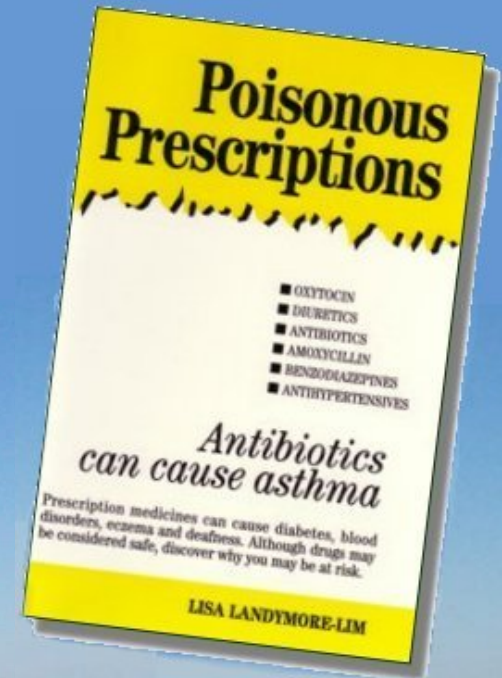


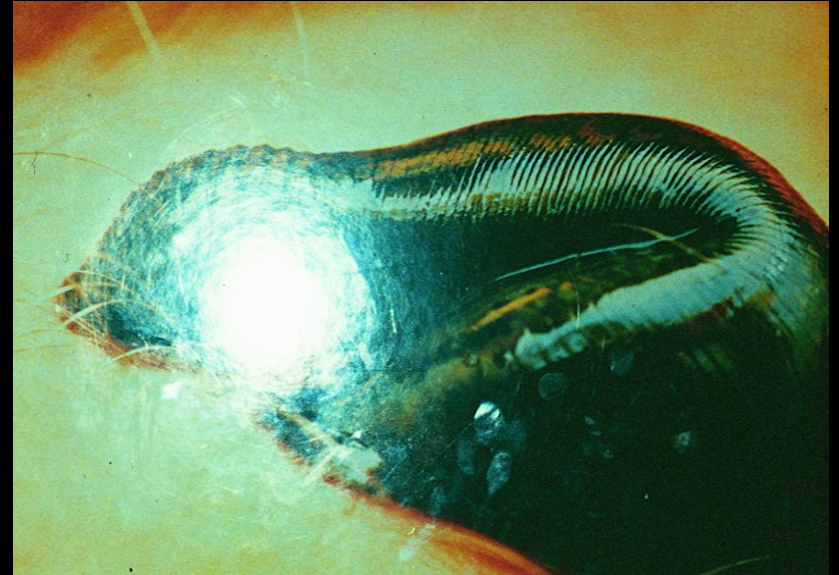
Poisonous Prescriptions

“Better health comes
from within.”



Tambourine Mountain, Queensland, Australia

Poisonous Prescriptions



A leech sucking blood from an arm.

The medical use of leaches died out during the 1930's.

