

How Drug Companies Deceive Doctors

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By Shane Ellison, M.Sc.

Following doctor's orders has become synonymous with danger. Every year, FDA approved drugs kill twice as many people as the total number of U.S. deaths from the Vietnam War.[1] Death by medicine flourishes because deceit, not science, governs a doctor's prescribing habits. As an ex-drug chemist, I witnessed this first-hand.

This deceit comes in many forms. Medical ghostwriting and checkbook science are the most prominent.

Doctors rely on peer-reviewed medical journals to learn about prescription drugs. These journals include the Lancet, British Medical Journal, New England Journal of Medicine and the Journal of the American Medical Association. It is assumed that these professional journals offer the hard science behind any given drug. This assumption is wrong. Medical journals can't be trusted thanks to medical ghost writing.

Medical ghostwriting is the practice of hiring PhDs to crank out drug reports that hype benefits and hide negative side effects. Once complete, drug companies recruit doctors to put their name on the report as authors. These reports are then published in the above mentioned medical journals.[2] The carrot for this deceitful practice is money and prestige. Ghostwriters can receive up to \$20,000 per report. Doctors receive prestige from having been published. Ultimately, patients get bad drugs disguised as good medicine.

As deplorable as medical ghostwriting sounds, it is more common than you think. Dr. David Healy, of the University of Whales, predicts that 50% of journal drug reviews are written by ghostwriters.[3]

Dr. Jeffrey Drazen, editor for the New England Journal of Medicine, insists that he cannot find drug review authors who do not have financial ties to drug companies. As a result, the journal had to relax their conflict-of-interest rules in 2000.[4]

The editor of the British Journal of Medicine has acknowledged that medical ghostwriting has become a serious problem for his publication: "We are being hoodwinked by the drug companies. The articles come in with doctors' names on them and we often find some of them have little or no idea about what they have written." [5]

Consider the testimony from deputy editor of The Journal of the American Medical Association: "This [journal articles] is all about bypassing science. Medicine is becoming a sort of Cloud Cuckoo Land, where doctors don't know what papers they can trust in the journals, and the public doesn't want to believe." [6]

Other weapons of mass deception exist " checkbook science. As defined by Diana Zuckerman, PhD, checkbook science is research intended not to expand knowledge or to benefit humanity, but instead to sell drugs. It has stolen the very soul of University research, scientific method, and the patients who serve as human subjects.[7]

Drug companies use checkbook science to sponsor their own drug research via the halls of academia and government institutions. Money is used to design their own studies, interpret the results, and stuff negative data under the drug-rug. The drug-rug is a behemoth rug. It has to be. A myriad of negative drug data exists.

Like medical ghostwriting, checkbook science is more common than you think. A third of academic professors have personal financial ties to drug makers.[8] Called the "Stealth Merger" by the LA Times, top scientists at the National Institutes of Health also collect paychecks and stock options from the drug industry.[9] This has been going on for over 20 years.[10] Known as the Bayh-Dole Act, U.S law was amended in 1980 to allow for these flagrant conflicts of interest.[4]

This calculated deceit is scandalous. Hopefully the line at the pharmaceutical trough gets shorter as this scandal

becomes public. Though, drug makers have an insurance policy for this " Direct-to-Consumer advertising. The oft repeated "ask your doctor" ensures that the herd instinctively embraces drugs, drugs and more drugs.

Understanding medical ghost writing and checkbook science explains why medical doctors have been hypnotized into drug worship " they only see the positive. It also explains why modern medicine is more deadly and lucrative than war " the danger has been silenced with the pen and money.

Drug companies do not take responsibility for the wonton prescription drug deceit. Instead, victims have been made invisible - dehumanized. They are not recognized as children, or men with significant contribution to society. Their deaths are simply shrugged off and attributed to sickness or aging.

Those who profit from prescription drugs should hold some sort of record for the having the most reckless disregard for human life. If the deceit continues the prescription drug leviathan will silently kill more people than Napalm dropped on Vietnamese villages.

About the Author

Shane holds a Master's degree in organic chemistry and has first hand experience in drug design. Specializing in therapeutic nutrition, he has made it his mission to introduce healthy lifestyle and nutrition habits to the general public. He is author of Health Myths Exposed and Hidden Truth about Cholesterol Lowering Drugs. His books and free offers can be found at www.healthmyths.net.

[1] Approximately 58,000 American™s died in Vietnam. FDA approved drugs kill 106 " 125,000 people per year when used as prescribed.

[2] Source: CBC's Marketplace. Aired March 25, 2003. Researcher Colman Jones.

[3] Antony Barnett. Revealed: how drug firms 'hoodwink' medical journals. Pharmaceutical giants hire ghostwriters to produce articles - then put doctors' names on them. The Observer. Sunday December 7, 2003

[4] Tufts eNews. Relaxing The Rules. Does the New England Journal of Medicine's decision to relax its conflict of interest policy strengthen or weaken the prestigious publication? Boston [06.19.02]

[5] http://observer.guardian.co.uk/uk_news/story/0,6903,1101680,00.html

[6] Shannon Brownlee. Doctors Without Borders. Why you can't trust medical journals anymore. Washington Monthly. April 2003.

[7] Zuckerman, D. Hype in health reporting: "checkbook science" buys distortion of medical news. International Journal of Health Services. 2003;33(2).

[8] Bekelman, J.E., Li, Y. and Gross, C. P. Scope and impact of financial conflicts of interest in biomedical research.

Journal of the American Medical Association. 289: 454-465.

[9] Willman D. Stealth merger: drug companies and government medical research. Los Angeles Times. 2003 Dec 7;;A1, A32-3.

[10] <http://www.washingtonmonthly.com/features/2004/0404.brownlee.html#byline>
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