

plundering the earth, setting up a cleverly deceptive financial system that controls the production and flow of fiat paper money using the US dollar as the standard international currency, they have turned the world's citizens and nations into indentured servants, hopelessly in debt due to their grand theft planet. With Russia and China spearheading a [shift away from the US dollar and petrodollar](#), and many smaller nations following their lead, a major shift in the balance of power is underway between Western and Eastern oligarchs. Thus, by design escalating calamity and crises are in overdrive at the start of 2015.

By examining one aspect of this grand theft planet through the story of Big Pharma, one can accurately recognize and assess Big Pharma's success in its momentum-gathering power grab. Its story serves as a microcosm perfectly illustrating and paralleling the macrocosm that is today's oligarch engineered, highly successful New World Order nightmare coming true right before our eyes that we're all now up against. By understanding how this came to manifest, we will be better able to confront, challenge and oppose it.

Every year a handful of the biggest pharmaceutical corporations are a well-represented fixture amongst the most powerful Fortune 500 companies of the world. The [twelve largest drug manufacturers and the eight largest drug delivery companies](#) (or otherwise known as the drug channels companies) that include drug wholesalers, chain pharmacies and pharmacy benefit managers (so called PBM's) consist in total only 20 of the top 500 global corporations in the world. Thus, despite making up only 4% of the total Fortune 500 companies in 2014, both Big Pharma's highly profitable revenues and absolute economic and political power in the United States and world are unprecedented.

The [median revenue of the drug channels companies](#) that made 2014's Fortune 500 from the most recent available 2013 figures was \$95.1 billion with a median profit as percentage of assets of 2.9% over the year before. The top 12 drug manufacturing companies held a median revenue of only \$17.5 billion but a median profit of assets level of 10.6% over 2012. Though the channels companies like CVS (the top channels company and #12 on Fortune 500), Walgreen (#37) and Rite-Aid (#118) overall maintain higher revenues and positions in the Fortune 500 list, their profit margins are not nearly as immense as the pharmaceutical manufacturers that are almost four times more profitable.

Big Pharma's top eleven corporations generated net profits in just one decade from 2003 to 2012 of [nearly three quarters of a trillion dollars](#) – that's just net profit alone. The net profit for 2012 amongst those top eleven amounted to \$85 billion in just that one year. The majority of these largest pharmaceuticals are headquartered in the US – including the top four, Johnson & Johnson (#39 on Fortune 500 list), Pfizer (#51), Merck (#65) and Eli Lilly (#129) along with Abbott (#152) and Bristol Myers Squibb (#176). The healthcare research company IMS Health projects worldwide sales of Pharma drugs to exceed one trillion dollars by 2014. With that kind of obscenely powerful money to throw around, what Big Pharma wants, Big Pharma nearly always gets.

Just as the oligarchs buy, own and control national governments to do their sleazy bidding, Big Pharma as an extension of those same oligarchs does too. Perhaps what makes Big Pharma unique in the US is that the industry outspends all others in laying down cold hard cash into its lobbying efforts – another word for bribing governments that includes not only

US Congress (and parliaments) but its US federal regulator, the bought and sold Food and Drug Administration (FDA). It poured [\\$2.7 billion into its lobbying](#) interests from 1998 to 2013, 42% more than the second most “Gov. Corp.” bribe which happens to be its sister industry insurance.

And it's this unholy trinity of the medical establishment (personified by the American Medical Association), embedded insurance industry that wrote Obamacare into law and Big Pharma that makes the United States the [most costly, broken, corrupt, destructive healthcare system](#) in the entire world. The structured system is designed and layered with built in incentives at every tier to make and keep people sick, chronically dependent on their drugs for survival that merely mask and smother symptoms rather than cure or eradicate the root cause of disease.

Plenty of empirical evidence exists that confirm concerted diabolical efforts have been made to ruin the lives of [pioneering heroes](#) who have come up with possible cures for cancer, AIDS and other terminal illnesses. Obviously their work poses a serious threat to medical status quo. Hence, their treatments have all been effectively suppressed by conventional medicine. Bottom line, if humans are healthy, the healthcare industry does not survive. Thus, it's in its own inherently self-serving interest to promote illness in the name of wellness.

Also because natural healing substances cannot be patented, Big Pharma has done its sinister best to squelch any and all knowledge and information that come from the far more affordable means of [alternative health sources](#) that explore ancient traditional cultures' medicinal use of hemp along with thousands of other plants and roots that could threaten drug profits and power of Big Pharma and modern medicine as they're currently practiced and monopolized.

Another cold hard reality is pharmaceutical drugs especially when consumed to manage chronic disease and symptoms cause [severe side effects](#) that also damage, harm and kill. The most prescribed drugs of all are painkillers that typically are highly addictive. Big Pharma with the help of their global army of doctors have purposely and calculatingly turned a large percentage of us especially in the United States into hardcore drug addicts, both physically and psychologically addicted to artificial synthetic substances that are detrimental to our health and well-being. More than [three quarters of US citizens over 50](#) are currently taking prescribed medication. One in four women in their 40's and 50's is taking antidepressants. Though the US contains just 5% of the world population, it consumes over half of all prescribed medication and a phenomenal [80% of the world's supply of painkillers](#). Those who admit to taking prescription drugs on average take four different prescription drugs daily. Taking massive amounts of prescription drugs has caused an epidemic that's part of a sinister plan to squeeze yet more profit out of a system designed to keep humans chronically unhealthy.

Even more alarming is the fact that death by medical error at near a quarter million people annually has become the [third largest killer](#) of US citizens behind heart disease and cancer. Other more recent studies have estimated upwards of up to [440,000 have died yearly](#) from preventable mistakes at hospitals. Blind obedience to Big Pharma and a conventional

medical system too dependent on surgery and technology has inflicted more harm than good on the U.S. population.

Because doctors now are forced to rely so heavily on drug companies for information about what they prescribe, they're ill equipped and ill-informed in their lack of adequate knowledge and training to understand what all the interactive drugs are doing to toxically harm their human guinea pigs they call patients. We are finding out that the [cumulative and synergistic effects](#) of poly-prescription drug use is frequently a lethal cocktail to millions of human beings on this planet. Combine that with the negative effects of our air, water, food and alcohol/illicit drugs, and the health dangers increase dramatically.

Look at the current damage done by over-prescribing antibiotics. Studies have learned that too much antibiotics cause trans-generational permanent DNA damage. The [20,000 times a year](#) in the US alone that antibiotics are prescribed are highly toxic and damaging to the nervous system. On top of that, they simply don't work anymore. The epidemic of trans-mutated bacterial infection and parasites that invade and infest the digestive tract in particular killing good bacteria and spread to other internal organs have become highly resistive to overuse of antibiotics. Big Pharma and doctors know all this yet they are responsible for antibiotic overconsumption by uninformed Americans.

Then look at what we are now learning about Big Pharma vaccines and the wanton reckless endangerment of children and pregnant mothers with toxic levels of mercury causing increased rates of autism, brain damage and even death. The [criminal cover-up by Big Gov. and Big Pharma](#) is egregious. [Flu vaccines](#) have recently been exposed that are totally ineffective along with the horrific damage being done to humans worldwide. Instead of preventing and decreasing illness, vaccines too often have had the opposite effect, exponentially increasing illness, causing irreversible damage and even death to thousands of unsuspecting victims mostly living in Third World nations. India's Supreme Court is currently looking into [charging Bill Gates with criminal harm](#) to many of its citizens especially children injured or killed by his global vaccine program.

A growing number of critics believe Gates' true aim is to eugenically [reduce the world population](#) from seven billion down to a "more manageable" size of half to one billion people. With the precedent of a well-documented history of horrifying [eugenics practiced on the poor](#) and most vulnerable in the US up till the 1980's, oligarchs have been scheming to kill most of us on the planet for a long time now. With last year's West African outbreak of the most deadly Ebola virus ever, and it being patented as bio-warfare, and [mounting evidence](#) that it was purposely started by a joint [US military-university research](#) team in Sierra Leone causing its global spread, more people than ever have perished and a growing segment of the population suspect that it is being used as a weapon of mass destruction to effectively depopulate the earth. We can largely thank the demonic partnership between Big Pharma and US Empire for that.

To further control the global health system, Big Pharma has largely dictated what's been taught in medical schools throughout North America, heavily subsidizing them as a means of dictating the conventional dogma that's standard curriculum down to even the textbooks. Several years ago [a revolt at Harvard](#) amongst med students and faculty went public. For a

long time now doctors have been educated primarily to treat their patients with drugs, in effect becoming drug pushing, pharmaceutical whores, mere foot soldiers in Big Pharma's war on health. Starting in the final year of med school, Big Pharma insidiously hones in on young med students, seductively wining and dining prospective physicians, showering them with money in the form of educational handouts, gifts, trips and perks galore to recruit its legions of loyal, thoroughly indoctrinated drug peddlers around the world. Thousands of doctors in the US [are on Big Pharma payrolls](#). Typically early on in their careers physicians are unwittingly co-opted into this corrupt malaise of an irreparable system that's owned and operated by Big Pharma.