Poisonous Prescriptions



Women collecting leeches from a river

Poisonous Prescriptions

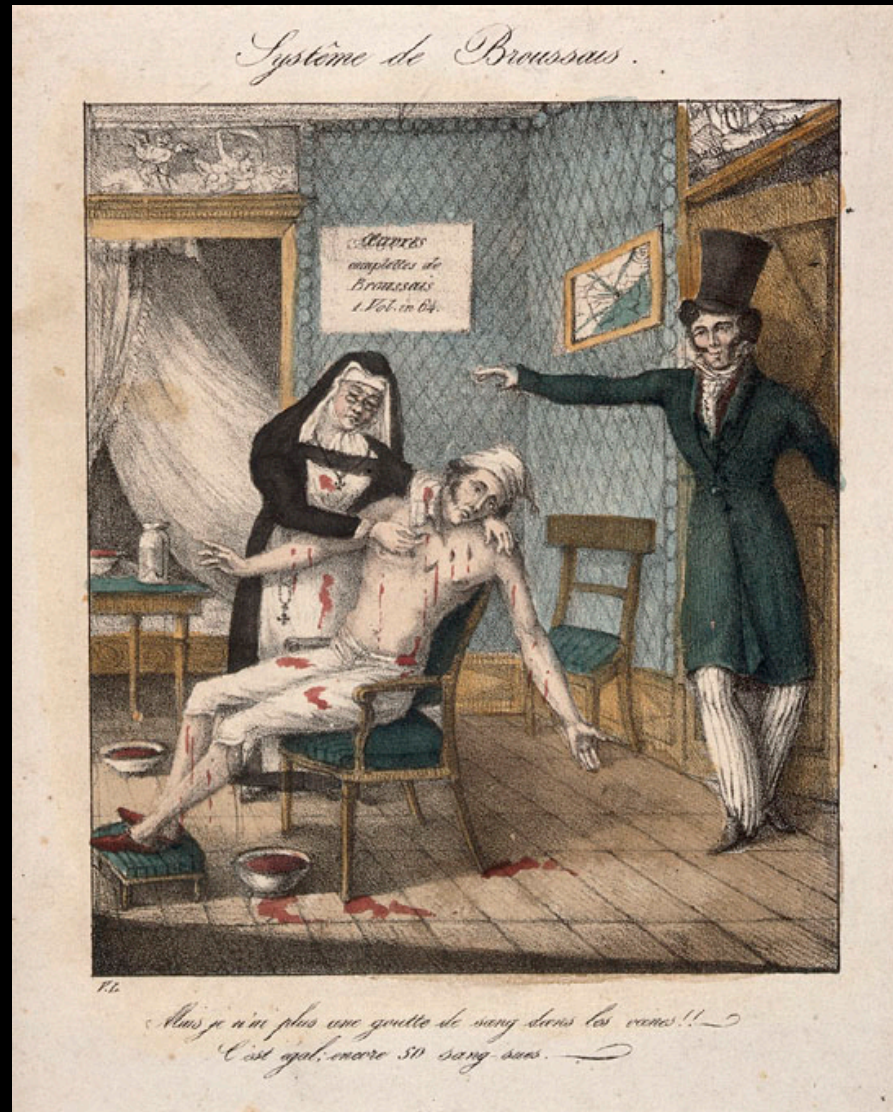


Porcelain leech
receptacles



Glass and metal leech
cage

Poisonous Prescriptions



Blood-letting

Poisonous Prescriptions



Morphine and opium were prescribed for colds and flu.

Poisonous Prescriptions



Remedies in a
doctor's bag:

Caffeine
Strychnine

Poisonous Prescriptions



Arsenici Preparatio

Poisonous Prescriptions

Mercury Cyanide Merck.

Dose: $\frac{1}{8}$ — $\frac{1}{2}$ grn., in solut.—**EXTERN.** (gargle) 1:10000.

Mercury Imido-succinate,—see MERCURY SUCCINIMIDE.

Mercury Iodide, Red, Merck.

MERCURY BINIODIDE.—**Dose:** $\frac{1}{8}$ — $\frac{1}{4}$ grn., in pills.

Mercury Iodide, Yellow, Merck.—U. S. P.

MERCURY PROTO-IODIDE.—**Dose:** $\frac{1}{2}$ —2 grn. **CAUTION:** Never prescribe this with a soluble iodide, since mercury biniodide (highly poisonous) is formed!

Mercury Oxide, Black (Hahnemann), Merck.

HAHNEMANN'S SOLUBLE MERCURY.—Grayish-black powd.; decomposes on exposure to light.—**Dose:** $\frac{1}{4}$ —3 grn.

Mercury Oxide, Red, Merck.—U. S. P.—Levigated.

Not used internally.—**Preparation:** Oint. (10%).—**INCOMPATIBLES:** Chlorides.

Mercury Oxide, Yellow, Merck.

Not used internally.—**Preparation:** Oint. (10%).

Mercury Oxycyanide Merck.

White, cryst. powd.—**SOL.** in water.—**Antiseptic.**—**USES:** *Extern.*, diphtheria, erysipelas, and skin diseases; said superior as antiseptic dressing to mercuric chloride because more active as germicide and less easily absorbed.—**APPLIED** in 0.6% solut. to wounds and in surgical operations.

