

Pharmacare and the drug companies

BUYING A PILL IN A POKE

by Denis Blue

Are you suffering "inappropriate anxiety resulting from a stress situation"? Inappropriate anxiety due to loss of job, family disintegration, financial difficulties, impending surgery or forced retirement?

Well, don't suffer any longer, get to your nearest doctor, lay the whole kit and kaboodle on him, then rush over to your local pharmacy and then, start popping!

While you're waiting in the doctor's office you might glance at the colour glossy medical journal to see what a wonderful selection of products are available with your pharmacare card. Why, you'll find cures for problems you never imagined had a chemical cure; you'll find cures for problems you never imagined were problems.

What products do these purchasing agents have to choose from, and what criteria are the purchases/prescriptions based upon?

Using figures from an excellent report by the Social Planning and Review Council of B.C. (SPARC), called *Use and Misuse of Drugs by the Elderly Consumer*, we learn that of 200,000 drugs available on the market, approximately 200 active ingredients are, in fact, involved, which alleviate about 30 symptoms. What differentiates these 200,000 products?

In its first ten years of use, the world's most popular mood-altering prescription, Valium, was the subject of a 200 million dollar promotional campaign by Hoffman-LaRoche.

In Canada, the Consumers Association estimates that more than 50 million dollars a year is spent by drug com-

panies promoting their products.

Physician Jerry Green estimates drug companies are spending 4,000 dollars per Canadian doctor a year promoting prescription drugs, with about one "detailman" or drug salesman per 12 doctors.

Extravagant medical journals, detailmen with gifts and free samples, sponsorships of medical conferences and volunteer organizations - these are a few of the methods the drug industry uses to persuade doctors. But how useful and reliable are their products?

For information on the many drugs available, most Canadian doctors rely on a book called the *Compendium of Pharmaceuticals and Specialties*. Widespread distribution, free to doctors, is made possible by the "participating companies."

Dr. Murray Katz expresses concern in a Montreal Star article that the drug industry remains the primary source of information on drugs available. He reviews the shortcomings of the *Compendium*, such as its failure to mention drug prices and, most importantly, its lack of critical analysis or objective analysis of the drugs being described.

So the purchasing agents are often unaware of the cost of the goods being ordered and are relying on information supplied by the suppliers of the goods, often without any substantiating documentation.

As Dr. David Penman, chairman of Saskatchewan's medical insurance commission, points out, drug companies "assiduously train doctors through heavy advertising" to prescribe drugs by brand name rather than by chemical formula.

Because the physician can order no substitution on prescriptions, the wide variation among drugs which are essentially the same thing is costing the Saskatchewan health plan thousands of dollars a year.

Penman adds that many large corporations have a vested interest in promoting a life style that causes illness among North Americans.

Because drugs interact with other drugs in multifold and unexpected ways, often increasing each drug's effects and side effects many times over, the overprescription of drugs is a very serious hazard to health.

Although the elderly comprise 10 percent of the population, they consume 23 percent of prescription drugs and are hospitalized due to adverse drug reactions at a proportionately higher rate. Mightn't this also be true of psychiatric patients?

And as the SPARC report suggests, the number of elderly people suffering from adverse drug reactions may be underestimated because symptoms such as forgetfulness, confusion, tremors and anxiety are often passed off as senility or aging.

In B.C. each person over 65 uses an average of 14.5 prescriptions a year according to the 1976 pharmacare statistics.

A review of current medical journals reveals a proliferation of ads which tend to depict old people as forgetful, ill, sexually uninterested, unproductive, depressed, confused, helpless, cranky, demanding and, most unforgivably, old.

With advance billing like that, how will an elderly person be perceived when approaching a doctor for help?

An analysis of most of the promotional ads submitted to the doctors reveals similar negative stereotyping, exaggeration and oversimplification. The message is clear - the cure is chemical. Proper diet, counselling, social change are ignored.

Dr. Samuel Epstein, professor of environmental studies and occupational health, states "The public is being kept ignorant of the dangers of chemicals in food, air and medicine because of a conflict of interests with testing scientists - most of the scientists who test the substances also work for the chemical and drug industries. As

"drug companies are spending 4000 dollars per Canadian doctor a year"

If your kid is restless, asking a lot of questions, expressing anger, not paying attention to the McDonalds advertisements, then she is probably "hyperactive" and is undoubtedly in need of "suspension".

Don't worry, though - your kid is actually normal; after all, one in every four school children in the United States is being similarly "maintained".

The pharmaceutical companies can help out in so many other ways, too. For instance, "management" of those troublesome geriatric patients. They can be a nuisance, can't they?

But here in the medical journal a lavish advertisement promises an all purpose tranquillizer than will "calm the agitated geriatric patient" and will make "Marie and Bernard easier to care for".

Reassuring, isn't it. Reassuring but not cheap. The pharmaceutical industry is a multi-billion dollar industry. Here in B.C. our provincial government covers most of the tab, 80 percent of the cost for prescription drugs after the 100 dollars deductible. Senior citizens and the handicapped receive a 100 percent subsidy.

Because only doctors can write prescriptions, they are in effect the purchasing agents for the provincial medical plan.

panies promoting their products.

Physician Jerry Green estimates drug companies are spending 4,000 dollars per Canadian doctor a year promoting prescription drugs, with about one "detailman" or drug salesman per 12 doctors.