And here's why the drug companies control the global healthcare empire. Since 1990 Big Pharma has been pumping at least [\\$150 million](#) that we know about (and no doubt lots more we don't know about) buying off politicians who no longer represent the interests of their voting public. Thanks to Big Law via last spring's [Supreme Court decision](#), current campaign financing laws permit unlimited, carte blanche bribery power for America's most wealthy and powerful to fill the pockets of corrupt politicians with absolutely no oversight. Though the corporate buyoff of other nations around the globe may not appear quite so extreme and blatantly criminal as in the United States, international drug companies make certain that every national government allows full access and flow of their prescription drugs into each nation, including rubber stamped approval by each nation's regulatory body to ensure global maximization of record setting profit. But because far more money is spent on the healthcare industry in the US, [twice as much as the next nation Canada](#) and equal to the next ten combined, it's no surprise that hapless Americans end up having to pay far higher exorbitant costs for their made-in-the-USA drugs than anyone else on the planet. The average US citizen spends [about \\$1000 on pharmaceutical drugs](#) each year, 40% higher than Canadians.

Big Pharma also invests more dollars into advertising than any other industry in America, transmitting its seductively deceptive message direct to its consumers, explicitly giving them marching orders to request specific drugs from their doctors. In 2012 alone, pharmaceutical corporations paid nearly [\\$3.5 billion to market their drugs](#) on television, radio, internet, magazines, saturating every media outlet. Their message – pleasure, relief, peace of mind, joy, love and happiness are all just a pill away. No problem or pain in life can't be conquered by a quick fix – compliments of Big Pharma.

Much of Big Pharma's success over the last couple decades has been the result of specifically targeting special new populations to con and win over, resorting to [creating new diseases](#) and maladies to entice troubled, stressed out, gullible individuals into believing there's something abnormally wrong with them, that they are among always a growing segment of our population who quietly suffer from whatever discomforting symptoms, deficits, dysfunctions, ailments, syndromes and disorders that enterprising Big Pharma connives to slyly invent, promote, package and sell. This unethical practice has been called "disease mongering." Drug companies today operate no different from the snake oil salesmen of yesteryear. Saturating the market with their alluring, promising ads, check out any half hour of national network news on television targeting the baby boomer and geriatric crowd and you'll notice 95% of the commercials are all brought to you by none other than Big Pharma. Of course they pay big bucks for slick ad marketing campaigns that shrewdly

target the oldsters most apt to suffer health problems in addition to being virtually the only Americans left still watching the nightly network news. [Three out of four people under 65](#) in the US today recognize that mainstream news media is nothing less than pure Gov. Corp. propaganda.

Also in recent years Big Pharma has become [deceitfully masterful at repackaging](#) and rebranding old meds at higher prices ever in search of expanded consumers. It's a lot easier and far less money to engage in this unethical industry-wide practice of recycling an old pill than to manufacture a new one. Prozac became the biggest drug sold until it was learned that it caused so many people to kill themselves or others, especially adolescents. Then Eli Lilly deceptively repackaged and relabeled it under the less threatening name Sarafem at a much higher price tailored to target unsuspecting women seeking relief from menstrual pain. Like Prozac as another Selective Serotonin Reuptake Inhibitor antidepressant, Paxil was suddenly repackaged as the cure-all for shyness under the guise of treating social anxiety. Taking full advantage of knowing that millions of humans feel unsure of themselves dealing with strangers and groups, Big Pharma to the rescue exploiting people's nervousness by clinically labeling it as social anxiety and reintroducing the antidepressant pink pill as their panacea to personal happiness, lifelong self-confidence and success in life. This most prevalent industry pattern of reusing the same old drugs all dressed up with new custom designed names for new purposes on new custom designed populations for yet more price gouging is nothing less than resorting to a predatory practice of criminal false advertising.

Perhaps as sinister as any aspect of the drug business is how Big Pharma has completely taken over the FDA. A recent Harvard study [slammed the FDA](#) making the accusation that it simply "cannot be trusted" because it's owned and operated by Big Pharma. With complete autonomy and control, now pharmaceutical companies knowingly market drugs that carry high risk dangers for consumers. But because they so tightly control its supposed regulatory gatekeeper, drugs are commonly mass marketed and before the evidence of potential harm becomes overwhelming, by design when the slow bureaucratic wheels turn issuing a drug recall, billions in profit have already been unscrupulously reaped at the deadly expense of its victims. Additionally, doctors, pharmacists and patients rarely even hear about important recalls due to dangerous side effects or contamination. Yet [hundreds of Big Pharma drugs](#) are recalled every year. Many FDA approved drugs like [FenPhen](#), [Vioxx](#), [Zohydro](#) and [Celebrex](#) kill hundreds before they're finally removed from the shelf. This withholding the truth from the professionals and public consumers is yet more evidence that Big Pharma protects its profits more than people.

This evil practice that keeps repeating itself is proof that [Big Pharma is a criminal racket](#). It no longer needs outside independent research demonstrating a drug's efficacy to be FDA approved. Currently research is conducted and compiled by the pharmaceutical industry itself to fraudulently show positive results from methodologically flawed drug trials when in reality a drug proves either ill effective at doing what it's purported to do or downright harmful. Research outcomes only need to show that the drug outperforms a placebo, not other older drugs already available on the market that have proven to be effective at lower cost.

Similar to shady personnel moving seamlessly in and out of governmental public service to think tanks to universities to private law to corporations to lobbyists, the same applies to heads of the FDA moving to and from Big Pharma. Unfortunately this is how our government has been taken over by special interests. Yet this [rampant conflict of interest goes unchecked](#).

Because Big Pharma sometimes outright owns and largely controls today's most prominent medical journals, spreading false propaganda, disinformation and lies about the so called miracle effects of a given drug is yet another common practice that is malevolent to the core. [98% of the advertising revenue of medical journals](#) is paid for by the pharmaceutical industry. Shoddy and false claims based on shoddy and false research all controlled by Big Pharma often get published in so called reputable journals giving the green light to questionable drugs that are either ineffective or worse yet even harmful. Yet they regularly pass peer and FDA muster with rave reviews.

But because Big Pharma's never held accountable for its evildoing, it continues to literally get away with murder, not unlike the militant police, the CIA, Monsanto and the US Empire that willfully and methodically commit mass murder on a global scale or through false flag terrorism having its mercenary Moslem allies kill innocent people as on 9/11 and France's recent "9/11." Since all serve the interests of their oligarch puppet masters toward grand theft planet and New World Order with total impunity, the world continues to suffer and be victimized.

Nearly five years ago the Justice Department filed and won a [huge criminal lawsuit against Pfizer](#), one of the largest pharmaceutical corporations in the world employing 116,000 employees and boasting an annual revenue of more than \$50 billion (\$53.8 in 2013). Fined \$2.3 billion to pay off civil and criminal charges for illegally promoting the use of four of its drugs, the unprecedented settlement became the largest case of healthcare fraud in history. The crux of the case centered on Pfizer's illegal practice of marketing drugs for purposes other than what the FDA originally approved. While the law permits a wide leeway for physicians to prescribe drugs for multiple purposes, Pharma manufacturers are restricted to selling their drugs only for the expressed purposes given them by FDA approval.

The 2003 lawsuit would never even have been filed had it not been for whistleblowing sales rep [John Kopchinski](#) who forced authorities to investigate what's been a common Big Pharma practice, selling drugs for off-label uses. While back in 2001 the FDA had approved a 10 mg dosage of Bextra for arthritis patients and for menstrual cramps, Pfizer sent Kopchinski out with instructions to give complimentary 20 mg samples of Bextra to doctors, thus willfully and illegally endangering patient lives, particularly because in 2005 Bextra was taken off the market due to [increased risk of heart attacks and stroke](#). The truth is Big Pharma will do anything to boost its money making big profits, including killing innocent people.

But the story doesn't end here. This legal case potently illustrates how the [US federal government has been co-opted](#) and conspires with Big Pharma to knowingly do harm to American citizens. When the story broke in the fall of 2009 of this record fine levied against Pfizer, assistant director Kevin Perkins of the FBI's Criminal Investigation Division touted

how the feds mean business going after lawbreakers within the pharmaceutical industry, boasting that “it sends a clear message.” But it turns out that that false bravado was an all-for-show facade.

The truth is the US government will knuckle under to Big Pharma, Wall Street and Big Banks every single time, even when it knows these “too big to fail” criminals repeatedly violate laws intended to protect the public. And constantly bailing them out at overburdened taxpayer expense only causes them to become more brazenly criminal, knowing they will always be protected by their co-conspirators the feds.

