

Re: The Bullshit Parade

Source: <http://sci.tech-archive.net/Archive/sci.med/2004-08/0726.html>

From: Bob (this one) (Bob_at_nospam.com)

Date: 08/07/04

Date: Sat, 07 Aug 2004 18:08:50 -0400

Dr. Andrew B. Chung, MD/PhD wrote:

> *Lost in this is the simple fact that the rising healthcare costs in*
> *the U.S. predate the recent war on Iraq and current actions against*
> *with Al-Qaida. We have been paying for R&D of medical technologies by*
> *these for-profit companies by letting these companies thrive on U.S.*
> *soil. It seems the Canadians are unabashedly eating the fruit without*
> *being willing to contribute to either fertilizing or watering the*
> *trees.*

Given that most major pharma companies aren't American-owned and that the entire rest of the world pays less for meds, it's a funny picture that emerges. It shapes up as more political than economic. For some reason, the medbiz puts out the line that Americans are doing the right thing by paying these high prices but others are somehow shirking their responsibilities by not agreeing to pay the same. Research is being done in Canada even as we speak. Their med prices are considerably lower and, somehow, the pharms are still in business there and still competing hard with each other. Can anyone believe that they lose money everywhere but the US? Or just break even? Seen any annual reports from pharms lately?

The other tired mantra from them is that if we buy meds from Canada, there's a safety issue. Does that mean that the pharms take less care with Canadian meds? Less what? Sterility? Purity? Care in handling? Outdated ingredients? If it's so, why haven't Canadian medical professionals spoken out against this condition? Could it be that there's no issue? When I was in Toronto a few weeks ago, I raised the question with some medbiz folks who laughed. One said, "It's commercial propaganda from the large companies, that's all. The meds are the same."

Pharms are consistently among the most profitable businesses of any kind. Period. They're vast multinationals making unheard of profits.

The other really significant variable is advertising. Nowhere else do the pharms do anywhere near as much advertising of prescription drugs direct to consumers as happens in the US. Advertising is expensive.

Very expensive. Adds significantly to the cost of meds. And they're still hugely profitable.

Rising healthcare costs in the US are the highest and fastest rising costs (with essentially no new variables) in our domestic economy. And they happen across the board with all components in the medbiz system.

I paid \$105 for an injection for my daughter in a hospital that cost \$29 in a doctor's office. Or rather, my insurance paid it. I would have paid \$135 if I had paid it myself. Hospitals charge people who pay in cash more than they do if insurance pays for it. They justify that by saying that since insurance companies buy more medical care for their insureds, they should be given a discount. But they're buying it one person at a time, case by case, in fact no different than one customer buying medical care for himself. Same or, most likely, less paperwork for the individual purchaser. Less administrative time. It should be cheaper for the paying customer; not more expensive.

The other great reality is that the pharms aren't doing the basic research on new meds. It's coming mostly from universities and scientific companies not in the pharm business. The pharms buy or, more often, just take over the development process after it shows some promise for relatively large sales. And that's the only key for them. That's why there are many diseases and conditions that will never be investigated by the pharms and no meds or treatments developed. Markets too small. Not profitable enough.

Some years back, an acquaintance was in sales for a scientific supply company. He showed me a couple centrifuges he had in the trunk of his car. One was that speckly gray that all the equipment in our college labs were. The other was white. I asked what the difference was. He said the paint and the price. I looked confused. He said the gray one was for a school and the white one was for a hospital. The white one was priced twice as high. "Professional equipment," he said. And laughed.

Pastorio