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Bad Pharma by Ben Goldacre

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Book Review

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If you are not furious by the time you have finished reading Dr Ben Goldacre's *Bad Pharma*, you have not read it correctly. This book systematically breaks down everything that is wrong with the pharmaceutical industry and its interface with regulators, journals, clinicians and patients. Evidence-based medicine is a key part of the medical curriculum; it guides our clinical decisions and informs our national guidelines. However, there are flaws in the system that are not openly discussed and in this book, Goldacre tears the lid from the Pandora's box of Big Pharma with shocking clarity. What's more, the facts are delivered with wit, as opposed to the soporific sermon that medical students may be used to in the lecture theatre.

A brief introduction familiarises us with how drug development is supposed to work, framing our expectations against the reality that he will later discuss. This section makes it clear from the start: this book can be read by anyone and is relevant to everyone.

We then take an in-depth look at the murky world of missing data. With sardonic lucidity, Goldacre sheds light on the tendency of unflattering trial data to go unpublished and distort the picture presented in the available academic literature. Here, the mechanisms put in place to prevent this problem are shown to have failed, signalling a strong need for change. As the author argues, missing data leads to misinformed clinical decisions and "avoidable suffering and death".

Regulators – the presumed guardians of healthcare – are then put to shame by a discussion of their dodgy practices and suspicious opacity. Much that should be in the public domain is sequestered away. For medics, this section overviews how drugs should be regulated – from trial to widespread clinical use – and what policies ought to be in place to ensure this.

The chapter *Bad Trials* could accompany any undergraduate epidemiology course, outlining the dubious tactics employed to exaggerate the positive effects and



downplay the negative consequences of drugs. It is widely taught that randomised controlled trials provide the most substantial evidence but strategies such as stopping trials early or the use of surrogate outcomes are less well known.

You may think "how is this relevant to me? I'm not interested in academia or industry". In spite of this, academia and industry are interested in you and what you prescribe. The very fact that *Bad Pharma's* longest chapter is devoted to marketing techniques used by industry is a testament to the severity of its influence. From the clandestine behaviour of drug reps to the widespread use of ghostwriters, we see that the pharmaceutical industry's marketing schemes are inherently corrupt. Recently, I witnessed my first "drug lunch", where attractive and charismatic

drug reps provide a fancy lunch as a pretext to deliver a suspiciously one-sided presentation. Having finished *Bad Pharma* the day before I was ready to scrutinise every detail for any sign of bias. I didn't have to: it was obvious and *Bad Pharma* made it that way.

Goldacre's fiery rhetoric may put off some readers. However, I believe the strength of his condemnations are in proportion to the issues outlined. These are dangerous practices being discussed.

After all, the text is not all fire and brimstone. Each chapter concludes with a "what can be done?" section, serving as a concise list of ways to move forward. Despite Big Pharma's assertions, these problems are present even now and change must happen. Medical students and doctors can form part of this change and I strongly recommend looking up alltrials.org to see what you can do.

Overall, *Bad Pharma*, despite its clear agenda, is a rigorous and balanced piece of work. With true epidemiological poise, Goldacre uses the best evidence available to decry the worst aspects of drug development. Meanwhile, he maintains that the collaboration between clinicians and industry is valuable and necessary. This book provides a comprehensive analysis of the current state of the pharmaceutical industry and evidence-based medicine, forming a vital part of the doctor's toolkit.