Back in November 2001 the FDA had stated that Bextra was unsafe for patients at risk of heart disease and stroke, rejecting its use especially at higher than 10mg doses on patients suffering from post-surgery pain. Yet [Pfizer went ahead anyway marketing its product](#) for any doctor who “used a scalpel for a living” as one district manager testified. It was learned that Pfizer deployed multimillions of dollars to its well-paid army of hundreds of doctors to go around “educating” other MD’s on the miracle benefits of Bextra. Again, misusing doctors as pitchmen to sell inflated false claims is employing the medical profession as Big Pharma’s industry whores.

By the time Bextra was finally taken off the market in April 2005, after killing a number of at risk patients that never should have been prescribed the painkiller, Pfizer had already made its cool [\\$1.7 billion](#) off the drug being illegally sold for purposes the FDA had expressly forbidden. Here’s where Big Pharma rules over Big Gov. Because by law any company that’s found guilty of fraud is prohibited from continuing as a Medicare and Medicaid contractor, which of course Pfizer is and was, the feds under the morally bankrupt excuse that Big Pharma’s also “too big to fail” made a dirty little secret deal with Pfizer in the backroom law offices of the federal government.

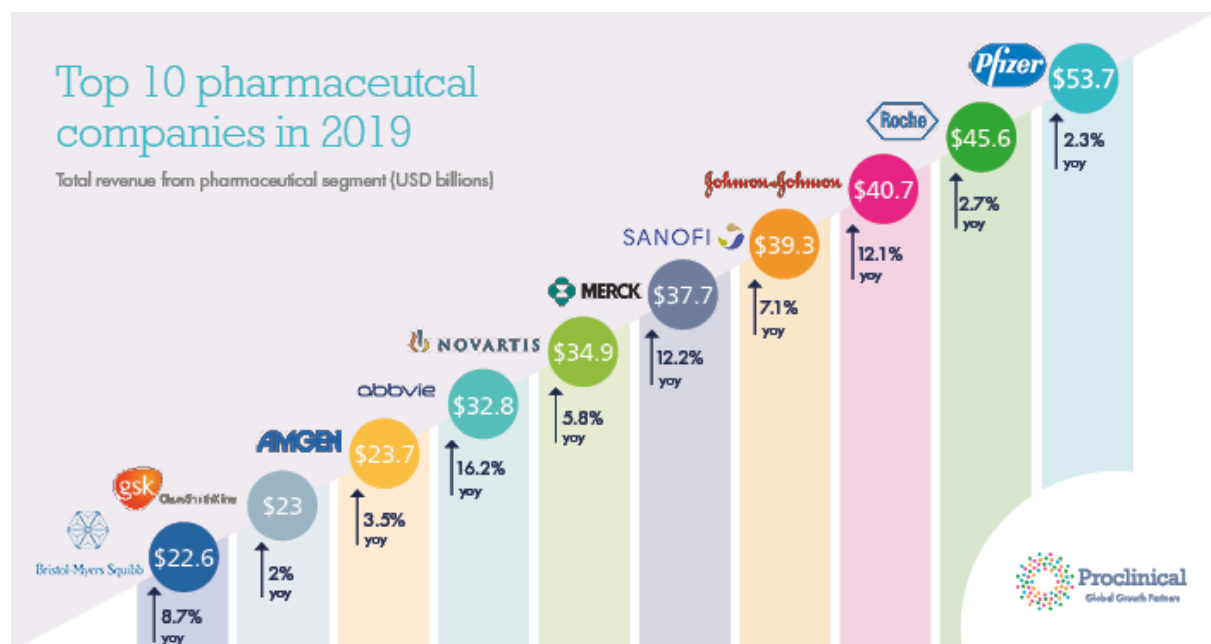
Just like US Empire uses the “national security” card, so do the banksters, Wall Street and Big Pharma use their “too big to fail” trump card to get away with their own crimes against humanity. It’s a rigged world where an elitist cabal of cheats and thugs mistreat fellow humans as owned commodities and indentured expendables. Money and power mean everything while human life means nothing to them. So the secret deal was cut where on paper only the [fake Pfizer subsidiary Pharmacia and Upjohn](#) that never sold a single drug would be found criminally guilty so the conveniently contrived loophole would spare Big Pharma Pfizer’s from its alleged death. Records show that on the very same day in 2007 that the feds worked out this sweetheart deal with Pfizer, this hollowed out shell company as Pfizer’s backdoor nonentity was born. How convenient as Big Gov. and Big Pharma got to live happily ever after together in criminal conspiracy against their own people they’re supposed to serve and protect, kind of like the way police forces across this nation are “serving and protecting” citizens.

Then with drug profits so obscenely high, even with a slap on the hand [penalty fee of \\$2.3 billion](#), Big Pharma’s net profit for just one quarter easily can pay it off. Three years later in July 2012 the Justice Department handed down yet an even bigger fine of \$3 billion to UK’s global healthcare giant [GlaxoSmithKline](#) for the same exact crimes. As long as Big Pharma continues raking in such enormous profits, fines into the billions mean nothing since they’re

paid off in a few months' time. Not until CEO's and top executives of Big Banks, Big Wall Street and Big Pharma start going to jail to serve long term sentences for their crimes, it'll conveniently remain business as usual. And as long as Big Pharma owns Big Gov. Corp., just like the oligarchs own everything there is to earthly own, nothing will ever change for the better unless we as citizens of the world demand accountability and justice that punishment rightly fit the corporate crime.

<https://www.globalresearch.ca/the-evils-of-big-pharma-exposed/5425382>

Who are the top 10 pharmaceutical companies in the world? (2019)



The global pharmaceutical industry reached unprecedented heights in 2018, being estimated at an astounding \$1.11 trillion. By 2020, this figure is set to rise to \$1.43 trillion. With rising pressure to develop drugs to meet ever increasing global demand, pharmaceutical companies continue to work tirelessly to bring the most innovative and cutting-edge treatments to patients.

Being a research-driven industry, approximately \$150 billion is spent by pharmaceutical companies every year on research and development projects. Out of thousands of compounds, only a small percentage gain [regulatory approval](#) to be used by patients to treat disease and improve quality of life. However, in 2018, a record number of novel drugs developed by pharmaceutical companies across the globe were approved by various regulatory bodies. A large proportion were approved by the US regulatory body, the FDA,

which approved 55 novel drugs and smashed its record for generic approvals (781 up from 763 in 2017).

Although the USA's market share of the global pharmaceutical industry is worth over \$341.1 billion, the Chinese, South East Asian, Eastern European and South American markets are beginning to emerge. For example, [the Chinese market is rich with preclinical and early-phase drugs](#), and is a growing nucleus of biotech activity. The next few years will see global growth thanks to the increasing wealth worldwide, as well as increasing demand to maintain high levels of innovation to combat unmet medical need.

Proclinical has ranked the leading pharmaceutical companies according to 2018 revenue from their **pharmaceutical segment only**. Below is a list of the top 10 biggest pharma companies in the world in 2019:



Bristol-Myers Squibb (BMS)

US \$22.6 billion

A new entry into the top 10 pharma list is Bristol-Myers Squibb, a leading American pharmaceutical company headquartered in New York City. BMS specialises in four key therapy areas: oncology, cardiovascular, immunoscience and fibrosis. The company's [strong growth in 2018](#) can be in part attributed to continued success of leading drugs Opdivo (cancer) and Eliquis (a blood thinner). BMS' success is likely to be further boosted following the company's planned acquisition of Celgene - an innovative oncology biotech - in early 2019. This strategic acquisition will help position BMS as a leading biopharma player thanks to Celgene's robust pipeline.



GlaxoSmithKline (GSK)

US \$23 billion

A staple candidate in the top 10 pharma list year on year, GlaxoSmithKline (GSK) is a leading British pharmaceutical company that always boasts a strong pipeline of innovative

drugs. The company specialises in a broad range of therapy areas but is particularly successful in the fields of HIV/AIDS, respiratory and vaccines. The company enjoyed 2% revenue growth compared with 2017 figures, with [sales being boosted](#) by GSK's best-selling HIV drugs Trivicay and Triumeq, the Ellipta inhaler for asthma and COPD and Nucala, another successful asthma treatment. Last year GSK saw the key approval of Shingrix, developed to treat the shingles virus, which was very successful in 2018 as expected, with sales reaching £784 million. In general, growth was slightly offset by steep generic competition in 2018 for various GSK drugs like Seretide, Epizixom and Avodart.



Amgen

US \$23.7 billion

Amgen is an American biopharmaceutical company headquartered in California that specialises in developing novel human therapeutics, with a focus on cardiovascular disease, oncology, bone health, neuroscience, nephrology, and inflammation. The company is steadily becoming a permanent fixture on this top 10 list. This change is in part due to the [success of various Amgen products](#), including Repatha (72% increase yoy), BLINCYTO® (31% increase yoy) and Prolia® (16% increase yoy). In early 2019, Amgen was voted one of Fortune Magazine's Most Admired Companies in the pharmaceutical industry and was listed number 5 on Fast Company's 2019 Most Innovative companies.



