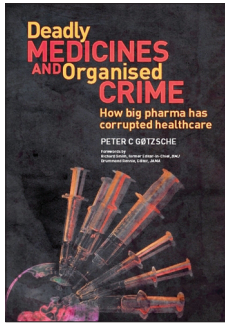


Book

Reforming big pharma



Deadly Medicines and Organised Crime: How Big Pharma Has Corrupted Healthcare

Peter C Gøtzsche. Radcliffe Publishing, 2013. Pp 310. £24.99. ISBN 9781846198847

For more on **transparency** see *Lancet Oncol* 2013; **14**: 1051–53

Drugs kill. After heart disease and cancer, drugs are the third leading cause of deaths in Europe and the USA, states Peter Gøtzsche in *Deadly Medicines and Organised Crime: How Big Pharma Has Corrupted Healthcare*. He estimates that in the USA, every year, about 100 000 deaths are due to drugs, despite people taking the drugs correctly, and another 100 000 people die because of errors. According to Gøtzsche, “we now suffer from two man-made epidemics, tobacco and prescription drugs, both of which are hugely lethal” and the norm for both industries is a “morally repugnant disregard for human lives”. Furthermore, Gøtzsche claims, the business model of the drug industry is “organised crime”. He told *The Lancet* that he has written his latest book because he wants to “influence policy towards much more transparency”.

Throughout *Deadly Medicines and Organised Crime* Gøtzsche uses many anecdotes, provides countless facts and comments based on facts, and cites more than 900 references to draw attention to the allegedly shocking crimes committed by the drug industry (including manufacturers of medical devices). Gøtzsche understands pharmaceutical companies only too well because of his long and varied career in health care, with roles that have included drug representative for big pharma, researcher in clinical trials, physician, lecturer, and author of papers and books. He cofounded the Cochrane Collaboration and is the Director of the Nordic Cochrane Centre in Copenhagen. With his expertise and uncompromising attitude, Gøtzsche is outraged and outspoken in his book about pharmaceutical companies being “just like street drug pushers”.

Some pharmaceutical companies have been caught and fined for their activities. For example, Gøtzsche

details how during 2007–12, in the USA, Abbott, AstraZeneca, Eli Lilly, GlaxoSmithKline, Johnson and Johnson, Merck, Novartis, Pfizer, and Sanofi-Aventis were fined from \$95 million to \$3 billion for illegal marketing of drugs, misrepresentation of research findings, hiding data about the harms of the drugs, Medicaid fraud, or Medicare fraud. However, some companies seem not to be deterred and apparently regard fines as marketing expenses.

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According to the pharmaceutical industry, high prices of drugs are attributable to the high costs of discovery and development. Gøtzsche argues that the price of a drug is determined by its value in the prevention and treatment of a disease, and in warding off competition. Novartis, he states, developed imatinib for chronic myeloid leukaemia at minimum cost (not reported in the book), but charged \$25 000 for 1 year’s treatment in 2002. Another myth, according to Gøtzsche, is that breakthroughs arise from research funded by the industry. But many breakthroughs take place in the non-profit sector—universities, research institutes, and government laboratories. Some of the most important drug discoveries in the 20th century Gøtzsche notes—including insulin, penicillin, and polio vaccine—occurred in publicly funded laboratories.

“Fundamentally, I think capitalism and health care go very poorly

together”, Gøtzsche told *The Lancet*. In his book, he recommends several reforms to address this issue. He claims that, like tobacco marketing, drug marketing is harmful and should be banned. Gøtzsche also stresses the need to remove the for-profit model and to radically reform the currently impotent or too-permissive drug regulation. His unequivocal opinion is that the pharmaceutical industry should not be allowed to do trials of its own drugs because being both the judge and defendant is a conflict of interest. Ideally, non-profit enterprises should invent, develop, and bring new drugs to market. Removal of the link between the costs of research plus development and the price of drugs would, Gøtzsche believes, address the unaffordability and unsuitability of the current medical innovation model, and reduce the incentives for the development of me-too products (ie, variations of known substances) and marketing and promotion of drugs that might not be used rationally or are no better than the existing alternatives.

Another of Gøtzsche’s recommendations is that drug regulatory agencies should be funded publicly to avoid the competition created by user fees between agencies to become the fastest and hence the least critical in approving new medicines. Also, he suggests the agencies should have separate divisions and authorities for dealing with approvals and the safety of drugs. Although Gøtzsche vehemently criticises the pharmaceutical industry, the reforms he proposes to address some of the issues raised in his compelling book could perhaps help improve the current state of health care.

Farhat Yaqub
farhat.yaqub@lancet.com