



Affordable Drugs for Killer Diseases

Article Review



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Medicine as a Luxury, Merrill Goozner, THE AMERICAN PROSPECT, Special Supplement, Winter 2002, 2000 L St., NW, Suite 717, Washington, D.C. 20036, pages A7 to A9. Online content at www.prospect.org.

HOW DOES THE INDUSTRIAL WORLD react when famine breaks out in developing countries? How does this compare with its response to microbial plagues in those countries?

AIDS, tuberculosis, malaria and leishman-iasis are infecting and killing millions of people annually, far more than hunger. But activists and some governments have had to force drug companies to help people who are dying because they can't afford medicine.

Recently, a coalition of developing nations and non-governmental organizations pushed the World Trade Organization to reaffirm every nation's right to void patent laws and grant licenses to generic manufacturers of essential medicines to meet emergencies. The US opposed this effort until the last minute. From 1997 until April 2001, our government threatened trade sanctions against South Africa after it passed an essential-medicines licensing law.

Brazil has one of the best records of providing drugs for its HIV-population. Brazil has issued, or threatened to issue, compulsory licenses to generic-drug manufacturers to produce inexpensive AIDS drugs. Other developing countries can't produce complex chemicals so a parallel-import clause in the resolution would allow one country to ask another's generic manufacturers to produce critically needed medicines. Goozner describes pharmaceutical industry complaints about the WTO resolution and provides data that appear to not support those complaints. Unfortunately, this brief article is not comprehensive enough for totally reliable data.

The rest of this article contains interesting information and commentary on the prices for AIDS and anti-terrorism drugs, the pharmaceutical industry's interest in research and development and the possible role of governments in providing critical drugs.

The author believes some way of providing inexpensive critical drugs must be developed, particularly for diseases causing widespread loss of life. The issue becomes more urgent as the world's population becomes more mobile, possibly hastening the spread of diseases. We should expect the pharmaceutical giants to make enough profit to fund productive R & D, but all the data I have seen indicates they are making much more. The author suggests governmental negotiation of cost-plus R & D contracts, which may be a reasonable solution, at least in part.

For readers interested in more extensive data and discussion of the pharmaceutical industry, particularly about spending on advertising, see the National Institute for Health Care Management and Educational Foundation's website at www.nihcm.org.

This review was written in March. Since then, numerous attempts were made, all futile,

by telephone and email for a response from PhRMA.

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