AbbVie

US \$32.8 billion

Research-driven American biopharma AbbVie has maintained its position on this list, with an impressive [increase](#) of 16.2% compared with 2017 pharma revenue statistics. AbbVie has recently announced that upadacitinib, one of their most anticipated drugs in development that will be used to treat moderate to severe atopic dermatitis, has been granted breakthrough therapy designation by the FDA. This is just one of the many promising pipelined drugs in AbbVie's varied portfolio which spans multiple therapy areas, including dermatology, oncology, neurology and gastroenterology. Boosting revenue is AbbVie's top

selling drugs Humira, the current bestselling drug in the world and Imbruvica, one of today's [leading cancer drugs](#).



Novartis

US \$34.9 billion

One of the leading pharmaceutical companies in Switzerland, Novartis comfortably makes the top 10 pharma list for 2019. The company focuses on a wide range of disease areas including oncology, immunology/dermatology, neuroscience and respiratory. The company's revenue grew by 5.8% compared with 2017 figures despite a few top selling drugs facing generic competition in major markets, such as as oncology success Gleevec, and blood pressure drugs Diovan and Exforge. To combat these losses, [Novartis spent 18% of their overall 2017 revenue](#) on research & development in 2018. Currently, Novartis' best selling drugs are Gilenya, for multiple sclerosis, and Lucentis, for patients suffering from eye-degenerative diseases.



Merck & Co

US \$37.7 billion

American pharmaceutical company Merck takes a spot as one of the top 5 pharmaceutical companies in the world in 2018. Merck is known as MSD outside of North America. The company develops drugs, vaccines and biologics in many areas including cardiovascular, oncology, endocrinology and infectious disease. The company saw an impressive [12.2% revenue growth since 2017](#) with sales boosted by the continued success of Merck's bestselling drugs: cancer immunotherapy Keytruda, HPV vaccine Gardasil and diabetes pill Januvia.

4 SANOFI 

7.1%  yoy \$39.3

Sanofi

US \$39.3 billion

Fourth on the top 10 pharma list is French pharmaceutical company, Sanofi. The company saw 7.1%% revenue growth within its pharmaceutical sector, which contributes a substantial percentage of the company's total revenue. Over 25% of this revenue came from [Sanofi's three best selling drugs](#), Lantus, an insulin injection for diabetes, Lovenox, an anticoagulant to prevent blood clots, and Aubagio, the one-daily pill to treat a form of multiple sclerosis.

3 Johnson & Johnson

12.1%  yoy \$40.7

Johnson & Johnson

US \$40.7 billion

In the top 3 pharmaceutical companies in the world is Johnson & Johnson, a company that was established over 130 years ago and has become a staple household name thanks to popular consumer goods like Aveeno, Neutrogena and Listerine. The notable 12.1% growth can be in part attributed to its acquisition of biopharmaceutical company Actelion in 2017, which contributed a 3.4% increase in 2018 thanks to its pulmonary arterial hypertension portfolio. Other drivers of growth included best-selling drugs Stelara, Darzalex and Zytiga.

2 Roche 

2.7%  yoy \$45.6

Roche

US \$45.6 billion

Swiss pharmaceutical company, Roche, is the 2nd biggest pharmaceutical company in the world for 2019, and employs 94,442 people worldwide. The company develops innovative drugs and devices in a number of key indications, such as oncology, immunology, infectious diseases and neuroscience. Annual growth from the pharmaceutical segment was 2.7% and revenue from the top 3 products contributed over 40% of Roche's total revenue in 2018

(\$57.2 bn). Roche's best-selling drugs also happen to be in the world's [top cancer drugs](#): Herceptin, Avastin and Rituxan. Roche's CEO, Severan Schwan reported that new medicines in accounted for [90% of the company's growth](#) in 2018, particularly the launch of Ocrevus, said to be the most successful in Roche's history.



Pfizer

US \$53.7 billion

The world's largest pharmaceutical company is multinational pharma giant Pfizer, headquartered in Connecticut, USA. The research-based company has a varied portfolio that spans many therapy areas, including immunology, oncology, neurosciences and rare diseases. Despite modest revenue growth, Pfizer had a very successful year in 2018. The company received several FDA approvals, particularly in oncology, and many of its best-selling products have many years of patent protection remaining. There was particular growth with some of Pfizer's key products, including Ibrance, Eliquis and Xeljanz.

Proclinical is a specialist recruitment company operating exclusively in the life science industry. Every day we have [new job opportunities](#) arising at top 10 pharmaceutical companies across the globe. Simply [upload your CV](#) to start getting matched with pharmaceutical jobs at leading companies that could transform your career.

<https://www.proclinical.com/blogs/2019-3/the-top-10-pharmaceutical-companies-in-the-world-2019>

Who Are the Players in the Pharmaceutical Industry (Big Pharma)?

The term "Big Pharma" is used quite often to describe massive pharmaceutical companies that make literally billions of dollars every year to keep Americans regularly supplied with a medicine cabinet's worth of pills. But when we say Big Pharma, who are the players in the pharmaceutical industry? Who is responsible for flooding neighborhoods and communities with addictive medication? Who are the agencies responsible for keeping them in check?

The Money of Medicine

There are two sides to the coin of this conversation: the pharmaceutical industry, which is responsible for the development, manufacturing, and marketing of drugs for use as

medications; and Big Pharma, the colloquial (and often pejorative) term used to describe faceless corporations that push hugely overpriced drugs onto hapless and desperate consumers.

Some of the names of the biggest players in the industry may be familiar. Others may not ring as many bells, but with their market value, the relative anonymity works to their advantage. *The Motley Fool* provides a list of the companies doing the best business:

- Johnson & Johnson (\$276 billion market value)
- Novartis (\$273 billion)
- Pfizer (\$212 billion)
- Merck (\$164 billion)
- GlaxoSmithKline (\$103 billion)
- Eli Lilly (\$98 billion)

Those deep pockets allow pharmaceutical companies to spend astronomical amounts on advertising. In 2014, spending on advertising was worth \$4.53 billion, representing an 18 percent year-by-year increase. Out of all the individual companies in the industry, Pfizer spent \$1.4 billion on advertising. Eli Lilly, the company behind the erectile dysfunction medication Cialis, spent \$272 promoting that drug alone.¹



The highest amount paid in a single year on marketing pharmaceutical products was \$5.4 billion in 2006. Ten years later, an ad aired during that year's Super Bowl that was 60 seconds long and cost \$10 million to produce but reached 111 million viewers.² The *BMJ Journal* writes that drug companies spend 19 times more on marketing than they do on research and development.³

That's a lot of money to spend on advertising, but *io9* writes that every \$1 spent on a commercial, billboard, radio, or print ad, brings over \$4 in retail sales. For example, Boehringer Ingelheim spent \$464 million in advertising for Pradaxa, its blood thinner, in 2011. In 2011, sales of Pradaxa passed \$1 billion

Marketing Medicine

The investment is a sound one: Doctors prescribe new drugs that are featured in direct-to-consumer advertising nine times more than drugs that are not marketed publicly. This is because patients sometimes demand to be given the drugs they've seen in commercials (or heard about from their friends and family members), but also because some doctors receive handsome bonuses for promoting medications from certain manufacturers.⁴

The Wall Street Journal created an interactive graphic that showed how companies rewarded doctors – and by how much – in just the four months between August and December 2013:

- Promotional talks and honoraria: \$228.1 million
- Travel, lodging, and entertainment: \$95.9 million
- Food and drinks: \$92.8 million⁵

One of the results of this spending avalanche is that pharmaceutical companies are seen and heard everywhere in the public sphere. "It's true," writes the *Washington Post*, "drug companies are bombarding your TV with more ads than ever." Thanks to federal rules allowing drug companies to advertise directly to consumers, and an economic recovery after the Great Recession, pharmaceutical corporations have enjoyed their time in the sun. In 2014, television accounted for 61.6 percent of companies' direct-to-consumer advertising revenue.⁶

The Wrong Side of the Law

The business of the pharmaceutical industry is not always a pleasant one. Given the fierce competition from rival corporations and the unfathomable amounts of money to be made, it is not surprising that some of the biggest federal fines ever levied have come against drug manufacturers.

In 2012, for example, GlaxoSmithKline pled guilty to criminal charges of willfully promoting its leading antidepressant drugs, like Paxil and Wellbutrin, to consumers under the age of 18. Neither drug had been approved by the US Food and Drug Administration to be used by minors, for which reason the government slapped a \$3 billion fine on the company. In 2012, Johnson & Johnson were hit with a \$2.2 billion fine for promoting off-label use of its drugs (i.e., the company was found guilty of encouraging consumers to use the drugs for purposes not condoned by the FDA). Pfizer, in 2009, paid \$2.3 billion for illegally marketing its Bextra drug. *The New York Times* noted that the fine – a "record sum" at the time – accounted for less than three weeks of Pfizer's sales.⁷



With so much money at stake, it comes as no surprise that pharmaceutical companies are behind some of the biggest mergers and acquisitions in history. Pfizer purchased Warner-Lambert for \$87.3 billion in 1993 (adjusting for inflation, about \$125 billion in 2016). Pfizer's goal was to have sole marketing leverage over the drug Lipitor, a medication to lower cholesterol. *Crain's New York Business* called Lipitor "the best-selling drug in the history of pharmaceuticals," after the medication generated revenue of \$1 billion in its first year and went on to produce \$125 billion worth of sales in almost 15 years.⁸ The pharmaceutical industry has some very deep pockets; across the entire world, the medication market was worth \$1 trillion in 2014, and a quarter of that revenue came from the United States alone, where five of the top 10 pharmaceutical manufacturing companies are located.

