

## Book Review

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**Charles Medawar and Anita Hardon**, *Medicines out of Control? – Antidepressants and the Conspiracy of Goodwill* (Amsterdam: Askant Academic Publishers, 2004). ISBN 90 5260 134 8. Paperback, 260 pp. Price £ 19.25/US\$ 34.50/Euro 27.50

Those who read and thought about the challenges of ‘*Power and Dependence*’ by Charles Medawar (1992: ISBN 0 946448 04 3), will by now be hungrily anticipating this new feast of information and controversy about drug regulation, marketing, management, use and social commentary.

In some ways, this new book can be seen as a sequel to *Power and Dependence*. The issues largely remain the same, but, a decade on, we are presented with the phenomena of antidepressant use/misuse and dependence instead of benzodiazepines to excite our critical appetites.

The first chapter is a starter, almost in the form of an executive summary. The next taste of the new book reminds us strongly of the former in its coverage of the history of psycho-active drugs from opium onwards. First, we found drugs that altered the way the brain works; we found they were good; we found more ways to use them; we found there were problems, particularly dependence; we used the drugs more cautiously; we found new ones without the problems of the old ones; we found they were good . . . . So the cycle has gone from opium to barbiturates, to benzodiazepines, to now – antidepressants.

Sadly, the chapter on ‘Drugs to Defeat Depression’ does not give us the real picture of the disease depression – so damaging to individuals that they seek relief through suicide. Patients riddled with anxiety are wretched, but depression is a real killer. Not to recognise this more fully, and the need to alleviate severe depression even when the treatment may carry risks, is a lack of balance in my view. The authors imply that the SSRIs are no better than the older tricyclics, and indeed there is evidence that at least in some studies and patients, they may be worse. On the other hand, that does not mean that they are completely ineffective, and many studies attest to their lower rate of unpleasant adverse effects, compared with the tricyclics. My point here is not to argue about the evidence quoted, but rather to point out that the effectiveness and risk balance of the various drugs must be set against the risks of the disease, in the case of depression, considerable. This is the essence of both regulatory and clinical decision making and deserves more discussion in the book.

It is even more important to be able to consider the serious indication of depression, vis-à-vis the many other indications which have been promoted for antidepressants, which may carry much less intrinsic disease risk. Then the risks of treatment are proportionally larger and need different consideration in the potential overall benefit to the patient, even if the drug is effective in all these disorders.

With this minor quibble out of the way, the remainder of the book stands up well to critical scrutiny. Naturally, there may be some selection of references and annotations used, but there is an abundance of authoritative material to support the main contentions of the book. From whatever standpoint one may consider the role of the pharmaceutical industry in health care, the material is fascinating. This is because it is a no-holds-barred critical overview of the interactions between the industry, international organisations, regulators, academia, health professionals, consumers and the media. Moreover, it deals with the complexity of trying to balance the commercial imperative of the pharmaceutical companies and their need to find ‘block busting drugs’ at a time of increasing investor pressure, mergers and a slowing down of innovatory drugs in the development pipeline. Intensified marketing, lobbying and further mergers are

expedient commercial answers. The authors present the development of these activities and particularly focus on direct-to-consumer advertising, influencing key influential academics, health professionals and politicians.

The medicalisation of a number of life's emotional and psychological challenges, at least in part, the authors claim, has been a result of trying to find ever greater uses for the anti-depressant drugs. Here one must say that nearly all of us collude in this as we all seem to expect more and more from science and technology in making our lives easier, if not happier.

This book is born at the time of ongoing controversy about the safety of SSRIs, and particularly their use in young people. In the United States the debate involves major health institutions and politicians as well as the public. Questions about how 'good' the scientific evidence is for effectiveness and risk; who should decide what is 'good'; what evidence has been left out of consideration or even hidden; and much more, are the subjects of media scrutiny. *'Medicines out of Control'* adds interest to all those following this current major US concern: there is much that is critical said about the standards of scientific studies and their analysis, as well as the way in which spontaneous reports of suspected adverse reactions are reported and considered.

The book focusses mainly on regulatory and industry activity in the UK because that is familiar territory, but there are examples from elsewhere around the world. Particularly one is impressed at the personal battle one of the authors had in trying to get information from, mainly, the UK authorities and how that eventually resulted in the release of 'yellow card' information for external analysis. There was even a major television documentary on the programme *'Panorama'* dealing with problems from the SSRIs and patients' personal experiences of adverse effects, as well as the views of some experts. The release of spontaneous report information for such an independent review is a novel and welcome trend from the secrecy with which most regulatory agencies handle such material. It seems good that any group with grave responsibilities to the public and health should be open to critical review from time to time. On the other hand, one must wonder about whether the short term impact, on vulnerable patients, of judgement-by-media is overall good or bad. One can only say that it would have been much better if all authorities were more accountable to critical external scrutiny: if they are right they should be able to convince others of that.

The book ends with a 'Discussion' section. The authors say that what happens with SSRIs happens with all other major branded drugs, that is, the cycle of regulatory control, marketing and prescription. They do not think we get value for money from our medicines and say that some of the world is over-medicated and other parts under-medicated. The cost of developing one drug is about the same as the whole African drug market in 2002, that is about US\$ 5 million! What must be done? Get rid of: institutional secrecy, rampant conflicts of interest, systematic manipulation of 'scientific' evidence, perversion of understanding, official indifference to the public concern, dominance of trade imperatives and over-promotion of disease awareness, and some more.

When you have devoured this book, and you absolutely must, see how far you think they have made their case. The evidence is there for the prosecution, and is convincing. Will the defence open its case, please?

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