would have little or no quality of life. I had practically every hypothyroid symptom and yet I was merely fobbed off by shortsighted NHS doctors. My tests said "normal", so I must be "normal", even though my symptoms screamed hypothyroid.

GPs fail to recognise that the TSH range currently used by the NHS is too wide and likely to be "skewed by the inclusion of persons with occult thyroid dysfunction" (The National Academy of Clinical Biochemistry, Laboratory Medicine Practice Guidelines: Laboratory Support for the Diagnosis and Monitoring of Thyroid Disease). They do not know that the USA lowered the top of the TSH range to 3.04 in March 2003. The AACE believes "the new range will result in proper diagnosis for millions of Americans who suffer from a mild thyroid disorder".

The UK system is outdated and condemns thousands of people to suffer needlessly. It also costs the NHS a fortune in unnecessary tests, investigations and medication to address each individual symptom, when they could all be easily treated with thyroid hormone. The NHS did not even bother to test my anti-thyroid antibodies (which were positive).

In contrast, Dr Skinner took the time to listen to me properly and treated me like a human being. He examined me thoroughly, including feeling my thyroid - something that no NHS doctor has ever done. He diagnosed me hypothyroid, prescribed medication and I am now well on the road back to full health.

Dr Skinner has guided my progress and made medication changes as necessary, always keeping my GP fully informed of my treatment. Dr Skinner now prescribes natural desiccated porcine thyroid extract (Armour Thyroid) for me. This contains a mixture of both T4 and T3 and is the only thyroid medication that works for me - synthetic thyroxine does not suit me. Without Armour, I would be condemned to a life of misery, being totally unable to carry on a normal life. Critics who allege that Armour is an unlicensed medication and that the

30/06/2005

T4 and T3 content in each batch is unstable are misinformed - the potency of Armour Thyroid is strictly controlled. This is backed by scientific evidence, which I can provide on request.

Dr Skinner also diagnosed my [redacted] daughter, who had been experiencing many hypothyroid symptoms. Her GP refused to listen. [redacted]

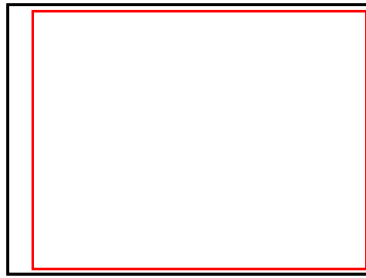
[redacted] After 3 months on thyroxine, she has improved tremendously and now has every chance of doing well [redacted]

Dr Skinner is a wonderful, caring doctor. He listens to his patients' symptoms and treats them accordingly. He has given many patients back lives, which had been devastated by unrecognised thyroid disease. He deserves to be congratulated for his work with thyroid patients, not vilified.

Yours sincerely,

[redacted]

30/06/2005



21st June 2005

For the attention of Adam Elliott
Interim Orders Panel
GMC
Regents Place
350 Euston Road
London
NW1 3JN

Dear Mr Elliott,

ago I would not have been able to write this letter. Because of Dr Skinner I am now more confident and much happier with me as a person. I do however feel that I still have a long way to go and with Dr Skinner's help I believe I can be the person I used to be.

I found it very difficult to believe when I was told that Dr Skinner was under investigation from the GMC and that he could be struck off because he has been treating patients like myself.

For many years I have felt unwell and had no idea what may be wrong with me. My GP at the time had little interest my thoughts that I might be Hypothyroid, so I did not push this and put it to the back of my mind and got on with my life the best I could, which was difficult. It was not until a friend told me about Dr Skinner some years later that I went back to see my GP. Reluctantly he referred me to Dr Skinner even though my TSH level was not abnormally high. I believe this was the turning point to me.

I believe that if I had had this help from Dr Skinner earlier I could not have missed out on the last years of my life. I can see no reason at all why Dr Skinner should be under investigation for treating and helping patients like myself. If he no longer able to do his work, how will all the other undiagnosed hypothyroid people out there going to get the help they rightly deserve.

I have written this letter in support of Dr Skinner and his fabulous work and I implore you to let him continue his work.

Yours sincerely,

[redacted]
Adam Elliott Esq.,
Interim Orders Panel,
GMC, Regent's Place,
350 Euston Road,
London
NW1 3JN

June 21st 2005

Dear Mr. Elliott,

I was appalled to learn that somebody has complained about Dr. Gordon Skinner, and greatly fear this will reduce his effectiveness.

I am immensely grateful to him, not just for restoring my health, as I am so very much better now that I have been on thyroxine for [redacted] but for opening my eyes to a familial problem of a tendency towards hypothyroidism, which I realised on reading his delightful, very informative book.

[redacted]
[redacted] A kindly GP who follows Dr. Skinner's principles and advice, in another practice, did all these for me when I was visiting that area.

Dr. Skinner on the other hand did a very careful and thorough examination and I began to realise to my huge relief [redacted].
Difficulties [redacted]
[redacted] have improved these last [redacted] months. [redacted]
[redacted]

[redacted]
It is not just I who is grateful; he was suggested to me by a young girl of [redacted], who had suffered from hypothyroidism for some [redacted] years, [redacted]

[redacted] Very soon ^{after seeing Dr. Skinner} she was lively again; [redacted]
strength to do; [redacted]

[Redacted]

[Redacted]

For the sake of so many of us, and I am constantly meeting women my age who are suffering from hypothyroidism, some acknowledged and some, like me, being dismissed airily by less than competent and certainly not caring GPs; please do not do anything to hinder his work. We need him; and that is lots of us.

A knowledgeable medically trained friend has told me that 2/3rds of women my age, [Redacted] have this problem, and half of us do not 'pass' the very unsatisfactory and fallible TSH test, so are left to moulder and gradually sink; probably eventually die as my relatives did. [Redacted]

[Redacted] Dr. Skinner has saved me from that familial fate. I happen to have written to him only two weeks ago to thank him.

So, please, look at the good he has done for so many, and spare him for us

Yours sincerely,

[Redacted]

[Redacted]

RECEIVED
21 JUN 2005

20 June 2005

Alan Elliott
Interim Orders Panel
Regents Place
3550 Euston Road
London NW1 3JN

Dear Sirs

RE: Dr Gordon Skinner

I am writing regarding the above named as I have just heard that Dr Skinner has been summoned to attend a GMC Public Hearing on 29 June.

I am absolutely appalled that the GMC does not support clinical observation in a patient and relies heavily on laboratory testing despite overwhelming evidence that the patient is Hypothyroid.

Many years ago doctors were much more inclined to listen to the patient and treat them accordingly yet the GMC have replaced all this with tests, which at best are flawed and at worst are useless. In the distant past GP's were there to help their patients, all this seems to have been dumbed down.

I had all the symptoms of Hypothyroidism namely, [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

I applaud Dr Skinner for the work he does and will give him my backing at every point. He gave me back my life and because of this, you want to take his. I have no faith or trust in the NHS as it is today, and the GMC are the ones that should be called to account.

Yours faithfully

[REDACTED]

[REDACTED]

CC - DR SKINNER

Catherine Green (0161 923 6410)

From: Catherine Green (0161 923 6410)
Sent: 21 Jun 2005 10:07
To: Guy Wilkinson (020 7189 5201); Adam Elliott (020 7189 5209)
Cc: Deidre Micklethwaite (0161 923 6573)
Subject: FW: Re Dr Gordon Skinner

I understand these messages should be forwarded to you for the IOP hearing. I would be grateful if you could confirm receipt,

thanks
Catherine

-----Original Message-----

From: Ebony Gayle (020 7189 5428)
Sent: 21 Jun 2005 09:32
To: Ceri Floyd (0161 923 6411)
Cc: Deidre Micklethwaite (0161 923 6573); Catherine Green (0161 923 6410)
Subject: Re Dr Gordon Skinner

fyi

Kind regards

Ebony

-----Original Message-----

From: [REDACTED]
Sent: 20 Jun 2005 23:54
To: egayle@gmc-uk.org
Subject: Re: Dr Gordon Skinner

Dear Sir/Madam,

Following the news that Dr Gordon Skinner is to appear before the GMC I felt I must write to offer him my full support.

As one of his patients I consider him to be an innovative, caring and understanding doctor who actually listens and tries to help.

I am unaware of the nature of the allegations against him although I suspect they are related to his approach to Thyroid treatment protocol. As a thyroid patient myself, he is the ONLY doctor that gave me a thorough clinical evaluation and explanation about the implications of this disease. The primary care NHS doctors I saw couldn't be bothered, and continuously misinterpreted my results leaving me in ill-health with a young child to care for. As a result I often think about the Hippocratic oath quote "At first, Do no harm"

Well, there are many primary care doctors out there 'doing harm' to thyroid patients, with many unable to interpret the thyroid blood results, leaving us hypothyroid, and in ill-health for the rest of our lives. Should these doctors not therefore be held accountable?

At least Dr Skinner understood this and was trying to do something about it to help his patients get better. After all, isn't that what doctors are for?

Yours Faithfully,

[REDACTED]

23/06/2005

Catherine Green (0161 923 6410)

From: Catherine Green (0161 923 6410)
Sent: 21 Jun 2005 12:35
To: Tim Simpson (020 7189 5208)
Cc: Guy Wilkinson (020 7189 5201)
Subject: FW: Dr Skinner's Hearing on 29th June 2005 - My Support for Dr Skinner

-----Original Message-----

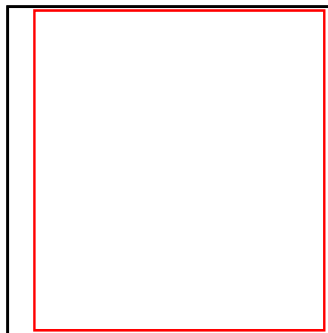
From: Ebony Gayle (020 7189 5428)
Sent: 21 Jun 2005 12:32
To: Ceri Floyd (0161 923 6411)
Cc: Deidre Micklethwaite (0161 923 6573); Catherine Green (0161 923 6410)
Subject: FW: Dr Skinner's Hearing on 29th June 2005 - My Support for Dr Skinner

FYI

Thanks
Ebony

-----Original Message-----

From:
Sent: 21 Jun 2005 11:24
To: egayle@gmc-uk.org
Subject: Dr Skinner's Hearing on 29th June 2005 - My Support for Dr Skinner



21st June 2005

RE Dr Skinner's GMC Public Hearing on 29th June 2005 - My Support for Dr Skinner, from a sufferer of Hypothyroidism

For the Attention of the Case Officer

Dear Sir/Madam

I am writing this e-mail to lend some support to Dr Skinner and would greatly appreciate it if you would take the time to read and take on board my comments. I am a sufferer of Thyroid Disease and have suffered in the past due to the closed-minded approach of Many Doctors.

23/06/2005

This disease effects different people differently, and each case should be treated individually. I have been told by many many people during the past year or so that Dr Skinner is amazing and has helped them to feel very much better, by allowing them T3/T4 combinations and in some cases treating the adrenals. In my eyes Dr Skinner is a hero and should be allowed to help people in the way he does. I would go so far as to say I wish (above all else) that other Doctors had the same thoughts and approach as he. People travel up and down the country to see him as he is their only hope to feeling well again.

Being a sufferer of the same, I have studied thyroid disease at length, and read lots of articles written by experts around the world, and I do feel that the UK is very old fashioned and closed minded in its approach to the disease. In America for example, the best treatment available is Armour Thyroid (something which should be readily available in the UK). Armour is something I would very much like to take to improve my quality of life (which is quite awful on Thyroxine fT4 only), however the only way to be on Armour from my own perspective would be to order it from online American pharmacies... this might not be a safe option and I worry the pharmacies will stop producing Armour and I'd be left untreated. If Armour was readily available in the UK, thyroid sufferers would gain quality of life, be able to continue working (which would help the economy) and lead relatively normal lives. People without thyroid disease produce a certain amount of fT3 from their thyroid gland itself - they also produce fT1 and fT2 (vital hormones that are also in Armour), so it stands to reason that treating patients of hypothyroidism with fT4 only, relies too much on conversion (to the active hormone fT3) for a feeling of wellness. Like people without the disease, we should be able to have some fT3 naturally in our bodies without having to convert every single part of fT3 in our livers and cells. Why are the majority of us treated in such a way that we have to be able to make all our fT3 from fT4 thyroxine, even if our bodies are poor at converting? I'm taking ☐ mcg, which by today's standards is a very high dose of thyroxine, yet I still have low fT3 and still feel very ill a lot of the time, as I'm not good at converting to fT3. This is so wrong and so behind the times, and contrary to many articles. Dr Toft himself states in an article that he feels that treatment will do a full circle eventually - referring to the fact that prior to the 70's treatment of thyroid disease consisted of a combination of fT3 and fT4. Treatment was also based more on clinical symptoms than the TSH test which was introduced in the 70's. It is the combination of fT3 and fT4 that we need to go back to.

To point you to Dr Toft's article entitled ENDOCRINE ABSTRACTS 3 S40 T3/T4 COMBINATION THERAPY:

<http://www.endocrine-abstracts.org/ea/0003/ea0003s40.htm>

"The first treatment for hypothyroidism introduced at the end of the 19th century was animal thyroid extract which contained both T₃ and T₄. Studies in hypothyroid rats suggest that it is only possible to restore universal tissue euthyroidism using a combination of T₃ and T₄. In patients in whom long-term T₄ therapy was substituted by the equivalent combination of T₃ and T₄ scored better in a variety of neuropsychological tests. It would appear that the treatment of hypothyroidism is about to come full circle."

From an NHS point of view, in treating patients with fT3/fT4 combinations, I believe their need for medical intervention would go down. Armour enables people to lose weight in the way thyroxine doesn't. There are products in Armour such as fT1 and fT2 which have been proven to help weight loss - I have read articles about the same. If the society of thyroid patients were able to take Armour and therefore to lose weight, you'd be treating less obesity, less heart disease, less stroke recovery, less thrombosis... you would need to prescribe less medication for hypertension, and less medication to reduce cholesterol. This would surely be cheaper for the

NHS in the long run.

Another part of thyroid disease is the TSH test. Too many GPs treat based on TSH alone rather than symptoms. I have to have a suppressed TSH just to function on a day to day basis, yet my FT4 and FT3 remain low. I believe that TSH, in some patients is NOT a good indicator of thyroid condition. Clinical symptoms would be a better indicator. Many Doctors overlook the clinical symptoms in favour of keeping the TSH above 1. This leads to long term health problems and no quality of life for the patient. I have been told on many occasions that Dr Skinner is an excellent Doctor who listens avidly to his patients and their symptoms. Thyroid patients need more Doctors like Dr Skinner.

If Dr Skinner is one of the few who is willing to test and treat adrenals first, he is a hero and an amazing Doctor who really cares about the wellbeing of his patients.

Dr Skinner isn't a hyper-modern Doctor or anything like that, he is simply a Doctor who listens to his patients, and I believe he knows far more about thyroid disease than the huge majority of Doctors. I have corresponded with top endos in the USA, Canada, and the UK, and from what I have learnt during the course of time, I am very willing to state strongly that Dr Skinner's approach IS the correct one. I feel we need more Doctors who listen to sufferers of the disease and are willing to take his approach. Too many Doctor's are un-flexible when it comes to treatment of thyroid disease, or worried about repercussions. They shouldn't have to feel that way, yet this hearing against Dr Skinner is proof in itself why other Doctors are un-willing to use treatments that do indeed work well.

Please please encourage the good work of Dr Skinner. He deserves a great deal of respect for everything he does for sufferers of thyroid disease. He should be an example to the medical profession and I would wish to see other Doctors following in his footsteps.

Yours Faithfully

23/06/2005

Catherine Green (0161 923 6410)

From: Catherine Green (0161 923 6410)
Sent: 21 Jun 2005 15:13
To: Tim Simpson (020 7189 5208)
Cc: Ceri Floyd (0161 923 6411); Guy Wilkinson (020 7189 5201); Deidre Micklethwaite (0161 923 6573)
Subject: FW: CASE AGAINST DR. G. SKINNER

-----Original Message-----

From: Ebony Gayle (020 7189 5428)
Sent: 21 Jun 2005 15:12
To: Catherine Green (0161 923 6410)
Subject: FW: CASE AGAINST DR. G. SKINNER

FYI - more I'm afraid

-----Original Message-----

From: [REDACTED]
Sent: 21 Jun 2005 14:09
To: egayle@gmc-uk.org
Cc: mirrornews@mgn.co.uk
Subject: CASE AGAINST DR. G. SKINNER

Dear Sirs

I am writing in connection of the forthcoming case against Dr Gordon Skinner. Although I am not a patient of Dr Skinner, I have heard such wonderful reports about this doctor who seems to genuinely care for his patients. [REDACTED]

[REDACTED]

[REDACTED] So is it any wonder that so many desperate patients are turning to doctors such as Dr Skinner and Dr [REDACTED] when the NHS is sadly failing them.

It would be such a shame and a travesty for so many patients if this doctor is not allowed to practice. Doctors such as Dr Skinner are some patient's only hope.

Yours faithfully

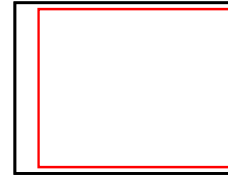
[REDACTED]

23/06/2005

Whatever you Wanadoo

This email has been checked for most known viruses - find out more here

23/06/2005



22 June 2005

To whom it may concern;

I am writing concerning Dr Gordon R B Skinner MD DSc FRCOG FRCPATH, of whom I have been a private patient since [redacted]. I have recently heard of his being called to appear before an Interim Orders Panel with the General Medical Council on 29 June 2005, and given only a fortnight to prepare, and felt I should tell everyone who will listen how he has helped me.

My story, briefly, is this: I had obvious undiagnosed thyroid dysfunction starting in [redacted] after I

[redacted]

I approached my NHS GP regarding my issues in [redacted] since a symptoms list seems to fit me like a glove, and was 'tested' for thyroid disease by using one test, the TSH, at 16.30 in the afternoon. It came back at [redacted] (reference range 0.5 – 5.5), and I was told I had no thyroid problem, to get some exercise and quit eating so much.

I approached Dr Skinner [redacted] and he did one of the most thorough physical examinations I have had: [redacted]

[redacted]

[redacted] After 1 hour and 30 minutes consultation, Dr Skinner agreed I was indeed in a state of thyroid hormone deficiency, and prescribed Armour thyroid.

It took me a few months for Doctor Skinner to get the dosage right for my body and my situation, guided by blood tests and symptoms both, but my life began to really turn around pretty quickly. [redacted]

[redacted]

[redacted]

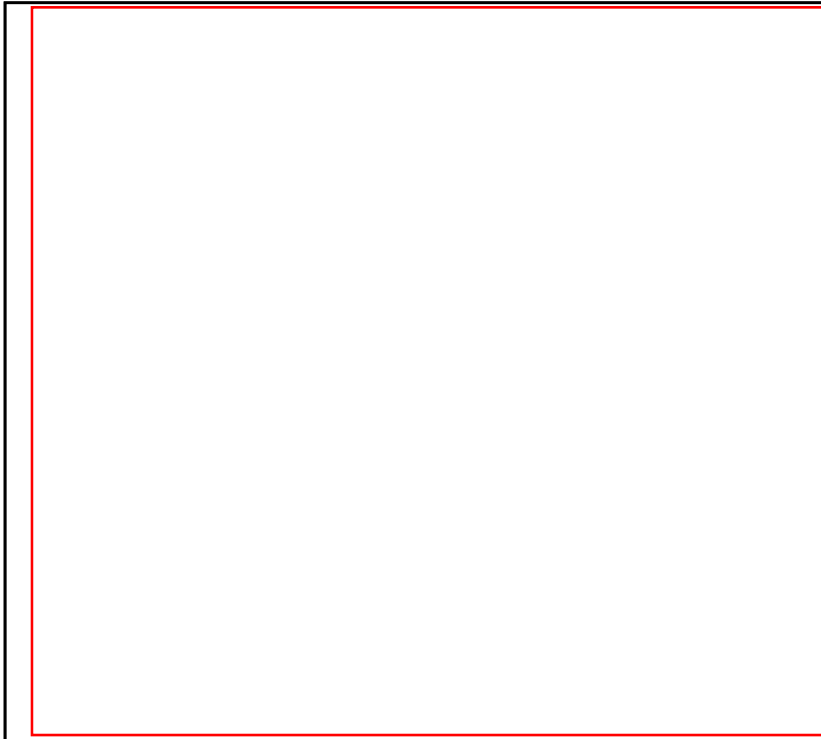
If Dr Skinner loses his license to practice and prescribe, what will happen to me, since my GP is still not on side? I will be forced to stop taking my medication, become fat and tired again, unable to conceive, unable to take care of my daughter, and life will once more become intolerable.

If this happens I will hold every single person involved in this atrocity **personally responsible** for the inevitable downhill decline in my health, and any damage done to my future children, as a result of my being denied medication and treatment.

Dr Skinner saved my life because he was willing to look at the whole picture, not just one TSH reading wrongly done at the wrong time of the day by a GP who had no idea what hypothyroidism looked like, let alone looking at his patients to see if they had it in the first place. Dr Skinner examined my body when no NHS GP was willing to do even that. Dr Skinner took the time that no other doctor would take, and he helped heal my body so that I was able to get back to living the life that someone in their should have been able to live, and start my family. I owe him a debt of gratitude I can probably never pay back.

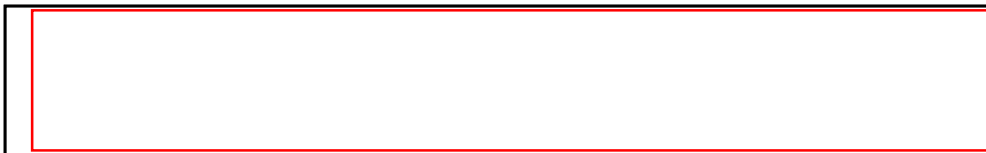
The GMC should not be allowed to crucify doctors like Dr Skinner for looking beyond a single flawed test result. A vast number people are going to suffer if this goes through, and a kind and generous doctor is going to lose his livelihood.

Where will Dr Skinner's patients go if he loses his license? Probably to the internet, to buy Armour thyroid off pharmacy websites in the States and have it shipped to the UK. Then they will probably have to self-medicate with Armour thyroid since most NHS GPs cite insurance problems as the reason they will not prescribe it themselves. And then the problems will really begin as these patients will not be guided by anything but themselves, and could cause themselves no end of health problems associated with under and over replacement of thyroid hormones.



TSH alone for diagnostic purposes is flawed. Many people needlessly suffer for it. I was one of them.

Doctor Skinner is a godsend to a great many people because of the NHS and its over-reliance on blood tests to diagnose and treat people. Myself included.



Those are doctors that deserved to be busted and stopped from practicing, they were harming patients! Dr Skinner has done no such thing, he has never harmed anyone; no patients are complaining, only senior endocrinologists with a bone to pick with Dr Skinner's far more successful method of dealing with thyroid disease.

Someone has to speak up. Someone has to stop the GMC before they do it again. In the end all we all want is to be healthy and to live our lives to the fullest, just like anyone else. 'Normal' TSHs and all.

Regards,





22nd June 2005

Mr Adam Elliott
Interim Orders
The General Medical Council
Regent's Place
350 Euston Road
LONDON
NW1 3JN

Dear Mr Elliott,

I am writing to express my concern regarding the action the General Medical Council have taken in the case of Dr Gordon Skinner who is summoned to appear before you at 2.00pm on 29th June 2005.

Following several years of declining health I was diagnosed with hypothyroidism in



Following research into my condition I consulted Dr Skinner. Since commencing the treatment instituted by Dr Skinner I have not taken a day off from my job My treatment is due to be reviewed by Dr Skinner I am still being treated with synthetic thyroid replacement hormone.

The GMC website states that the purpose of the General Medical Council "is summed up in the phrase 'protecting patients, guiding doctors' ". I understand that to mean that the interests of the patients are central to your work. I do not understand how suspending Dr Skinner will benefit me or any of his other patients. I know that I have a quality and fullness of existence that has been absent from my life for a long time. I have also been able to resume my career, earn my living and even enjoy my demanding job.

I understand that there are major differences in opinion regarding the treatment of low thyroid function. I trust that the General Medical Council, in accord with its stated purpose, will not put my health at risk by making Dr Skinner unavailable to treat me.



22 June 2005

Interim Orders Panel
The General Medical Council
Regents Place
350 Euston Road
LONDON NW1 3JN

For the attention of Mr Adam Elliott

Dear Sirs,

Dr Gordon R B Skinner

I should like to express my support for Dr Skinner. I have known Dr Skinner for the past years and in all that time have found him to be a caring, knowledgeable member of the medical profession. I am extremely pleased with the treatment I have received. His expertise has allowed him to diagnose and treat me satisfactorily.

Yours faithfully,

Catherine Green (0161 923 6410)

*Emails received
in support of Drs.
-forwarded to
Guy.*

From: Catherine Green (0161 923 6410)
Sent: 22 Jun 2005 10:13
To: Tim Simpson (020 7189 5208)
Cc: Guy Wilkinson (020 7189 5201); Ceri Floyd (0161 923 6411)
Subject: FW: Dr Skinner Hearing

-----Original Message-----

From: Ebony Gayle (020 7189 5428)
Sent: 22 Jun 2005 09:22
To: Catherine Green (0161 923 6410)
Cc: GMC Pressoffice
Subject: FW: Dr Skinner Hearing

FYI - more letters

Ebony

-----Original Message-----

From: [REDACTED]
Sent: 22 Jun 2005 06:49
To: egayle@gmc-uk.org
Subject: Dr Skinner Hearing

To whom this may concern,

I am writing to you to express my support to Dr Skinner. I do not really understand why he has to attend this hearing but regardless of the allegations I must let you know that thanks to Dr Skinner I have found hope in my future wellbeing.

[REDACTED] I was diagnosed with severe hypothyroidism [REDACTED] years ago. I was put on T4 replacement therapy. At that time [REDACTED] because of my poor health I went off sick. I was always told I was going to get well soon, which to date has not happened. [REDACTED]

[REDACTED]
[REDACTED] I found out about Dr Skinner and I went to see him at [REDACTED]. He advised me to start a different treatment with T4 and T3. Since then, I have been feeling more positive about everything and have really started to think that it is possible to get back to being healthy again.

I really think Dr Skinner is doing his best to help people like me to recover their health. I do not know what I would do if Dr Skinner wasn't allow to treat patients like me anymore.

I hope this letter would help Dr Skinner case. If you need any more details about my medical history do not hesitate to contact me.

Yours sincerely,

[REDACTED]

Dear Dr Skinner,

22.06.2005

I'm writing to express my horror over that GMC has called you to appear before an Interim Orders Panel - which I believe is for doctors who are a "danger to the public". How they can do such a thing to a caring doctor who tirelessly tries to help his patients that for years have been untreated or undertreated for hypothyroidism, is beyond my understanding. If anyone should be called "danger to the public" it should be all those GP's and other doctors who in their ignorance only look at certain blood tests and not to the symptoms of their patients.