When the Pharmaceutical Industry Becomes Big Pharma

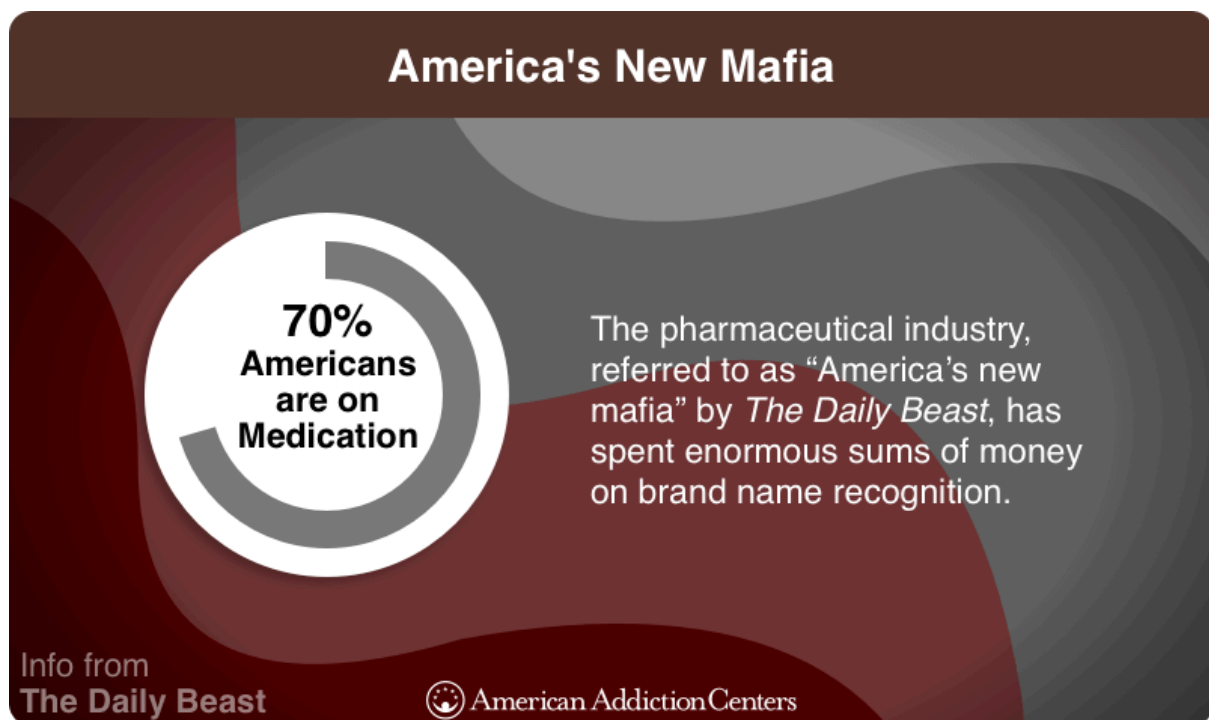
With those pockets comes a strong hand of political and legislative influence, to the tune of \$2.9 billion between 1998 and 2014 on lobbying expenses, and \$15 billion in campaign contributions between 2013 and 2014. For some people, this straddles the line between unethical and illegal. Even as the federal government issues massive fines to keep those companies in check, the industry itself is a significant contributor to the Food and Drug Administration's budget, leading to concerns of conflicts of interest and outright bribery. This, say observers and watchdogs, is where "the pharmaceutical industry" becomes "Big Pharma."

Science-Based Medicine wonders if Big Pharma's influence reaches too far – not just to advertisers and lobbyists, but doctors willing to accept lucrative bonuses and scared patients demanding to be prescribed brand-name drugs for no other reason than seeing those names

in the media. The very “psyche of the American people” is not immune to the weight of literally billions of dollars in spending money.⁹

The New American Mafia

It is for reasons like these that the *Daily Beast* referred to the pharmaceutical industry as “America’s new mafia,” leveraging enormous sums of money and brand-name recognition to put 70 percent of American consumers on medication.^{10, 11} Many of those people are members of vulnerable, at-risk demographics who either need medication to go about their daily lives or who do not have access to the information to determine whether or not expensive, potentially addictive medication will ultimately be good for them.



For Big Pharma, such people are ultimately consumers. Eleven companies in the pharmaceutical industry made \$711 billion from price-gouging Medicare, the government program for seniors and disabled citizens, leading the *Huffington Post* to declare that Big Pharma is committing a robbery by overcharging taxpayers. Per capita drug spending in the United States is 40 percent more than it is in Canada, 75 percent more than it is in Japan, and nearly three times as much as it is in Denmark.¹²

In 2014, *The New York Times* quoted a professor of management practice at Harvard Business School, who asked whether the purpose of large pharmaceutical corporations was to research and develop drugs that can improve the quality of life for people, or – after Pfizer failed to buy AstraZeneca, a multinational pharmaceutical and biologics company for \$119 billion – whether such entities existed “to make money for shareholders through financial engineering.”^{13, 14}

[Click Here to Learn More](#)

Brand-Name vs. Generics

Another example comes from New Jersey, home to many giants of the pharmaceutical industry. One of them is Endo Pharmaceuticals, which was sued by the Federal Trade Commission in 2016 for illegally blocking the production of lower-costing generic versions of their drugs, Opana ER and Lidoderm.¹⁷ In the Garden State, elderly and disabled residents are more likely to be prescribed brand-name drugs over basic generic drugs than in any other state in the country. The national average of brand-name prescriptions is 21.2, but that figure shoots up to 28 percent in New Jersey, a figure representative of what local doctors have called “wasteful overprescribing.”

Scientific American explains that the difference is not so much to do with the chemical composition or quality of the brand-name and generic drugs, but how they are regulated and priced. Brand-name drugs are obviously much more expensive than generics, even though generics can have acceptably similar effects on patients. The professor and head of the Department of Pharmacy Practice at the University of Connecticut, per *The Huffington Post*, “strongly recommends” that patients choose generic medications over brand-name products if possible, “since they almost always work as well and can save people a lot of money.”¹⁸



However, the companies that produce generic drugs often do not have the financial influence and spending power of the bigger pharmaceutical companies that produce the brand-name drugs.¹⁹ This, despite the FDA stating that nearly 80 percent of the prescriptions filled in the United States are for generic drugs, hinting at the unimaginable sway Big Pharma companies have over that market.²⁰

With so much of the pharmaceutical industry housed in New Jersey, doctors there are exposed to a great deal more of the sway and leverage that Big Pharma can exert, leading to doctors eagerly writing prescriptions for brand-name drugs and receiving lavish bonuses

for their efforts – sometimes in the form of free food and beverages, and other times in the form of private stadium suites at sporting events and dinner at five-star restaurants.²¹

Big Pharma's Big Pockets

Patients can be complicit on their own, oftentimes overriding their doctors' opinion about using a generic drug instead of an unnecessary brand-name counterpart. *Consumer Reports* quotes the *Journal of the American Medical Association* in noting that many doctors acquiesce to their patients' demands.²² Researchers writing in the journal of *Medical Care* lament that patients who request a specific medication during their doctors' appointments have the effect of "dramatically" increasing how often their physicians prescribe that particular medication.²³

Speaking to *NJ Spotlight*, a doctor laments that Big Pharma corporations "have the government and the regulators in their pocket."²⁴

The Rise of the 'Thought Leader'

The doctors who accept the overtures from pharmaceutical companies, and the companies who engage in the practice, see things a bit differently. Pharmaceutical Research and Manufacturers of America, the trade group that represents the interests of the pharmaceutical industry in the US, is of the official position that the business between individual drug manufacturers and doctors, is to improve patient care through the advancement of shared interests in pharmaceutical care.

One way this is done is by the work of doctors speaking to other doctors, either in one-on-one settings or at symposiums and seminars. A doctor in this role is known as a "thought leader," someone who is paid by a pharmaceutical company to talk to other doctors about a drug, or drugs, manufactured by that company.²⁵

In "How to Win Doctors and Influence Prescriptions," NPR writes that the term *thought leader* is widely understood to be a euphemism. Even as Pharmaceutical Research and Manufacturers of America looked to scale back on some of the more excessive methods used to court doctors, the trade group still left the door open for a more subtle way to spread their message.