Mercury Salicylate Merck.

White powd.; about 50% mercury.—**SOL.** in solut. of sodium chloride, dilute alkalis.—**USES:** *Extern.*, chancre, gonorrhea, and venereal affections; $\frac{1}{2}$ powd. or oint. *injection* in urethra, 1—5% water.—Reported easily borne by the stomach, and to produce no salivation.—**Dose:** $\frac{1}{2}$ —1 grn.

Mercury Succinimide Merck.

MERCURY IMIDO-SUCCINATE.—White powd.—**SOL.** in 25 parts water; slightly in alcohol.—**Antisiphilitic.** *Alternative.*—Said to be free from disagreeable local and secondary effects.—**Dose:** $\frac{1}{2}$ grn., hypodermically.

Mercury Sulphate, Basic, Merck.

MERCURY SUBSULPHATE; **TURPETH MINERAL.**—**Dose:** *Emetic*, 2—5 grn.; *alterative*, $\frac{1}{4}$ — $\frac{1}{2}$ grn.; in pills or powd.

Mercury Tannate Merck.

Greenish-gray powd.; about 50% mercury.—**Antisiphilitic.**—**Dose:** 1—2 grn., in pills.

Mercury-Ammonium Chloride Merck.—U. S. P.

WHITE PRECIPITATE; **AMMONIATED MERCURY.**—Not used internally.—**Preparation:** Oint. (10%).

MAT. MED.

PART I.

Arsenic Bromide Merck.

Colorless, deliquescent prisms; strong arsenic odor.—**SOL.** in water.—**USES:** Diabetes.—**Dose:** $\frac{1}{60}$ — $\frac{1}{15}$ grn.—**MAX. D.:** $\frac{1}{2}$ grn.—**ANTIDOTES:** Same as arsenous acid.—**INCOMPATIBLE:** Water.—**CAUTION:** Keep well-stoppered!

Arsenic Chloride Merck.

Colorless, oily liq.—Decomposes with water.—**SOL.** in alcohol, ether, oils.—**Dose:** $\frac{1}{60}$ — $\frac{1}{15}$ grn.

Arsenic Iodide Merck.—U. S. P.—Pure, Cryst.

Dose: $\frac{1}{60}$ — $\frac{1}{15}$ grn., in pills.—**MAX. D.:** $\frac{1}{2}$ grn.—**INCOMPATIBLE:** Water.—**CAUTION:** Keep from air and light!

Asafetida.—U. S. P.

Dose: 5—15 grn.—**Preparations:** Emuls. (4 per cent.); Pills (3 grn.); Tr. (1:5).

1899

July	Aug.	Sep.	Oct.	Nov.	Dec.
1	1	1	1	1	1
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28	28	28	28	28	28
29	29	29	29	29	29
30	30	30	30	30	30
31	31	31	31	31	31

A READY-REFERENCE POCKET BOOK

FOR THE

PRACTICING PHYSICIAN

CONTAINING

NAMES AND CHIEF SYNONYMS, PHYSICAL FORM AND APPEARANCE, SOLUBILITIES, PERCENTAGE STRENGTHS AND PHYSIOLOGICAL EFFECTS, THERAPEUTIC USES, MODES OF ADMINISTRATION AND APPLICATION, REGULAR AND MAXIMUM DOSAGE, INCOMPATIBLES, ANTIDOTES, PRECAUTIONARY REMARKS, ETC., ETC., — OF THE