I only found out this morning about this appalling news and feel I have to tell you how much I have appreciated your help. My own story is, as you know, that although I was diagnosed some [redacted] years ago and put on Thyroxine, I still had all the classical symptoms of being hypothyroid and had no quality of life at all. No doctor acknowledged that my symptoms still was from my thyroid, they just said that I was treated and therefore it could not be my thyroid. How wrong they all were!

With your help and changed medication, I slowly began to regain well-being and the last few months have been my best for many, many years! The best thing with this is that my blood tests are always within so called normal ranges, so my GP is quite happy for you to take care of my thyroid and for me to continue with my current medication prescribed by you.

My thoughts are in turmoil right now, will there be justice? Will I be able to continue to keep well if the unthinkable should happen and you will be suspended? I just can't get my head around this at all. How can GMC, who suppose to be there for the interest of the patients, do just the opposite? I sincerely hope this will not be the case - for you, myself and all the other hundreds of your patients whom you have given their lives back.

My thoughts will be with you on June 29th and I wish you all the best for the hearing. Please feel free to use this letter if you think it can help your case.

Kindest regards,

[redacted]

[REDACTED]

JAJ/DLP

22nd June 2005

Mr. Adam Elliott,
Interim Order Panel,
General Medical Council,
Regent's Place,
350 Euston Road,
London,
NW1 3JN

Dear Mr. Elliott,

Re: Dr. Gordon Robert Bruce Skinner, MD, FRC.Path., DSc
[REDACTED]

I am deeply saddened to hear that Dr. Gordon Skinner is being discussed by the Interim Order Panel next week.

I have known Dr. Skinner for many years [REDACTED]
[REDACTED]

I understand that his competence to help women with thyroid problems has been called into question. Obviously I cannot comment on the cases which have brought this about but what I can say is that over a period of several years I have referred women to Dr. Skinner for assessment of thyroid problems. Perhaps I could make the following points:

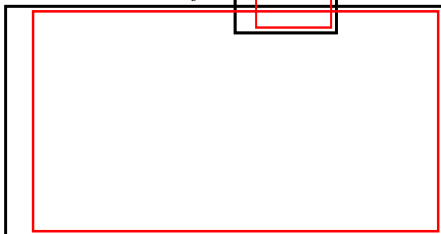
1. I am aware that Dr. Skinner's approach is sometimes regarded as unorthodox in as much as he sometimes gives higher levels of Thyroxine than the average person.
2. He justifies this by treating symptoms rather than simply relying on routine thyroid function tests.
3. The women I have referred to him have fallen into two broad categories:
 - a. Women who clinically have symptoms suggestive of hypothyroidism and yet who have normal thyroid function tests.
 - b. Women who are clinically hypothyroid but whose thyroid function tests are sometimes normal and at other times euthyroid.
4. In most instances he has been able to help the women I have referred to him and many have been extremely grateful for the fact that their symptoms have been improved. These are usually women who have been told either that Thyroxine was not indicated or that they are having the optimum amount and could not have more (in spite of symptoms.)

I have at all times found him extremely caring and conscientious. He gives patients an excellent service and I have no doubt whatsoever that some of my patients who have been refused treatment by their G.P. have benefited from the fact that Dr. Skinner has seen them as individuals with symptoms with which he can help, as opposed to women who have been denied treatment because their thyroid function is deemed to be either normal or euthyroid (and not requiring treatment.)

You may wonder why [redacted] refer patients to Dr. Skinner. The reason is simply that I see many women with menopause problems and it is not uncommon for me to see women whose problems are helped to some extent with the use of oestrogen replacement therapy but who continue to have symptoms which clinically fall, in my opinion, within the symptoms we see in women who are hypothyroid.

With kind regards,

Yours sincerely, [redacted]



COPY



22nd June 2005

Mr. Adam Elliott,
Interim Orders Panel
General Medical Council
Regents Place
350 Euston Road
NW1 3JN

Dear Mr. Elliott,

I am a patient of Dr. Gordon Skinner and when I telephoned this week on medical matters I heard that a hearing was to take place. I asked to be allowed to write this letter.

My background:



I saw Dr. Skinner's name in [redacted] [redacted]

[redacted] He said he might be able to help me. [redacted]

[redacted]

[redacted] My own surgery considered my thyroid tests within the normal limit. Dr. Skinner looked at all my symptoms and record together with those tests and felt I needed adjusting. Incidentally he is the only doctor I saw who automatically took pulse, blood pressure and blood tests every time I saw him. He was meticulous in his procedures. Thanks entirely to his medication I responded in [redacted] and

I have since had regular blood tests sent to him from my G.P. surgery and if I feel worse I phone him at once for his advice. I owe my greatly improved health to the combination of Dr. Skinner's medical direction working closely with my own G.P. who has been most co-operative in this team approach. His medication worked. I don't expect a miracle cure and Dr Skinner certainly never promised one, but he has improved my health beyond recognition. [REDACTED]

[REDACTED]

This doctor gave me back a standard of health that I can function within. Without his help I needed constant care from friends to keep me alive.

I met a lot of doctors and specialists in the [REDACTED] years I have had to contend with my condition. I spent a fortune without avail. I only wish I had been sent to Dr. Skinner years ago, I believe I would [REDACTED] not have [REDACTED].

I am happy to be interviewed by anyone in connection with Dr. Skinner's hearing and I am available on the telephone on [REDACTED].

Yours sincerely,

[REDACTED]



22nd June 2005

Adam Elliott,
Interim Audit Panel,
GMC,
Regents Place,
350 Euston Road,,
London.
NW1 3JN

For the attention of Adam Elliott

Dear Sir,

Re: Dr Gordon Skinner Hearing 29th June 2005

With reference to the hearing regarding Dr Gordon Skinner by the Interim Audit Panel on Wednesday 29th June 2005.

I am a patient of Dr Gordon Skinner whom I first consulted in the latter part of [redacted] this was after I had been seeing my own GP who was unable to help me with my medical problem. I was referred, on request, by my doctor to see Dr Skinner, after appropriate thyroid and adrenal tests by him, he recommended appropriate medication for my condition.

Dr Skinner personally kept my doctors apprised at all times and strove to set up dialogue with them.

I can only speak for myself that the medication prescribed by Dr Skinner along with regular [redacted] checkups [redacted] my health has returned to a satisfactory level. My husband and I are extremely grateful to Dr Skinner for his diagnosis and treatment leading to my recovery.

If you decide for whatever reason to suspend him from practice could you please inform me of a quality doctor of Dr Skinner's standing who can take on my condition – I am deeply concerned and require your assurances, Dr Skinner's expertise is not appreciated by my family doctor so I cannot get help from this source for my complaint.

I am also sending a copy of this to the Secretary of State for Health and I am sure many of Dr Skinner's patients, of whom I have met in his surgery and have regained so much of their good health due to Dr Skinner, will also be writing.

One thing I must emphasise is the way Dr Skinner does such a thorough diagnosis when treating his patients and insists on following up with regular check ups to monitor their conditions.

Could you please send me a copy of the outcome of the board please and any advice you feel I may need.

Yours faithfully,



c.c. Patricia Hewitt Secretary of State for Health



Thursday 23rd June '05

Mr Adam Elliott
Interim Orders Panel
GMC
Regents Place
350 Euston Road
London NW1 3JN

Dear Mr Elliott,

Re: Dr Gordon Skinner

I am shocked and appalled to hear that Dr Gordon Skinner has to appear before the Interim Orders Panel to justify his treatment of patients with hypothyroidism.

I have been a patient of Dr Skinner for years, and it is no exaggeration at all to say that his treating my hypothyroidism completely put my life back on track.

I have a very busy and stressful career and prior to finding Dr Skinner I spent hundreds and possibly thousands of pounds trying to find someone who would make me feel better. Just a few of my problems were:



All of the above, without exception have improved to such a degree that they are no longer a concern or problem or discomfort.



My GP is always copied on my notes after a consultation with Dr Skinner, by Dr Skinner himself and he is fully informed of the level of medication I take on a daily basis.

It would be wholly unjust if Dr Skinner were no longer able to practise as he makes a massive difference to people's lives. GPs don't specialise in conditions of the thyroid, they simply take a blood test and as long as the results fall within their guidelines of what is 'normal' they won't treat their patients. Dr Skinner specialises in thyroid functions and he can look at anyone's results and explain how the different levels will impact upon the patient. No GP that I have ever heard of will do this.

One thing I am sure of is that if I had never been diagnosed I would no longer be working and that alone would cause unimaginable problems. Problems that I don't want to have to consider. These days I wake up in the morning and can't wait to start the day – a stark contrast to the way I felt and behaved before starting treatment with Dr Skinner.

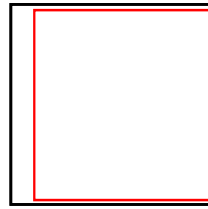
I hope you and your fellow board members consider very carefully – just because something doesn't fall within current guidelines does not automatically mean that it is wrong.

Yours sincerely,

[Redacted signature box]

Cc – Dr Gordon Skinner


Copy to Dr Skinner



23/6/05

Attention of Adam Elliott

Dear Sir

I am writing to you in support of Dr Skinner I have been a patient of his since 

Dr Skinner correctly diagnosed and treated me for under active thyroid, returning me to full health.

Previously I had been prescribed Thyroxine ,this only made a marginal difference still leaving me with many distressing symptoms.
I am unable to convert T4 to T3

Through Dr Skinner's care and help, I am able function normally now and resume a good quality life.

I remain in good health and Dr Skinner continues to monitor my progress

Yours faithfully





23 June 2005

Adam Elliot Interim Orders Panel
Regents Place
350 Euston Road
London
NW1 3JN

Dear Sir,

After hearing the worrying news that Dr Gordon R B Skinner will be before your panel on Wednesday 29th June I felt compelled to write to you in full support of the fantastic work he does.

I have suffered for many years with a number of debilitating symptoms of which my GPs were at a loss to diagnose. [REDACTED]
[REDACTED]ng.

When I eventually became so ill [REDACTED]
[REDACTED]
[REDACTED] I sought the advice of Dr Skinner who is a specialist in this field.

Dr Skinner confirmed that I did have an underactive thyroid by looking at my clinical features and symptoms and prescribed thyroxine and later T3. My current GP agrees with Dr Skinner and they are working together to return me to full health. I am continuing to improve and hope to be returning to my employment very soon.

Dr Skinner must be allowed to continue his fantastic work. Without his help I would still be bedridden in constant pain and a drain on my family and children who had to do everything for me.

I am not alone. Since discovering I have this illness I have found from researching that there are thousands of people in the same situation. These people are suffering because their GPs will not prescribe thyroxine as their blood tests say they are in the normal range even though their clinical features and symptoms clearly say otherwise. I am one of the lucky ones who found Dr Skinner and I feel that by stopping him practising you are taking away their chance at recovery and living a normal healthy life again.

Yours Faithfully





Telephone

Adam Elliot
Interim Orders Panel
Regents Park
350 Euston Road
London
NW1 3JN

23rd June 2005

Dear Mr Elliott,

I am horrified to hear that Dr Skinner has been summoned to appear before you, presumably to be disciplined, or worse.

I am a hypothyroid sufferer. A private doctor (not Dr Skinner) diagnosed me just over years ago after my local GP had failed to ascertain the cause of my deteriorating health, which included

Once on thyroxine there was a noticeable gradual improvement in my wellbeing. My GP agreed to prescribe thyroxine for me. later he told me that he was no longer able to treat me for a low thyroid condition. No explanation was given.

I then turned to Dr Skinner with the blessing of my GP and he has treated me for approximately years. Throughout Dr Skinner has been most attentive and monitored my health scale very carefully and treated me with respect. I am almost of age and my health is excellent.

Dr Skinner is not only an excellent medical practitioner, very highly qualified and constantly researching, but is also a medical scientist working in the field of virology. His departure from the medical profession would not only be a catastrophic loss to thousands of patients (who have to pay for the privilege of visiting him ~~because~~ of the total lack of knowledge and understanding of thyroid conditions within the medical profession), but would also be a serious loss to medicine itself.

2

I have no hesitation in recommending him to you, and I can assure you he has my full support.

Yours sincerely





23 June 2005

Mr Adam Elliott
Interim Orders Panel
General Medical Council
Regents Place
350 Euston Road
London
NW1 3JN

Dear Mr Elliott

I am writing in support of Dr Gordon Skinner who had been treating me for hypothyroidism since [redacted]. At Dr Skinner's request my GP sent a letter outlining my treatment by the NHS.

I chose to visit Dr Skinner as my local NHS Trust hospital refused to treat my condition

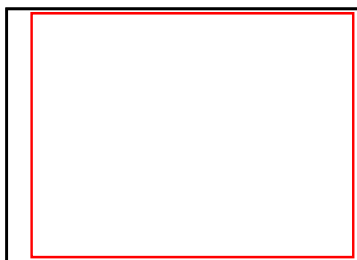


It has been acknowledged in many quarters for a long time that clinical tests alone in the diagnosis of hypothyroidism are unreliable and that many patients respond positively to Dr Skinner's approach to treatment. In the short time I have been treated by Dr Skinner I have begun to 'reclaim' my life. My symptoms are slowly beginning to disappear and I am returning to 'normal'. [redacted]

I have come to believe that many doctors refuse to believe that their patients can be aware of their own bodies, we are not intent in harming ourselves, quite the reverse, our wish, which is often ignored, is to be well, why then are we constantly refused the treatment we require.

I would like to thank you for taking the time to read this letter; I am sure you will concur that Dr Skinner's treatment of hypothyroidism deserves to continue and us, his patients, deserve the care he gives.

Yours sincerely



23rd June 2005

REF/K.O'C

PRIVATE AND CONFIDENTIAL

Mr. Adam Elliott,
Interim Orders Panel,
General Medical Council,
Regents Place,
350, Euston Road,
London NW1 3JN

To Whom It May Concern:

Re: Dr. Gordon Skinner

I wish to support Dr. Gordon Skinner in his effort to defend his professional reputation with the General Medical Council.

[Redacted]

[Redacted]

[Redacted] Over the years I have continued to keep in touch with Dr. Skinner and his work. I have occasionally from time to time referred him patients for treatment with a Herpes Vaccine which he developed as part of his research programme. At all times he communicated professionally and I received many favourable comments regarding his professionalism from patients referred. I always regarded him as a brilliant doctor whose overwhelming interest and expertise lay in research. I know him to be a very caring honest doctor who is so prepared to help his patients that he will not shy from ruffling the feathers of colleagues who resist his honest approach – a characteristic I feel sure has proved very costly to him professionally in the past.

Above all apart from being brilliant Dr. Skinner is honest. He does not usually tow the party line in matters, which are controversial and because of this he leaves himself exposed to criticism from medical colleagues who misjudge his intentions.

I trust you will give Dr. Skinner a fair hearing and judge him in the knowledge that he is not your average doctor but rather a brilliant research worker and teacher who has spent his life breaching frontiers where most of us have neither the time, expertise or desire to venture.

Yours sincerely,

A rectangular box with a red border, used to redact the signature of the sender.

COPY

Copy also sent to Sylvia Hullah

23rd June 2005

For the attention of:

Adam Elliott
Interim Orders Panel
Regent's Place
350 Euston Road,
London
NW1 3JN

Telephone:
International:
Email:

Fax: 0207 1895179

Dear Mr Elliott,

Reference: Interim Order: Dr Gordon Skinner.

I am writing to you to support Dr Gordon Skinner, who is apparently appearing before you in connection with prescribing Armour Natural Thyroid. Below, I have responded to the guidance notes taken from the GMC's website, **Interim Orders Panel: Referral Criteria**. These guidance notes are shown in italics.

When considering whether to refer a case to the IOP, the Case Examiner, Performance Case Co-ordinator, Investigation Committee or Fitness to Practise Panel, as appropriate, should take account of the following factors:

a. The seriousness of risk to members of the public if the practitioner was to continue to hold unrestricted registration. In assessing this risk the IOP will consider the seriousness of the allegations, the weight of the evidence, including evidence about the likelihood of further offences occurring whilst the allegations are resolved.

I was referred to Dr Skinner in

Dr Skinner was the first doctor to give me what I consider a first-class physical examination. He used his medical instruments to look into my ears, my nose, my eyes. He examined my fingernails, he took my body temperature, he examined my skin condition. What he was trying to discover, I later realised, was this: "Does this person **look** ill?" He was not relying on blood tests alone, he was doing what doctors have had to do through the ages: he was

using his skills as a physician to see if I was ill and if my body was showing any indication of where that illness lay.

From this professional approach it will be apparent that Dr Skinner is not a person who will put the well-being of his patients in jeopardy. [REDACTED]

[REDACTED] I understood his cautious approach.

[REDACTED] I have not heard of anyone complaining about the medicine that Dr Skinner has prescribed for them. The general feeling has been how grateful we are to have a doctor prepared to try to improve our terrible condition.

b. Whether public confidence in the medical profession is likely to be seriously damaged if the practitioner were to continue to hold unrestricted registration whilst the allegations are resolved.

Dr Skinner is exactly the sort of physician we people with ME/Chronic Fatigue need. When you tell him you are ill, he believes you. This may sound odd to you, but getting doctors to believe we are ill is a major stumbling block to getting treatment. I have had years of "We can find nothing wrong with you, [REDACTED]." But I am ill, make no mistake about that.

[REDACTED]

[REDACTED]

[REDACTED]

So here is a doctor who is discovering that 99% of patients he sees with this 'reported' problem is confirming that they have a serious illness. This is exactly the type of doctor who is enhancing the reputation of the medical profession. We don't just need Dr Skinner, we need thousands more doctors like him.

c. Whether it is in the doctor's interests to hold unrestricted registration. For example, the doctor may clearly lack insight and need to be protected from himself/herself.

One of the most important things about talking to Dr Skinner is that he treats you as if are a human being: an intelligent human being. Although he has excellent skills as a physician, he

knows that only the patient can actually tell him about how ill he or she is feeling, only they who can tell him about all the major and minor symptoms of the illness, all the little pieces of the jigsaw that will give him an understanding of the full puzzle. He understands that you are not just "a patient" but that you have insights of your own about the illness that no-one else has. And, of course, each individual patient he sees enables him to build up a body of knowledge about the ME/Chronic Fatigue problem that few other doctors in the country will possess. In this respect he has more insight than any other doctor or consultant I have met.

Dr Skinner is not, to my knowledge, the only doctor to prescribe Armour Natural Thyroid. Some patients respond better to Armour than ordinary thyroxine. Isn't this what a doctor should be doing - trying to find the best treatment for his patients?

Dr Skinner is the most professional physician I have met in the years I have been ill with That I am now on the road to recovery is due to Dr Skinner's treatment, which enabled me to do more than move between the bed and the armchair. His approach is to try to get people well - no more, no less. We as ME/Chronic Fatigue patients can want for no more than his thoroughly professional approach.

Yours sincerely,

[redacted] [redacted]

For the attention of

Adam Elliott
Interim Orders Panel
Regents Place
London
NW1 3JN

23 06 05

Dear Mr Elliott

Re Dr Gordon Skinner / Hearing 29 06 05

I understand that Dr Gordon Skinner's approach has been called into question.

I was first diagnosed with hypothyroidism at the age of [redacted].

Over [redacted] years of conventional treatment with synthetic thyroid hormone, the dose determined by the blood test results, failed to make me well. The 'normal' levels given as guidance are not 'normal' for me.

It was only when I became a patient of Dr Skinner's and was able to benefit from T3 replacement therapy – that I have been able to live the kind of life that those of you with normal thyroid functions take for granted.

Inadequate treatment of hypothyroidism condemns one to a life half lived – the effects of which – reverberate through ones family and their lives.

Dr Skinner's treatment of hypothyroidism is the most successful I have found in the [redacted] years since my diagnosis.

The IOP has a duty to act to protect members of the public and the wider public interest. It is in the public interest for the IOP to applaud and embrace the findings of doctors such as Dr Gordon Skinner,

Yours sincerely


[redacted]

[redacted]

Attention of Adam Elliott
Interim Orders Panel

23/6/05

Dear sir

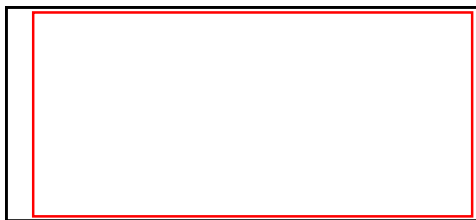
I am writing in support of Dr G Skinner, who treated my daughter 
for her underactive thyroid.

She has returned to full health after his correct diagnosis and treatment.

Her improvement was clearly visible to me.

She continues to be monitored by him, and remains in good health.

Yours Faithfully



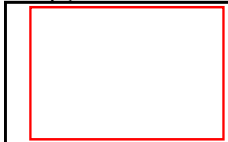
Copy to Dr GRB Skinner



23rd June 2005

To: Adam Elliot
Interim Order Panel
Regents Place
350 Euston Road
London
NW1 3JN

Copy to: Dr Gordon Skinner



Dear Sirs

Re: Dr Gordon Skinner

I write in support of Dr Skinner.

At age I was diagnosed with an under-active thyroid. I was prescribed micrograms of thyroxine which was gradually increased I regularly returned to my GP's complaining of poor quality of life. I was repeatedly told that my **blood readings were normal and my thyroid problem was rectified.**

In I consulted Dr Skinner and subsequently increased my thyroxine intake to **Thanks to Dr Skinner my family and I are now enjoying a normal life.**

Should you require further information I should be happy to help.

Yours faithfully,

June 23, 2005

Dr Gordon R B Skinner. M.D.,(Hons) F.R.C. Path., F.R.C.O.G., D.Sc.

Mr Adam Elliott
Interim Orders Panel
Regents Place
350 Euston Road
London
NW1 3JN

Dear Mr Elliott,

I would like it to be known that I am a patient of Doctor Skinner and support him in his effort to help people who suffer from thyroid problems.. I have been receiving treatment for the last and my well being has improved considerably. I have suffered from various symptoms for about years with no help from my National Health doctor. I was so relieved to find someone who understood my predicament and has been able to give me a new start in life. I have no desire to return to my previous state of ill health.

Yours sincerely

Mr. Adam Elliott
Interim Audit Panel
Regents Place
350, Euston Road
London
NW1 3JN

23rd June, 2005

Dear Mr. Elliott

Dr. G.R.B. Skinner MD (Hons.) DSc, FRCPath, FRCOG

I am writing to you to explain the great debt of gratitude I owe Dr. Skinner who, after I had been ill for several years, diagnosed my underlying problem and put me on the road to recovery.

As I had been getting progressively ill over a period from [] I had been a constant visitor to my Doctor's surgery and saw several different Consultants. My problems included (what I now know to be) []

[]

In [] a friend heard Dr. Skinner on Radio 4 talking about research he had been doing in the field of herpes and this being one of my many problems suggested I tried to see him. I can only say that what happened when I walked through the door into his consulting room still brings me to tears, even today some [] years later.

[] Dr. Skinner asked me to explain all my symptoms to him and he immediately identified a link to a hypothyroid condition which, following a number of tests, was confirmed. I have been on [] micrograms of thyroxine for [] years and can now live a normal life; []

[]

I can honestly say that, given the way my body was breaking down, Dr. Skinner saved my life and restored my faith in the medical profession which, up until then, I felt had failed me greatly.

Dr. Skinner was the first medical practitioner I had seen in years who took an holistic approach to my condition. He is a kind, very professional man who has a genuine regard for all suffering human beings and I can never thank him enough.

Yours sincerely,



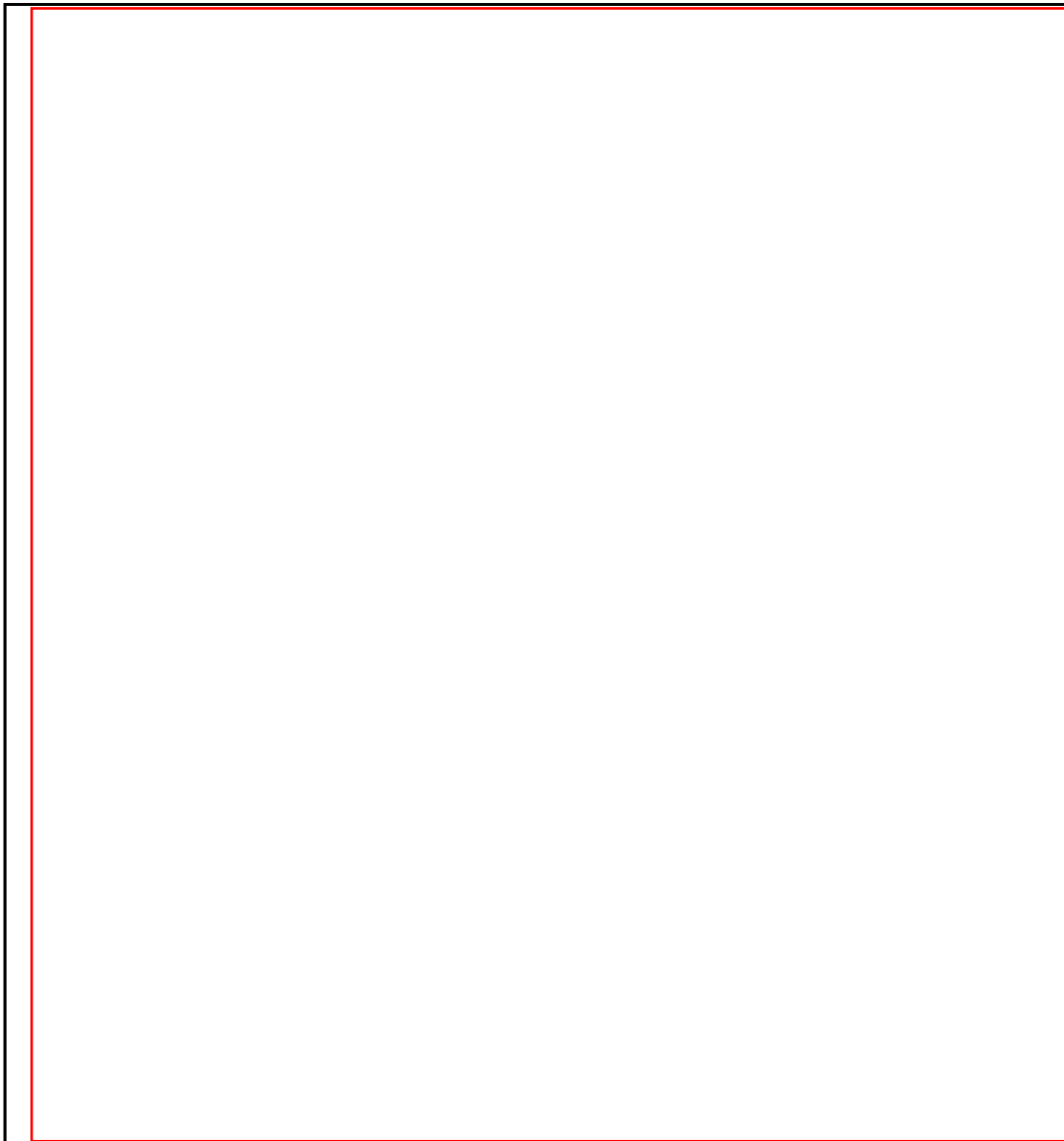
Copy of letter
sent to GMC


Dear Sir/Madam,
Re: Dr Gordon Skinner

With reference to the forthcoming hearing on 29th June, I would like to offer my personal experience of Dr Skinner to the GMC for the following reasons:

- a) The vast improvement in my health, since I have been his patient and,
- b) My great concerns for my continuing health and well-being should he not be able to practise.

