

## Book Review

---

***Prescription for Injury – The Politics of Pharmaceutical Manufacture, Regulation and Prescription***, Colin Downes-Grainger (AMAD (Action on Mind-Altering Drugs), London, UK), 2007, £6.99

Any reasonably informed observer of the pharmaceuticals scene must in very recent years have come to the conclusion that all is not well in the world of drugs. A Report for the United Nations Millennium Project concluded in 2005 that much needed to be changed, especially in view of the fact that a small minority of the globe's population consumes some 90% of all medicines (and does so to excess) while a substantial majority are deprived of access to them. Others have drawn attention to the severe decline in development of truly new and useful drugs, to issues of overpricing and profiteering, and to the frequency of adverse effects. By 2007 a series of urgently convened conferences were being held, on both sides of the Atlantic, in an attempt to confront one or more aspects of the situation, while a working group in London foresaw a coming "Pharmageddon" which it defines as "The prospect of a world in which medicines and medicine produce more ill-health than health, and when medical progress does more harm than good". There are both optimists and pessimists but they essentially agree that things are going drastically and rapidly wrong; they differ only in their view as to whether or not the situation will right itself in due course without the need for drastic corrective action.

Among the most level-headed of the critics is Charles Medawar, whose study of the problems caused by benzodiazepines (*Power and Dependence*) and the antidepressants (*Medicines out of Control?*) have become classics in their field. A relatively new voice in print is that of Colin Downes-Grainger with his new book *Prescription for Injury*. He directs much of his attention to the same two therapeutic classes as Medawar, but his criticism is aimed almost entirely at the situation in the United Kingdom, where in his well-documented view the authorities and the regulators have betrayed the public interest. All too often, as he demonstrates, these bodies have denied the existence of risk, whether that be dependence to benzodiazepines or triggering of adolescent suicide with the newer generation of antidepressants, essentially siding with an industry that, as he puts it, worships only the balance sheet, and to which "no life is sacred".

If Downes-Grainger's book stood alone one might question the reliability of his arguments where he bases them on numerous and possibly selective quotations from individual patients and experts of varying hue. However, his material serves only to confirm the alarming data advanced by others, in well-conducted studies and in other parts of the world. The issue of benzodiazepine dependence and withdrawal reactions came most clearly to the fore a quarter of a century ago in The Netherlands; the suicide-triggering capacity of the newer antidepressants has been documented by experts for America's International Center for the Study of Psychology and Psychiatry; both phenomena are of a type that is readily exposed to scrutiny in courts of law when the victims call the manufacturers or prescribers to account. By that time, a lot of unnecessary harm has been done – the problem is to find an approach to drug policy that prevents most of that injury ever occurring.

Downs-Grainger makes the case for some form of conspiracy, with the policy makers all too often placing the interests of industry in the foreground, and some of his quotations make it clear that this has been a factor, at least in Britain. "The pharmaceutical industry is of enormous importance . . . to Britain. It is in all our interests that the industry maintains its currently strong position". Would one have

expected such a statement to be made by a Minister of State having primary responsibility for Quality and Patient Safety?

Beyond that, of course, there is a curious inability on the part of some policy makers to think beyond the most direct and most heavily publicized financial issues. On one occasion the Department of Health established a Committee to consider measures to curb smoking, its report was quoted as saying “. . . that it would be very serious if smoking were reduced, because they liked people to die off at 65 to save their pensions”. If any lesser person than Sir Richard Doll had provided that quotation one would doubt that it was genuine. Where medicines are concerned, policy makers have tended to put more weight on the economic benefits to British society of a thriving pharmaceutical industry than on the costs of the unnecessary injury done by drugs. Both can be measured, but policy measures have shied away from setting these figures against each other, considering the extent of the human suffering involved, and drawing the logical conclusion.

Any excuse that successive governments might have offered for their failure to develop and implement truly health-based policies in this field was surely invalidated by the impressive report of the House of Commons Health Committee, issued in 2005. At one point that report stated in no uncertain terms that: “The crux of the problem is that the Department of Health sponsors both the drug industry and public health matters”. Alas, the recommendation that this situation be changed was ignored by the government of the day.

No-one will deny the advances in medicine made possible by the best of industrial research during the latter half of the twentieth century. In the last two decades, however, real advances have become very rare; the still burgeoning fortunes of the industry have been based largely on over-promotion, over-consumption, over-pricing and the aggressive marketing of new compounds offering little or no new benefit but introducing new risks.

Downes-Grainger’s accusations in this book are aimed almost exclusively at the authorities in Britain. His work is however complemented by parallel studies undertaken and recently published by writers such as Joop Bouma in The Netherlands and Angell, Avorn, Scott, Goozner and others in the United States. All of them show that real change in the situation is called for, and there can be little doubt that it is now just around the corner; tragically, it could have come much earlier if, in matters of health, governments had been more concerned with the real interests of the people whom they represented.

Graham Dukes  
Trosterudveien 19  
Oslo N-0778  
Norway  
E-mail: [mngdukes@online.no](mailto:mngdukes@online.no)