

## *Discovering the Politics of Health*

I became involved in the health issue mainly because of a close friend of mine. Dr. John Richardson was an MD who practiced general medicine up in the San Francisco area. And one day he told me that he was having trouble with the medical authorities because he was using a substance in the treatment of cancer which was not approved by the AMA or the FDA in this case. And even though he was having marvelous results with it, better results than anything he had ever tried in his practice, they had told him in effect, "Stop using it or you're going to lose your license." And he had a terrible dilemma because his Hippocratic Oath was to save lives; that was his first obligation. And to preserve his licence seemed to be secondary to him. He was a very principled man.



I said to John, "Hey but look, my business is communication so let me dig into this, give me your papers, give me your notes, educate me a little bit and I'll produce a little documentary film and we'll explain the truth and then the opposition will go away when they understand what the truth really is." Well that's how naive I really was. I had no idea how much voltage was in the wire I was about to grab.

In this field, in particular the science of cancer therapy, wasn't nearly as complicated as the politics of cancer therapy. It wasn't an issue whether something was effective. It didn't matter whether it worked. It didn't matter whether you were saving lives. The important thing; was it approved? Did it go through the political process? And then you find out that the political process is dependent largely upon the economic process. Who's involved? Who's making a buck on this thing? Who is in control of the industry? And wow, I had no idea what I was getting into.

I can speak of the American medical profession, it was captured. It was totally captured in 1910 by the pharmaceutical industry. From that point forward the doctors of America were trained in how to prescribe drugs. Who was paying the bill? The pharmaceutical companies and so therefore the curricula of the great medical centres where the doctors get their medical training has always been skewed in the direction of drugs and drug therapy.

Prior to 1910 the condition of medical excellence if you want to call it that, the medical professionalism in the United States, was at a very low level. In those days it would be possible to get a medical diploma by mail. And just about anybody who really wanted to, could hang out the shingle and say, "I'm a doctor," and they could treat people. And there was a lot of quackery out there. I might say parenthetically however, there's a lot of quackery out there today and some of them have the MD degrees but nevertheless let's just take it straight. There was quackery and this is certainly not anything to be defended. There was a low level of medical knowledge.

So everyone knew this, or a lot of people knew it in congress anyway and there was a lot of pressure, political pressure, for medical reform in America. But nobody wanted to fund it. I mean medical reform, whatever that means, that somehow it means money. If you're going to reform something you've got to finance the reform. Well it just so happened that the people who were most heavily invested in the pharmaceutical industry, people like the Carnegies and the Rockefellers, had tax exempt foundations that were practicing what I call in my book, "efficiency in philanthropy". It's not really what I call it; I borrowed that phrase from one of the original designers of philanthropy in those days. His name was Ivy Lee. And then his trade was picked up by a fellow by the name of Fred Gates. And these people were like public relations experts and they were hired by the tycoons of the period like Carnegie and George Pillsbury and John D. Rockefeller to improve their public images.

And so people like Ivy Lee and Fred Gates came up with what they called "efficiency in philanthropy" and their formula was alright here's what you do. You give away large amounts of money. You've got plenty of that so if you give away a \$1 million or \$2 million you'll hardly notice it but to the average person it's a huge donation. So you get a lot of publicity on being a great philanthropist. But don't just give it away with no strings attached to it; give it away in a certain fashion so that it brings money back to you. And that's what the efficiency formula was all about. And what they would normally do — I'm digressing for a moment here but it's interesting I think this part of the history — this was the origin of the matching funds formula. They used to just give away the money but then Fred Gates said, "No, no don't just give it away. Give away half of it. Get the community involved. Tell them that you will match dollar for dollar. Every dollar that they can raise from the community you will put a dollar in."

Now that way you still get your name on the top of the library door or the hospital door, it's your project and you get all the publicity for it but you only pay half as much. And not only that you get the community involved and they're out there ringing doorbells and doing mailings and everybody feels that they're part of your project and they feel that they're your partner. And they have this great feeling of camaraderie with you and on and on and on. So it's a business you see. Raising money is a business. And this all originated in those days.