The Psychology of Making Leaders out of Doctors

Instead of suite seats at sports stadium, pharmaceutical companies turned to doctors themselves, asking physicians to become speakers at upscale restaurants and hotel conference rooms. The doctor's role is to educate their colleagues on the advantages and disadvantages of a particular drug, for which a handsome fee is paid out. The nature of the role is explicitly laid out by the company paying the doctor for the work: The doctors are trained to present the drugs in a very specific way, using psychologically precise language that will appeal to the communal sense that the gathered doctors all share. NPR notes that

all the pharmaceutical representatives they interviewed for their story “used the exact same phrase” when talking about how doctors were prepared for their roles as thought leaders.



One doctor tells NPR that his role is to increase education and awareness of new drugs hitting the market. The money is nice, he says, but the satisfaction comes from teaching other doctors how they can help their patients.

This ego boost provides a veneer of insulation against the work that pharmaceutical reps used to do: go to hospitals and clinics and try to woo harried and busy doctors with free samples and glowing statistics, typically greeted with “disdain and abuse.”²⁶ Some doctors would even ban reps from their professional premises.

When a thought leader does it, however, usually in a setting that is much nicer than a doctor’s office or a hospital, there is a sense of advancing a cause larger than themselves; they do it in the name of academics and in the name of medicine. That feeling of inspiration suggests a new direction that the pharmaceutical industry is adopting, but one former representative speaking to NPR admits that not much has changed. The definition of a thought leader is “a physician with a large patient population who can write a lot of pharmaceutical drugs.”²⁷

Pleading Guilty and Paying Fines

Driven by literally billions of dollars’ worth of research and advertising, the modern healthcare system seems stuck between those who want to legitimately advance medicine and those who want a piece of the very rich pie. Writing about the \$1.4 billion settlement that Eli Lilly reached with the federal government, *ProPublica* notes that sales representatives acting on behalf of the company encouraged physicians to promote “off-label” uses of the Zyprexa drug. Since such uses are not approved by regulating like the Food and Drug

Administration, the sales reps and the doctors who did what they were told were in violation of federal law.²⁸

Lawsuits from whistleblowers – usually disgruntled former sales representatives, fed up with the cutthroat business practices – have highlighted other dishonest practices from companies in the pharmaceutical industry. For example, Allergan, the manufacturers of Botox, hosted over 200 doctors at an oceanfront resort in California who were paid \$1,500 to do nothing but listen to presentations. Allergan agreed to a government settlement for \$600 million and offered a misdemeanor guilty plea for misbranding Botox.²⁹

Elsewhere, sales representatives of Forest Laboratories leaned on doctors to prescribe Celexa and Lexapro under the guise of participating in a program where they would merely “observe” the doctors – who, in turn, were paid up to \$1,000 each for their participation. A subsidiary of Forest Laboratories pleaded guilty to felony and misdemeanor charges, and the company itself paid \$313 million in combined criminal and civil penalties.

Illegal Promotions and Public Disclosures

Similarly, Wyeth Pharmaceuticals – owned by Pfizer – was accused of hiring speakers on the basis of how often they prescribed one of the company’s drugs. Two former sales reps went on record as saying that the corporation’s management not only “exclude[d] speakers who did not promote [the drug]” but also rewarded those who did so with multiple speaking engagements and payments.

Wyeth Pharmaceutical’s method of dealing with dissenting doctors – those who had unfavorable or enthusiastic opinions about the drug – was to have sales representatives “counsel” the doctors on how they could treat the medication with greater favor.

Some pharmaceutical companies don’t even bother with the counseling. A complaint in 2008 against Cephalon accused the company of

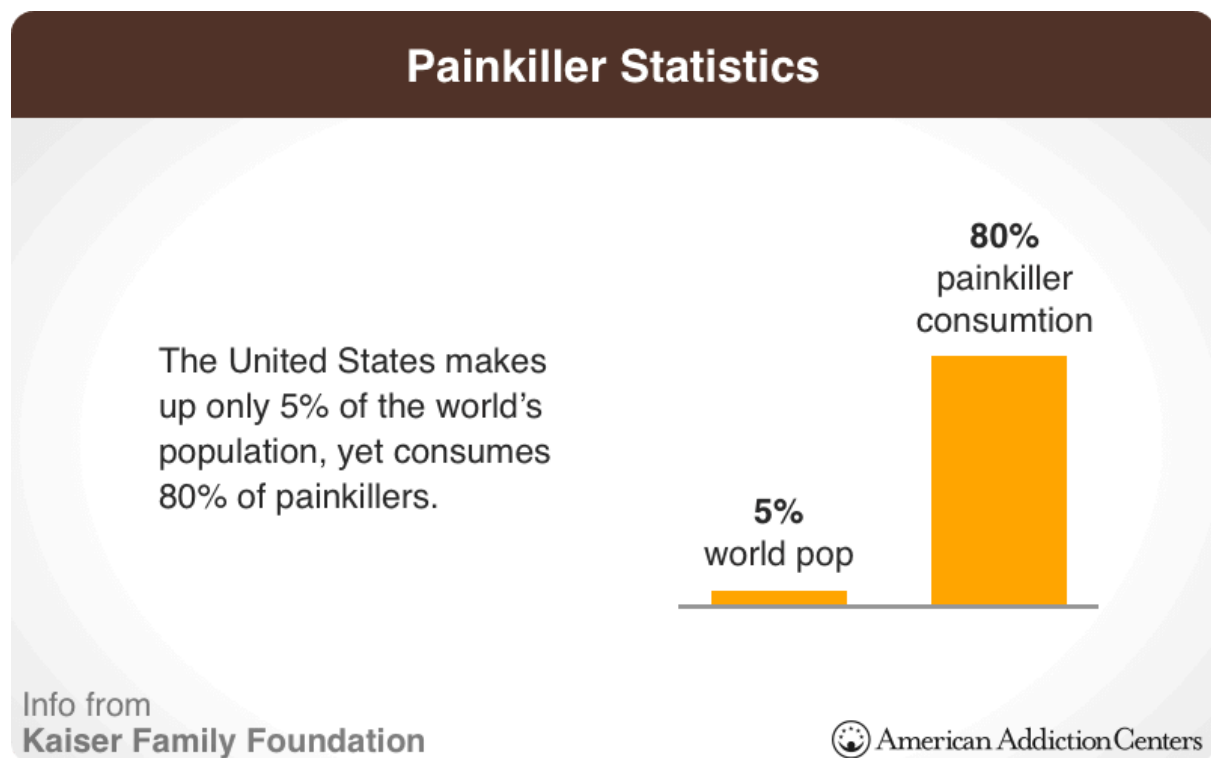
rewarding poor speakers, as long as they “heavily prescribed” the drugs produced by the company. Some doctors were paid to attend public speaking training sessions even though there was no plan to make the doctors actually

speak at seminars or gatherings. Other doctors were paid when there were no audience members in attendance. Even good public speakers were dropped by Cephalon if it was found that they did not write “substantial off-label prescriptions.” Cephalon pleaded guilty to a misdemeanor charge of selling misbranded drugs and paid \$425 million in fines. The terms of the settlement included Cephalon having to publicly disclose the nature and amount of payments it made to doctors.³⁰

Purdue Pharma and the American Opiate Epidemic

Big Pharma has raised a lot of eyebrows for the money it can throw at doctors and legislators, but perhaps the most serious effect it has had on American healthcare is the

epidemic of the overprescription of powerfully addictive drugs. A 2011 survey conducted by the Kaiser Family Foundation revealed that Americans aged 19-64 were prescribed an average of 11.9 prescriptions, and Americans 65 and up received an average of 28 prescriptions. The United States makes up only 5 percent of the world's population but consumes 80 percent of the painkillers in the world.



A staggering number of those painkillers bear the watermark of one pharmaceutical company. That same company started what *The Week* calls “the American opiate epidemic,” thanks to a relentless marketing strategy that downplayed the true nature of the drug being produced.³¹ In 1995, the Food and Drug Administration gave the nod to Purdue Pharma, a private, family-owned company in Stamford, CT, to produce OxyContin, the brand name of the generic form of oxycodone, a semisynthetic opioid. It took one year for OxyContin to generate \$45 million in sales. By the beginning of the following decade, sales passed \$1 billion; by the end of that decade, sales passed \$3 billion. In 2010, Purdue Pharma owned one-third of the painkiller market in the United States, all thanks to OxyContin.³²

To get to that point, Purdue Pharma had a lot of help. The company went from employing 318 sales representatives in 1996 to 671 in 2000. To better push OxyContin to doctors and “thought leaders,” those sales reps received yearly bonuses to the tune of \$70,000; some saw their bonuses pass \$250,000. In 2001, after OxyContin logged sales of \$1 billion, Purdue Pharma’s expenses on promoting the drug to doctors passed \$200 million. The company even created a list of doctors who, based on precedent, were likely to prescribe pain medication to their patients and actively pursued those doctors.³³

Fishing Hats, Stuffed Toys, and Coupons for Free Prescriptions

Between 1995 and 2000, Purdue Pharma hosted 40 “pain conferences” in resorts that catered to primary care physicians and doctors who specialized in cancer treatment. The company arranged for more than 2,500 physicians to deliver (paid) speeches and presentations at the conferences. In a single year (2001), Purdue put down \$4.6 million to advertise OxyContin in medical journals.

