



## Alessandro Liberati

Medical statistician and founder of the Italian Cochrane Centre. Born on April 27, 1954, in Genoa, Italy, he died of multiple myeloma on Jan 1, 2012, in Modena, Italy.

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The multiple myeloma that killed Alessandro Liberati was, for many years, both an illustration of what he saw as some of the weaknesses of medical research, and a personal spur to continue addressing them. Writing in the *BMJ* in 2004, he described how a series of tests had led in 1977 to a diagnosis of monoclonal gammopathy of uncertain significance: “one of those strange nosological entities of modern medicine—which is so good at creating new diseases without necessarily knowing how to cure them”. A few years and a great many tests later the diagnosis was revised to smouldering myeloma, and subsequently to multiple myeloma. The experience, he wrote, had taught him that research findings “should be more easily accessible to people who need to make decisions about their health”. It also reinforced his own desire to participate in those decisions. More recently, in a letter in this journal, he wrote of the need for a new governance strategy in medical research: one that would encourage it to address the “uncertainties that matter most to patients, and to ensure that these are viewed as priorities for future funding”.

Liberati graduated from the medical school at the University of Milan, Italy, in 1978, and began work as a research fellow in the Laboratory of Clinical Pharmacology at the Mario Negri Institute in Milan. After a year at Harvard School of Public Health studying epidemiology and statistics, he returned to Italy to work on, among other topics, the assessment of quality of care in oncology, and the evaluation of the scientific literature. In 1998 he was

appointed an associate professor of medical statistics in the medical school of the University of Modena.

Paola Mosconi worked with Liberati at the Mario Negri Institute for 25 years. His aim all along, she says, was to foster a culture of clinical trials in Italy, especially in oncology. “He was one of the first people in Italy to speak about quality of life.” She adds that “In Alessandro’s view, a clinical trial was not just a tool for establishing the effectiveness of an intervention, but for exploring its value in health care and its impact on the patient’s overall health.” With Mosconi and other colleagues, Liberati was involved in *PartecipaSalute*, a project designed to encourage patient-centred research, and the active participation of people in decisions about health.

In 1994 he became the founding Director of the Italian Cochrane Centre, also based at the Mario Negri Institute. 5 years later, he was one of the driving forces behind the publication of the PRISMA statement, an analytical technique to help with systematic reviews. PRISMA (Preferred Reporting Items for Systematic reviews and Meta-Analyses) was designed to take account of various conceptual and practical advances in the science of this kind of reviewing. Gerd Antes of the German Cochrane Centre at the University of Freiburg rates Liberati’s role in PRISMA as among the most important of his contributions to the international research scene.

Nationally Liberati had already made an impact. In 1986 he founded Gruppo Interdisciplinare Valutazione Interventi in Oncologia, an interdisciplinary research group for cancer care evaluation that recruited general and community hospitals to undertake multicentre controlled trials on the effectiveness of therapeutic interventions and the quality of care in oncology. He also contributed to the adoption of standardised methods of quality of life assessment in clinical trials in Italy, and coordinated a national study to assess the impact of national guidelines on the treatment of various cancers. Since 2005 he had been a member of Italy’s National Committee for Health Research, and of the Research and Development Committee of the Italian Drug Agency. In all his activities, says Antes, “Alessandro’s personal integrity was a vital ingredient during an era of Italian government administration not always characterised by this virtue”. Liberati’s death was noted by the Italian Minister of Health, Renato Balduzzi, who commended his honesty and humanity.

Mosconi describes Liberati as always “generous with his time, even if you called him in the middle of the night”. Antes speaks of how “he was always friendly and open. In the same moment he could be cheerful and light-hearted, but also serious”. This balance was reflected in his wider interests, says Antes. Although politically active he never allowed this aspect of his life to become a distraction from the seriousness that he attached to his research, and to maintaining its high quality. Liberati leaves a wife and two daughters.

*Geoff Watts*

For Alessandro Liberati’s Correspondence see *Lancet* 2011; 378: 1777–78