Context



1.11 In my frustration, I found Dr Skinner. In my very first consultation he took the trouble to look at 'me'. 





1.12 My GP has never looked inside my mouth or asked me any questions that might equate my speaking problems with hypothyroidism. [redacted]
[redacted]

1.13 Dr Skinner thoroughly examined me, analysed my test results and asked me a number of questions about my health and cognition. Questions that my GP had never bothered to ask. I realised that many problems I had had were actually symptoms of hypothyroidism.

1.14 Within [redacted] months of seeing him [redacted] family and so many colleagues said they could see the 'sparkle' back in my eye.

[redacted]
[redacted] I believe this is powerful testimony to the effectiveness of the treatment.

1.15 After my second visit to Dr Skinner, it was at this point that I realised how ill I had been. [redacted]
[redacted]

1.16 [redacted]

1.17 I still see Dr Skinner [redacted] He is very careful to ensure that I am monitored.

Had I not seen Dr Skinner, I cannot imagine what would have happened to me. It may be hard for the GMC to understand the immense impact of Dr Skinner's treatment has on individuals but I can say, from a personal viewpoint, that his treatment has improved my health immeasurably, and has certainly saved me from failing at work

I am also angry that at least [redacted] years of my life have been spoiled by an increasing medical problem that could have been so easily avoided. [redacted]
[redacted] I was hypothyroid and the medical profession let me down.

My GP has since admitted that test results are there to protect doctors from legal action, therefore, I conclude that they are not there to support the treatment of patients. I felt I had a right to have a say in my treatment and that was denied me. Frankly, the GPs who deny their patients this treatment based on test results should try living with the symptoms I had for over [redacted] years.

In Dr Skinner, I feel that my clinical symptoms have been given right and proper credibility. I have made amazing progress in [redacted] If his services are denied of me and other patients, I give notice that I fear for my long-term health and of my ability to do my job at the level that is required.

Yours sincerely

[redacted]

[redacted]

[REDACTED]

23rd June 2005

Dear Mr. Elliott,

I am writing to inform you that I am both shocked and appalled to hear that Dr. Skinner's practice is under question. I truly believe that I would be dead by now if I had not met Dr. Skinner. I had seen several general practitioners and was suffering classic and eventually severe symptoms of an underactive thyroid over at least a [REDACTED] year period, but not one of them identified this. General practitioners are what they are titled to be - GENERAL - they are not experts in any particular field and are often ignorant of the complexities of thyroid dysfunction.

The first time I saw Dr. Skinner I was so relieved that I had found a doctor who knew what he was talking about and who understood that what I had been suffering for all those years was real. Unlike the general practitioners, he didn't treat me like a hypochondriac; [REDACTED] and didn't treat me as a number. He recognised straightaway, just by looking at me, that I had a thyroid problem.

He is a true expert in his field and I have every faith in him as a specialist. I only wish that my mother could have seen him too. [REDACTED]

[REDACTED]

[REDACTED] What a sorry state of affairs.

Instead of dragging down the doctors who truly know what they are doing in the medical profession, the General Medical Council should be looking into the way general practitioners treat their patients. If I can be of any further assistance or support in regard to Dr. Skinner then please do not hesitate to contact me. We need more doctors like Dr. Skinner, not less!

Yours faithfully,

[REDACTED]

Ceri Floyd (0161 923 6411)

From: Michael Keegan (020 7189 5157)
Sent: 23 Jun 2005 14:54
To: Ceri Floyd (0161 923 6411)
Subject: FW: GMC reforms and clinical governance

Dear Ceri

I understand that you are the caseworker dealing with the Dr Skinner case/s.

I have received an email, below, in which you might be interested.

Kind Regards

Michael Keegan
Standards & Ethics
Tel: 020 7189 5157
Email: mkeegan@gmc-uk.org

-----Original Message-----

From: [REDACTED]
Sent: 23 Jun 2005 00:25
To: mkeegan@gmc-uk.org
Subject: GMC reforms and clinical governance

Hi

I'm certain that you have heard complaints against the GMC with regard to Dr. Gordon Skinner. I have just read the codes of practise on this site, and feel I must say Dr. Skinner covers all these. Added to which Dr. Skinner offer help and hope for many thyroid patients who have been sadly neglected by the NHS. I am one of these people, I have been searching for years to answer on my health problems. And it is only with help from Dr. such as Dr. Skinner that I have any sort of life. I urge you to look at <http://groups.yahoo.com/group/TPA-UK> and contact [REDACTED] (the founder) it see how many desperate people are seeking help and having to pay privately. It seems to me and my family that the GMC/NHS why so many people are being abandoned to their own devices purely and simply because of government reference ranges with in the NHS. The rest of the world is one the ball, and the patients get the treatment they need. In this country all Endocrinologists seem to do is look at test results and say you're fine, but why is it that so many are suffering and having little if no quality of life. I also note that there is no mention on your site of the hearing for Dr. Skinner next week. From what I am reading on the above site plus many other sites

Thank you

[REDACTED]

30/06/2005

[REDACTED]

For the attention of Adam Elliott

With reference to Dr. Skinner

Dear Sir,

I have suffered [REDACTED] for [REDACTED] years. I was recommended to Dr. Skinner by two unrelated people. I was worried that my symptoms were that of an underactive thyroid.

I had a consultation with Dr. Skinner who prescribed a very low dose of Thyroxin which was to be gradually built up to an average dose. My blood test came back showing an average result so Dr. Skinner telephoned me to advise me of the results and to ask whether I wished to continue the treatment. Literature from my local M.E. Group supported my desire to see if there would be any benefit from taking Thyroxin.

At no time did I feel pressured or unduly led and would be happy to recommend Dr. Skinner to any person with a potential thyroid condition.

Yours sincerely,

[REDACTED]

[REDACTED]

c.c. Dr. Skinner

COPY ✓



23 June 2005

Mr A Elliott
Interim Audit Panel
Regent's Place
350 Euston Road
London NW1 3JN

Dear Mr Elliott

I have been informed that Dr Gordon Skinner has been asked to appear before an Interim Audit Panel regarding his treatment of patients with thyroid conditions.

I was introduced to Dr Skinner ☐ years ago by a fellow sufferer. I had been suffering for ☐ years with various symptoms of hypothyroidism but, because my blood test results fell within the so called "NORMAL RANGE", I was not treated. One GP refused to consider a diagnosis of hypothyroidism and yet another said she sympathised with me because she could see I had many symptoms but, because of my blood test result, she COULD NOT treat me. I eventually begged a Locum GP to write a referral letter for me to see Dr Skinner. She did this reluctantly.

Dr Skinner listened to me and checked me over for physical symptoms of an under active thyroid. His diagnosis and treatment were based not only on a blood test result, but also by taking a full case history and applying his invaluable knowledge. My blood test results fell well within the "NORMAL RANGE".

I have been restored to AI health and will be forever grateful to Dr Skinner for his professional, caring and accurate diagnosis. I have the utmost faith in Dr Skinner. He treats a patient as they should be treated, allowing professional judgment to lead him to a diagnosis, rather than having to be guided only by a blood test result.

Maybe this is an ideal opportunity to highlight the fact that individuals cannot, and must not, be slotted into a "NORMAL RANGE". What is NORMAL? Every human being is an individual and has the right to be treated as such. Who set these ranges and what were the criteria based on? These ranges are dangerous and inappropriate and adversely affect people's lives every day. Thousands of patients are having the door shut in their face by GPs and Endocrinologists,

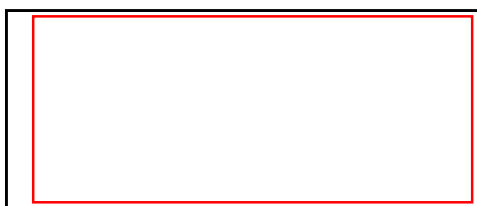
unaware that they are, indeed, being deprived of restoration to optimum health through a very simple, cost effective process of being prescribed thyroxine.

Dr Skinner is using mainstream medical practices and medicines to help many people who otherwise would be condemned to a life of misery, or even death. Surely this is something that should be applauded, not criticised?

If consideration was given to updating the guidelines used in the diagnosis of thyroid conditions, allowing GPs and Endocrinologists to use latest medical knowledge and their discretion, then that would be a worthwhile cause. Instead, it seems that the GMC is more concerned with persecuting someone who listens to the patient rather than adhering to blood test result ranges which have remained unchanged for at least thirty years despite overwhelming evidence that challenges their relevance.

I have no hesitation in recommending Dr Skinner to fellow sufferers and continue to do so on a regular basis.

Yours sincerely






24 June 2005



Dear Mr Elliott

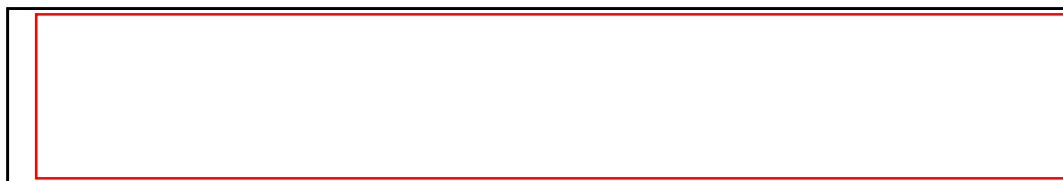
Re Dr GRB Skinner

I am writing in support of Dr Skinner.


I first saw Dr Skinner after reading the book "Tears behind closed doors". My wife has 

Dr Skinner treated us as people who mattered and dealt with all our symptoms in reaching his diagnoses.

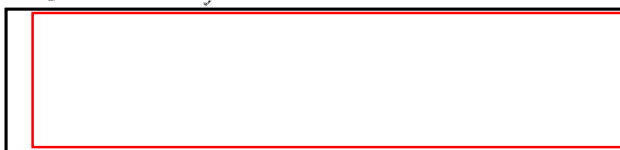
On my initial consultation Dr Skinner 
 put me on a course of thyroxin for an under active thyroid. I felt the benefits of this and it was increased on subsequent visits.



Dr Skinner's diagnosis, based on his holistic approach, proved accurate and reliable. I have no hesitation in supporting him as an honest, polite and skilled professional.

My wife,  also has every confidence in Dr Skinner. We wish him well for the future.

Yours Sincerely





24th June 2005

Mr Adam Elliott,
Interim Orders Panel,
General Medical Council.

Dear Sir,

I am very concerned to hear that Dr Skinner is to appear before an Interim Orders Panel of the General Medical Council. I am a patient of his and am extremely grateful for all that he has done for me.

I first noticed symptoms, which I associated with hypothyroidism, around [redacted] years ago. Since then, I have consulted a series of general practitioners, all of whom have performed the same tests and assured me that the results were either within acceptable limits or on the margin. [redacted]

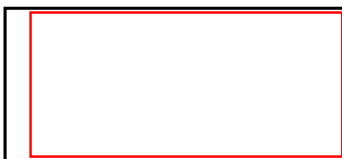
[redacted] I consulted Dr Skinner, having heard about him from a relative. Following a very thorough consultation, during which he recognised many of my symptoms as being associated with hypothyroidism, he prescribed a thyroxine

[redacted] Since then, I have had [redacted] further consultations as a result of which my daily dosage of thyroxine has been progressively raised to [redacted]. This has resulted in the following improvements to my state of health:



In considering Dr Skinner's case, I trust that you will bear in mind the huge amount of good that he has been able to do for his patients by his willingness to maintain an open mind regarding the relationship between their symptoms and their level of thyroid activity.

Yours sincerely,



cc. Dr Skinner (Your copy).

24 June 2005

Adam Elliott
Interim Orders Panel
General Medical Council
Regents Place
350 Euston Road
London
NW1 3JN

For the attention of Adam Elliott

Reference : Dr. Skinner's Hearing on 29/6/05 at 2pm

Please read this letter. I am one of the patients who does not stay well on the normal blood tests for hypothyroidism ie TSH.

I am a regular patient of Dr. Skinner. He is a very caring man and only wants people to feel well again.

I had a very unfortunate history –

My doctor said I could see a Consultant and this is how I got to see Dr. Skinner. A friend of mine who has normal blood levels but is on thyroxine due to having all symptoms of hypothyroidism mentioned that she was referred to Dr. Skinner by a doctor.

I went to see Dr Skinner and I am now back how I used to be. Energetic, having returned to work and do not have any problems with hypothyroidism. [REDACTED]

[REDACTED]

This has been carefully monitored through Dr. Skinner and my doctor. The first time I saw Dr. Skinner he spent an hour with me. He checked my weight, blood pressure, pulse, skin etc. We talked and he observed me for a long time. I was not converted enough T3 from T4 to give me energy. My T3 was at the bottom of the range. He got the doctor to raise my dose up very slowly and to get the hospital to measure the T3 and T4.

Gradually [REDACTED] I got better. My mind works as it has always done. My creativity has returned and I do all sorts of hobbies. I work full time and go away a lot in my job. [REDACTED]

[REDACTED]

I am very satisfied with the treatment I have received from Dr. Skinner. If I had not seen him I would probably have never gone back to work. Unfortunately I have to support myself and I would have been really stuck.

Yours faithfully

[REDACTED]
[REDACTED]



24th June 2005

Case Officer
Interim Orders Panel,
GMC Regents Place
350 Euston Road, LONDON,
NW1 3JN

Dear Sir,

I wish to register my extreme concern at the GMC's decision to summon Dr Gordon Skinner to appear before the Interim Order Panel on 29th June 2005. Dr Skinner, far from endangering anyone's life, has saved, or at the very least, improved the quality of life of many of us, previously undiagnosed and untreated by the NHS, on the basis of his knowledge of viral illnesses and their effects on the endocrine system.

My ill health became apparent in [REDACTED]

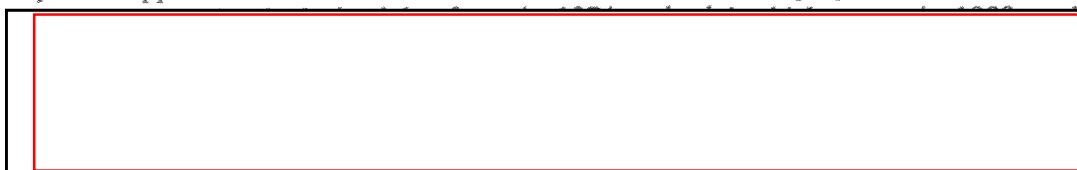


Every one of those specialists told me that my numerous symptoms sounded like a thyroid problem and most of them tested me for such a problem. My tests were 'normal' therefore I could not have a thyroid problem. Each of these specialists also carried out many other tests [REDACTED]

[REDACTED] which must have incurred a great cost to the NHS.

Meanwhile I became more and more ill, finding it increasingly hard to live a normal life, and medical consultations began to border on the surreal with no doctor able to understand my symptoms or being willing to believe how very ill I felt, although I now realise most of them had a very good idea of what was wrong. Thankfully my GP arranged regular thyroid blood tests for me, and when I finally lost my job and career she suggested I see Dr Skinner since two of her other patients, with a similar history to mine, had recovered their health under his care.

My first appointment with Dr Skinner was a revelation. [REDACTED]



I entrusted my medical care to my GP and her chosen specialists, but was not helped until Dr Skinner treated me. I believe it is the remit of the GMC to ensure the care of this nation's health. If you now prevent Dr Skinner from treating me, you are denying me appropriate treatment for my medical condition, and I will take legal advice, and action if necessary, to be treated within this country as I am entitled, rather than be forced abroad for treatment for a condition which any doctor would have treated on clinical symptoms alone until a few decades ago.

Should any doctors who are intimately, and possibly financially, involved in the development of both the thyroid blood tests and the synthesis of thyroid hormones, be involved in any way whatsoever with this hearing, its transparency would be questionable, a conflict of interests would arise, and the proceedings would appear to have the trappings of a Star Chamber.

I request that you take this submission into account on 29th June and that you will not prevent Dr Skinner from treating me, or my fellow sufferers, in the future, we owe him a very great deal, and others doctors should learn from his expertise.

Yours sincerely,

[Redacted]

[Redacted]

[Redacted]

[redacted]

[redacted]

24th June 2005

TO WHOM IT MAY CONCERN – RE DR GORDON SKINNER.

Having been diagnosed with ME after a long period of being confined to bed with a variety of symptoms I was determined [redacted] to identify any physical causes. Among many tests I underwent the standard blood test for Thyroid function and was informed my T4 was 'within normal range.'

Having real suspicions that my problems were, at least partially, caused by a thyroid malfunction I consulted Dr Skinner whose examination and questioning of me revealed a number of clear symptoms which demonstrated severe hypothyroidism – [redacted]

[redacted]

Dr Skinner's advised protocol of low levels of Prednisolone administered in conjunction with low levels of Thyroxine was exactly correct for this set of circumstances and subsequent retests have shown improvements in the situation. Dr Skinner wrote to my GP and I showed him the urine test results but he stated he had to use the standard blood test as his guide.

Dr Skinner's interest and attention to my situation has proven to be the only positive contribution from a medical profession whose advice appears to be sit, wait and hope. He uses his observational skills and the factors that served doctors well for the years before the current reliance on simplistic tests.

I am appalled that any disciplinary action should be taken against such a kind, expert and brave Doctor.

Yours Sincerely

[redacted]

[redacted]


June 24, 2005

Mr. Adam Elliott
Interim Orders Panel
Regents Place
350 Euston Rd.
London NW1 3JN

Dear Mr. Elliott,

I am moved to write to you with regard to the forthcoming meeting on Tuesday, the 29th June concerning Gordon R. B. Skinner, MD DSc. FRCPATH. FRCOG.

I am extremely shocked and dismayed to learn about this meeting and its purpose and after much thought would like to make the following points in his defence:

-  I sought Mr. Skinner's expertise as a second opinion after suspecting a thyroid condition for years. Because the thyroid blood test charts me at the bottom of the 'normal' range, my G.P. had insisted that there was nothing wrong, ***even though I was displaying several classical symptoms of hypothyroidism.***
- I chose to go to Mr. Skinner after carefully reading about his work and taking a personal recommendation from a work colleague who had herself been ill with unrecognised hypothyroidism. Her extensive research for help led her to Mr. Skinner and over a period of time I ***have watched this woman restored to normal health.***
- Mr. Skinner made a detailed investigation of my symptoms, in relation to the blood test results. I was able to ask questions in a free manner and felt that he was interested and focused on my return to good health. ***The first time I had felt that connection with a medical professional, in a long, long time.***
- Furthermore it was absolutely evident that he was extremely knowledgeable and had done a lot of research on the matter in hand. If I ask him a question to which he doesn't know the answer, he is

honest and will think about which variables are at play and why he cannot answer. My experience shows me that this sort of professional confidence comes from someone who really has spent time with the subject.

- He was able to make a lot of sense out of my particular case. He explained to me about what happens if thyroid disease remains undiagnosed and to comment on genetic history. Although I had probably not been right for a very, very long time I had the ultimate faith that he would do his very best to get me well.
- I am now a 'work in progress'. Things have been getting much better for me although I know there is a long way to go. Recently a separate medical problem led me to consult him about an important matter, which I was able to do [REDACTED]
- I can testify that Mr. Skinner has always been honest, completely honourable and dedicated in his work. Whatever professional politics may be occurring, ***it would be a complete travesty of justice to stop this doctor practicing and continuing his good work, depriving patients of his refreshing and knowledgeable approach.***
- Finally, I leave you with a very important truth. **MANY, MANY PEOPLE GET WELL AS A RESULT OF HIS WORK.** I would urge you to really consider this as you evaluate this case.

Sincerely,

[REDACTED]

[REDACTED]

c.c. Mr Gordon R.B. Skinner, MD DSc FRCPATH FRCOG

When I saw Dr Skinner he listened to my symptoms, was very thorough in his examinations each time I visited, I could phone him anytime if I wanted to discuss my progress. **Because of his care,**

- My life now does not compare with my miserable existence before I saw Dr. Skinner
- I am and have a better quality of life thanks to Dr Skinner than I have had for 40 years.

I would not have spent thousands of pounds over the years, nor been on countless exclusion diets, swallowed homeopathic and herbal remedies, if any single GP over the years had referred me to a specialist instead of dismissing me out of hand and assuming they knew better than I did about my health. I am assured the blood test is the definitive answer but according to thyroid groups it should not be taken in isolation, the symptoms should also be taken into consideration. The GP's are after all, general practitioners not specialists.

I only ceased seeing Dr. Skinner because I retired from work in and could not afford the hundreds of pounds it was costing me for private prescriptions. I was prescribed Tertroxin and Thyroxine and the Tertroxin is very expensive.

I now feel at a very bad disadvantage within the NHS because I saw Dr. Skinner but I do not regret it.

I obviously do not know what 'evidence' you have to justify interviewing Dr Skinner about his treatment of patients but I am one patient who has Dr Skinner to thank for saving my life and I just wish I had known him years ago I would have had a much better quality of life, [REDACTED], I have tried very hard not to be bitter about the way GP's have dismissed me over the years. I have nothing but praise for Dr. Skinner's treatment that gave me a new life, albeit so late in the day for me.

[REDACTED]

I am personally appalled upon learning what is happening to him.

Yours faithfully

[REDACTED]

[REDACTED]

23.06.2005

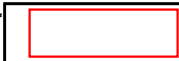
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Phone Number

Fax Number



Web Address

Email:



Fax Transmittal Form

To: Interim Orders Panel

Name: Adam Elliot

Phone:

Fax: 0207 189 5179

From:

Date Sent: 24th June 2005

Number of Pages: 1

Message; Re Dr. G. Skinner

I have just been advised of the Hearing.

Could I give my unsolicited support to Dr. Skinner. He helped me back to health where the NHS failed me. I do not need to go into details about the NHS blood test for detecting under active Thyroid problems as I am sure you are well aware of these.

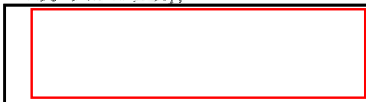


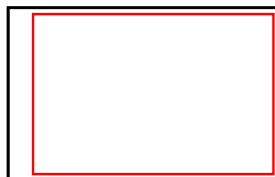
So, despite a lifetime of paying into the system and never being in ill health, when I do need help I just cannot get it. I don't know how to convey to you how devastating my journey to get a diagnosis has been. If it had not been for Dr. Skinner, I dread to think where I would be today. At all times he liaised with my GP to ensure I WAS getting the help I needed. Through his help, I now have my GP on board, but the system continues to fail me.

I do wish the GMC would listen to people like me and try to give us the help we need. If it did then we would not be forced seeking alternative help and diagnosis. Can you give me any hope for the future?

Can I conclude by saying that if Dr. Skinner is guilty of anything - it is of helping people like me and I am truly grateful that he did.

Yours sincerely,








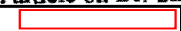


Tele: 

24th June, 2005

To Whom It May Concern

I would like to offer my support for Dr. G. Skinner at the public hearing on the 29th June, 2005.

From  I felt that I had no "quality of life" 
 I had consulted my G.P. many times over the preceding years to try to establish the cause of my illness but to no avail.

I saw an article on Dr. Skinner's work and was fortunate to be able to see him on the . He had asked for my thyroid profiles from my health centre and these showed that the results indicated an under-active Thyroid. Dr. Skinner immediately started me on a progressive course of Thyroxin and Amour Thyroid medication. 
 Life was and continues to be worth living...

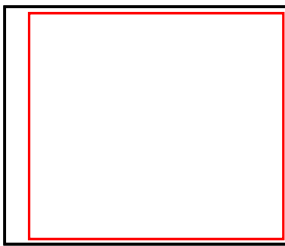
Dr. Skinner in my eyes is a "saviour" and not just to me, but too many other very sick people. Without his expertise, I and several of his recovered patients would have taken their own lives. He has always treated his patients with the utmost professionalism and has always asked for regular thyroid blood tests to monitor this condition.

I fervently wish for Dr. Skinner a positive and successful outcome at this hearing, particularly, after having to cope with the anguish of losing his beloved wife and the added stress of this investigation.



Patient of Dr. G. Skinner.

* c.c. to Dr. G. Skinner.



24th June 2005

Dear Sir,

Regarding Dr. Gordon Skinner

It has been brought to my attention that the GMC are investigating the work of Dr. Gordon Skinner. I have limited knowledge of why this investigation is taking place but I am aware that Dr. Skinner has treated patients in the area of ME and thyroid dysfunction.

I was a patient of Dr. Skinner in [redacted]. I was referred to him after seeing a number of consultants regarding my thyroid dysfunction. I was diagnosed in [redacted] with an under-active thyroid, [redacted]. A year on thyroxine had had no effect and it wasn't until Dr Skinner suggested to my GP that I try liothyronine (T3) that I began to regain my energies. The fatigue I had experienced was so disabling [redacted]

[redacted]
[redacted] After 6 months slowly increasing the doses of T3 I was able to return to work following a [redacted] absence. I have now been back at work for [redacted] years.

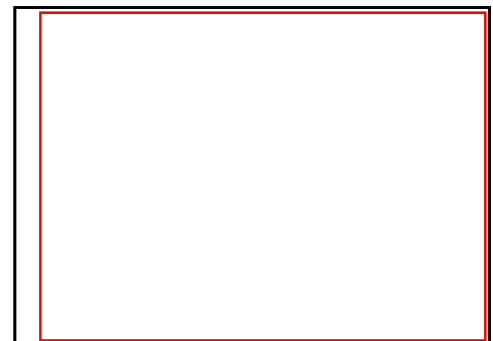
I found out about Doctor Skinner through a thyroid patient web site. Following the recommendation of other patients I asked my GP to refer me to him. I went with an open mind [redacted]

[redacted]

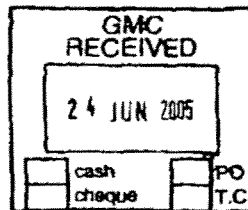
Dr Skinner was at all times polite and helpful and we had a number of telephone conversations following the initial appointment in which he was happy to discuss my progress. He did not charge me for this time on the telephone. He was also more than happy to speak to my GP and write any letters requested of him.

I would urge you to consider positive testimonies from Dr. Skinners former or current patients. This Doctor is genuinely interested in helping people with ME and thyroid problems. I am indebted to him because without his intervention I believe the quality of my life would have been intolerable.