CHEMICALS AND DRUGS USUAL IN MODERN MEDICAL PRACTICE

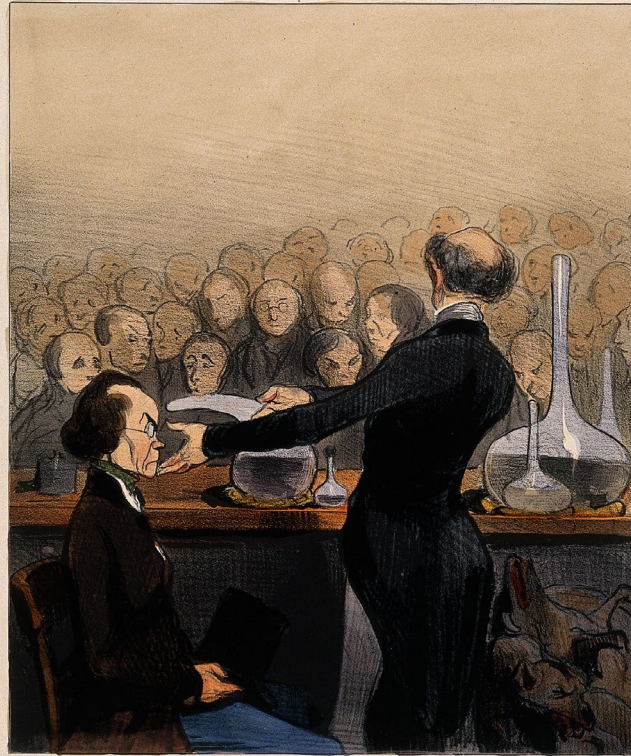
Compiled from the Most Recent Authoritative Sources and Published by

MERCK & CO., NEW YORK

Poisonous Prescriptions

ACTUALITÉS.

58



Cher Albert gal. Vero-Podai.

Sup. L'Album - C^{te}

L'AMITIÉ D'UN GRAND CHIMISTE. N'EST PAS UN BIENFAIT DES DIEUX.

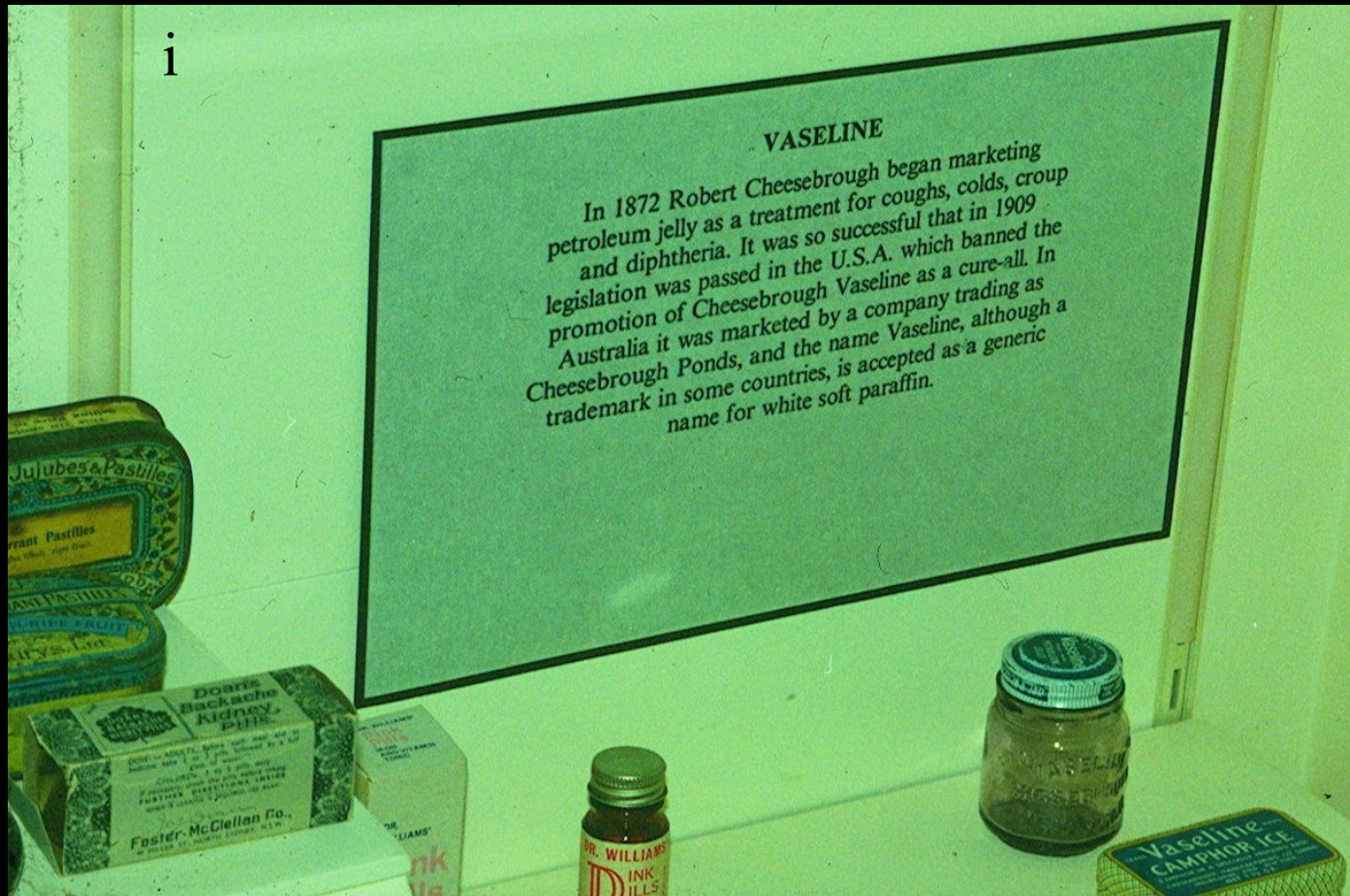
Je suis tellement sûr de mon fait, que maintenant, si vous le desirez, je vais empoisonner mon ami intime, M^r Coquardeau, et je retrouverai de l'arsenic dans le verre de ses lunettes.

