Books

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'Bad Pharma' details drug companies' tactics

By Kevin Kavanagh
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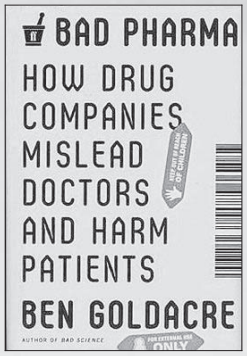
The book "Bad Pharma, How Drug Companies Mislead Doctors and Harm Patients" is a great example of the phrase "Don't judge a book by its cover." The bland dust jacket and an often flamboyant writing style in the introduction may lead the casual reader to believe this book is not authoritative, but nothing could be further from the truth. The information presented is referenced with reputable research studies published in world class medical journals. I checked many of these and found them to be accurate.

One of the book's most stunning revelations is that there is an entire field of sociology that studies regulatory capture, or how to influence the regulators. This involves intricate plans of establishing friendships and dangling implied — but never fully offered — future job opportunities. Similar tactics are used on the prescribing doctor. The United States is one of four industrialized countries (New Zealand, Pakistan and South Korea are the other three) that allow the helpless patient to be inundated with direct-to-consumer advertisements. Up to twice as much is spent on marketing as is spent on drug development and research. Massive amounts of money were spent by the pharmaceutical industry to soften the methamphetamine bill in Kentucky and, in my opinion, created a false public impression regarding the issues at hand.

Regulatory mechanisms in both Europe and the U.S. are presented. The tactics used to undermine each system are similar and both systems are high dependent upon each other. More than 50 percent of drug research study trials are currently not run in the United States. Thus, an international perspective is necessary. Trials in Third World countries raise the ethical issue of whether participants are enrolled of their own free will or for a chance to obtain health care they otherwise would not receive. The author points out that the same dilemma exists in the United States where tens of millions are without health insurance.

An important difference between the United States and Europe is that our FDA is fully transparent along with its meetings and recommendations. The FDA certainly needs improvement as indicated by the numerous drug recalls and advisories issued in recent years; the FDA does act, albeit sometimes too late for many patients.

Not reporting negative data is a huge problem. It is alleged that the drug company knew of suicides in children taking Paxil but was under no obligation to report to the United Kingdom because it was an off-label use. The most recent example we are facing is in the medical device industry, where evidence is mounting that Johnson & Johnson knew that its metal-on-metal hip implants had a 36 percent five-year failure rate — and allegedly withheld this data.



Bad Pharma: How Drug Companies Mislead Doctors and Harm Patients
By Ben Goldacre, Faber & Faber, 448 pp./$28

The book discusses similar drugs under the headings of Me-Too and Me-Again drugs. It is argued that duplicative drugs can significantly increase costs and have resulted in Medicaid spending $800 million per year on the little purple pill Nexium when a much cheaper alternative exists.

The dysfunctional role of academia was illustrated with a report that found 47 of 53 "landmark" cancer studies could not be replicated and could potentially cause significant patient harm and waste more than $100 million in drug development resources. This study was performed by the drug manufacturer, Amgen, and is testament to the strong innate desire of academia to publish positive results. A recent example of this is the University of Kentucky researcher who is alleged to have falsified data in grant applications and in at least 10 studies. The alleged whistleblower was let go by UK.

The subterfuges that can exist at all levels of the drug approval process as described in "Bad Pharma" are sobering, if not reprehensible. The pill-popping culture of Kentucky has fallen hook, line and sinker for these tactics and believes that there is a guaranteed safety in prescribed medications. What the book "Bad Pharma" tells us is that taking any drug has risks, some of which are not even known. Even under the best circumstances, rare but serious side effects may not become apparent for years after the drug is introduced.

As this reviewer and many seasoned doctors may tell you, it is often better to sit back and wait to see how a new drug does than to immediately jump on the bandwagon. Thus, you should not take a medication unless absolutely necessary. If you are one of the many Kentuckians who take multiple psychotropic medications (nerve, sleep, pain), no one knows for sure how these pills will interact or even if some of these combinations are safe. I highly recommend that caregivers, doctors and patients read this book.

Kevin T. Kavanagh is a retired physician from Somerset, Ky.