Yours Faithfully,



RECEIVED
27 JUN 2005



22nd June, 2005

Dear Sir,

Dr. Gordon Skinner, MD, (Hons), FRCOG, FRCPath, DSc

I have attached a letter I have written to the Interim Orders Panel regarding Dr. Gordon Skinner.

This doctor is I would say, the best and most understanding doctor I have ever met and I have seen a lot over the years. My thyroid symptoms started when I was



One of my daughters was ill from the age of after being critically ill,



Some people, especially young can lose weight because of the adrenal problems associated with untreated hypothyroidism. Well, after about on treatment, I saw the real daughter I hadn't seen since she was



My younger daughter



Is it just
coincidence that this is the time she has been having thyroid treatment? She is very well and to me that is what is important.

If Dr. Skinner is suspended, the GMC should be brought before some greater authority. Why aren't patients allowed to speak in defence of Dr. Skinner?

These kangaroo courts should not be allowed to go on! Dr. Skinner is a virologist who had ME patients referred to him and he realised that they had symptoms of hypothyroidism even though their blood tests were normal. Once treated with thyroid medication, a lot of them became well again.

Perhaps doctors should read the many books on the subject and then perhaps they will realise there is a HUGE problem with diagnosis because they stick to the blood test results, they are making people's lives a misery.

The Great Thyroid Scandal by Dr. Barry Durrant- Peatfield
Solved: The Riddle of Illness by Stephen E. Langer MD
Tears Behind Closed Doors by Diana Holmes

These books would make interesting reading for your members and may even educate them!

Thank you for your attention

Kind Regards



PRIVATE AND CONFIDENTIAL



Adam Elliott
Interim Orders Panel
Regents Place
3550 Euston Road
London
NW1 3JN

24th June 2005

Dear Mr Elliot

RE: Dr Gordon Robert Bruce Skinner
Hearing: 14.00 on Wednesday 29 June 2005

I am writing to express my support for Dr. Skinner. I have been a patient of his since my referral from my GP in .

Throughout my involvement with Dr. Skinner I have always found him highly professional and very effective in my treatment of Hypothyroidism. I have been ill for many years and my undiagnosed condition at that time got worsened as time went on. I have seen many medical practitioners trying to establish a diagnosis let alone an effective treatment plan to combat my symptoms. My ill health affected every part of my life which included my family life, social life and my professional working life. At one point last year, I considered retiring on the grounds of ill health at the age of , and that would have been a tragedy.

On meeting Dr. Skinner, I found someone who showed me great deal of care and time in listening to all my symptoms and understanding me as person. He has always maintained his professionalism with me and I had the confidence to call him anytime if I needed to, which at times I did. My GP has found Dr. Skinner very professional and after every appointment with him he always writes a letter to my GP giving a full account of my progress and any changes in medication.

Since being treated by Dr. Skinner I have began to get my life back. I almost lost hope and at times I thought I would never recover. My friends and family and work colleagues have all see great changes in my health. Which I thought was impossible in my ill health. I wish I met Dr. Skinner earlier in my life, as I have wasted so many years trying and struggling to get by.

I have come across many medical practitioners in my personal journey in trying to find what the matter with me was. [REDACTED]

[REDACTED]
[REDACTED] I have found all these qualities with Dr. Skinner and his practice. In my view as his patient, he is not only very professional, he is also safe, sound and very supportive.

If you would like to talk to me or contact me, please do not hesitate to do so at my above home address or call me on [REDACTED] mobile or [REDACTED].

Yours Sincerely,

[REDACTED]
Patient of Dr. Skinner

[REDACTED]

[REDACTED]

June 24, 2005

Dear Mr Elliott,

I am writing this letter in support of Dr Gordon Skinner. If I had not seen him I do not know what I would be like now in terms of my underactive thyroid. With regard to my thyroid illness, which in retrospect I think I may have had most of my life, generally I feel 60% better and ONLY because of him have most of the horrible physical symptoms finally stabilized and not worsened.

In [REDACTED] I went to my gp, Dr [REDACTED] and a blood test showed my thyroid was severely underactive with a TSH level up in the [REDACTED]. She put me thyroxine, gradually increasing my dose up to [REDACTED]mcg, and once my blood test went back into the so-called normal range I was left on that dose. [REDACTED] later not only had I not gotten any better whatsoever, but my symptoms had worsened. I went back to my gp about this time and time again, but all she would say was that my blood test was normal now. I feel that if she had stopped staring at her computer and taken a good look at me she would have seen that I looked awful and I was obviously not any better. I continued to feel so ill that I thought I might be dying; I could not feel anything working in my body and could not rise off the bed at all.

Frustrated and distraught, I found my way to Thyroid UK and Dr Skinner was recommended to me by some women who said he had made them feel better where their gps had failed - such as mine had. The moment he saw me he told me how awful I looked and I was relieved that someone finally could see it! I was diagnosed as being myxedemic and my thyroxine dose was increased and I was also tried on T3. Within [REDACTED] I could feel a difference and could feel a slight spark of life in me again. And gradually over the course of several months some of my symptoms finally started to stabilize.

Almost [REDACTED] years later, I am still taking the T3 because I know this is what helped me and helped my symptoms to stabilize. Some of my symptoms have not only stabilized, but have improved slightly as well, although not all of them, but at least they are not getting worse and physically I do feel better. Dr Skinner recognized that I was not converting the thyroxine and that was why I was getting worse even on the thyroxine and tried me with T3 which obviously has helped with that. Needless to say, I am no longer with the gp who was so fixated on my blood test results that I was becoming more ill the longer I was on thyroxine on its own. I am one of those people for whom just prescribing thyroxine alone was not enough and it was not that straightforward for me. Dr Skinner was the one that suspected this was my problem.

Dr Skinner has helped people and he should not be in trouble for that. Until gps know what they are doing regarding thyroid illness then there will be a need for doctors like Dr Skinner.

Sincerely,

[REDACTED]

[redacted]
E-mail: [redacted]

24.6.2005

Mr Adam Elliott
Interim Orders Panel
General Medical Council
Regents Place
350 Euston Road
LONDON, NW1 3JN

c.c. Dr Gordon Skinner

Dear Mr Elliott,

Public Hearing – Dr Gordon Skinner, 29.6.2005

I understand that a Public Hearing is to take place on Wednesday next week concerning the case of **Dr Gordon Skinner** and that this is likely to focus on his treatment of patients for thyroid problems.

I am deeply concerned that yet another case involving a caring GP, who has successfully treated a great many patients for thyroid disorders, should have been brought before the General Medical Council. [redacted]
[redacted]

I have known of Dr Skinner's treatment of patients for thyroid dysfunctions for many years and became aware of this through my long-standing contact with patients suffering from ME (Myalgic Encephalomyelitis) or CFS (Chronic Fatigue Syndrome), and sometimes FMS (Fibromyalgia Syndrome). [redacted]
[redacted]

[redacted] It became apparent then that thyroid dysfunctions, notably hypothyroidism, had been diagnosed in a number of such patients and in some cases remedial steps had either alleviated some significant aspects of these patients multiple health problems, or in one case remedied the problems completely. In addition, a significant number of these patients had developed further health problems, in particular also Osteoporosis, Rheumatoid Arthritis or other bone disorders, without having received any treatments for thyroid dysfunction. [redacted]
[redacted]

[redacted] A key feature is a defect in the hypothalamic-pituitary-adrenal (HPA) axis (J Clin Endocrinol Metab, 1991;73:1224-34; J CFS, 1995;1:59-66). In one study, computed tomography (CT) of ME patients showed that both adrenal glands were reduced by as much as 50% compared with controls (Radiology, 1998;209P [Suppl]:411-2). - [redacted]
[redacted]

[redacted] a great deal of documented evidence existed supporting the view that undetected thyroid dysfunction, notably sub-clinical hypothyroidism, was very prevalent amongst patients with these diseases, but more information confirming these findings has since become available. In particular the Belgian Professor Kenny de Meirleir, a world-reknown expert in these problems, has repeatedly referred to such deficiencies. In a talk given as part of the Session on 'Effective Therapies for CFS + FM', sponsored by the Wisconsin CFS Association, held on the eve of the international conference arranged by the American Association of Chronic Fatigue Syndrome (AACFS), which took place in Madison, Wisconsin, in October 2004, Dr Byron Hyde, a Canadian long-standing expert in this field, stated amongst other details that an unusually high proportion of his ME/CFS patients had developed thyroid cancer and that 25% of the rest of such patients did show ultrasound evidence of Hashimoto's thyroiditis or other thyroid injury, but in many cases without abnormal TSH, free T3 or free T4, although "modest numbers of these with antibody signs of thyroid disease".

The views of certain UK 'experts' in this field clearly are at variance with both the experiences of patients as well as the views and findings of other international clinicians and researchers.

As far as Dr Gordon Skinner's role is concerned, I am of course aware of Diane Holmes' experiences, as documented in her book 'Tears Behind Closed Doors', but I have also heard personally of his successful treatment of patients with moderate or even severe ME for thyroid problems.

I suggest that the entire question of undetected sub-clinical hypothyroidism in a significant number of patients (not merely those with a diagnosis of ME/CFS or FMS) be thoroughly re-examined by an independent Working Group and that given the current widespread ignorance of these problems Dr Skinner's case be dismissed – I am not aware of any adverse experiences or comments on his approach from patients, but I am aware of the fact that his treatment approaches are viewed sceptically by certain medical practitioners – in my opinion unjustifiably so.

Yours sincerely,

[redacted]
[redacted]

Adam Elliot
Interim Orders Panel
General Medical Council
350 Euston Road
NW1 3JN

25th June 2005

Dear Mr Elliot

I am very concerned to hear that Dr Gordon Skinner is being brought before the Interim Orders Panel on 29th June 2005.

I am a patient of Dr Skinner's. In brief I became ill in [redacted]

By the time I was referred to Dr Skinner in [redacted] I was desperately ill, virtually housebound and on the verge of losing my job due to ill health. I had what I now know to be several classic hypothyroid symptoms [redacted]

Dr Skinner correctly diagnosed my condition using both blood tests and clinical observation, something which the other medical professionals that I had seen had failed to do. In a matter of weeks I was able to return to work and now enjoy the same standard of health that I experienced prior to my illness.

I have now been a patient of Dr Skinner's for nearly [redacted]. During this time the care that I have received from Dr Skinner has been of the highest standard. His manner and attitude have been extremely professional and exemplary.

I am at a loss as to why the GMC should want to investigate and potentially suspend such a valuable and effective Practitioner. As a specialist in the area of thyroid illness Dr Skinner is able to diagnose and treat many patients who are currently being failed by the NHS. In short if it was not for Dr Skinner I am convinced that I would still be ill with an undiagnosed condition. What's more I would be unemployed and dependant on benefits.

I would like the above to be taken into account in your Interim Orders Panel and request a written response to this letter detailing the outcome of your investigation.

Yours sincerely

[redacted]

cc Rt Hon Patricia Hewitt, Secretary of State for Health

[redacted]
Dr Gordon Skinner

[redacted]
Mr Adam Elliot
Interim Orders Panel
Regents Place
350 Euston Road
London NW1 3JN

25th June 2005

Dr Gordon Skinner

Dear Mr Elliot

I was surprised and upset this week to find out that Dr Gordon Skinner's medical practices are being questioned by an Interim Orders Panel.

I am surprised because my experiences as a private patient of Dr Skinner have only been positive, and were it not for the thyroxine he has prescribed me I would not have been able to achieve so much over the past 36 months.

When I first saw Dr Skinner in [redacted] he treated me as a human being and a whole person, and recognised the clinical symptoms of hypothyroidism which NHS GPs had overlooked. My blood levels of T3 and T4 were in the normal range, yet I was very unwell, [redacted]
[redacted]

[redacted]
Dr Skinner took the trouble to listen to my own views on my health, treating me with compassion and good humour, and began prescribing thyroxine in a steady, step-wise fashion, gradually increasing the dose until we found the right level, all the while monitoring my blood levels and symptoms to check the dose was not too high.

I am frightened that, because of the views of just one or two patients, the lives of many others will be put at risk. I am frightened that if Dr Skinner ceases to practice, I will not be able to access the thyroxine I need and my health will be put at risk.

His approach to treating patients is one of absolute integrity, and he has my wholehearted backing. I would strongly urge you to consider the hundreds of testimonies from Dr Skinner's patients which will evidence the dramatic difference he has made to the health of so many people, and the inspiration he has provided.

I am happy to be contacted further on this matter if required.

Yours sincerely [redacted]
[redacted]

Cc Dr Skinner, [redacted]

Adam Elliott
Interim Orders Panel
Regents Place,
350 Euston Rd.
London NW1
25 6 05



Dear Mr. Elliott,

Re. Dr. Skinner.

I am a year old female.

I do not hesitate in writing to support Dr. Skinner at this panel. He has always been Professional, wise and kind. I am very grateful to him for giving me back my life. That is not over dramatic

I kept questioning my thyroid status with different Drs. the blood test always came back normal. I even questioned if my normal could be different to others, but I was always told, there was no problem with my Thyroid.

My medical training, the reluctance to take any medication, also concern and pressure from my GP. Over Dr Skinners treatment, and the evidence of the blood test results, all made me very courteous about taking thyroid medication.

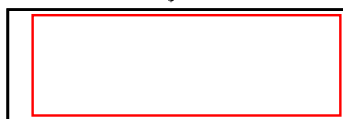
My response to the thyroid medication was instant and dramatic, I have steadily improved with each increased dose. My own experience of taking thyroid medication, also my trust and thanks to Dr. Skinner's wisdom and experience, out way any of my doubts or my GPS concerns. In my view, my recovery speaks for its self, and justifies Dr. Skinners treatment for me. The blood test should be there to help and guide not dictate my treatment or lack of it, and are not infallible.

I am quite prepared for the panel to see my relevant thyroid, T3 and Armour thyroid treatment and notes, including the blood test,(they only record what is in my blood stream, not what I can utilise or how well I am) if any of this would help Dr Skinner, further research and help others. I am also concerned about my continuing treatment and care for me, by Dr Skinner. I hope to be reassured about this soon.

I enclose a passage about the thyroid blood test history. Each new test has helped more people. I found this account helpful :- From fatigue to fantastic by Jacob Teitelbaum, MD.

I hope my letter and Dr Skinners and others continued work, will help those in the medical profession help patients, who have undiagnosed thyroid problems as Dr. Skinners work does. I enclose Names and addresses of some people who have seen my many and various improvements in my condition, who could be contacted if needed.

Yours sincerely

A rectangular box with a red border, used to redact the signature of the sender.

pharmaceuticals, in this case I am most comfortable with standardized hormones. If the amount of hormone given is within the body's normal range, the body can decide for itself how much of the hormone it wants to use.

The adrenal gland makes many hormones in addition to hydrocortisone. One of these is DHEA. DHEA is often very low in CFS patients. Although DHEA's function is not yet fully understood, it appears to be important for good health,⁷⁻⁹ which makes a low DHEA level worth treating. Some studies suggest that the higher a person's DHEA level is, the longer that person will live and the healthier he or she will be. For many patients when a low DHEA level is treated, the result is a dramatic boost in energy. I recommend beginning treatment with 5 to 20 milligrams per day of DHEA and slowly working up to what feels like an optimal level to you. In women, I suggest keeping the DHEA level at around 150 to 200 micrograms per deciliter, which is the middle of the normal range for a twenty-nine-year-old female. For men, I keep the DHEA level between 350 and 500 micrograms per deciliter, which is the normal range for a twenty-nine-year-old male. The low ends of these normal ranges are normal only for people over eighty. If you have side effects such as facial hair or acne, which are uncommon, check your blood level of DHEA-S and decrease your dose back into the normal range. DHEA is available by mail order with a prescription (see Appendix E: Mail Order Sources).

Another important function of the adrenal gland is maintaining blood volume and pressure. Low blood pressure and dehydration are common in CFS patients. Recent research at Johns Hopkins Hospital in Baltimore has suggested that a low dose of a prescription adrenocorticoid such as Florinef can dramatically improve how fatigue patients feel. The researchers suspect that the CFS patient's blood pressure drops precipitously at times and triggers symptoms that can last for weeks.¹⁰ Florinef, which helps the body retain water, can prevent this. Begin with one-quarter of a .1-milligram tablet per day and increase by a quarter tablet every four to seven days until you reach one whole tablet. Note that you may notice any effects for three to six weeks. Drinking plenty of water and getting enough salt and potassium are also helpful.

Hypothyroidism

The thyroid gland, located in the neck area, is the body's gas pedal. It regulates the body's metabolic speed. If the thyroid gland produces insufficient thyroid hormones, the metabolism decreases and the person gains weight. It is not uncommon, in fact, for CFS patients to put on 20 to 50 pounds during the first year of their disease. Other symptoms of hypothyroidism include cold intolerance, fatigue, achiness, confusion, and constipation.

The thyroid makes two primary hormones. They are:

- **Thyroxine (T_4).** T_4 is the storage form of thyroid hormone. The body uses it to make triiodothyronine (T_3), the active form. Most synthetic thyroid medications, such as Synthroid and Levothyroid, are pure T_4 . These synthetics are fine if your body has the capability to turn them into T_3 . Many patients find that their bodies do not.
- **Triiodothyronine (T_3).** T_3 is the active form of thyroid hormone. Although in some life-threatening illnesses the body appropriately makes less T_3 , experience suggests that at times it may not be able to turn T_4 into T_3 when necessary. Most doctors never check T_3 levels. They need to check total or free T_3 levels and directly monitor T_3 function. As just mentioned, the synthetic thyroid medications do not contain T_3 . However, the natural thyroid hormones, such as Armour Thyroid, do.

Many years ago, while I was in medical school, physicians were taught to diagnose hypothyroidism, or low thyroid function, by using the newly discovered method of measuring the metabolic rate while the patient ran on a treadmill. Doctors thought that this was a wonderful new test and that they finally had a way to identify patients with underactive thyroids. Doctors congratulated themselves on being so clever. But then a new test came out. The new test measured protein-bound iodide (PBI). When doctors began using the PBI test, they realized, "Oh, we missed diagnosing so many people with a low thyroid, but this new test will now pick up everybody who has a problem." The doctors patted themselves on the back and told all their newly discovered thyroid patients that it turned out that they were not crazy—they just had a low thyroid. The doctors were comfortable that they

could now determine with certainty when someone had a thyroid problem.

Then the T-level thyroid test was developed and the doctor said, "Oh, that silly old PBI test. It missed so many people with a low thyroid, but this new test will find everyone." Then the T-level test came out, and then the thyroid-stimulating hormone (TSH) test. Modern medicine is now into the fourth generation of TSH tests, and with each new test, doctors realize they missed many people with underactive thyroids. You would think that we doctors would finally catch on.

My impression, and the impression of many other physicians, is that the current method of testing still misses many people with underactive thyroids. Therefore, doctors must treat the patient, not the blood test. To make matters more difficult, if the thyroid is underactive because the hypothalamus is suppressed, the test may appear to be normal, or even on the high side of normal. (For a more complete discussion of the interpretation of thyroid tests, see Appendix A: For Physicians.)

If you suffer from chronic fatigue plus have achy muscles and joints, heavy periods, constipation, easy weight gain, cold intolerance, dry skin, thin hair, a change in your ankle reflexes called a delayed relaxation of the deep tendon reflex (DTR), or a body temperature that tends to be on the low side of normal, you should consider asking your doctor to prescribe a low dose of thyroid hormone. As long as you do not have underlying angina and you follow up with a blood test to make sure that your thyroid levels are in a safe range, you will find an empiric trial of low-dose thyroid hormone safe and maybe dramatically beneficial.

Some patients have found desiccated thyroid (Armour's Thyroid) to be helpful and the synthetic thyroid (Synthroid) to be. Some have found the opposite. I have found—either through blood testing or according to symptoms—that about 47 percent of my chronic fatigue patients have a low thyroid and that 10 percent of these patients have improved by taking a low dose of thyroid hormone. If you have fibromyalgia and are not treated for an underactive thyroid (even if your blood tests come back normal), your fibromyalgia simply will not resolve. Many physicians who are experts on chronic fatigue agree. 11-11

Some physicians recommend checking your axilla (armpit) temperature each morning when you first wake up. Before you get out of bed, put a thermometer under your arm and lie quietly for ten minutes. If your temperature is routinely under 97.4°F, consider a trial of thyroid hormone regardless of what your blood test shows.

Low Estrogen, Testosterone, and Oxytocin

Many people going through the change of life develop fatigue or depression. This includes men and women alike. Men and women, experiencing a decreased libido also feel fatigued and depressed. Researchers have found that if the estrogen level in females or testosterone level in males is low, a trial replacement of these hormones can bring about dramatic improvement and is therefore worth considering. Some researchers have also wondered if females can have a low testosterone level due to an underactive adrenal gland. Although the ovaries make most of a woman's estrogen and the testicles make most of a man's testosterone, the adrenals make small but significant amounts of both regardless of sex. That females begin with much lower GHRA and testosterone levels than males do may be one factor that increases women's risk of getting CFIDS.

A lot of controversy surrounds who benefits from taking estrogen when going through the change of life. Overall, studies suggest that women who have an increased risk of heart disease (based on high cholesterol, diabetes, family history, heart attack, or who have osteoporosis, or who have had a hysterectomy) will have longer and healthier lives if they take estrogen. If a woman has not had a hysterectomy, she should take progesterone along with the estrogen to prevent uterine cancer. Patients who have been diagnosed with breast cancer should avoid estrogen, as should women whose mother or father had breast cancer.

If you are a woman who is going through menopause and you prefer not to continue menstruating, you should consider taking estrogen and a decreased dose of progesterone together instead of in cycles. On this regimen, your period may disappear in six to nine months. Some women have found that natural estro-

[redacted]

[redacted]

Mr. Adam Elliott, Solicitor,
Interim Orders Panel,
Regents Place,
350 Euston Road,
London, NW1 3JN

Dear Sir,

Dr Gordon Skinner, of Warwickshire, London & Glasgow

I have heard that Dr. Skinner's treatment and care of patients may shortly be up for review by an organisation that you represent. Although my experience of Dr. Skinner's care, consideration and diligence is secondhand, in the sense that it was my late husband [redacted], who was his patient, I was present at all consultations and was included in the telephone exchanges, e.g. of test results, changes in dosages, etc..

Briefly, my husband was an extraordinarily fit man,

[redacted]

[redacted] Around about [redacted] he seemed to change dramatically, losing his energy and simple tasks became unexpectedly difficult. [redacted]

[redacted]

[redacted] Under pressure, the GP did blood tests, but these provided no explanation. Meanwhile, [redacted] had discovered The British Thyroid Foundation, whose pamphlet on Hypothyroidism appeared to set out, almost exactly, his symptoms, and whose Newsletters revealed many examples where even persons with severe symptoms did not show up as suffering from Hypothyroidism in blood tests. [redacted]

[redacted]

[redacted] Ultimately, [redacted] persuaded his GP that he needed to consult Dr. Skinner, which he did in [redacted]

I can say that from then on my husband's health improved. He regained most of his previous strength, both physically and

page 2

mentally. We were both impressed by the care taken by Dr. Skinner to achieve the minimum dosage of Thyroxine needed to maintain [redacted] is health; the regular tests made to check that all was well; and the care and interest taken at consultations to elicit factors that might be important to diagnosis.

I remain greatly indebted to Dr. Skinner for all his care and help to my husband, who was enabled to enjoy life until his sudden death at [redacted] years from a [redacted]. I am further indebted to Dr. Skinner for a highly successful intervention in my daughter's health, when, in her early [redacted], she began to exhibit symptoms similar to her father's. [redacted]

[redacted] I attribute 100% to Dr. Skinner's care and diligence. I am sure that she will want to provide her own testimony; and to express a fervent hope that there will be no change in her treatment.

Please ensure that any consideration given to Dr. Skinner's career takes account of those whose lives have been immeasurably improved by his professional skill and knowledge. When listening to the comments of other patients, I have heard nothing but praise of Dr. Skinner. There are many who would attest to Dr. Skinner's expertise, I am only sorry that my husband is not able to do so for himself.

Yours faithfully.

[redacted]

25 June 2005

URGENT

Mr Adam Elliot
Interim Orders Panel
Regents Place
350 Euston Road
London
NW1 3JN

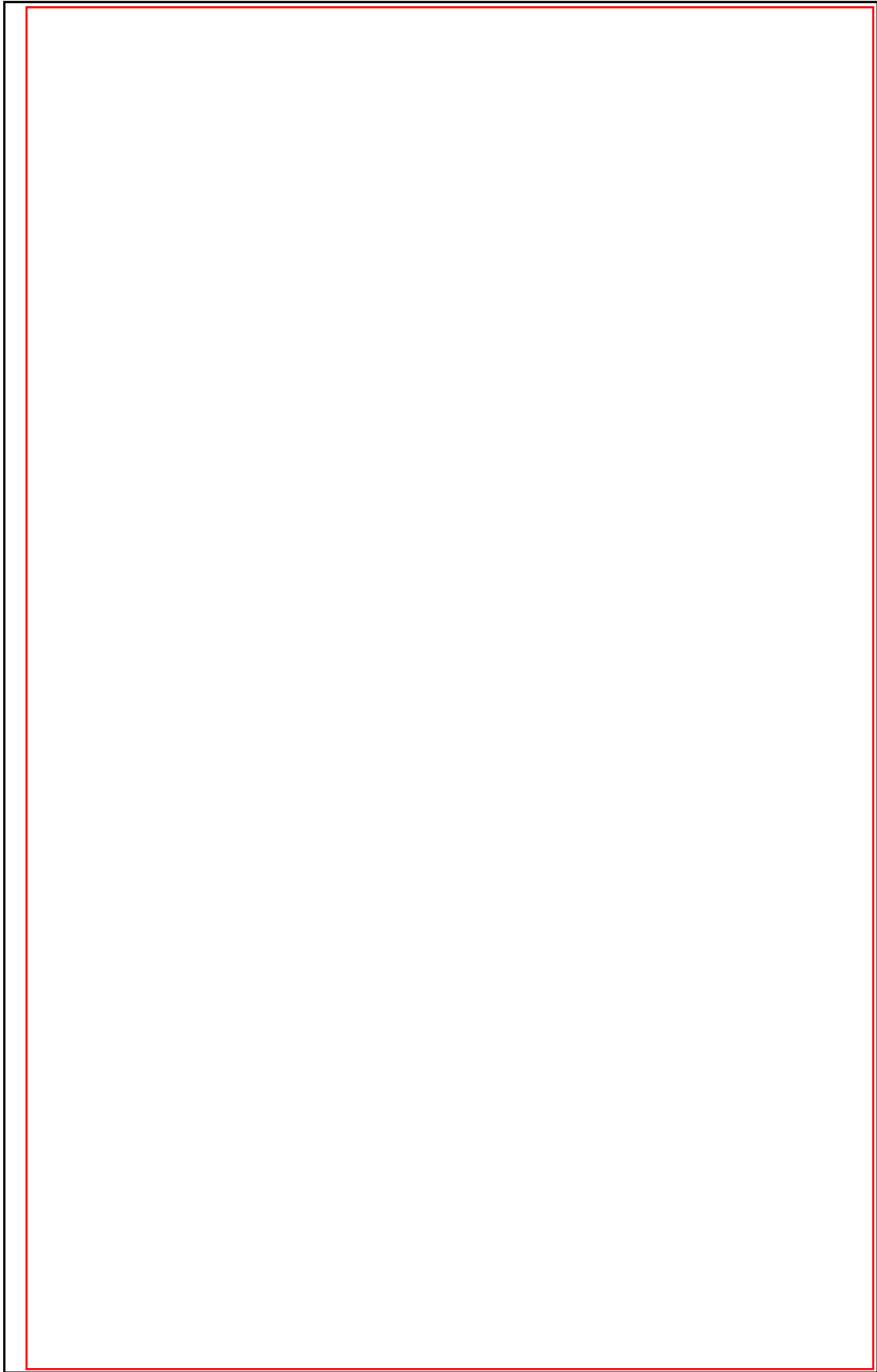
Dear Sir

Re: Dr Gordan R B Skinner, MD (Hons), DSc FRCath FRCOG

I write with regard to the hearing scheduled on Wednesday, 29 June 2005,
regarding Dr Gordan Skinner.