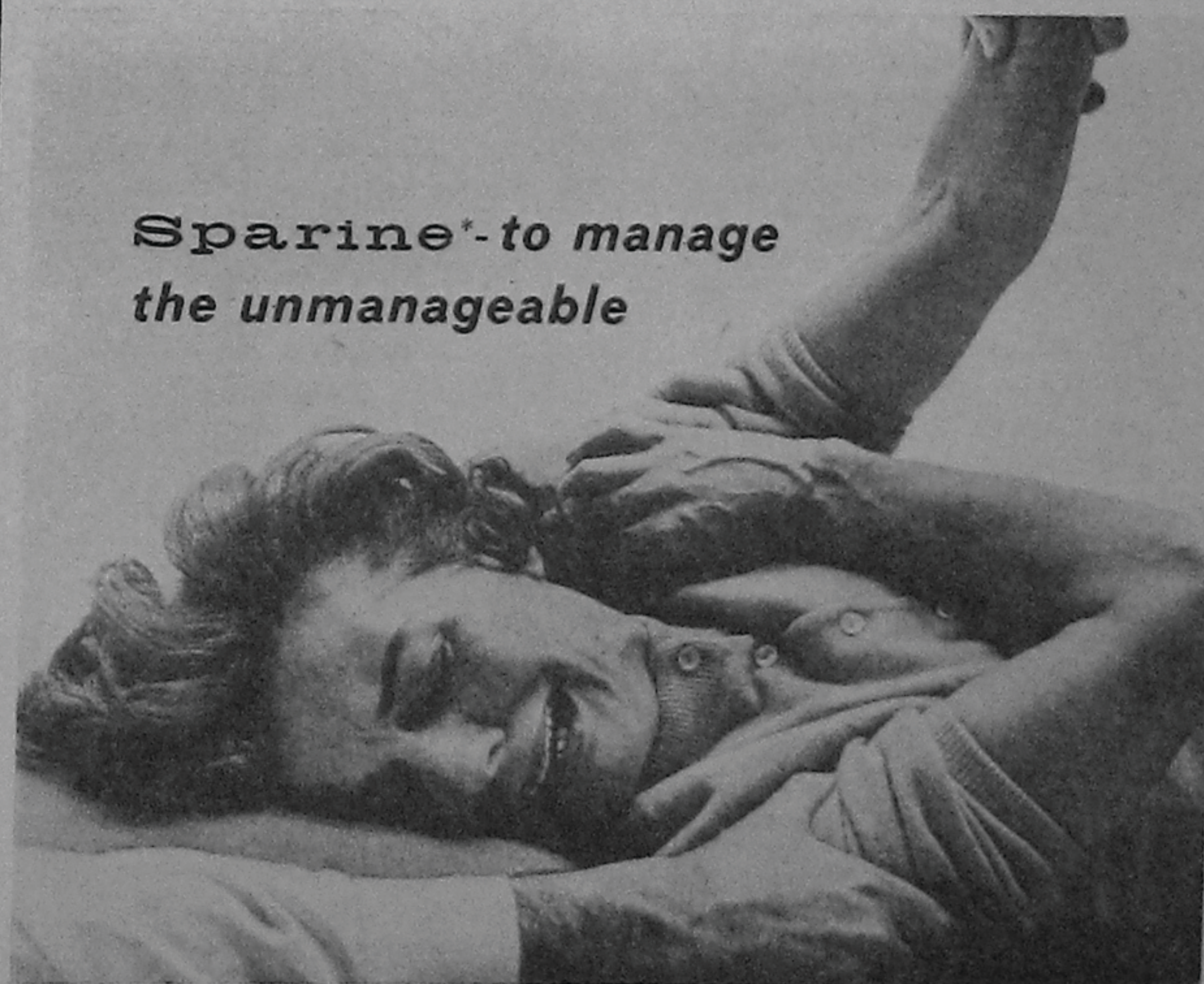
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Sparine* - to manage the unmanageable



ACUTE AGITATION¹ • ALCOHOLISM² • DRUG WITHDRAWAL³ • NAUSEA AND VOMITING⁴ • SEVERE PAIN, AS AN ADJUNCT TO ANALGESIA⁵

AN AD FROM MD, A PROMINENT MEDICAL JOURNAL

Pill in a Poke, Cont.

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a result, "testing defects range from extensive incompetence to manipulation and distortion of tests."

Epstein suggests that a group composed of representatives of the public, business and government be established to stand between the researchers and the chemical industry and set standards.

Recently, in response to many inquiries from the public, the provincial government initiated a "full, scientific" study of megavitamin therapy.

Human Resources minister Bill Van der Zalm explained that "the government could not endorse a programme as controversial as this without knowing all the facts". Exactly. Likewise, the pharmacare underwriting of the drug industry should remain suspect.

For the first time, mandatory competency exams are being given to the

province's 1,837 pharmacists. Aren't the products they distribute in need of even greater testing safeguards?

In 1975 the Consumers Association of Canada passed a resolution requesting the department of health and welfare to abolish all drug promotion directed to doctors and pharmacists and instead promote objective, scientific information.

Perhaps the 50 million dollars that drug companies spend yearly in promoting their products in Canada could be directed into a publicly monitored research and testing body, information from which would supply doctors, pharmacists and the public with the reliable knowledge so necessary for good health care.

And hopefully, the quick and convenient chemical cure-all that drug companies have promoted into acceptance by doctors and the public will be replaced by healthy life styles and, where necessary, social change.