A Government Accountability Office report published in 2003 revealed that Purdue Pharma “distributed several types of branded promotional items” to doctors and physicians, including:

- OxyContin fishing hats
- Stuffed toys
- Luggage tags
- Music CDs
- Coffee mugs with heat activated messages

The company even created a program whereby doctors could distribute coupons to their patients for free, single-use OxyContin prescriptions.³⁴

The unbelievable sums of money paid off. OxyContin prescriptions in 2002 were ten times higher than those in 1997. To keep up with the ravenous demand, the FDA approved Purdue Pharma increasing the dosage per pill, doubling the 80 mg original to 160 mg.

The Truth behind OxyContin

All this masked an ugly reality: The effects of the OxyContin wore off much sooner than the magical 12-hour duration, a fact that Purdue Pharma knew very well. According to an in-depth report from the *Los Angeles Times*, Purdue Pharma knew about it when the drug was going through clinical trials in the mid-90s. When doctors started to prescribe shorter doses to ensure that their patients didn’t start to withdraw from their drug therapy, sales representatives – acting on orders from Purdue’s executives – instead encouraged (and incentivized) doctors to prescribe stronger doses. The *Times* explains that the key reason OxyContin enjoyed such market dominance in the crowded painkiller market was because of its promise of 12-hour relief. Take that away, and not much separates OxyContin from less expensive painkillers.³⁵

A deception on that scale couldn’t be covered up for very long, especially as more and more Americans started abusing OxyContin, stealing pills, and forging prescriptions, and unscrupulous doctors were more than happy to oblige. When the OxyContin became too much to afford, and the need to take more drugs became too much to resist, people turned to deadlier alternatives.

The National Institute on Drug Abuse reports that in 2001, around 2,000 people overdosed on heroin across the United States. By 2013, heroin claimed about 8,000 lives.³⁶ As the trade and death count of heroin increased, so too did the number of deaths related to overdosing on prescription opioids, like Purdue Pharma's OxyContin. There were 6,000 such fatalities in 2001; by 2013, there were 15,000.³⁷ The National Survey on Drug Use and Health discovered that 80 percent of heroin users started out on opioids, dramatically changing the demographics of drug use across the country.³⁸

The trail of death and misery led back to OxyContin, which led back to Purdue Pharma. In 2007, the Department of Justice initiated proceedings against Purdue in federal court, on charges of misleading doctors and patients by claiming that OxyContin was less likely to be abused than other forms of narcotics. Purdue admitted that they misbranded OxyContin as "abuse resistant" and paid \$600 million in fines – an amount that *Pacific Standard* magazine says "would have little effect on the company's revenue."^{39, 40} Even after three company executives paid \$35.4 million in individual fines, OxyContin still makes \$3 billion every year for the company. The Sackler family, which privately owns Purdue Pharma, is worth \$14 billion, amounting to the 16th-largest fortune in the United States.⁴¹

Is Big Pharma Going to Get Bigger?

In 2014, *ProPublica* wrote that the total amount that pharmaceutical companies have agreed to pay the Department of Justice in fines and penalties for fraudulent market practices, such as promoting medications for uses that violate the approval standards of the Food and Drug Administration, exceeded \$13 billion.⁴²

The colossal figure not only speaks to the severity and scope of the worst of Big Pharma, but also to the dizzying heights of the financial influence that the companies in the pharmaceutical industry wield. These companies can be individually docked in the hundreds of millions of dollars to even a few billion dollars, but still recoup those losses in a matter of weeks. Even as the corporations admit culpability and promise to do better next time, their products flood hospitals and pharmacies, medicine cabinets, and gym bags. Marketing blitzes and millions of dollars thrown at primetime commercial spots ensure that, for all the lawsuits and negative press, Big Pharma is not going to get smaller.

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How Big Pharma Is Corrupting the Truth About the Drugs It Sells Us

Remember how appalled we felt as a society when we discovered that, for so long, we had been mistakenly taking [Big Tobacco's word](#) that cigarettes are harmless? Rinse and repeat with [lobbyists for Big Alcohol fear-mongering about legal weed](#). And again and again with a panoply of consumer-level commodities and goods.

Nowadays we have all these familiar worries, but about our drugs and medications instead. It's become so bad that there's now reason to believe Big Pharma is also colluding to poison the well of scientific inquiry.

The truth is, there are many examples of private industry paying for positive press from the scientific community. When you look closer at our spending priorities as a nation, it's not entirely difficult to see why. As public funding for the sciences has fallen away, many scientists have had to pivot toward more consistent—and ethically fraught—sources of funding and stability as surely as politicians who, for want of public election funding, get buoyed by billionaires at [\\$100,000-per-plate fundraising dinners](#).

We'll take a look at case studies in a moment, but for right now, think about how important it is for us to be able to trust, at a minimum level, the products we invite into our bodies and our homes.

It's become common knowledge that the pharmaceutical industry is one of the most corrupt out there. This is a serious affront to justice that has gone on for far too long. The fight for consumer protections of all kinds can and must begin with health care, medicines, prescription drugs and medical devices. Here are the stakes.

The Erosion of Trust

In 2006, GlaxoSmithKline—the esoteric name for a ubiquitous diabetes treatment brand—took a victory lap after a lengthy [report in the New England Journal of Medicine](#) declared its Avandia medication to be the most effective of the three diabetes drugs tested.

Unfortunately for readers and patients, the extent of the report's bias was not as attention-grabbing as the headline and ensuing celebratory press releases. In fact, with the help of the FDA and renowned heart specialist Steven Nissen, the Washington Post found that GlaxoSmithKline directly funded the research itself. All 11 of the paper's authors [had received consultation fees](#), grants or another form of monetary compensation.

There may be no clearer example of conflicts of interest in the halls of science. Given the degree to which private money may have influenced the result of this scientific endeavor, we have little choice but to assume it did.

Even worse? The drug didn't merely fail to help patients cope with their illnesses, it actually raised their risk of heart attack. Avandia effectively doesn't exist anymore in the U.S., in part because GlaxoSmithKline was so busy trying to force two logical dots to connect that it didn't even pick up on all the collateral damage.

This is outrageous. Consumers shouldn't have to second-guess the medical professionals who are supposed to help us take care of ourselves.

The Fall of Accountable Science

Between 2011 and 2012, the New England Journal of Medicine published more than 70 “original studies” of newly FDA-approved and experimental drugs. [Of these 70-plus reports:](#)

- Sixty received direct pharmaceutical company funding.
- Fifty were written or co-written by a current employee of a pharmaceutical company.
- Thirty-seven had lead writers who had, at some point, received speaking fees or other compensation from the subject of the study.

Up until about the 1980s, the federal government was the primary financier of scientific research in the world of medicine. In the '60s and '70s, the federal government had a 70 percent share of scientific research. In 2013, that number [finally dropped below the 50 percent mark](#).

As you may have guessed, there is at least token legal oversight available for clinical investigations of new drugs in the form of FDA regulation. In addition to protecting the personal information of trial participants (patients), the FDA also maintains that [no drug may reach the investigation phase](#) until its effects—and its lack of harm—have both been documented in a lab setting. As you can likely tell, these protections no longer appear adequate.

It has become an open secret that most of the drugs the FDA concerns itself with [cannot be relied upon to greatly outperform placebos, or existing treatments, in a vast majority of cases](#). Moreover, the wholesale regulatory capture of the FDA has resulted in a situation where this vital public office [serves as a glorified rubber patent stamp](#) for protecting medicines as privately owned, profit-generating pieces of intellectual property.

The American People Are No Longer in Control of Their Scientific Destiny

A generation or so ago, the skill with which a nation pursued and made use of scientific knowledge was one of the chief metrics of its greatness. However, starting in the 1980s, the United States [took a decided turn away from public sector expansion](#). Reagan-era policies aimed to privatize government services in the name of balancing local and state budgets. Since then, the world has watched as Americans have continued to vote accountable government and transparent scientific study nearly out of existence by proponents of “small government” and the shifting of fiscal, bureaucratic and legislative power from the public to the private sector.

When corporatists boast of the rate of innovation in the private sector, they generally fail to mention [where the money came from](#) that makes all that innovation possible—or what America used to do with it instead. In truth, privatization does not necessarily lead to less government, as its proponents would like to believe. In many cases of privatized innovation, the government still plays a significant role along the value chain of innovation.

The difference, though, is that instead of the government being involved for the sake of oversight and accountability, profit-seeking privatized enterprises can lobby for the expansion of public funding just the same as those in the public sector would. Those private companies can then [skim off only the most successful ventures](#). It's simply another example of how the government continues to turn a blind eye to unethical, profit-mongering business

practices in the name of “trickle down economics,” which we know [have not worked in the past](#).