My year old daughter, , has been a patient of Dr Skinner's for the
past years and it is only because of him that, today, she is now able to lead
an active and "normal" life!!

's History – (I will try to explain as simply and briefly as possible)



It was then I explored the internet and found Dr Skinner's details on the Thyroid UK Website. I telephoned and an appointment was made to be accompanied by a letter of referral.

[redacted]: [redacted] was seen by Dr Skinner. Who had no doubt that with the previous blood test and her numerous clinical symptoms she was "Hypothyroid" and he commenced her on a low dose of Thyroxin.

I have to say, at this point, that Gemma was totally convinced this was **not going to work** because nothing else had!!

The result was remarkable and almost immediately [redacted]'s condition started to improve, slowly but surely and day by day. She was seen by Dr Skinner at regular intervals and monitored closely. He was **always** available to speak to at the end of the telephone.

Over the ensuing months there were a few ups and downs and eventually Dr Skinner had to introduce a combination of Thyroxin and Tetroxin. All in all [redacted] was much improved. However, there were still a few underlying problems that just would not go away and having, by this time, researched the 'Thyroid' as much as we possibly could we had read about the use of Armour. We asked Dr Skinner his opinion and he discussed this at some length with us and agreed [redacted] should gradually introduce some into her regime and see how she responded. The result was unbelievable and nothing short of miraculous!

Today, [] is an **exceedingly** healthy, happy [] year old on a combination of []mg Thyroxine, []mcg Tetroxin and []grains of Armour. She is now closely monitored by a local NHS Consultant Endocrinologist along with Dr Skinner and her GP. Her Endocrinologist, having performed all the necessary blood tests, is happy she is making a safe and informed choice on her treatment and combined regime of Thyroxin/Tetroxin/Armour.

Yours faithfully,

[]

[]

✓ cc. Dr G R B Skinner

[REDACTED]

[REDACTED]

25 June 2005

Mr Adam Elliott
Interim Order Panel
General Medical Council
Regent's Place
350 Euston Road
LONDON
NW1 3JN

Dear Mr Elliott

Ref: Dr. Gordon R B Skinner, MD(Hons), DSc, FRCPath, FRCOG

I write in support of the work of Dr Skinner with patients with thyroid disorders, in particular those who are hypothyroid. I understand he is under scrutiny by the GMC and central to the concerns are his procedures in respect of blood tests, particularly in the diagnosis of hypothyroidism. I had such tests years ago and the condition was excluded. I wish my then GP had had the courage of Dr. Skinner to look more broadly at other indicators and not be led solely by laboratory results. I might then have been spared the [REDACTED] years of the misery of living life 'through glass', as it has been described, and received appropriate treatment.

[REDACTED]

I was fortunate to discover Dr Skinner through Thyroid UK and transferred to him. [redacted]

[redacted]
[redacted] Overall I am about 95% normal and I am grateful for that, although over the years I have come to understand that even with overall improvement there can be setbacks, especially in response to any onslaught - [redacted]

Now that I understand the situation nationally I am full of admiration for Dr Skinner's courage in questioning the rigidity of many of his colleagues in being guided solely by blood test results that indicate normal thyroid activity, despite the patient clearly being ill. The failure to look at the broader overall picture and be bound purely by blood test results is *one of the biggest scandals* of the medical profession. My heart goes out to those people who have not been as fortunate as me in finding two doctors who have been brave enough to put their patients needs first and thus risk the wrath of the medical establishment.

[redacted]
In closing I would request that, whatever the outcome, Dr Skinner's patients are not left high and

[redacted]
[redacted] In my dealings with Dr Skinner I have always found him to be professional and caring. I have total confidence in him and I am sure you will understand that I am terrified of returning to living my life 'through glass'.

I should be pleased to give any further information you may require should you, or anyone else connected with this issue, care to contact me.

Yours sincerely

[redacted]
Cc: Dr G R B Skinner
Thyroid UK

Mr Adam Elliot
Interim Orders Panel
GMC
350 Euston Road
LONDON
NW1 3JN

25th June 2005

Dear Mr Elliott

Re: Dr G.R.B. Skinner

I am writing with extreme concern as I have heard that the above doctor is to appear before the Interim Orders Panel this week.

I would like to express my complete support for Dr Skinner who in my opinion has delivered me the highest standards of medical practice and has the interests of his patients at heart.

I became ill in [redacted] I immediately became too ill to work. [redacted]

[redacted] I had been investigating by reading books, surfing the internet and asking my medical friends and GP, if there was any other possibility open to me, was there anyone in the medical profession who would help me? I believed that I was still badly hypothyroid, I desperately wanted to get better, I am an intelligent woman and could not accept that this was the best quality of life available to me. I knew that I was still ill, and I made a concerted effort to find a doctor (private or NHS) who cared enough about his patients to look at them and listen to them and make a sound judgement based on the facts/evidence available.

I researched and chose to consult Dr Skinner, he came with strong personal recommendation from many sources. I consulted him in [redacted] [redacted] After thoroughly assessing my clinical symptoms and blood test results he prescribed increased Thyroxine (T4). When I was still ill three months later he prescribed Tertroxine (T3). My health improved dramatically over the next few months, and although we are now still tweaking the dosage I am so much better. I am working part time and am leading a fairly normal life. I hate to think how ill I would still be if I had not pursued seeing Dr Skinner as a course of action.

In summary, prior to consulting Dr Skinner I had consulted two consultant endocrinologists and a consultant in infectious Diseases. I had also lost my job. None of the Consultants had come anywhere near giving me the quality of care that Dr Skinner has. They all seemed oblivious to the physical symptoms that I was suffering and were all completely reliant on assessing my condition based on a piece of paper with thyroid function test results on it. I am not a piece of paper! I am a unique individual human being.

During my consultations with Dr Skinner he has shown exemplary behaviour, he has been completely professional and he has listened to me, his patient. I am therefore struggling to understand why a Doctor who has shown more care and understanding than many others, and who has obviously succeeded in treating me is having his care of his patients questioned. Dr Skinner appears to have a thorough and comprehensive underpinning knowledge of the treatment of hypothyroidism. This is based on research into the Thyroid Blood Tests currently used and clinical signs of hypothyroidism all of which was reported in the BMJ.

I therefore request that you accept and consider this letter in support of Dr Skinner.

Yours sincerely



c.c

Rt Hon Patricia Hewitt -- Secretary of State for Health



Dr G.R.B. Skinner

The Court 25.06.05

Adam Elliott
Interim Orders Panel
GMC
Regents Place
350, Euston Road
London NW1 3JN

REVISED!

Re. Hearing of Dr. Gordon Skinner.

● has come to my attention that Dr. Skinner is due to appear at a hearing on June 29th as a result of his unorthodox treatment of hypothyroidism.

Many of my patients have consulted Dr Skinner in the last few years and they have all benefited greatly from his expertise. Every one of them has had their condition examined and treated thoroughly and effectively.

Dr Skinner's treatment of hypothyroidism is based on physical measurements and symptoms rather than purely on the basis of limited blood tests. There is a direct parallel between his treatment of hypothyroidism and the conventional treatment of diabetes. The diagnosis of diabetes on the basis of symptoms and blood sugar level is normal and long established. It is not based simply on the measurement of insulin levels in the blood as these are too variable and *insulin resistance* is too common for this to give a reliable method of diagnosis. In the same manner, Thyroxine (T4) level in the body varies dependent on circumstances (e.g. stress, antibody production) each person has different needs, and there may be problems with *thyroid resistance*. Treatment of diabetes is by insulin (a hormone), the same as the treatment of hypothyroidism by Thyroxine.

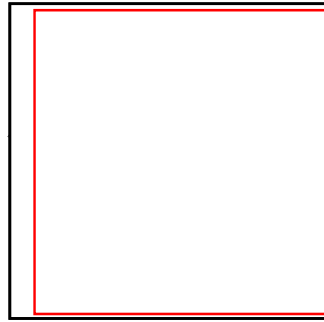
● I find it astonishing that anyone should be persecuted for diagnosing and treating hypothyroidism in the same way as diabetes.

It should be noted that most of Dr. Skinner's patients had previously been under the care of other NHS doctors, but they had not received effective treatment. Only when they came into the care of Dr. Skinner, did they improve.

If Dr. Skinner were to be prevented from working, I would be unable to help many of my patients, for whom Thyroxine provides huge benefits in improving a long term debilitating condition.

Yours truly,

●
[Redacted signature box]



Saturday 25th June 2005.

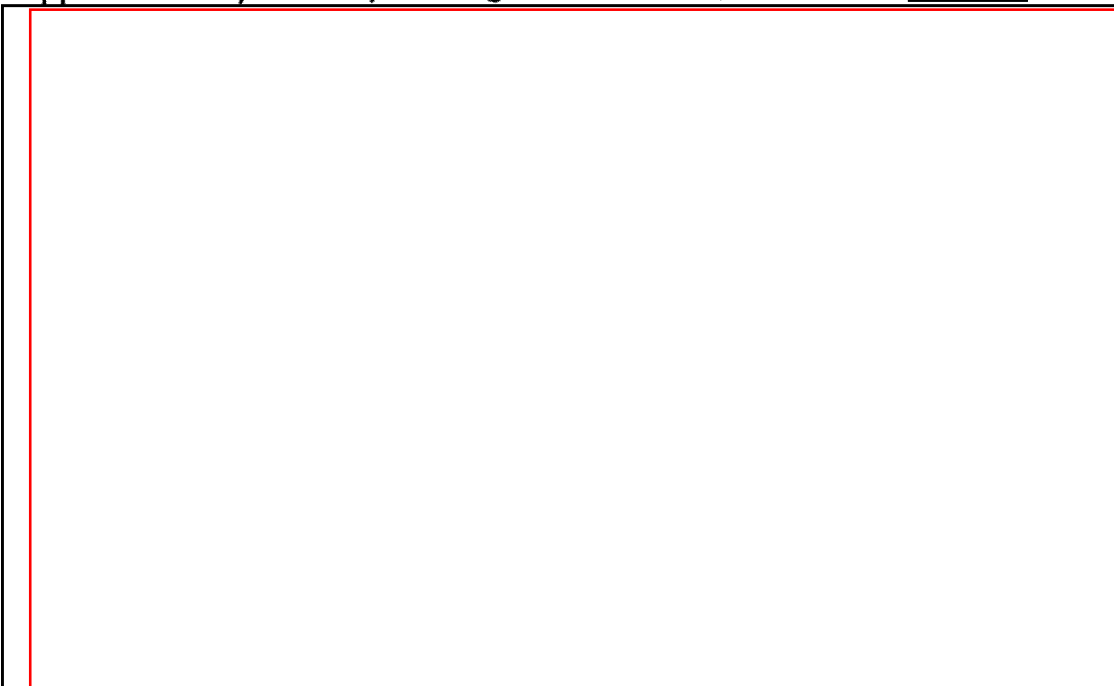
Dear Sir,

I write in support of Dr Skinner.



After a while my health started to deteriorate, although my blood tests were referred to as 'normal' I knew deep down that I wasn't quite right. When I referred to 'the book' it showed that my Thyroid was struggling.

Approximately years ago, I became quite unwell



One day a friend called and brought a magazine to me saying that I should read it, I did so and promptly sent off for 'the book' entitled 'Tears behind closed doors'. What an appropriate title I might add, as many a time I had been told that my blood results were 'normal'; and yet according to the book and the way I felt inside, I was struggling.



I read the book, my mother read the book, and my father read the book. It was the best book that we had ever bought. My father identified many of my symptoms in the book, and then as my mum read it she underlined the parts that were significant to me and my condition. When they discussed these symptoms they found that had recognised many, if not all, of my symptoms.

I managed to get an appointment with Doctor Skinner and I can honestly and truthfully say that it was the best thing I have ever done. Doctor Skinner has positively changed the quality of my life.



When I left Doctor Skinner that day I felt a brick had lifted from me and at long last I could see light at the end of a very long tunnel. Thanks to Doctor Skinner, many of my symptoms that I have identified in this letter have improved considerably and I now lead a much more fulfilling and active life. I go to the gym two to three times a week and can ride my bike...alone. I certainly couldn't have done this without his help, advice and Thyroxine, the medication I took when I was years old. In fact, I feel that if I had carried on much longer like I was, I may not have been here now!

I am please to have found Doctor Skinner, someone who truly understands the condition of Thyroid, its symptoms and treatment.

Thank you Doctor Skinner.

Yours Sincerely,

[redacted]
Mr Adam Elliot
Interum Orders Panel
General Medical Council
Regent Place
350 Euston Road
London
NW1 3JN

Friday 25th June

Dear Mr Elliot,

I believe that Dr.Gordon Skinner has been called to appear before the General Medical Council, and I am writing to pledge my support for both himself and the work that he does.

I have been under the care of Dr.Skinner since [redacted] and the difference it has made to my way of life is outstanding. Hypothyroidism controls the way you live your life and after numerous visits to my GP, I was referred to see Dr.Skinner and began to see light at the end of the tunnel.

After being a patient of Dr.Skinner for [redacted] years now I feel the work that he does is invaluable, and his research into this illness is well documented within the medical profession.

I and many people like me have had our way of life changed dramatically for the best by the work that Dr.Skinner does and I urge you to think of me and many like me when considering the outcome of your meeting on Wednesday.

Yours sincerely

[redacted]
[redacted]

Mr Adam Elliot
Interum Orders Panel
General Medical Council
Regent Place
350 Euston Road
London
NW1 3JN

Friday 25th June

Dear Mr Elliot,

RE: Dr.Gordon Skinner

I am writing this letter with great support to Dr.G Skinner.
I would like to stress the help that Dr.Skinner is giving
me in the diagnosis and treatment of my low level thyroid
hormone.

I had been seeing my GP for some years and was told that I

[redacted]
[redacted] I will
not bore you with the other symptoms that I have been suffering,
however I must stress the effort I had to endure to complete
the simplest of tasks. Whilst the TSH test results came within
"normal limits" and because of this the NHS would not test
my T4 even though it is possible to have an abnormal T4 and
a relatively normal TSH, I was referred by my GP to see
Dr.Skinner.

After further blood tests were carried out, I have been taking
thyroxine for [redacted] months now and the changes to my life have
been staggering.

It was a huge relief to find a doctor who understood what
I was feeling and the symptoms I was experiencing without
being told I was on a downward spiral of depression.

Dr.Skinner is a most caring and understanding person who takes
time to understand and listen to his patients whilst treating
them in a most professional manner.

I hope you and your colleagues will think long and hard before
taking any action against Dr.Skinner and robbing the general
public and the medical profession of a most valuable doctor
through disciplinary action.

Yours sincerely



Mr Adam Elliott
Interim Orders Panel
General Medical Council,
Regents Place,
350 Euston Road,
London,
NW1 3JN

25 June 2005

Dear Mr Elliot

I am writing to you about the case of Dr Gordon Skinner, who is to appear before the Interim Orders Panel on Wednesday 29 June 2005.

I have been a patient of Dr Skinner's for over years and his treatment has changed my life so I am very concerned that he is being called to appear before the Interim Orders Panel and hope that you will take reports from his many satisfied (nay, delighted and grateful) patients into account.



In , when I was a friend told me about Dr Skinner and the way he treated thyroid patients by a) taking a thorough medical history b) noting down all symptoms c) exploring possible causes d) offering thyroid treatment if symptoms and absence of other likely causes suggested this would be worthwhile. I was told that he used symptoms to diagnose thyroid problems, with the blood tests used as back up,

and did not think statistically 'normal' blood tests necessarily ruled out the need for thyroid treatment.

When I first saw Dr Skinner I was very ill – [redacted]

[redacted]
After taking down all details and questioning me thoroughly about my medical history and symptoms he started me on thyroid replacement hormone.

The effects were *nothing short of miraculous*. Within months the following had happened:

☐ months after beginning the treatment with Dr Skinner I started full time work and was able to manage hobbies as well – dancing, socialising, youth hostelling etc.

As I was such an 'obvious case' (for a medic of Dr Skinner's experience and knowledge) of hypothyroidism, I was very easy to treat and I didn't realise how much skill and expertise Dr Skinner had. Recently, thanks to a change in the medication I was taking for my thyroid condition, some of my old symptoms returned, and Dr Skinner's care for me during this time has been excellent. He has advised on management strategies, spotted symptoms that I had not realised had returned, monitored me carefully and returned me to a manageable dose of thyroid replacement hormone. In this time I have been more impressed than ever with his analysis of symptoms, his care for patients and his understanding of the condition.

He has always written regularly to my GP, responded with phone calls (at no extra cost, I might add) when I have had concerns, and been unfailingly helpful and willing to explain symptoms and changes in his approach to both myself and my GP. I am very grateful to Dr Skinner for giving me back my health and my ability to live an active and interesting life, where I have a future to look forward to.

I do not know the details of the charges against him, but I would like to say that his treatment of me has been excellent. I would be horrified to think that a doctor of his calibre could be suspended, or in some other way disciplined, because of an unorthodox (yet extremely effective in numerous cases) approach to thyroid diagnosis and treatment.

Yours faithfully,

26/6/2005.

Dear Adam & Juliet.
I would like to tell you - I now Dr Skinner helped my daughter [redacted], with his thyroid treatment, and alleviated some of her worst symptoms. She has had [redacted] for many years, and no other doctor has been able to help her at all.
I am aware that Dr Skinner's treatment does not fit in with current medical practice, but the results he achieves should be taken note of.

His belief that each individual has a different level of need - of thyroid medication makes sense. I do not know which doctor decided we should fit the same level?

All I can say is that Dr Skinner's treatment helped [redacted] lead a more normal life, and I thank him for that.

Yours sincerely,

[redacted]

Mr Adam Elliott
Interim Orders Panel
Regents Place
350 Easton Road
London
NW1 3JN

26th June 2005

Dear Mr Elliott

Re: Dr Gordon R B Skinner, [redacted]
Public hearing at 14:00 on Wednesday 29th June 2005

It is with considerable distress I understand Dr Skinner is being challenged because of his work treating people with thyroid conditions. If it were not for Dr Skinner I doubt I would be here, writing this letter in his support.

[redacted]

- Having tried many avenues to improve my health I eventually came to the symptoms of hypothyroidism and with joy, knew I had found my problem because I was exhibiting 80% of the symptoms described.
- I approached my GP, who looked at me with great pity as she advised me there was nothing she could do because my thyroid test was 'normal' – if on the low of normal. She agreed to refer me to an NHS endocrinologist though told me this would be a very long wait since I was 'normal' and that because of this it was unlikely that anything could be done. After searching I discovered Dr Skinner and was referred.
- When I saw Dr Skinner at the end of [redacted] I had given up hope. I only attended the appointment because my husband drove me there. I was started on an incremental course of medication for hypothyroidism and very soon began to notice improvements. [redacted]

[redacted] I cannot describe what it felt like to be getting better, finally, after so many years. I am still improving with Dr Skinner's help and advice with regard to the best treatment for me. My family and friends can bear testament to the change in me, mentally, emotionally and physically.

As a layperson, I was able to find a tremendous amount of information with regard to unrecognised hypothyroidism and the unreliability/pointlessness of the tests. I am astounded that the medical profession are not doing serious research in this field. I used to say "I cost the NHS a fortune" with all the drugs I was taking for this symptom, or that, not to mention my stays in hospital. Now I take my inexpensive thyroid medication and I am very nearly back to normal. Hopefully, by treating my condition, I will not succumb to diabetes in later life, as my father has.

May I add my voice to the many who support Dr Skinner in his work and in my fervent hope that this approach be developed so that more people can be helped?

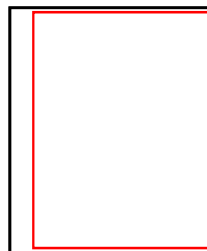
As this is a public hearing, may I request a copy of the record of the meeting and the decision that is reached?

Yours sincerely

[redacted]

26th June 2005

To: Mr Adam Elliott
Interim Orders Panel
Regents Place
350 Uston Road
London
NW1 3 JN



Dear Sir

In early I began to feel very ill. This got worse over time until I had to give up work and was unable to carry out tasks as a mother and housekeeper.



found. Even though hypothyroidism runs in my family and everyone including my GP new that eventually my test results would show that I was in fact hypothyroid, I was left to a life of a semi invalid with a twilight existence for years to come.

I was always visiting my GP for one thing or another and I knew that he could only keep the symptoms under control. (I was what's known in the medical profession as a heart sink patient).

My husband and I decided that it was either another 20 years of this awful existence or pay for Dr Skinner's assistance and we are so glad that we took the latter decision. The changes that have taken place since being under his care are miraculous. Almost all of the symptoms both physical and mental have disappeared and I have a quality of life now that is worlds away from . He listened very carefully to my symptoms and gave me an examination and took some blood for test. Dr Skinner was very patient with me as I was unable to string a sentence together and muddled my words. I decided that I would take the thyroxin that Dr. Skinner prescribed and see what happened. I felt there was nothing to loose and that since doing a lot of research about thyroxin that a short trial would do me no harm whatsoever.

Over the first few months' things improved and family and friends began to notice changes in my appearance. Towards the end of the course my symptoms began to take hold again and my dose was upped. This continued to be the way things went with each

extra dose of thyroxin, but I never slipped back to that strange half life before thyroxin. On the last visit and the previous one Dr. Skinner suspected that I was not processing the T4 and recommended adding T3. I decided that this was the best course of action. Dr. Skinner told me from the start that any problems day or night that he was just a phone call away. [REDACTED]

Thanks to Dr. Skinner I am now a fully fledged member of the human race and my T3 has done the trick. My constant GP visits are a thing of the past and my husband has got his wife and friend back and my daughter who is not so keen on having a mother who wants to know about her life and friends or if she has her homework done is also pleased [REDACTED]

I almost cry when I think of the thousands of other mothers out there who are leading horrible lives with failing marriages and work who for the sake of knowing a brave man or woman who is willing like Dr. Skinner to treat symptoms and history as more important than blood test results.

CFS/ME only became a disease when test results became the ONLY diagnosis for hypothyroidism.

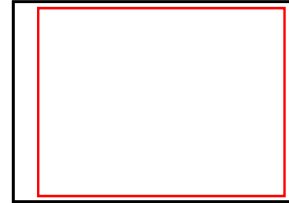
I swithered about putting this last thought to my ramblings but can't control my anger in regards to the hearing, but here goes.

"The only hearing DR. Skinner should have is the sound of the joy in the patients and family's hearts of the many hundreds of people he has helped".

Yours sincerely

[REDACTED]

COPY SENT TO
MR A-ELLIOTT



26th June 2005

Mr A Elliott
Interim Order Panel
Regents Place
350 Euston Road
London
NW1 3JN

Dear Mr Elliott,

Re: Dr G R B Skinner

Since the birth of my second son [redacted] some [redacted] years ago I started to experience a number of different symptoms. These gradually became worse [redacted]



Since [redacted]'s birth my health continued to deteriorate. [redacted]



[REDACTED]

Becoming more and more frustrated I decided to do some research on the internet. On the Thyroid UK web-site I checked off my symptoms against the list - not only did I have so many but I was also very interested to read the papers regarding developmental problems with children born to mothers' with an under-active thyroid. I asked my GP to refer me to Dr Skinner. [REDACTED]

[REDACTED], I was referred.

Dr Skinner listened to all my symptoms - [REDACTED]

[REDACTED]

For once someone was actually listening to how I felt and not just looking at the blood test results to diagnose me.

I started increasing my thyroxine in measured increments and all of my symptoms started to improve. I finally got back to how I used to feel [REDACTED] years ago. Then my GP ran some more tests and told me to start reducing my medication as my blood tests were coming back high. **However, I had no symptoms whatsoever of an over-active thyroid.** [REDACTED]

[REDACTED]

After seeing Dr [redacted] I was so depressed that I would have to live life with such a poor quality that I contacted Dr Skinner again to make an appointment. My husband was so concerned about me that he drove me to see him. Dr Skinner again listened to my symptoms. [redacted] my medication and within [redacted] and all the other symptoms gradually started to improve. I now have the energy to exercise which I was unable to do before. I have no doubt whatsoever that without the expertise of Dr Skinner I would be in a wheelchair by the end of the year. I was not prepared to live life with such a poor quality.

Numerous papers and information is available on the internet which brings into question the way that endocrinologists diagnose thyroid conditions by blood tests alone. Surely all these people cannot be wrong. To continue to totally ignore a patient's symptoms and only look at blood tests is doing a total injustice to them.

Dr Skinner in his work has given so many people back their lives who would otherwise been a drain on the welfare system. I am eternally grateful to him. We need more like him who are genuinely making people better and not leading them to believe that their illness is all in their imagination.

Yours sincerely,

[redacted]

[redacted]

27th June 2005

Mr A Elliott
Interim Orders Panel
Regents Place
350 Euston Road
London
NW1 3JN

Dear Mr Elliott,

Re: Dr Gordon R.B. Skinner

I was extremely disappointed to hear of the possible action being taken against Dr Skinner.

Both my sister and I have endured many stressful years of suffering with Hypothyroidism because of the lack of in depth knowledge and compassion shown by most of the members of the 'standard' medical profession.

My sister reached a stage where she could no longer walk unaided and spent most of her time in bed. Two years on she is a completely different person, alert, bright and able to do many activities. Dr Skinner was the only one who really listened and has helped us both enough to change our lives.

Any action taken to restrict Dr Skinner's ability to practice as he sees fit would be very detrimental to many people

Yours sincerely

[Redacted]

27th June 2005.

Adam Elliot
Interim Orders Panel
Regents Place
350 Euston Road
London NW1 3JN

Dear Mr. Elliot,

I am writing to state the unequivocal support of both myself and my wife,
[Redacted] for Dr. Gordon Skinner.