Se Vend Chez Bouvier & Robert des Deuxiers du FIGARO de la CARICATURE & du CHARIVARI du Croissant N° 16.

Poisonous Prescriptions

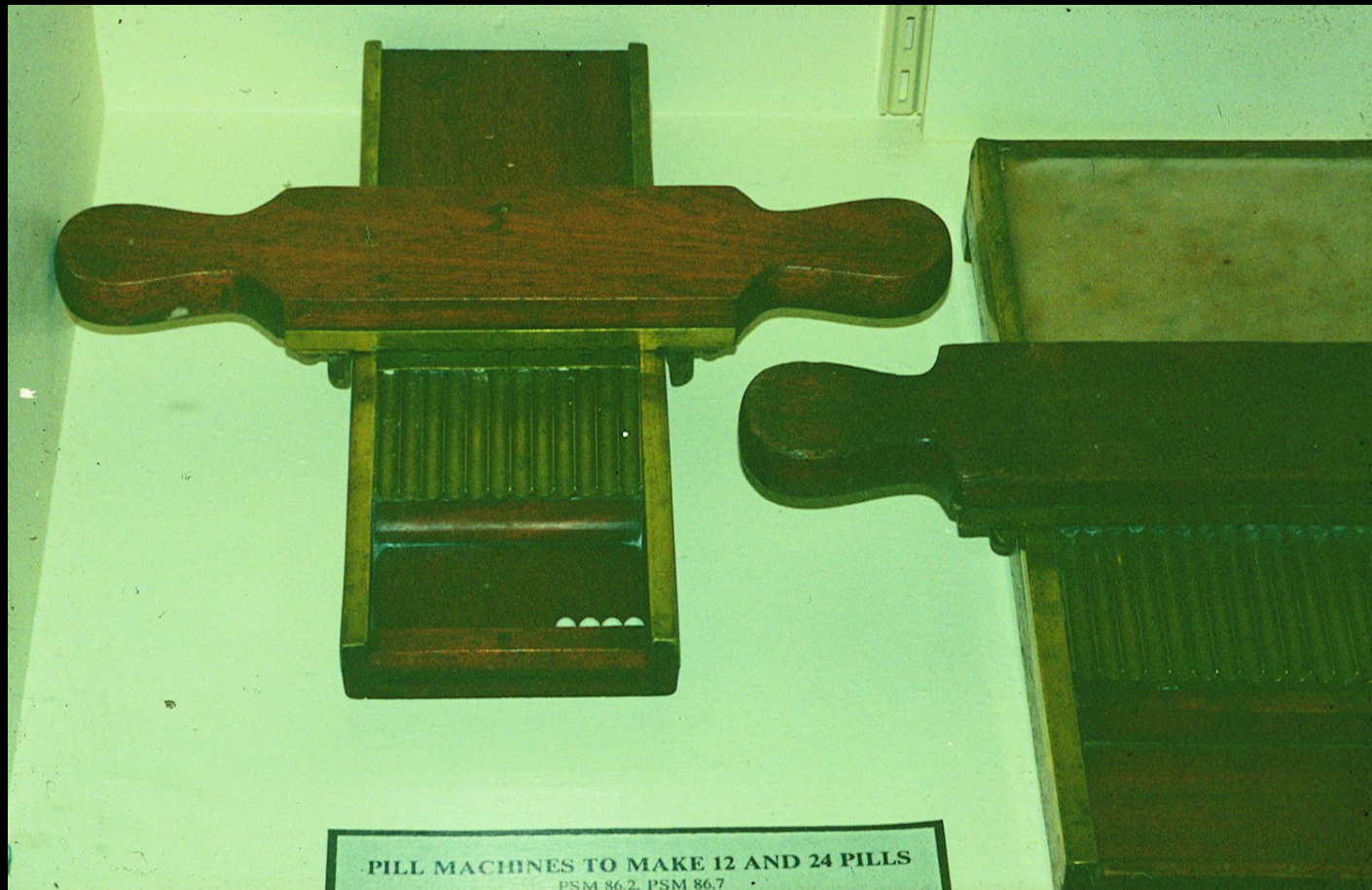


Poisonous Prescriptions



Vaseline was inappropriately marketed as a treatment for coughs and colds

Poisonous Prescriptions



Pill making machines to produce 12 or 24 pills
at one time

Poisonous Prescriptions



Modern day Rx



Penicillin in the making

Poisonous Prescriptions

Two people are admitted to the casualty department of a hospital suffering from nausea, vomiting and diarrhoea.

One, who ingested mercury, is said to be suffering from poisoning; the other who took an antibiotic, is said to be showing an allergic reaction.

In the first case the blame is put on the chemical, in the second, on the patient.

Lisa Landymore-Lim

“There will inevitably be drug disasters in the future; some will underline how subtle the unwanted effects of drugs can be – and with others it will seem the problem was right under our noses all the time.”

Charles Medawar, London
1992.

(Power and Dependence –
Social Audit on the Safety of
Medicines)

Poisonous Prescriptions

ARSENIC

Originally used internally as solutions or externally as ointments.

Symptoms of ***poisoning*** may include: Sore mouth and throat

Constriction of the throat

Inflammation of the conjunctiva

Muscle aching and weakness

Watery or bloody diarrhoea

Intense thirst and cramps

Wide range of blood disorders

eg. leucopenia, thrombocytopenia

