**Manuscript evaluation guidelines**Title: **Research on Chrysotile Asbestos: Failure of Ethics by National Institute of Occupational Health and National Human Rights Commission**

1. Importance of the paper  
  
           Does it address issues relevant to the fields of bioethics and medical ethics in the developing countries? - YES  
  
2. Is it topical? - YES  
  
           Is the issue discussed from another country's/culture perspective?  
  
           Will it influence practice or policy?  
  
           Is it too specialized for the journal?  
  
3. Originality - UNLIKELY  
  
           Is the information /comment new?

Is there any likelihood of plagiarism?  
  
  
4. Conclusions – I think that the article has taken a too narrow view of the actions of the NHRC and by focusing on the individual instance of contradiction and framing it as unethical looses the opportunity to raise the issues of corporate influence of science as well as conflict of interest. I have written about this in detail in section 7..   
           Is the interpretation warranted, unwarranted, well developed?  
  
           Does the article contain loose generalisations?  
  
           Are there any important omissions?  
  
  
5. Other comments – see section 7  
  
  
6. Recommendation  
  
 Accept as is  
  
 Accept with modifications (specify)  
  
 - style

- substance  
  
  
  
7. Separate comments for the author

Thanks for the opportunity to review this paper.

I think that the issues being raised in the paper by the author are very important. They are reflective of a larger issue of corporate influence into both the practice of science and the institutions or regulation.

My comments on the paper are broadly two fold:

* The first is that the author assumes a certain familiarity with the complex processes involved in the negotiations of the Rotterdam convention and the Indian government’s stand vs the civil society / occupational health groups demands etc., There are at least three background issues that need to be explicated in order to make full sense of this specific instance. These are the overall debate on asbestos at the world level – and the process of the Rotterdam convention and the number of countries that have already banned asbestos, the national level processes vis-à-vis the Rotterdam convention – and also how the present NHRC action fits into this, and lastly the details of the exact process for which the RTI petition was filed and why it was filed etc., If the particular format of IJME does not allow space for this – the author may at least provide a box with links etc., so the interested reader may follow the leads.
* My second general point is that focusing solely on the NHRC for taking “unethical” steps the author is missing the opportunity to raise a number of other important issues that may be germane to the discussion. The NHRC may well justify contradicting its stand by saying there is new evidence. However rather than point to the contradiction per se, if the authors raises the issue of **corporate influence of epidemiological studies** – (corporate epidemiology) and the issue **of Conflict of Interest** – where the Asbestos Industry is centrally involved in the study – highlighting clearly how the ToR changed with this inclusion, it is likely for the reader to see the logic of why the NHRC’s stand is questionable – despite its purported following of procedure.
* Overall the suggestion is that as it is the article presents one instance of a questionable decision by the NHRC – based on problematic science. It can easily be dismissed as an isolated case. By placing the case in the larger picture as suggested above and making it more clear how and why the NHRC is involved in the first place may help the readers see this instance as part of the increasing corporate influence in both science and governance and thus something that should not be dismissed as a one off event.

More specific comments on the article.

* The section titled – “Scientific Unanimity on the harmful impacts….” – in fact has only historical data – the story of Lucy Deane while fascinating – does not add to the argument being made. If this could be reduced and instead we have more recent evidence and statements / guidelines of international organizations and details of number of countries who have banned asbestos referenced here it would make the subsequent arguments more convincing. This information coming before the more India specific information that the author presents will give a clear trend of phasing out of Asbestos – and hence clearly leave readers questioning the decision of the NHRC.
* In the section titled – “NHRCs omissions” – A clear sentence or two describing the circumstances of how NHRC got involved int his case will be pertinent. It is essential for the reader to connect the dots. How is the NHRC involved in the Rotterdam negotiations?
* I think that the using of the death of Minister Ananth Kumar as part of the argument is in fact counter productive and distracting from the main thrust of the argument – it is very much in the realm of speculation – however clear the author may think it is. I would suggest dropping this example in order to get space to raise other substantial points pointed out above.

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\***Please let us know whether you would like your name to be published as a reviewer of the manuscript. This is optional.**

Please note that I have written as part of collections demanding the banning of asbestos in the past.

I will be happy for my name to be included as a reviewer.