My wife suffered from undiagnosed Hypothyroidism for over [Redacted] years, which even after diagnosis by her GP was undertreated. This was due to an obsessive reliance on the blood test results which flew in the face of her clinical symptoms. Dr. Skinner was the first member of the medical profession to provide real help by treating those clinical conditions.

[Redacted]

The importance of the work carried out in this field by Dr. Skinner cannot be underestimated.

Yours sincerely, [Redacted]

[Redacted]



**By Fax to 0207 189 5179 and recorded delivery
4 pages in total**

Adam Elliott
Interim Orders Panel
General Medical Council
Regents Place
350 Euston Road
London
Nw1 3JN

27th June 2005

Dear Mr Elliott

Regarding Interim Orders Panel Hearing – Dr Gordon Skinner, 29th June 2005

I am a registered medical practitioner

[Redacted]

I have had course to refer a number of patients to Dr Skinner over at least the last ☐ years. I would like to share with you some of my experiences as I believe these are relevant to the above hearing.

Professionalism

Dr Skinner has demonstrated to me the utmost professionalism. He has always kept me informed of his opinions, his treatment suggestions and of any private prescriptions he has issued to any of my patients. He has also closely monitored any of my patients for whom treatment was initiated.

Without exception, when directly questioned, my patients found Dr Skinner to be kind, caring, having a great sense of humour, and to spend a great deal of time both listening to the patients complaints and to talking patients through any issues they may have. The patients would obviously not be able to make value judgments about the appropriateness of treatment, however the general impression I gained of his communication and other skills was excellent.

Representation

Dr Skinner held a [REDACTED]

[REDACTED] At no stage has Dr Skinner represented himself to me as a consultant endocrinologist.

It is my understanding that his clinical practice, like all professionals, has evolved over several years. All of my initial referrals to Dr Skinner were for a clinical opinion regarding chronic fatigue syndrome or "M.E.". Due to the potentially infectious aetiology of these conditions, I felt Dr Skinner had appropriate qualifications to both diagnose and manage such patients.

I understand from discussions with Dr Skinner, that many, but certainly not all, of these patients were actually suffering with sub-clinical hypothyroidism. Consequently he started treatment for these patients with thyroid hormones. Clinical responses were generally very good, with few if any adverse effects.

Appropriateness of treatment

Without exception patients who I referred to Dr Skinner were patients who had not been helped by other physicians (eg having seen general or other physicians for M.E. etc.), and that referral to Dr Skinner was to offer a different perspective on the patients' problems.

The treatment prescribed by Dr Skinner may at first glance appear to be slightly unorthodox i.e. treating patients with thyroid supplements when they appear biochemically euthyroid, this is however far from the full picture.

Prior to continuing my own patients on treatments recommended by Dr Skinner, I decided to acquaint myself with more information on the subject. I read with interest the recommendations of the American Association of Clinical Endocrinologists for the evaluation and treatment of Hypo and Hyperthyroidism, published in November 2002.(AACE Endocrine practice 2002;8(No6) 457-469).

In these guidelines, specific reference is made to the treatment of "sub-clinical hypothyroidism" - the very type of patient that Dr Skinner has been treating.

In this guideline document it states

"Patients with chronic thyroiditis may have normal results of thyroid function tests, including the sensitive TSH (thyroid stimulating hormone)".

The paper also states-

"Recent studies have suggested that treatment of sub-clinical hypothyroidism will reduce cardiovascular risk factors, improve the lipid profile and minimize neurobehavioural abnormalities."

And

"... some patients who have depression are treated not only with anti-depressants but also with thyroid hormone replacement even though they have normal thyroid function".

I think it is also relevant to describe the clinical practice of accepted experts in the field. In a editorial in the British Medical Journal (Toft et al 2003; 326:295-298), Dr Toft a consultant physician with expertise in the treatment of thyroid disorders states;

"There is also the difficulty of interpreting a serum concentration of TSH in isolation. A concentration at or near the upper limit of the reference range (*i.e normal*) particularly if associated with a normal free T4, may indicate underlying autoimmune thyroid disease. A consensus exists for early treatment of such patients with thyroxine if anti thyroid peroxidase antibodies are present in the serum, not because of any immediate benefit may be expected but because the risk of overt thyroid failure in future years might be high and it makes sense to anticipate morbidity rather than risk loss to follow up".

It has also been my understanding that when treating a patient, clinical examination and clinical findings should take precedent over the results of a single blood test- ***one should treat a whole patient not a blood test result.***

If a patient demonstrates gross physical findings suggestive of a certain condition, one must question the validity of that particular blood test for that particular patient. It may be that that patient has certain factors that make the interpretation of that particular blood test questionable e.g. endogenous antibodies that interfere with TSH, T4, FT4, T3 and FT3 biochemistry methodology which may occur in as many as 10% of patients with autoimmune disease (Despres N. Clinical Chemistry 1998 44:3 440-454).

It is well known that TSH and other thyroid hormone concentrations vary considerably for any given patient, and treatment should be tailored to the individual by monitoring their clinical response- Dr Toft again stating in his BMJ editorial;

".. in our experience most patients feel well only with a dose resulting in a high normal T4 and low normal TSH concentration, and those patients with continuing symptoms despite "adequate" doses of thyroxine may be slightly under replaced. Some patients achieve a sense of well being only if free T4 is slightly elevated and TSH low or undetectable"

After acquainting myself with these facts, it was my opinion that Dr Skinner was not undertaking clinical practices that were significantly different from his peers, and importantly his practice follows the clinical guidelines of accepted experts in the field.

It is for all of the reasons stated above, that I believe Dr Skinner to be a competent, professional and responsible physician, and I am surprised and disappointed that he has to stand before the Interim Orders Panel for clinical activities that are not only within the accepted normal parameters, but are motivated by the best interests of his patients.

Yours sincerely



Deidre Micklethwaite (0161 923 6573)

From: Catherine Green (0161 923 6410)
Sent: 27 June 2005 10:12
To: Tim Simpson (020 7189 5208)
Cc: Deidre Micklethwaite (0161 923 6573); Guy Wilkinson (020 7189 5201)
Subject: FW: Dr Gordon R B Skinner / upcoming case GMC Interim Orders Panel

-----Original Message-----

From: Ebony Gayle (020 7189 5428)
Sent: 27 Jun 2005 09:09
To: Catherine Green (0161 923 6410); Ceri Floyd (0161 923 6411)
Subject: FW: Dr Gordon R B Skinner / upcoming case GMC Interim Orders Panel

FYI another letter.

-----Original Message-----

From: [REDACTED]
Sent: 23 Jun 2005 12:40
To: egayle@gmc-uk.org
Subject: Dr Gordon R B Skinner / upcoming case GMC Interim Orders Panel

To whom it may concern;

I've written this letter concerning my private thyroid doctor, Dr Gordon R B Skinner, who, after being given only a fortnight to prepare himself, is being hauled up in front of the GMC's Interim Orders Panel, possibly to be suspended for 18 months.

He believes in practicing clinical medicine as well as evidence based, and takes signs and symptoms as important as blood tests, something the NHS does not believe in. If the bloods do not agree, then it doesn't exist as far as they are concerned. But there is a small subsection of us who indeed have thyroid dysfunction in spite of 'normal' blood tests, and we've been forced to seek out a private doctor to help us as the NHS will not.

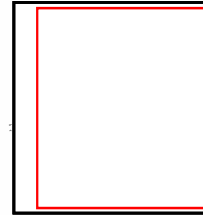
If this happens, myself and a great number of people are going to be very ill indeed, when our medication is cut off.

Someone, please speak up. Please help us stop this from happening to our doctor, the man who has taken care of us in lieu of the NHS, because our thyroid results originally read 'normal.'

Kindest regards;

[REDACTED]

27/06/2005



27th June 2005.

Adam Elliott,
Interim Orders Panel G.M.C.
Regents Place,
350 Euston Road,
London,
NW1 3JN.

Dear Sir,

I am saddened to know that the GMC are having an open meeting on 'Wednesday 29th June 2005 regarding Dr. Gordon Skinner.

I am a patient of his and I have received excellent treatment and advice from him.

I was diagnosed as being hypothyroid over [redacted] ago by my G.P. Initially with Thyroxine treatment my health improved, but subsequently I became less able to function normally. I was always informed that my regular blood test results were within the "normal reference range", and that no change in treatment was necessary. I continued to be very unwell.

[redacted]
I became aware of Dr. Skinner's work, and my G.P. referred me to him. Dr. Skinner suggested that the dose of Thyroxine I was taking was not sufficient to alleviate my problems, although my blood test results were within the normal range. He suggested an increase in Thyroxine, I asked if it would be appropriate to take Armour Thyroid. Dr. Skinner agreed that it would be, and since then my health has gradually improved. I am now able to lead an almost normal life, and do things, which were impossible for so many years. Dr. Skinner has enabled me to function again and without his advice I would be existing like a zombie and not having a normal life. Without Dr. Skinner and other Doctors like him I am sure many people similar to me would be denied the god given right to a normal life.

I have 3 friends and 2 acquaintances who have all been helped by Dr. Skinner; we cannot understand why the GMC are not happy with his practice. We need more Doctors like Dr. Skinner, and from my personal experience he practises safely and most importantly, every patient is the centre of his consideration, as he wants us all to be well.

I would like the GMC to take special note of my valid comments regarding the fact that G.P.'s and other medical practitioners should be allowed to practice medicine without the bureaucratic nonsense regarding withholding Thyroid hormone

Replacement Therapy, when blood test results are within the current specific range. Surely the range needs to be re-examined and altered to something more appropriate? The medical profession should be able to make clinical judgement and diagnosis for Hypothyroidism without the restrictive blood result range, and be able to prescribe medication, as they deem necessary.

A year ago I would not have had the energy and would not have been able to think clearly enough, or have found appropriate words to write this letter. As I am sure you can see from this letter, I have now recovered sufficiently to lead an almost normal life. This is only because of Dr. Skinner's excellent clinical diagnosis, treatment and help.

Yours faithfully,

[Redacted signature]

[Redacted address]

[Redacted]
[Redacted]
27th June 2005

Home Tel:
Work Tel:
Mobile:
E-mail:

[Redacted]

Adam Elliott, Esq.
Interim Orders Panel
General Medical Council
Regent's Place
330 Euston Road
LONDON
NW1 3JN

By Fax (020 - 7189 5179) & 1st class post

Dear Sir

INTERIM ORDERS PANEL - DR GORDON R.B. SKINNER - 2PM WEDNESDAY 29.6.2005
LETTER IN SUPPORT OF DR. SKINNER FROM RICHARD PORTSMOUTH (A PATIENT)

I am a patient currently receiving treatment from Dr Skinner. I only learnt of the impending Interim Orders Panel hearing on Saturday and have felt compelled to write as soon as I could. I hope that the following is of assistance to the Panel with its deliberations -

Summary

- Following unsuccessful attempts to obtain appropriate treatment for an underactive thyroid from others, I am feeling very much better under Dr Skinner's care.
- I have found Dr Skinner to be very professional and attentive to my changing symptoms and willing to try a number of treatments to find one that works for me
- It is Dr Skinner's persistence that allows me to still hold down a job
- I believe that he has kept my GP's fully informed of my consultations and treatment.
- I will be very dismayed if I am unable to continue to be treated by Dr Skinner.

Background

I have suffered ill health over many years including, [Redacted]

[Redacted]

[Redacted]

Interim Orders Panel - Dr Gordon RB Skinner - 2pm Wednesday 29.6.2005

Letter from Richard Portsmouth (patient) dated 27.6.2005 - in support of Dr Skinner

Treatment under Dr Skinner

A further year later, in [redacted] with worsening symptoms and therefore difficulties coping at work, I sought a second opinion from another private endocrinologist relying on various recommendations. I am very pleased that I managed to get an appointment to see Dr Skinner, in [redacted]. I have had a number of consultations since and have found Dr Skinner to be very professional in his examinations and very attentive to the changing symptoms presented before and after treatment.

Dr Skinner has very patiently treated me over the last [redacted] years with a number of drugs which at various times have included various doses of Thyroxine, Armour Thyroid and Tertroxin (Liothronine Sodium BP T3). I am currently on [redacted] and my undesirable symptoms have reduced dramatically. [redacted]

Without this persistence and willingness to try various solutions, I believe that I would not be still holding down my job. Whilst my health problems are not all solved, I feel so much better under Dr Skinner's direction and care. I am now seeing Dr Skinner in his [redacted] consulting room [redacted]. His patients are very fortunate that he is prepared to hold consultations at a weekend, recognising the difficulties that constant absences from work can cause.

During the period under Dr Skinner's care I have a new NHS GP following a change of home address [redacted]. I am pleased that my current NHS GP fully recognises the fact that I have an underactive thyroid and I am able to get prescriptions from him rather than having to rely on Dr Skinner to prescribe.

From what I can tell from my visits to respective GPs, Dr Skinner has written to them on a number of occasions and carefully explained his findings and his treatments. It is unfortunate that my original GP was not happy that I was being treated for an underactive thyroid, however, this GP has since proved to be wrong - this was through over reliance on blood test results alone.

Two specialists have confirmed that I do need treatment. I would be feeling very unwell on such medication if I did not need it. I am feeling very much better for the medication.

I would be very dismayed if I were not to be able continue to see Dr Skinner, as that may well prove to be a significant set-back in my recovery process.

Yours faithfully

[redacted]

cc Dr Skinner, [redacted]

Adam Elliott
Solicitor
Interim Orders Panel
Regent's Place
350 Euston Road
London NW1 3JN

27 June 2005

By Fax: 0207 189 5179

Dear Sir

Dr Gordon R B Skinner
Hearing before Interim Orders Panel: 29 June 2005

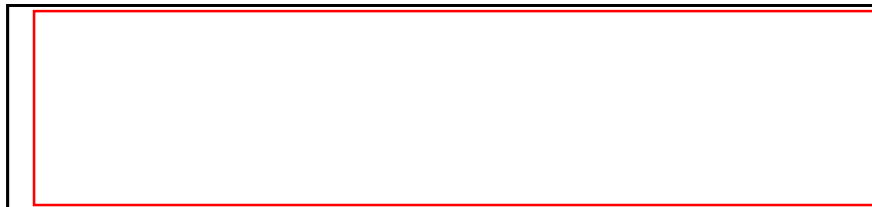
I have been a patient of Dr Gordon Skinner for hypothyroidism for six plus years. I understand that he has been called before the panel to justify his manner of treatment of patients and set out below his treatment of me and the massive success it has had.

I want to stress that his treatment of me has changed my life and given me back the energy, drive, commitment, focus, and good health, which I had lost in my early [redacted]'s (see below). More importantly it has given me the capacity to withstand the high levels of stress and bring to my work the high levels of energy which my job demands. As you will understand I am extremely concerned that if he is unable to treat me after 29 June 2005, my quality of life will deteriorate to such a level that I will not be able to perform the functions of my current employment or be in a position to provide for my family as I have been doing.

I was recommended to Dr Skinner by my father (who was also being treated for hypothyroidism) and introduced by my then GP Dr [redacted] with an above normal range TSH count, but a T4 reading at the very bottom of the acceptable range. Given that my father was being treated for hypothyroidism it seemed possible that the cause of the symptoms set out below was hypothyroidism (as it had been for him) and, following the blood test results, I went to see Doctor Skinner for consultation given the successful treatment he had prescribed for my father.

At the time I first saw Doctor Skinner I had a job as [redacted]

[redacted]



27th June 2005

Mr Adam Elliott
Interim Orders Panel
Regents Place
350 Euston Road
LONDON
NW1 3JN

Dear Mr Elliott

DR GORDON SKINNER

It was with great dismay, sadness and panic that I heard about Dr Skinner's being called before a Panel on Wednesday afternoon.

My experiences with Dr Skinner have been nothing but positive. His extensive knowledge of thyroid, adrenal and related illnesses and his compassionate treatment of me as a patient (not a set of test results) are second to none. It would be a crying shame and a travesty if he was suspended and could no longer be there for me - and moreover, anyone else the NHS has failed through indifference, lack of time/understanding and deficient specialist knowledge/education.

Please bear in mind that this is Dr Skinner's life and livelihood you will be calling into question on Wednesday. For the sake of my health (and my life), I beg you not to suspend Dr Skinner.

Thank you for your kind attention.

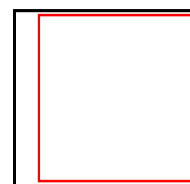
Yours sincerely

[redacted]

[redacted]

(Patient of Dr Skinner's for in excess of [redacted] years)

Mr A Elliot
Interim Orders Panel
GMC
Regents Place
350 Euston Road
London
NW1 3JN

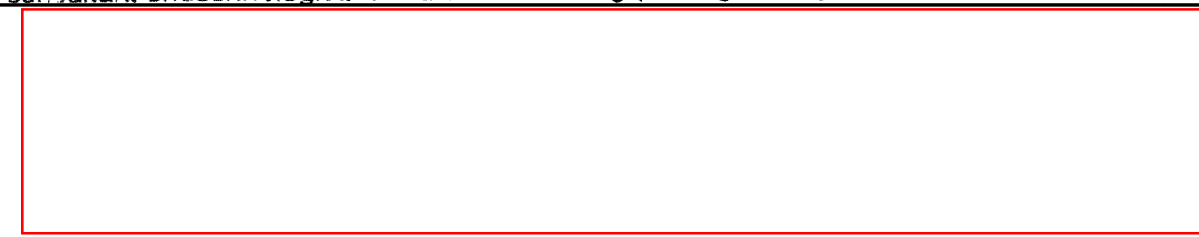


Dear Mr Elliot

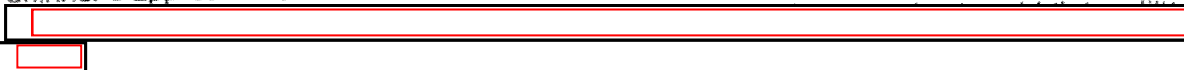
REF : DR GORDON SKINNER

I am writing in connection to Dr Skinner's appearance before the Interim Orders Panel on Wednesday 29th June 2005.

I was both surprised and saddened to hear that Dr Skinner had been called to appear before the Panel on grounds relating to his diagnosing and prescribing practice. I was referred to Dr Skinner in [redacted] by my GP after a long-winded and fruitless referral to a local consultant endocrinologist. I had been suffering (amongst many other symptoms including



My first visit to Dr Skinner in [redacted] involved a very lengthy and detailed consultation. During the course of the consultation Dr Skinner : listened very carefully to the long list of health problems I had acquired; enquired about, and took notes relating to, my family's medical history; carried out a thorough physical examination; took note of the correspondence between my GP and the local consultant; and took blood for a full blood thyroid profile. On the grounds of both my symptoms and of the level of T4 within the subsequent blood test results (which were at the low end of the currently established 'normal' range), Dr Skinner felt it justified to undertake a trial of thyroxine. As a result of Dr Skinner's approach I am now free of almost all of the symptoms, [redacted]



The reason I felt compelled to write to you in regard to Dr Skinner is to support his method and approach to both diagnosing hypothyroidism and to prescribing thyroid support medication. My two main areas of concern, and where I feel Dr Skinner is being unfairly treated, are as follows :

- the current established approach to diagnosing an underactive thyroid appears to revolve entirely around the use of blood tests which use only a statistical norm to dictate whether a patient is euthyroid or not. What this approach fails to account for is that every member of the human race has a different physiology and has hormonal requirements that will

change and vary throughout their lives. What may be entirely 'normal' for one person may not be normal for another -- in spite of that 'normal' falling within the statistically-driven normal range. Undoubtedly there are hundreds of thousands of people in the UK whose euthyroid 'normal' should be very high within, or even or above, the established normal range and who are suffering classic hypothyroid symptoms, but have been told that their thyroid profile is 'normal' and, frustratingly, that 'their symptoms are driven by stress, diet or lack of exercise or by an unknown cause

- ♦ there also appears to have been a complete breakdown in the system of symptom-based diagnosis and prescribing by both GPs and consultants. Too often GPs rely almost entirely on blood tests to diagnose whilst completely overlooking the massive body of evidence provided by the patient. As a result, the patient is almost overlooked in the diagnosis and is subsequently left feeling frustrated and angry when they are told that they are 'normal' or 'fine' in spite of having described to the doctor a wide range of health problems

Dr Skinner's approach involves a heavy reliance on considering symptoms as experienced and described by the patient, a willingness to let patients determine if thyroid support medication alleviates symptoms and a solid belief in the clear fact that each patient is different. Through regular check-ups and correspondence with Dr Skinner, where patients are encouraged to record and describe their state of health, his patients are given a sense of a measure of control over their health -- undoubtedly a most important fact in the recovery rate/success of Dr Skinner's patients and something which the medical profession as a whole could learn a great deal from.

During the proceedings of forthcoming Panel I would urge you to consider the views of Dr Skinner's patients on the effectiveness of his approach and practice. The sheer number of Dr Skinner's patients who have made a significant recovery following treatment has to stand as evidence of his effectiveness and as grounds for the medical profession to re-evaluate and open up the debate on its current approach to the diagnosis and treatment of hypothyroidism. I would also urge the Panel to consider the impact of any decision to restrict Dr Skinner's ability to continue his work in this area and to prescribe thyroid support medication. A detrimental result would render the Panel responsible for the decline in health of many hundreds of Dr Skinner's patients and would throw them back onto the mercy of a system which served them very poorly and was prepared to do little or nothing to alleviate their health problems.

I trust that my views will be reflected in the proceedings of the Panel and that its members will consider the wider implications of the debate.

Yours sincerely

Dear Sirs,

Re: Dr Gordon Skinner M.D.(Hons), D.Sc., F.R.C.Path., F.R.C.O.G.

I understand that the conduct of Dr Skinner's practice is under consideration. I have been his patient since [redacted]. He has been of inestimable help to me.

After many years of [redacted]
[redacted] with every General Practitioner I registered with on my many house moves diagnosing hypothyroidism until they obtained blood results within the normal range, I had the good fortune to make an appointment with Dr Skinner. I had obtained a list of names from a patient support organisation and he was simply the practitioner who was able to afford the earliest appointment.

I consulted him on the basis that if the problem was not my thyroid then he would be able to recommend to me a practitioner who worked in whatever field was appropriate. [redacted]
[redacted]
[redacted]

He required that I provided full blood tests, obtained via my own GP, and a very full medical history. He examined me carefully and took a long note. He explained the various possibilities to me, the benefits and disadvantages, and made sure that I understood what he perceived to be the nature of my problem. He outlined routes which I might follow were he to be proven wrong. He was clearly caring and concerned, despite a maverick sense of humour, which readily put me at ease and permitted me to discuss matters about which one tends to be more reticent than is necessarily helpful to one's medical adviser.


Since that first appointment I have re-consulted him on many occasions by telephone and visit. No charge has been made save for appointments. He has required that I keep my GP informed at all times and have regular blood tests. He prescribed Armour thyroid for me, a prescription for which he makes no charge, [redacted]
[redacted]


As a result of his treatment I am still working. [redacted]
[redacted]
[redacted] and I am, [redacted], in
[redacted]

better physical health than I was years ago. I have been with my current GP for years and she would doubtless confirm the improvement in my health and physical capacity.

- Dr Skinner is clearly motivated by concern for patients and not by money: his charges are ludicrously low or non-existent.
- His treatment may not be "mainstream" but it is successful.
- His care of his patients, judging by my own experience, is exemplary.
- His insistence on blood tests and GP involvement ensures secondary monitoring of his patients.

I trust that this letter will be of help to you in your deliberations.

 faithfully,



Mr Adam Elliott
Interim Order Panel
General Medical Council
Regents Place
350 Euston Road
London
NW1 3JN

Date: 28 June 2005

Dear Mr Elliott


Re: Dr Skinner's Interim Order Panel – 29.06.05

I am writing about Dr Skinner questioning by the Interim Order Panel on 29 June 2005. I am deeply saddened to hear that Dr Skinner's procedure of work is being questioned, rather than it being acknowledged for the positive benefits that patients like myself have received.

I've researched through many books e.g.

- * The Thyroid Solution, A Revolutionary Mind-Body Program That Will Help You
Ridha Arem, M.D
- * Thyroid Problem, A Practical Guide to Symptoms Treatment
Patsy Westcott
- * Why Am I So Tired, Is Your Thyroid Making You Ill?
Martin Butt

I had also surfed the net to learn more about my condition and about available treatments. I came across Dr Skinner's details while surfing the net and choose to contact him. It's ☐ since I voluntarily sought advice and help from Dr Skinner for my Autoimmune Thyroid Disease, and have since seen some relief from the treatment he had prescribed, if not all.



also extremely angered, confused and frustrated. Although it was a relief to be given a diagnosis it was most unfortunate that nothing could be done, no form of treatment be given, despite the continued heightening symptoms and my deteriorating health. It was extremely sad and upsetting to learn that no consideration was given to the serious affect that this condition was having on my health. I was literally left to suffer and bear with this on-going health problem alone.

From that moment on my main priority was my health, and my quest was only to seek information and help to improve it. I therefore contacted Dr Skinner and sought help and advice from him. Dr Skinner's consultation was conducted in the best of manners, both on a professional and personal level. He carefully looked at my reports, and also took notes of all the physical, mental and emotional effects that this condition was having on my health. He thoroughly explained what treatments were available and gave clear instruction on how they should be taken, and only upon my consent prescribed the treatment - Levothyroxine. The treatment has been stabilising and there has been some slight improvement to my health despite the slow progress. Any amount of improvement to my health for me is more positive result than alternative, which was nothing before Dr Skinner's help.

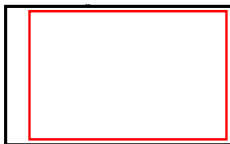
I believe Dr Skinner has the best interest of his patients and works directly with them, taking notice of what they have to say, unlike many other Doctors that I have

experienced. I find it disturbing that you are wasting time in questioning Dr Skinner's procedure, when he has been such great help to me and potentially many others who are suffering with this condition. Perhaps your time should concentrate on the benefits of the treatment?

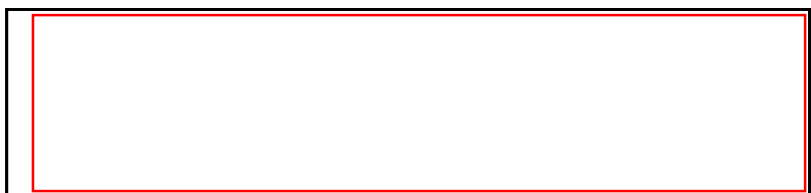
The Thyroid Condition Disease is generally acknowledged, but the serious extend of the condition isn't. I, as a patient can only see time being wasted by scrutinising Dr Skinners, when in fact the time could be put to better use by making the public, GP, Medical Professions, Clinics and Hospitals more aware of the serious affects this condition has on the patients, listening to patients complaints and not just going by blood test and reports, as they are the ones who are actually suffering with the condition.

Last but not least, I appreciate you taking the time to read my letter and listening to my experience of this disease and my treatment by Dr Skinner.