And so the formula for efficiency in philanthropy was applied to taking over the medical

schools. All they had to do was to finance a great study to show how bad medical education was in America which was easy to do because it was in bad shape. So they hired a fellow by the name of Flexner, Abraham Flexner. And he was working at the time for the Carnegie Foundation and he travelled around America and got the data together and published what was called the Flexner Report. And you'll find this in any of the textbooks of the period about the development of medical education.

The Flexner Report said, "Surprise," medical education was in a low state and needed to be reformed. Well having then delivered the Flexner Report in the academic community and in the Halls of Congress now the great philanthropists came forward and offered money to reform medical education in America. Demonstrate the need then offer the solution. So they did. They offered millions and millions of dollars to the medical schools in America. There were dozens of them that would accept their money with the strings attached. That they have some voice in how the universities or the medical schools would then contour the curricula for medical education. And of course the universities or medical schools that accepted the money are the ones that we have today as the great leaders in medical education. They had the money. They were able to build buildings and hire teachers with great credentials and bring in the equipment for the laboratories and all of that. The ones that rejected the money have disappeared. You don't hear about them anymore. They're gone.

The pharmaceutical industries indirectly, through the tax exempt foundations which were mutually controlled by the same financiers, were able to capture control of the medical schools. In every case the schools that took the money also took with the money people who were put on the boards of directors of the universities and the medical schools. These were Abraham Flexner and his brother Dr. Simon Flexner and a certain group, there were about five of them all together, and three of them always showed up in the same positions with all of the medical schools. And they saw to it that with the money came the control and with the control came a contouring of the curricula so that now from that point forward all of the doctors getting their training would learn about drugs, drugs and more drugs. And that is how it came to pass.

One of the most perplexing questions that people have is when they find out for the first time that there are therapies that are indeed very effective and they find out that they're not available; they're illegal as a matter of fact. The question is, "Why? If these things really work why doesn't my doctor know about them or if he does know about them why cannot he get them and why cannot I get them?" And the answer to that question is very simple and very logical when you think about it. We have accepted the idea that it is the function of government to protect us. This is kind of a mindset that's been gradually growing among Western Civilization for perhaps the last century; that people are not really responsible for themselves; it's the government's role to take care of them. And in that context we have the thought that the government agencies — in the United States it's the Food and Drug

Administration, the FDA — it's their job to take care of us in this field of medicine. They're supposed to tell us whether this is good or acceptable or whether it's quackery or whether we're allowed to have it. We're like little children and we look to the government to tell us.

So we've allowed governments to have the power, the legal authority, to control the field of medicine and to determine at that high level whether or not a therapy can be allowed. And the assumption is that these are all good people running these organizations and they have no hidden agendas. They're not subject to financial flattery or anything like that, that they're all good people and great scientists and so we can trust them. And this process of getting all the way through these tests in today's terms never goes less than \$20 million and in many cases it'll cost you over \$100 million and in some cases \$200 million to go through that process. Now who can afford \$200 million?

If you were to discover something that was growing in your backyard and you said, "This stuff really works. I don't know why it works but look, it's curing cancers," and you tried to give it to your neighbour you would go to jail because you see you're prescribing or giving, administering, an unapproved substance. And you say, "Well I'll get it approved." No you're not going to get it approved unless you have \$20 million that you are ready to just spend on the project. That means that automatically the only companies, the only people, the only entities in the world, that can ever get an approved substance are those that have the \$20 million to spend or \$200 million depending on where you are in the spectrum. That means the large pharmaceutical companies.

So these laws have effectively blocked everybody out of the pattern except the very large, well-funded pharmaceutical companies. They now have a monopoly on all of these drugs for this very reason. Supposedly because it's to protect us you see. But really it's to protect the large pharmaceutical companies. Beyond that no large pharmaceutical company is going to take your weed that you found in your backyard and have it tested because if they did sell it they couldn't patent it. Anything that grows in nature, anything that's found naturally, cannot be patented. It has to be a manmade concoction before it can be patented. So why would even a large pharmaceutical company spend the \$200 million or whatever it takes to prove that something growing in everyone's backyard is effective when they couldn't patent it and they would never get their money back.

And that is the reason that anything found in nature regardless of how effective it may be will never be patented and therefore it will never be approved and therefore it will always be on that list, that horrible list they tell us, "This is an unapproved cancer therapy."