

Re: Looking At The Estimated 218,000 Deaths Each Year From Adverse Drug Events

Source: <http://sci.tech-archive.net/Archive/sci.med/2004-11/0440.html>

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Date: 11/05/04

Date: 5 Nov 2004 08:32:00 -0800

What also should be mentioned is that drug companies systematically obscure adverse drug reactions and even deaths that occur during clinical trials by simply deleting or mislabeling them in data submitted to the FDA. Suicides that occurred during the testing of Prozac were systematically mislabeled as "no drug effect" or "depression," so that when the FDA examined the drug data, patient suicides could not be found and counted. Suicide was one of the first major problems encountered when Prozac was released on the market, leading to multiple deaths and lawsuits. Many of the symptoms fueling the current debate about the dangers of anti-depressant drugs were known and documented by the drug companies during the trials, but the drugs were released anyway. Lets face it, most people are guniea pigs standing in line at their doctor's office so willing to take the "newest" "hottest" drugs they see advertised on television. The majority do not bother to do any research whatsoever, blindly following their doctor's orders, taking a multitude of meds of which samples are dispensed like candy that can cause them to suffer severe adverse drug events and possibly death.

rbystrianyk@gmail.com (Roman Bystrianyk) wrote in message news:<4f28e591.0411021905.642db22e@posting.google.com>...

> http://www.healthsentinel.com/news.php?event=news_print_list_item&id=369

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> Roman Bystrianyk, "Looking At The Estimated 218,000 Deaths Each Year From Adverse Drug Events", *Health Sentinel*, November 3, 2004,

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> According to the CDC, in July of 2000, the three leading causes of death were heart disease at 724,859 per year, cancer at 541,532 per year, and stroke at 158,448 per year. A recent study in *Drug Safety* looks at how to quantify the much lesser known number of deaths caused by adverse drug events or ADEs for short.

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> Adverse drug events (ADEs) present the single greatest risk of harm to patients in hospitals. An adverse drug event is an unwanted or harmful side effect experienced following the administration of a

- > *pharmaceutical or combination of pharmaceuticals. In the United States*
- > *ADEs account for an estimated 218,000 deaths each year and cost from*
- > *\$30 to \$130 billion each year.*
- >
- > *"The direct medical costs associated with ADEs have been estimated to*
- > *be in the range of \$US30 billion to \$US130 billion annually in the US*
- > *alone. These estimates are even more meaningful when compared with*
- > *other high cost conditions or diseases, such as diabetes mellitus*
- > *(\$US45.2 billion), obesity (\$US70 billion), and cardiovascular disease*
- > *(\$US199.5 billion). Drug-related mortality has been estimated to claim*
- > *218,000 lives annually."*
- >
- > *Traditional efforts to detect ADEs have focused on voluntary reporting*
- > *and tracking of errors. However, "health-related accreditation bodies*
- > *estimate that as many as 95% of all ADEs are not reported." In fact,*
- > *although ADE reporting is mandatory for pharmaceutical companies, it*
- > *is voluntary for healthcare professionals. Because of this voluntary*
- > *system ADEs are rarely reported to the FDA.*
- >
- > *"Between mid-1997 and mid-1998, physicians reported 2,083 ADEs to the*
- > *FDA. If one assumes that 1997 is a typical reporting year, US*
- > *physicians report an ADE to the FDA once every 336 years, based on the*
- > *number of licensed physicians in the US. During the same reporting*
- > *period, pharmacists in the US reported 7,406 ADEs to the FDA. US*
- > *pharmacists fare a bit better in the frequency analysis, reporting an*
- > *ADE to the FDA once every 26 years, based on the number of licensed*
- > *pharmacists in the US."*
- >
- > *The authors indicate that the current voluntary reporting system is*
- > *not sufficient to identify and reduce deaths from pharmaceuticals. The*
- > *authors also suggest that changes to a more active reporting system*
- > *would be greatly beneficial in reducing this high cost in lives and*
- > *money. They also note that systematic reviews are almost entirely*
- > *focused on "efficacy data" and are rarely on ADEs.*
- >
- > *SOURCE: Drug Safety, 2004, Vol. 27, No. 11, pp. 757-761*