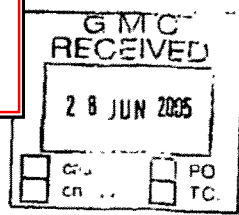
Yours faithfully,



KL



RECEIVED
29 JUN 2005



24th June 2005

Dear Sir,

The NHS is killing us !

The creator of Super bug vaccines faces suspension for helping hypothyroid patients regain their normal health. Dr Gordon Skinner from [redacted] is to stand before an Interim Orders Panel (IOP) on Wednesday 29th June 2005 at 2.00p.m.

We presume it is because of his clinical practice on the diagnosis and management of hypothyroidism. Because of his clinical practice, thousands of patients have returned to full health. Dr. Skinner is an eminent virologist and practitioner facing a 'kangaroo court' for treating ill patients who's blood test results lie within the so called 'reference ranges'. Endocrinologists have refused to discuss this matter with him. Neither Dr. Skinner's representative nor himself has had disclosure of the complainant's names. Dr Skinner has approx 4,000 patients (live files) plus 500 archived.

The NHS cannot treat hypothyroid patients successfully and many do not regain their health under their treatment protocol. If Dr Skinner is suspended, thousands of patients will be without vital medication, many will go into a decline and many will die. .

We feel deep outrage that the GMC has not been brought to account for the injustice and abuse of basic human rights that its newest, and most infamous creation, the Interim Orders Panel (IOP) daily and weekly commits. The extraordinary abuse of justice is terrifying in its implication; one can scarcely believe what is happening. The disgraceful and unforgivable distortion of power that doctors can face in the hands of the IOP, an abortion conceived by the GMC, is an attempt to remedy lacunae in their procedures highlighted by the Shipman case.

The conduct of the IOP beggars belief that it should form any part of a British legal system. With this new and terrible Star Chamber, the doctor is unquestionably guilty at the outset; explanations are listened to with impatience, and like as not, the registration is "suspended". But this suspension is the same as being struck off: the doctor cannot work from the moment of suspension, and without appeal. And so, his livelihood, irrespective of any rights in common law, is lost. They have scant regard for truth and common sense. Evidence is not taking into consideration – the IOP only look at 'information'. The respondent should be considered innocent until proved guilty and evidence should be considered to arrive at a verdict. This does NOT happen, and the GMC considers it is fully justified in this abuse of common law. Dr. Skinner demanded a Public hearing (his one remaining right). The GMC wished this hearing to be held in private, as they do not want the public to see their particular brand of rough justice in action.

They must now be held to account why they think the basic rules of justice can be flouted, day after day, and week after week. This question has been asked. We demand a reply.

Yours sincerely



Thyroid Patient Advocate

[REDACTED]

[REDACTED]

22nd June, 2005

Dear Mr. Elliott,

Dr. Gordon Skinner, MD, (Hons), FRCOG, FRCPath, DSc.

What you and your organisation is doing to Dr. Gordon Skinner and to his patients, is a complete and utter travesty of justice!

I owe everything to Dr. Skinner, a virologist, not so much for my recovery, but for that of my two daughters. If you have children (mine are now [REDACTED]), you know you would give everything in the world to make them healthy. **The NHS totally and utterly failed where Dr. Skinner succeeded.**

When [REDACTED] he still gave his all to his patients. If only you would go to some of his clinics and speak to and listen to the patients, you would know how highly everyone regards Dr. Skinner. When I have sat in his waiting room, virtually all of the patients stories are the same and they are very sad indeed. [REDACTED]

[REDACTED] Do not put me back to the condition I was in [REDACTED] years ago! My GP said, you certainly look and sound hypothyroid, but the blood tests say you are not! I am not a blood test, I am a person!

In the past, there were no blood tests and patients were treated until they were well. Now, if you creep into the bottom of the range of FT4 you are 'normal'. Well, the range is vast and most people don't feel well until the upper end of the ranges and often with a TSH of below 0.01. **Indeed a Dr. A. Toft of Edinburgh has actually quoted that he treats some patients to above the FT4 range and to below the TSH range. Why isn't he up before the GMC? He has also started giving Tertroxin stating that things have gone full circle with medication!** Untreated and undertreated hypothyroidism increases the risk of heart disease, cancers, infertility, kidney disease, depression etc. All well documented, but do not have space to include them in this letter.

Finally, I will hold Adam Elliott and his panel, fully responsible for my and my daughters' future health. If there is any deterioration because Dr. Skinner has been suspended, I will have no choice but to take legal advice as to whether I can take legal action against the panel members. Also, I think this should be taken to the Court of Human Rights. I am not a number, I am a human being who deserves to be treated with respect and this panel would be depriving me and my family of a healthy life should Dr. Skinner be suspended.

Question: What crime has Dr. Gordon Skinner committed?

Answer: It appears his crime has been to make patients well, when other specialists, GP's etc have totally failed their patients.

The GMC should spend there time concentrating on doctors who are a danger to the public and not those who make us well. I trust you will take all this into account.

When the GMC is reviewed, they must speak to patients and not have a kangaroo court.

I rest my case!

Yours sincerely,



Adjudication Sec

29 JUN 2005

Dear Mr Adam Elliot,

I was treated by Dr Gordon
Skinner in [REDACTED].

Having had tiredness from the age
of [REDACTED] and stopped growing. At the
age of [REDACTED] I developed
CFS/ME. The medical profession always
tested my thyroid very regularly,
but it was always in the "normal
range". Each Dr I have seen
throughout my life saw it
necessary to keep having my

thyroid retested. I am now [redacted]

Dr Skinner treated me with
thyroxine — a huge transformation



[redacted] On [redacted]

of thyroxine I am brighter more
energetic, I still have [redacted]
but life is now more bearable.

yours sincerely

[redacted]

Adjudication Section

I write this in support of Dr Skinner

29 JUN 2005

I have had the pleasure of being a patient of Dr Skinners for a relatively short time, in that time I have met a gentleman who not only is highly intelligent, but who is also compassionate and caring.

He put me at ease straight away, he listened to my story and my symptoms, he had a copy of my blood results and he really wanted to help me.

I speak very highly of Dr Skinner, my partner is also trying to get a referral as the NHS surgery we use has kept her dose artificially low, after of thyroid treatment she is still borderline and feeling unwell.

I fully support Dr Skinners methods as he has more than proved his competence And expertise in the field of thyroid diseases, as a result after so many years of feeling unwell I can start looking forward to feeling well again.

I hope this continues

Kind Regards

(satisfied patient)

Enc}- Brief story of my illness

RECEIVED
08 AUG 2005

I became a patient of Dr Skinner's after years of failing health and failing healthcare for that matter! I have suffered with a whole range of "diagnosed" conditions ranging

[redacted]

For several years I have had minor complaints that got worse and more worrying, my symptoms were, [redacted]

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

When I saw Dr Skinner he confirmed my thyroid was underactive and started me on thyroxine first [redacted] only when I started taking [redacted] some of the symptoms have eased a little obviously I will need a higher dose as I am still unwell, however I now have good days where I feel almost human again!.

[REDACTED]

Adjudication Section

29 JUN 2005

Dear Mr Adam Elliot

I am writing to you to bring my support to Dr Skinner in front of the Interim Order Panel. Not being a doctor or specialist on the question of thyroid treatment, I can't argue the case. However my friend [REDACTED] has spent many years collecting an enormous data on the subject and regards Dr Skinner ^{With Compliments} with great esteem. I truly trust that [REDACTED]

Judgment. I have known her for many years and know her
thorough and well informed her judgment & opinion is

King Regards



Private Section

29 JUN 2005



28 June 2005

Mr Adam Elliot
Interim Orders Panel
General Medical Council
Regents Place
350 Euston Road
London NW1 3JN

Dear Mr Elliot

I am writing to express an opinion and volunteer my support for Dr Gordon Skinner.

My attention was drawn to Dr Gordon Skinner in [] after reading an article in a local newspaper, regarding people struggling with hypothyroidism.

I was amazed at the similarities of the symptoms shared by the sufferers and that of my wife. I had seen a steady decrease in her health over the previous [] years deteriorating to the point where she was virtually becoming my full-time patient.

Over the years we consulted many doctors who listened to the symptoms, but dismissed it as someone suffering from depression. After reading the above noted article, we made further investigations and managed to arrange a consultation with Dr Skinner. Thankfully, Dr Skinner was the first **and only** doctor who took the time to listen and heard her cries for help. He decided on a course of treatment and over the next [] months of correspondence and careful monitoring of prescribed dosages of drugs, my wife began to make a noticeable recovery.

Now some [] years later, we have two beautiful children [] a very normal happy family life, all of which would not have happened without Dr Skinner's medical knowledge.

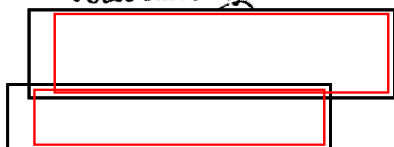
I would therefore have no hesitation in recommending sufferers of this illness to visit Dr Skinner. I have known other people including members of my wife's family, who have suffered with this terrible illness and after Dr Skinner's care have made massive improvements in their quality of life.

Whilst I am by no means medically qualified to speak on this subject, I can speak on behalf of my wife, members of her family and other people I have spoken to, who all have a great feeling of gratitude to Dr Skinner.

The facts and Dr Skinner's successes speak for themselves. Consequently, I would urge the British Medical Council to consider the possibility that Dr Skinner's method of treatment is right and the conventional treatment wrong.

I hope you will give some consideration to my comments and I would be happy to hear your thoughts regarding these issues.

Yours sincerely



Adjudication Section

29 JUN 2005

Dear Sir,

I am the daughter of one of Mr Skinner's patients [redacted]
It is my personal experience that most of the doctors my
mum have been to have not understood her condition and
have just referred her to someone else or said that she would
get better in time. Since visiting doctor Skinner my mum has
found out that she has had under active thyroid and has almost
fixed it, she is a lot more mobile than [redacted] and is achieving
things that probably wouldn't be possible without the expertise
of Doctor Skinner. I would say from all that I have heard through
my mother and by seeing all the miraculous changes in her since
[redacted] that Dr Skinner is a very nice person who is good
at his job.

Yours

[redacted]

Adjudication Section

29 JUN 2005

Adam Elliott
Interim Orders Panel
GMC
Regents Place
350 Euston Road
London
NW1 3JN

By fax: 020 7189 5179

Our ref:
Direct dial:
Please ask for:
Email:

28 June 2005

Dear Sirs

Re: Doctor Gordon Skinner
Public Hearing
29 June 2005

I refer to the above hearing and would be grateful if this letter could be placed in front of the Panel in support of Dr Skinner.

You will note that [redacted] and I have been a patient of Dr Skinner for [redacted] years. I was referred to Dr Skinner by my GP for a second opinion as I was concerned that my hypothyroidism [redacted] was not under control. I was still not able to function properly and was only able to work part time. My treating doctors at the time were relying solely on my blood test results being within the normal range.

When I saw Dr Skinner for a consultation he was very thorough. He went through a full history with me and gave me a proper clinical examination, something which I had not been given in the previous two years. As a result of his carefully considering my clinical presentation, he wrote back to my doctor suggesting additional medication. This was

[Redacted signature area]

[Redacted signature area]

increased on a very gradual basis with consultation with my GP, Dr [redacted]
[redacted]

The result is that since [redacted] I have returned to full time employment and I am now able to fully function on all levels. My GP has commented that he is very impressed with the results of Dr Skinner's treatment.

I believe that the area of hypothyroidism is an evolving area of medicine and it has long been a tradition in medicine that as medicine is not an exact science and it is continually evolving, there is always room for more than one school of thought in the same area of medicine.

This is recognised in the English law (and this standard is adopted in most similar jurisdictions worldwide) that a practitioner is not necessarily negligent if he has acted in accordance with a practice accepted as proper by a responsible body of medical men skilled in that particular art, even though a body of adverse opinion also exists among medical experts. A doctor is therefore not negligent just because someone else of greater skill and knowledge would have prescribed different treatment or operated in a different way.

Dr Skinner has always acted in a professional and proper way. I would therefore urge you not to find against a doctor who has dedicated his life to improving the well being of his patients and, from my experience, has been very successful at it.

Yours faithfully

[redacted]

cc: Dr G Skinner

[redacted]

Adjudication Section

28th June 2005

29 JUN 2005

Mr Adam Elliott
Interim Orders Panel
Regents Place
350 Uston Road
London
NW1 3JN

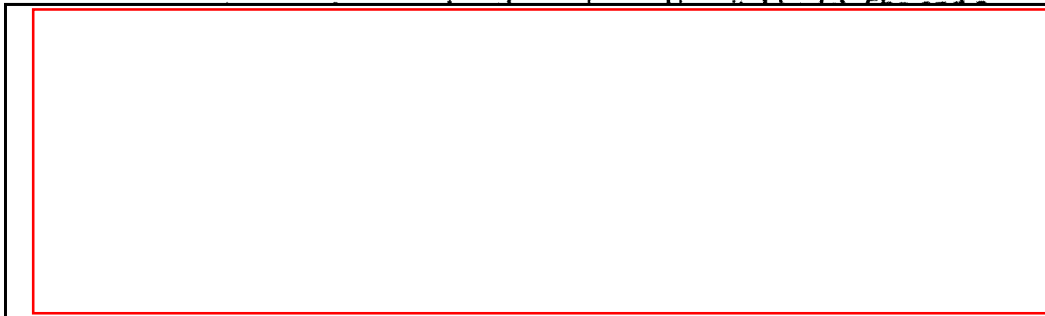




Dear Sir,

Panel Hearing
Dr Skinner


I herein write in support of Dr Skinner, as he has contributed significantly in the improvement in my wife's health. We went to Dr Skinner because the NHS failed totally to diagnose and treat my wife. In fact the NHS in conjunction with current practices have in my opinion been the main catalyst in my wife becoming unwell.

My wife

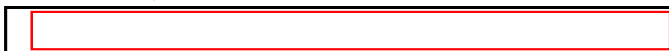


My wife became unwell and had to give up work. She attended her Doctor, undertook tests and examinations. My wife suspected under-active thyroid as it runs in her family. However the NHS proscribed test results were not conclusive. The NHS after a considerable period  offered no solutions. My wife was virtually an invalid for .

She attended Dr Skinner who diagnosed under-active thyroid. The treatment has been hugely successful and she has now a considerably improved quality of life.

I write in support of Dr Skinner and I am somewhat dismayed to here that he is subject to a panel hearing. Without Dr Skinner's treatment my wife (in her mid ) would be and invalid.

Yours faithfully



Adjudication Section

04 JUL 2005

June 30th 2005

Dear Mr Elliot,

Dr. Skinner was recommended to me by the [] branch of the ME association who organised regular clinics for members. The praise given to Dr. Skinner at these clinics was almost evangelical – everyone had a story and they were all positive. He gave hope to people who had been written off by the NHS. After many expensive and fruitless years of going to consultant after consultant, being operated upon, taking part in new drug trials, having blood test after blood test, Dr. Skinner offered a simple diagnosis which was treatable with an affordable daily pill - 'Armour Thyroid'.

I saw Dr. Skinner for the first time in [] he took a blood test, tested my blood pressure [], took my temperature [], asked many questions about my symptoms (varied and chronic) and told me I had the classic signs of low thyroid function. This was confirmed when the result of the blood test was returned. Although this was only slightly below the base line it was low. I started to take Armour Thyroid on a very low dose this was increased very slightly every few months until my optimum level was reached []. I have been on this dose ever since. It has changed my life. My whole body system has been rejuvenated. I cannot imagine or even contemplate how I would physically react if I were denied access to this hormone treatment.

I would like reassurance from yourselves that prescriptions will continue. I must also add that at no point was I ever in doubt as to Dr. Skinner's competence. He conducted his clinics professionally and often suggested that he could refer me back to my GP so that costs (i.e. fees) could be reduced. It was only after nearly [] years with Dr. Skinner that I agreed to this system and only then as it was difficult for me to travel to [] when I work full time.

I hope to hear from you soon,

Yours sincerely,

[]

Adjudication Secretary

05 JUL 2005



1 July 2005

Mr Adam Elliott
Interim Orders Panel
Regents Place
350 Euston Road
LONDON
NW1 3JN

Dear Mr Elliott

Re Dr G R B Skinner MD (Hons) DSc FRCPATH FRCOG

I have recently visited my very valued Physician, Dr Skinner, and was most disturbed to learn that following some sort of complaint from another doctor, he had been summoned to attend a meeting with yourself in connection with this allegation.

I wish to place on record that in the [redacted] years or so that I have been treated by Dr Skinner, my health has dramatically improved and [redacted] I have been impressed by his professional and consistently thorough approach. This view is also shared by other patients with whom I have spoken and whom, like myself, rely heavily on his continued advice and treatment.

It is therefore unthinkable to us that any action could be taken against Dr Skinner and I sincerely hope that, following your meeting with him, you will have been able to clear up any doubts which may have been raised, allowing uninterrupted continuation of his current much-needed surgery.

Yours sincerely

[redacted]

[redacted]

Adjudication

05 JUL 2005



30th June 2005

Dear Mr Elliott

I am writing to you in support of Dr Skinner who was called to a tribunal on 29th June.

I saw Dr Skinner for the first time on [redacted]. He scrutinised the blood tests that I provided and asked me a great many questions about my general health from as far back as I could remember. At the end of the consultation he stated that in his opinion I had hypothyroidism albeit only in a mild form. He asked if I would like to have a prescription for Thyroxine medication, I accepted this offer and began taking on [redacted].

I am please to tell you that already I am beginning to feel the good effect that the medication is having on my system. [redacted] I still have other thyroid type symptoms which I hope over the coming weeks will disappear.



Still suffering, I visited my doctor again and asked if she would refer me to see Dr Skinner who had been recommended to me as a thyroid specialist by someone who has received a great deal of help from him. Dr [redacted] agreed to refer me to see Dr Skinner. (I would point out that the NHS have not paid a penny towards these consultations.)

I was horrified to find on the day of the consultation that Dr Skinner was due to attend a tribunal in London on the following Wednesday 29th June.

I have spoken to a lady who was at the tribunal and she has related the events of the day. I understand that he received superb support from his patients. I am delighted to hear that the tribunal went in favour for him, and that he is to continue to practice.

I wish to place on record my support for all his endeavours on my behalf.

The NHS should acknowledge this gifted man. Learn from him and [redacted] who have the experience of helping 1000's of patients through their knowledge, understanding and research in this field of medicine.

Thank you taking the time to read this letter.

Yours truly,



2005-418

Mr Ian Chisholm
Chairman
GMC
Regent's Place
350 Euston Road
LONDON SW1 3JN

RECEIVE

11 JUL 2005

1 July 2005

Please quote ref: 50434Y

Dear Mr Chisholm,

I am writing on behalf of [redacted]
[redacted] and enclose her correspondence to me of 21 June.

As you will see [redacted] is extremely concerned at what she feels is a great injustice being actioned against Dr Gordon Skinner.

I think [redacted] correspondence is self-explanatory and her strength of feeling evident.

I would therefore be grateful for full clarification of this particular case, and for any information you are able to impart regarding the outcome of the Interim Orders Panel before which Dr Skinner appeared on 29 June.

Many thanks for your kind attention to this matter, and I look forward to hearing from you.

Yours sincerely,

[redacted]

Enc: [redacted] correspondence 21 June

[redacted]

21st June 2005

Dear [redacted]

I am writing to alert you to an injustice, which is about to be perpetrated against Dr Gordon Skinner MD (Hons) DSc. FRCP Path. FRCOG, of [redacted]. He has been summoned before the General Medical Council at 2.00pm on 29th June 2005 at The Interim Orders Panel, Regents Place, 3550 Euston Road, London NW1 3JN in order to answer complaints which have been received from other doctors and patients about his treatment protocol of thyroid disease. However, the only crime of which Dr Skinner is guilty is daring to make people well against accepted medical protocol.

As a patient of Dr Skinner I am appalled at the treatment that he is receiving. The GMC's motives are highly questionable. Their modus operandi is unfair and geared against any form of fair trial and towards obstructing the advance of medical science. Dr Skinner was given only two weeks to prepare his defence and will not be allowed to speak on his own behalf at his hearing. This seems to be little more than a "Kangaroo Court", where his fate has already been decided. Dr Skinner has no way of knowing who the complainants are, as their names have been blanked out, [redacted]

[redacted]. The GMC are not interested in knowing the facts or listening to any evidence either from the prosecution or the defence. The verdict will be announced based not on the facts or evidence, but on the "information" heard. Dr Skinner has little hope. It seems he has no rights whatsoever.

[redacted]

Had it not been for Dr Skinner and his thyroid treatment protocol, my life would be unbearable. I would be terribly unwell and would have little or no quality of life. I had practically every hypothyroid symptom and yet I was merely fobbed off by shortsighted NHS doctors. My tests said "normal", so I must be "normal", even though my symptoms screamed hypothyroid.

GPs fail to recognise that the TSH range currently used by the NHS is too wide and likely to be "skewed by the inclusion of persons with occult thyroid dysfunction" (The National Academy of Clinical Biochemistry, Laboratory Medicine Practice Guidelines: Laboratory Support for the Diagnosis and Monitoring of Thyroid Disease). They do not know that the USA lowered the top of the TSH range to 3.04 in March 2003. The AACE believes "the new range will result in proper diagnosis for millions of Americans who suffer from a mild thyroid

21/06/2005

disorder".

The UK system is outdated and condemns thousands of people to suffer needlessly. It also costs the NHS a fortune in unnecessary tests, investigations and medication to address each individual symptom, when they could all be easily treated with thyroid hormone. The NHS did not even bother to test my anti-thyroid antibodies [redacted]

In contrast, Dr Skinner took the time to listen to me properly and treated me like a human being. He examined me thoroughly, including feeling my thyroid – something that no NHS doctor has ever done. He diagnosed me hypothyroid, prescribed medication and I am now well on the road back to full health.

Dr Skinner has guided my progress and made medication changes as necessary, always keeping my GP fully informed of my treatment. Dr Skinner now prescribes natural desiccated porcine thyroid extract (Armour Thyroid) for me. This contains a mixture of both T4 and T3 and is the only thyroid medication that works for me - synthetic thyroxine does not suit me. Without Armour, I would be condemned to a life of misery, being totally unable to carry on a normal life. Critics who allege that Armour is an unlicensed medication and that the T4 and T3 content in each batch is unstable are misinformed - the potency of Armour Thyroid is strictly controlled. This is backed by scientific evidence, which I can provide on request.

Dr Skinner also diagnosed my [redacted] daughter, who had been experiencing many hypothyroid symptoms. Her GP refused to listen, [redacted]

[redacted]

Dr Skinner is a wonderful, caring doctor. He listens to his patients' symptoms and treats them accordingly. He has given many patients back lives, which had been devastated by unrecognised thyroid disease. This talented doctor has also developed vaccines against Aids, Staphylococcal infection and Herpes. He deserves to be congratulated for his work, not vilified.

Yours sincerely,

[redacted]

23/06/2005

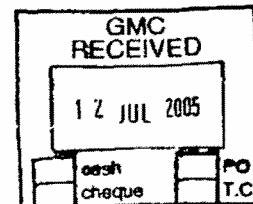
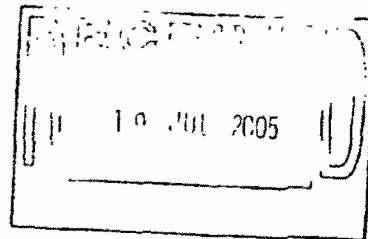
Ceri Lloyd
200510701

RECEIV

13 JUL 2005

6th July 2005

The Secretary,
General Medical Council
Regents Place,
350 Euston Road,
London NW1 3JN.



Dear Secretary,

Dr. Gordon Skinner

I understand that this doctor has been called before the Interim Orders Panel of the General Medical Council and I enclose a copy of a letter that I have received from one of his patients.

Yours sincerely,

13/7/05

FAO:


Samantla Huntington

FPD (Administration)

GMC London.


25 June 2005


Dear 

I am not a  but I am writing about a doctor who practices in your constituency, who has given me back my health and who is, this week, being called to appear before the Interim Orders Panel of the General Medical Council.

Dr Gordon Skinner is a remarkable man who treats patients with thyroid problems in a way that many doctors these days do not. My own story is attached (in the letter I have just sent to the GMC so I won't repeat it here) but I would also like you to understand Dr Skinner's method of diagnosing and treating patients.

Dr Skinner trained before current blood tests for thyroid function were introduced and was trained to diagnose thyroid problems based on symptoms, medical history and the elimination of other likely causes of symptoms. Having taken a medical history and symptoms list it was then the practice to try patients on thyroid medication if their symptoms and so on suggested this was necessary. Doctors would then monitor them very carefully, in order to see if the treatment worked. If it did work then the treatment was continued. There are no documented cases of this method having gone wrong, or having failed patients by causing other problems.

In the 1970s blood tests were invented which were designed to assist doctors by providing extra evidence when they came to diagnose thyroid problems in patients. The blood tests were, initially, never intended to be the only deciding factor. As doctor time per patient has decreased and as the blood tests have become more and more commonplace the previously respected methods of diagnosing thyroid problems have become secondary. The blood tests have become the deciding factor in diagnosis. Incidentally, vets are still trained to ignore thyroid function tests in animals if the symptoms override what the blood tests suggest.

In the 1980s Dr Skinner was working as a virus specialist at Queen Elizabeth Hospital in Birmingham. With the growing 'epidemic' of 'M.E.' or 'C.F.S.' at that time there were investigations into a possible viral cause of this 'new' condition. Dr Skinner, therefore, received referrals from GPs to his virus clinic. He was surprised to see what appeared to be 'typical' cases of hypothyroidism. He was puzzled as to why GPs had not picked up and treated such obvious cases and spoke with the GPs. They told him they had run the 'usual' thyroid blood tests and they had been negative. Dr Skinner

decided to cautiously try these patients on thyroid treatment, regardless, and met with remarkable success with many of these patients recovering.

He has since worked privately as a GP in order to concentrate on treating thyroid patients. He has studied the blood tests and found them questionable, relying as they do on statistical 'norms' to categorise patients who do not always conform to those norms. He has brought many people back to health, myself included as you will see from the attached letter. He has also written about his work in peer-reviewed medical journals and in a book he has recently published. He always works with a patient's GP and keeps them informed of every action he takes.

Because he practices in this (currently) unorthodox, but successful, way he has been challenged by some mainstream thyroid doctors who believe that his methods are ill-advised. They have little evidence to base this on, and have so far not come up with cases where Dr Skinner himself has behaved wrongly. I strongly urge you to contact Dr Skinner to learn more about the way he treats patients, and to discover if you can give him support of any kind. He is a remarkable man who should not have to face this ordeal alone after the help he has given to so many people.