However, the winds of change seem to be shifting. For all our present social and political turmoil, we’re more aware of the problem than ever before. But before we can fix it, we must remember science is, like any other endeavor, a human institution.

Like a passionate grade-school teacher who can’t do her best work due to a lack of school funding, scientists of all stripes are, after all, human beings with their own biases, internal monologues, ideas, agendas and needs. Science is one of the most vitally important institutions we have right now. Most [Americans say it’s very nearly the only thing that matters](#) in the face of global, anthropocentric climate change, but it’s currently perishing from neglect.

Here is the silver lining: Though junk science seems to have a stubborn place in the spotlight and in our shared vocabulary, scientists are actively trying to turn the tables. Inspired in part by the fallout from the 2016 election, American scientists are [seeking political office at a brisk clip](#)—and being vocal about it, too.

Additionally, it seems that we are finally collectively beginning to wake up to the enormous disservices that Big Pharma has done our society. Throwing our support behind scientist-politicians could be one aid to the problem, but we also need to address the bigger issues at hand with how our medical knowledge is funded and who we can trust to provide us with real answers to medical questions.

Government oversight and funding are important aspects of that, and improved transparency regarding where we’re getting our “science” is something people [are finally starting to advocate for](#), and should continue to. With this two-part awakening in both the scientific and general community, we can only hope that we are, at last, reaching the end of the road for scientific illiteracy in the States.

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<https://deserthopetreatment.com/addiction-guide/drug-industry-trends/>

Distorting science in the COVID pandemic

I’ve lost all trust in medical research – the financial muscle of Big Pharma has been busy distorting science during the pandemic

Evidence that a cheap, over-the-counter anti-malarial drug costing £7 combats COVID-19 gets trashed. Why? Because the pharmaceutical giants want to sell you a treatment costing nearly £2,000. It's criminal.

A few years ago, I wrote a book called *Doctoring Data*. This was an attempt to help people understand the background to the tidal wave of medical information that crashes over us each and every day. Information that is often completely contradictory '*Coffee is good for you... no, wait it's bad for you... no, wait, it's good for you again,*' rpt. ad nauseam.

I also pointed out some of the tricks, games and manipulations that are used to make medications seem far more effective than they truly are, or vice-versa. This, I have to say, can be a very dispiriting world to enter. When I give talks on this subject, I often start with a few quotes.

For example, here is Dr Marcia Angell, who edited the *New England Journal of Medicine* for over twenty years, writing in 2009:

"It is simply no longer possible to believe much of the clinical research that is published, or to rely on the judgement of trusted physicians or authoritative medical guidelines. I take no pleasure in this conclusion, which I reached slowly and reluctantly over my two decades as editor of the New England Journal of Medicine."

Have things got better? No, I believe that they have got worse – if that were, indeed, possible. I was sent the following e-mail recently, about a closed door, no recording discussion, under no-disclosure Chatham House rules, in May of this year:

"A secretly recorded meeting between the editors-in-chief of The Lancet and the New England Journal of Medicine reveal both men bemoaning the 'criminal' influence big pharma has on scientific research."

"According to Philippe Douste-Blazy, France's former Health Minister and 2017 candidate for WHO Director, the leaked 2020 Chatham House closed-door discussion between the [editor-in-chiefs] – whose publications both retracted papers favorable to big pharma over fraudulent data."

"Now we are not going to be able to, basically, if this continues, publish any more clinical research data because the pharmaceutical companies are so financially powerful today, and are able to use such methodologies, as to have us accept papers which are apparently methodologically perfect, but which, in reality, manage to conclude what they want them to conclude," said Lancet [editor-in-chief] Richard Horton."

A YouTube video where this issue is discussed can be found [here](#). It is in French, but there are English subtitles.

The New England Journal of Medicine, and the Lancet are the two most influential, most highly resourced journals in the world. If they no longer have the ability to detect what is essentially fraudulent research, then... Then what? Then what indeed?

In fact, things have generally taken a sharp turn for the worse since the COVID pandemic struck. New studies, new data, new information is arriving at breakneck speed, often with little or no effective review. What can you believe, who can you believe? Almost nothing would be the safest course of action.

One issue that has played out over the last few months, has stripped away any remaining vestiges of my trust in medical research. It concerns the anti-malarial drug hydroxychloroquine. You may well be aware that Donald Trump endorsed it – which presents a whole series of problems for many people.

However, before the pandemic hit, I was recommending to my local NHS trust that we should look to stock up on hydroxychloroquine. There had been a great deal of research over the years, strongly suggesting it could [inhibit the entry of viruses](#) into cells, and that it also interfered with viral replication once inside the cell.

This mechanism of action explains why it can help stop the malaria parasite from gaining entry into red blood cells. The science is complex, but many researchers felt there was good reason for thinking hydroxychloroquine may have some real, if not earth-shattering benefits, in COVID-19.

This idea was further reinforced by the knowledge that it has some effects on reducing the “cytokine storm” that is considered deadly with COVID. It is prescribed in rheumatoid arthritis to reduce the immune attack on joints.

The other reason for recommending hydroxychloroquine is that it is extremely safe. It is, for example, the most widely prescribed drug in India. Billions upon billions of doses have been prescribed. It is available over the counter in most countries. So I felt pretty comfortable in recommending that it could be tried. At worst, no harm would be done.

Then hydroxychloroquine became the centre of a worldwide storm. On one side, wearing the white hats, were the researchers who had used it early on, where it seemed to show some significant benefits. For example, Professor [Didier Raoult](#) in France:

“A renowned research professor in France has reported successful results from a new treatment for COVID-19, with early tests suggesting it can stop the virus from being contagious in just six days.”

Then [research](#) from Morocco:

“Jaouad Zemouri, a Moroccan scientist, believes that 78% of Europe’s COVID-19 deaths could have been prevented if Europe had used hydroxychloroquine... “Morocco, with a population of 36 million, [roughly one-tenth that of the U.S.] has only 10,079 confirmed cases of Covid-19 and only 214 deaths.

“Professor Zemmourit believes that Morocco’s use of hydroxychloroquine has resulted in an 82.5% recovery rate from COVID-19 and only a 2.1% fatality rate – in those admitted to hospital.”

Just prior to this, a study was published in the Lancet, on May 22nd stating that hydroxychloroquine actually increased deaths. It then turned out that the data used could not be verified and was most likely made up. The authors had major conflicts of interest with pharmaceutical companies making anti-viral drugs. In early June, the entire article was [retracted](#) by Richard Horton, the Editor.

Then a UK study came out suggesting that hydroxychloroquine did not work at all. Discussing the results, Professor Martin Landray [stated](#):

“This is not a treatment for COVID-19. It doesn’t work,” Martin Landray, an Oxford University professor who is co-leading the RECOVERY trial, told reporters. “This result should change medical practice worldwide. We can now stop using a drug that is useless.”

This study has since been heavily criticised by other researchers who state that the dose of hydroxychloroquine used was, potentially, toxic. It was also given far too late to have any positive effect. Many of the patients were already on ventilators.

Then, yesterday, I was sent a pre-proof copy of an article about to be published in the International Journal of Infectious Diseases which has found that hydroxychloroquine...

...“significantly” decreased the death rate of patients involved in the analysis. The study analyzed 2,541 patients hospitalized among the system’s six hospitals between March 10 and May 2 and found

- *13% of those treated with hydroxychloroquine died while*
- *26% of those who did not receive the drug died.*^(ref)

When things get this messed up, I tend to look for the potential conflicts of interest. By which I mean, who stands to make money from slamming the use of hydroxychloroquine (which is a generic drug that has been around since 1934 and costs about £7 for a bottle of 60 tablets)?

In this case it is those companies who make the hugely expensive antiviral drugs such as Gilead Sciences’ Remdesvir – which costs \$2,340 (£1877) for a typical [five-day course](#) in the US. Second, the companies that are striving to get a vaccine to market. There are billions and billions of dollars at stake here.

In this world, cheap drugs e.g., hydroxychloroquine, don’t stand much chance. Neither do cheap vitamins, such as vitamin C and vitamin D. Do they have benefits for COVID-19 sufferers? I am sure that they do. Will such benefits be dismissed in studies that have been carefully manipulated to ensure that they do not work? Of course. Remember these words:

‘...pharmaceutical companies are so financially powerful today, and are able to use such methodologies, as to have us accept papers which are apparently methodologically perfect,

but which, in reality, manage to conclude what they want them to conclude,” said Lancet [editor-in-chief] Richard Horton.’

Unless and until governments and medical bodies [act decisively](#) to permanently sever the financial ties between researchers and Big Pharma, these distortions and manipulation in the pursuit of Big Profit will continue.

<https://drmalcolmkendrick.org/2020/07/05/distorting-science-in-the-covid-pandemic/>