Please contact him, care of his colleague

[redacted]

Yours faithfully,

[redacted]

[redacted]



Please quote reference
on all correspondence

Finlay Scott, Chief Executive
General Medical Council
Regents Place
350 Euston Road
London, NW1 3JN

To Paul Philip: reply
cc Finlay Scott
Andrew Ketteringham
DPCE

Our Ref: Scott/Tanner/060705/Non/le

11 July 2005

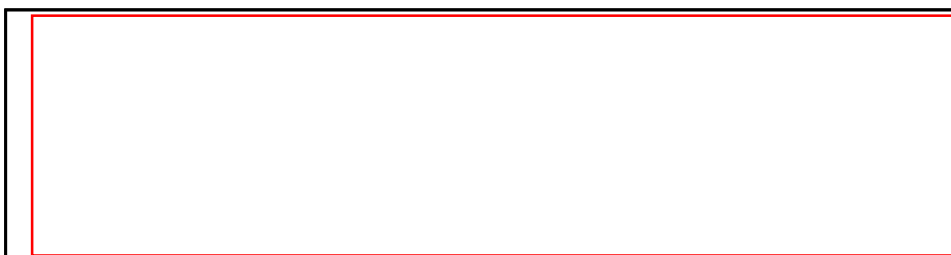
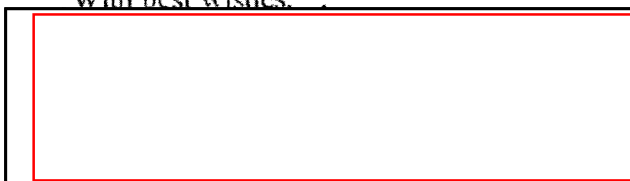
Dear Mr Scott

I am writing to you on behalf of [redacted]
[redacted] concerning the
suspension of Dr Skinner.

I enclose a copy of [redacted]'s letter and enclosures. I would
appreciate you looking into the points raised and letting me have your
comments.

I therefore look forward to hearing from you in due course.

With best wishes,



RECEIVED
30 JUN 2005




22nd June 2005.

Dear 

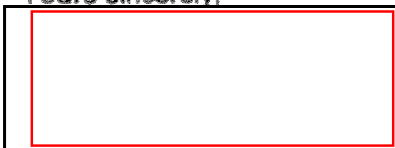
Please find attached a copy of a letter sent to the GMC. I realize you may not know a huge amount about thyroid disorders, but I would be very grateful if you could read the letter attached. There is a paucity of research surrounding the treatment of hypothyroidism and much confusion within the medical profession (please refer to the BMJ for more articles). Unfortunately due to a minority of very powerful doctors, the chances of there being any decent research into this field are very small. This is because this minority refuse to accept that many thousands of patients have been treated successfully by the likes of Dr Skinner, and because they are too narrow-minded to think outside the box, they stifle any research or opinions that do not agree with theirs.

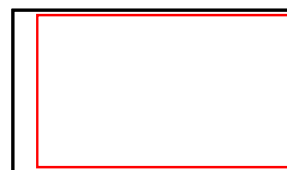
This is a very serious matter and has been raised many times before, but unfortunately no-one seems to be listening. In fact, many of us have tried to get this topic discussed in a public arena such as on television, but the medical advisers on these programmes again stifle this. The result is that many people are suffering needlessly and being given all sorts of irrelevant diagnoses, costing the NHS and benefits system thousands of pounds.

You are in a position to make a difference and look into this matter. I am not saying you can directly intervene in Dr Skinner's case, but it illustrates the bullying and harassment that some doctors face by a minority of arrogant doctors. This is not a democracy and it is certainly not protecting patients. Maybe I am wrong in the assumption that the GMC are there to protect patients. As it stands in this case, I feel they are simply there to give in to bullying by other doctors, instead of discussing the matter openly. There is no scientific evidence of any quality to back their argument up, but that does not stop them victimizing anyone who does not agree with them.

I can appreciate that you are very busy but should you wish to discuss these matters, I can be contacted via telephone on  Dr Skinner would be more than happy to discuss these issues with you also – he has many years of experience in this field.

Yours sincerely,





Adam Elliott
Interim Orders Panel
GMC
Regents Place
350 Euston Road
London NW1 3JN

22nd June 2005

Dear Dr. Elliott,

I am writing to you regarding the hearing involving Dr. Gordon Skinner on 29th June 2005. I am not entirely clear on why you would want to victimize such as excellent doctor but I would guess that it is because he has the backbone that many doctors in the endocrine profession lack. Yes, he treats patients in a holistic manner rather than purely blood tests alone. I for one do not think this is a matter of concern for the GMC. His treatment protocols are very safe and patients are monitored very closely, often in conjunction with their GPs.

In reality he has helped many thousands of people get their lives back following little or no helpful treatment from the rest of the medical profession. Consequently, this has resulted in the NHS and benefits system saving thousands of pounds. I am one of these patients who has suffered for years or more. Even though I had two different types of thyroid antibodies and had many of the symptoms of hypothyroidism, I was still not treated. The endocrinologist I saw did not even ask me about my symptoms. This is a typical examination if the majority of your blood tests happen to be normal.

I am not easily convinced of medical interventions

. This means I weigh up the pros and cons of something very carefully before I decide to go ahead. I have read the research – there is no evidence of any quality to support the current standard philosophy of not treating hypothyroidism until a patient's blood tests are abnormal. How can any doctor say what is normal for a patient unless these levels are taken when a person is well. For example, one person may work perfectly well with a level of T4 at 12 whereas another person may work optimally at 20. Why do you think there are so many people being diagnosed with chronic fatigue syndrome and fibromyalgia now, as compared with 30 years ago? These conditions have really only come about after the introduction of thyroid function tests. Before this time, if patients presented with symptoms similar to CFS or fibromyalgia, they would have been treated for hypothyroidism. That is why some doctors who do treat these patients as hypothyroid claim over 80% of them get better with this treatment (this is from books

I have read and people I know who have been diagnosed with CFS etc but treated with thyroid replacement therapy, not necessarily Dr Skinner's opinion).

Whilst I am the first to admit there is not much scientific evidence in the form of randomized placebo controlled studies to support treating hypothyroidism in patients with normal blood tests, this does not mean it is wrong, as the thousands of patients treated by Dr. Skinner will testify. It simply means the research hasn't been done, bearing in mind there is no good evidence to support not treating these patients, as mentioned above. You only have to read the BMJ to realize there is such confusion regarding how to treat and when to treat thyroid problems, therefore it is impossible to say if one person is wrong and another right. It is not that black and white.

Before you make a decision (if it is not already made), I hope you realise the hundreds and hundreds of people you are condemning to a lifetime of ill health and misery should you go ahead with this suspension, not to mention the consequent health costs this will incur. Instead of victimizing Dr Skinner and others before him [redacted], may I suggest you fund proper research into this topic so that you can be very sure that you are basing your decision on fact, and not pressure from ignorant and arrogant endocrinologists who have failed so many people in this country. Who is looking at them? I was under the impression that the GMC was supposed to be protecting patients – this suspension would not be doing this. It will only serve to reinforce the victimization that Dr Skinner has endured for a long time.

Yours sincerely

[redacted]

cc. Patricia Hewitt, Secretary of State for Health, House of Commons
Dr. Liam Fox MP, Houses of Parliament
Paul Burstow MP, Houses of Parliament

27/8/05

[Redacted]
To: Professor Sir Graeme Catto, President of the GMC
Regent Place, 350 Euston Road
London NW1 3JN

Dear Professor Catto

Re Doctor G R B Skinner MD (Hons) DSc FRCPath FRCOG

I would like to refer you to a letter [copy attached for your information] which I sent to the GMC on the 20th of June 2005 prior to Dr Skinner's appearance before the IOP on the 29th June 2005.

As you will see from this letter, both my daughters are patients of Dr Skinner to whom they owe their recovery from seriously under treated hypothyroidism. The letter I sent on the 20th of June asked for a response, which I have yet to receive and so I am asking this question again. What can my family and I do to help defend this skilled and highly competent doctor?

As you will no doubt be aware, Dr. Skinner's hearing was public and [Redacted] and several dozen of Dr Skinner's other patients and their families turned up on the day to support Dr. Skinner. In addition, during the hearing itself which I was fortunate enough to attend [many were turned away due to lack of space], it was made public that Dr Skinner had some 4000 patients of which several hundred had written to the GMC in support of this exceptional doctor. However, during the proceedings, these letters were barely referred to by Mr.Brassington, who was representing the Council on that day.

Having now received and read the transcript of that hearing, I would like to make some comments.

Firstly, all the complaints it seems [except one] arose from other medical practitioners and endocrinologists, who differ [from Dr Skinner] in their opinions and approach to the treatment of the hypothyroid patient. From what I could gather, these differences of opinion centered around the heavy reliance on blood tests by these practitioners in diagnosing such patients. Furthermore, if the patient was diagnosed as hypothyroid, there were some differences in opinion of what medication, how much medication and what combination of medication was deemed to be appropriate.

It also became clear during this hearing that, there are sets of guidelines in place which dictate a narrow range of treatment for all patients regardless of their individual circumstances or severity of their hypothyroid condition. Such guidelines leave medical practitioners little choice in how they prescribe and help their patients to manage their condition.

Dr Skinner on the other hand, in determining whether a patient is hypothyroid and how their treatment needs to be managed, takes a more holistic approach and prescribes medication on an individual basis for each of his patients according to their condition.

In the case of both my daughters, he considered blood tests, presenting symptoms, case histories, genetic disposition and listened carefully to what each had to say. In addition, he is the only doctor [other than their paediatrician who treated them during childhood] who has taken the trouble to carry out clinical assessments of my daughters during each of their appointments with him. I therefore have first hand experience of his thorough and individualistic approach as I have sometimes been present during such appointments. As a result, I am very concerned about the hearsay and allegations contained

in the transcript by individuals who, in Dr Skinner's words [Page 21, paragraph H of the transcript] "have never seen the patient or talked to me in their professional life".

It is a fact that there will always be differences of opinion between doctors and their ideas on treatment. One only has to read books relating to medical history to know that many doctors have often been castigated for their ideas [eg Harvey] only for it to be later confirmed that such ideas were correct all along and now form part of main stream medical practice and understanding. A rigid and inflexible approach has no place in modern medicine or in the sciences. A point that was well illustrated at page 28 paragraphs E to H of the transcript of the proceedings.

Therefore for the record, can I ask, how did this 'fourth generation' of blood tests come about? Who decided what is 'normal' or 'not normal'? Why is there such scant regard currently being paid to presenting symptoms?

My concern is that the endocrinologists who are the main protagonists in relation to this hearing wield rather too much power over their patients. They are denying such patients access to the full range of treatments that are available and thus some of their patients their health because of the rigid guidelines being imposed regardless of individual requirements. At this point, I suggest that the GMC needs to speak to the patients who have written in support of Dr. Skinner for a more balanced viewpoint. At the end of the day, what matters most is that these patients are treated according to their needs and severity of their condition and are able to regain their health and well being.

With regard to my own daughters, slavish adherence by the NHS to the NHS guidelines [ie lab technicians making a diagnosis on behalf of the doctors via blood tests] and little or no notice being taken of numerous presenting symptoms, resulted in the undertreatment of their condition. They became seriously ill and unable to function. I know by widespread reading and talking to other hypothyroid patients that my daughter's cases are not isolated incidences - the problem is widespread, the current NHS guidelines need investigation as they are putting some patients at risk.

I would like to back up the above statements at this point by re-iterating that Dr Skinner is quite unique in that he gave my daughters permission to contact him by phone with any queries they might have regarding their treatment. In short he is a doctor who is meticulous, conscientious and who cares about his patients and most certainly does not take a 'carte blanche' approach to prescribing hypothyroid treatment as implied by Page 12 Paragraph F of the transcript, which mentions "anonymous" correspondence when making such allegations!!.

Dr Skinner's careful and considered approach was further confirmed by other of his patients, many of whom I met and spoke to for the first time on the 29th June, whilst waiting for the hearing to start. I heard the same story over and over again, that Dr Skinner had helped them recover from this dreadful debilitating condition [where NHS doctors had failed them] and given them their lives back. I also asked some of them what treatment they were receiving and found out that each of them were on different dosages and/or combinations of medication according to need - again showing that the allegations made in this respect were without foundation.

In page 2 paragraphs A/B of the transcript, the reason for the hearing was spelt out. There is no doubt in my mind that the Interim Orders Panel has a role to play. However, I was disturbed by these particular proceedings, for the following reasons.

The complaints were from other medical practitioners [mainly endocrinologists]. They related to differences of opinion in the diagnosis and management of hypothyroidism. Such issues require further research [and as such are outside the remit of the IOP]. In addition, since I saw no evidence of patients

coming to harm [in fact quite the reverse - patients were getting better] I was therefore at a loss to understand why such issues had dominated the greater part of the hearing.

There were a few instances of correspondence going astray, administrative errors and such like, these could have again been dealt with outside of the panel by phone calls or further correspondence.

The one complaint from just one patient was not sufficient to warrant a hearing and perhaps could have been investigated separately. In fact, I believe that Mr Jenkins refers to this as case number 2 [Page 24 paragraph C of the transcript refers] as the lady who asked for her money back. On the other hand, the hundreds of letters from patients and other medical professionals in support of Dr. Skinner should have merited a closer look and I hope that this will now be the case, so that justice can prevail.

At the end of the hearing, I was still at a loss to understand why it had been called in the first place, since we were hearing about a doctor who was healing his patients!!

Finally, I cannot think of any doctor who is more fit to practice than Dr. Skinner. Please consider the following, if Dr Skinner is not allowed to continue to practice and without restriction - what is to become of his patients? Such patients [possibly 4000] will lose access to a doctor of their choice and whom they trust. So one final question, if that happens whom do I and my family go to for redress as my daughters become ill again? I look forward to your response as a matter of urgency.

Yours sincerely


27th August 2005

JAJ/DLP

9th November 2005

Mr. Adam Elliott,
Interim Orders Panel,
General Medical Council,
Regents Place,
350 Euston Road,
London,
NW1 3JN

Dear Mr. Elliott,

Re: Dr. Gordon R.B. Skinner, MD(Hons) DSc FRCPath FRCOG
22 Alcester Road, Moseley, Birmingham, B13 8BE

I understand that Dr. Skinner is being reviewed by the Interim Orders Panel on the 2nd December 2005 and that the GMC has asked Dr. Skinner to obtain references from doctors with whom he has shared patient care.

I refer on average about 2 patients a month to Dr. Skinner and following his consultation with the patient, both at the initial consultation visit and at follow-up visits, he keeps me fully informed as to his findings and recommendations. Most of these patients I see in my own practice so I have feedback both from Dr. Skinner and from the patients I refer to him.

I can honestly say that the assessment and care which he give to the patients I have referred to him is of the highest order. Many of the patients I refer have either normal Thyroid Function Tests or are Euthyroid and have been told by their GPs that their thyroid gland is normal and does not require treatment. I have to say that often it is in these patients that I have seen the greatest improvement.

In conclusion without his help and support many of these patients would have been denied treatment which has transformed their lives.

With kind regards,

Yours sincere

[Redacted signature block]

tele
fax
email

Mr Adam Elliott
Interim Orders Panel
General Medical Council
Regents Place
350 Euston Road
London
NW1 3JN

14.11.2005

Adjudication Section

Dear Mr Elliott

17 NOV 2005

Re Dr Gordon Skinner

I have been asked to write to you by a colleague of Gordon Skinner, [redacted]. I have had experience of the treatment Dr Skinner has provided privately for one of my patients whose thyroid function and other medical problems were quite complex and I was impressed by the time he gave her and she felt helped by his medical care.

We have jointly continued her management, although for obvious reasons of geography I do more of the management and oversight but I value Gordons comments when he has seen my patient. There has not been any evidence of inadequate treatment thus far.

I have known Gordon Skinner for many years, [redacted]

[redacted]

Yours sincerely,

[redacted]

[redacted]
cc Gordon Skinner.

23 NOV 2005

GSM/SM

18 November 2005

Mr Adam Elliott
Interim Orders Panel
General Medical Council
Regents Place
350 Euston Road
LONDON
NW1 3JN

Dear Mr Elliott

Re: Dr Gordon R B Skinner

I believe that Dr Skinner has been asked by the GMC to obtain references from General Practitioners whose patients have seen Dr Skinner in relation to their hypothyroidism.

I have one such patient. My patient self referred but before seeing Dr Skinner I was able to send him a summary of my patient's previous medical history. Since then we have corresponded by fax – Dr Skinner has kept me informed of my patient's medication and I have informed him of his thyroid function test results and any other changes in his medication and medical history.

Although his approach is not standard, it remains the choice of my patient and I have always found my dealings with Dr Skinner satisfactory.

I am happy for you to contact me should you require further information.

Yours sincerely

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21 November 2005

Mr Adam Elliott
Interim Orders Panel
General Medical Council
Regents Place
350 Euston Road
London
NW1 3JN

Adjunct. tion
23 NOV 2005

Dear Mr Elliott

Gordon R B Skinner

I have referred several patients to Dr Gordon Skinner since .

I have found him very helpful. The patients like him because he listens to them and treats their symptoms rather than their biochemical test results. He has improved the quality of life of the majority and he has kept me informed of his treatment plans.

I hope to be able to continue to refer patients to him when necessary.

Yours sincerely



Mr Adam Elliott
Interim Orders Panel
General Medical Council
Regents Place
350 Euston Road
LONDON NW1 3JN

23 November 2005

Dear Mr Elliott

Re: Dr Gordon Skinner

I understand that Dr Skinner will be appearing before your panel on Friday 2nd December. Although I appreciate that there is to be no public involvement in his support on this occasion, I would not wish it to be forgotten that there are thousands of his patients, once very sick indeed, who now live entirely normal lives, thanks to his treatment. Before his previous hearing my husband said that it was not Gordon Skinner who should be 'impeached', but those members of the medical profession who, over many years, had done nothing to address his wife's considerable medical difficulties.

I would invite your panel to remember there is a wider picture here that requires serious investigation. There is something intrinsically wrong with the testing, diagnosis and treatment of patients with hypothyroidism and ME in the UK which effectively leaves them, not only without medical support at a level which would allow them to recover, but without any means of redress. There is a frightening lack of care or concern on the part of many doctors for these cases, be it through ignorance or fear. It begs these questions:

- Who governs/controls this area of medicine and in whose interest is this governance exercised? It is certainly not that of patients.
- Why is there such a limited level of knowledge in this field which leaves so many languishing with half lives, or no lives, for want of correct treatment?
- Why is so much fear and ignorance to be found among GPs in this field, such that their clinical skills desert them?

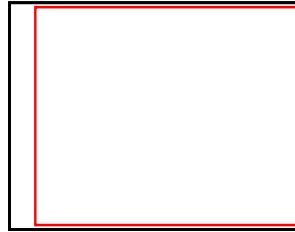
One might hope that the GMC, whose role I understand is to protect patients, would be alarmed by this state of affairs, but that would not appear to be the case. Instead, it chooses to place in great jeopardy, the career of a man whose extensive knowledge and experience has benefited all those fortunate enough to be his patients.

As someone who works in the court system, I was astonished at his first hearing by the flimsiness of the accusations made against him, and indeed, that they could even be brought anonymously. Criminals who have committed heinous crimes are afforded the benefit of a QC and an accompanying legal team, who painstakingly construct a defence case over a year or more. Dr Skinner, on the other hand, a man of unblemished character, was given precious little time to defend himself.

It grieves me to see a professional body treating a man of his calibre, thus. WHY? I needed protection from the neglect [born partly of ignorance and partly of indifference] to which I was subjected before I became a patient of Dr Skinner. In a 'thyroid family' he is the greatest blessing to have been bestowed upon us. Thanks to him we have all recovered, or are in the process of recovery.

Please, Mr Elliott, DO something about this grave situation. Many sick people are depending upon you for justice in this matter. We want to live, and we want all the other unfortunate people without the benefit of a Dr Skinner, to have the same good fortune. Do not allow this man to be deprived of professional standing. Rather, explore *why he succeeds* with his patients where so many others fail. He is the role model from whom new teaching methods *that work*, should stem. ***We have to have this help.*** I believe many GPs would like to be freed of the yoke that prevents them succeeding like Dr Skinner.

Yours sincerely



23 November 2005

TO WHOM IT MAY CONCERN

Dr Gordon RB Skinner DSc FRCPath FRCOG

[Redacted]

I understand that Dr GRB Skinner is to attend for hearing with regards to his medical practice.

I am aware that he has a very successful practice in [Redacted] and some other centres. I believe that he gets all his referrals from General Practitioners.

Dr Skinner treats his patients using large dosage of Thyroid Hormone which has benefited a number of his patients and the practice has grown from strength to strength. At times he uses Thyroid hormone above conventional dosage. With his experience of using this particular treatment he appears to have helped a considerable number of patients. Nobody has come to any harm to my knowledge. Most of his patients ~~for~~ have been turned down by other practitioners as being regarded as beyond help with conventional treatment. His innovative approach appears to be working and I believe that he should continue to practice in this manner.

Dr. Skinner is a pioneer of Herpes virus vaccine and has clientele in this country and beyond.

I wish him well

[Redacted]



23.11.2005

Adjudication Section

28 NOV 2005

Mr A Elliott
Interim Orders Panel
General Medical Council
Regents Place
350 Euston Road
London
NW1 3JN

Dear Mr Elliott

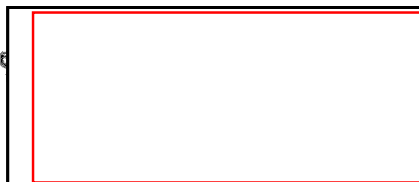
Re: Gordon Skinner – IOP Review on 2nd December 2005

I have been in General Practice for over ☐ years now and have come to realise that there is a lot more to management of thyroid disorders than the simplistic blood levels which we receive from the laboratory.

I myself treat patients on their symptoms and well being more than whether their bloods conform to normal levels with regard to thyroid.

I have come to regard Mr Skinner as similar minded with this approach and consequently have referred my rather more difficult cases to him. I must say he has been very successful in treating those I have referred. Both myself and our shared patients are extremely satisfied with his treatment.

Yours sincerely



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MK/JB/28028

23 November 2005

Adjudication Section

28 NOV 2005

Mr Adam Elliott
Interim Orders Panel
General Medical Council
Regents Place
350 Euston Road
London
NW1 3JN

Dear Mr Elliott

Re: Dr Gordon R B Skinner

I understand from my patient [redacted] that Dr Skinner is to appear before the Interim Orders Panel on Friday 2 December 2005. [redacted] has asked me to write.

[redacted] informed me she feels better and appears to be making steady progress.

Dr Skinner has written from [redacted] in [redacted].

Yours sincerely

[redacted]

[redacted]

c.c. Dr Skinner [redacted]

SJK/jd

23rd November 2005

Mr. Adam Elliott
Interim Orders Panel
General Medical Council
Regents Place,
350 Euston Road
London
NW1 3JN

Adjudication Section

29 NOV 2005

Dear Mr. Elliott,

I am writing with regard to Dr. Gordon Skinner, [REDACTED]

[REDACTED]

I have shared the care of one patient with Dr. Skinner since [REDACTED]. I have found my interactions with Dr. Skinner in regard to this patient completely satisfactory.

Yours sincerely,

[REDACTED]

[REDACTED]

[REDACTED]

Adjudication Section

29 NOV 2005

24 November 2005

Mr Adam Elliot
Interim Orders Panel
General Medical Council
Regent's Place
£50 Euston Road
LONDON NW1 3JN

Dear Mr Elliot

Re: Dr. Gordon Skinner

I am a practising General Practitioner in [redacted] and have been a friend of;

[redacted]
for many years. During this time [redacted] has suffered significant ill health and has been given various diagnoses [redacted]
[redacted] It was only after she was treated by Dr Skinner that she began to show remarkable improvement in her general health, which has been maintained. She is now fully recovered and leading a normal life in a way which has been impossible for her for many years

So impressed have I been by her recovery, that I am now following some of Dr Skinner's ideas in my assessment and treatment of Chronic Fatigue Syndrome and have observed significant improvement in my patient's symptoms and well being.

Yours faithfully

[redacted]

Adjudication Section

01 DEC 2005



Tel:

Fax:

27th November 2005

Mr Adam Elliot
Interim Orders Panel
General Medical Council
Regents Place
350 Euston Road
London
NW1 3JN

Dear Mr Elliot,

Ref: Dr Gordon R B SKINNER

Dr Gordon Skinner has treated of my patients over the period of the last years as an expert adviser and medical second opinion as referred by me. He has treated some of our hyperthyroid patients and I have found his expert second medical opinion and diagnosis validation and confirmation beneficial. All of our patients have been extremely satisfied and his interaction with them has been of the highest quality. As for my experience of him I have found him to have a very approachable manner and always reachable, on the telephone, for any advise that may have been required. He has always conducted himself in a very professional and competent manner for both my patients and myself.

If I may be of any further assistance please do not hesitate to contact me at your earliest convenience.

Yours sincerely,

[REDACTED]

[REDACTED]

Adjudication Section

01 DEC 2005

REF: LT/ANS

29.11.2005

Mr Adam Elliott
Interim Orders Panel
General Medical Council
Regents Place
350 Euston Road
London
NW1 3JN

[REDACTED]

Re: Dr R B Skinner

Dr [REDACTED] has written to me indicating that Dr Skinner is due to appear before you. I have not been able to write prior to this due to other commitments.

I have had one patient see Dr Skinner privately and have been pleased with the care that he has carried out. I have found that he has written to me on each occasion and we have conducted one telephone consultation for further feed back about the patient.

I believe the patient too has been happy with his care.

[REDACTED]

I hope that the above is of help to you in your decision making.

Yours faithfully,

[REDACTED]

[REDACTED]

Andrew Elliott
Interim Orders Panel
Regent's Place
350 Euston Road
London
NW1 3JN

Re: Doctor Gordon Skinner

Dear Sir

Re: Interim order – Doctor Gordon Skinner

I wish to write in support of Dr. Skinner, whose patient I have been since

Personal background

In when I was aged Dr. Skinner took a blood test which indicated that I was hypothyroid.

Over the past years, Dr. Skinner has prescribed Armour Thyroid and Thyroxine and I now attend once a year for a checkup. I am also under the care of my G.P., Dr. who has for the past years carried out an annual thyroid blood test, which on each occasion he has confirmed to be satisfactory.

My debt to Dr. Skinner

My life is immeasurably happier as a result of these changes and I ascribe them entirely to Dr. Skinner's care and treatment.

I am grateful for Dr. Skinner's help with a more delicate matter.

I cannot adequately convey how grateful I feel to Dr. Skinner for the compassion he showed and the life changing help which he offered first by listening and then by acting.

Dr. Skinner's personal qualities

Dr. Skinner does so much more than merely prescribe medication. He is an inspiring doctor with a first class medical mind. He is also an extraordinarily good and patient listener and a deeply kind man. I regard it as a privilege to have been treated by him. If I had to name any of the people who have helped me in life, Dr. Skinner would be top of the list.

Yours Faithfully,

[Redacted Signature]

[Redacted Name]