Arsenic is no longer recommended for therapeutic use.

MERCURY, STRYCHNINE, MORPHINE and OPIUM were originally readily available for use by even babies.

Poisonous Prescriptions

SIDE-EFFECTS OF PENICILLINS

Eczema (dermatitis), Exfoliative dermatitis

Skin eruptions of various types

Fever

Blood disorders eg. neutropenia, leucopenia

Kidney damage

Albumin or blood in urine

Arrestation of bone marrow growth

Arthritis

Anaphylaxis: bronchoconstriction with severe asthma, or abdominal pain, nausea and vomiting, hypotension and possible death.

Poisonous Prescriptions



Poisonous Prescriptions

ASTHMA SYMPTOMS DOUBLE IN DECADE

"British experts said that although genetic factors were important...short period in which increases had occurred...suggested that *environmental* influences had been mainly responsible."

(BMJ 1994)

Poisonous Prescriptions

ASTHMA

Changes in living standards such as brick houses without under-floor ventilation, declining family size, prevention of viral infectious diseases, pollution and the dust-mite have been speculated by some as causing asthma.

Some such as Professor Phelan (Royal Children's Hospital, Melbourne) doubts the living standards hypothesis. Asthma rates rising whilst pollution levels falling and no dramatic change in living standards in Victoria during 1964-91 when rate in Victorian children rose from 11% to 24%.

Research indicates that environmental agents cause asthma

Poisonous Prescriptions

ASTHMA: Trigger agents/causes...

Chemicals in paints, plastics, glues

Enzymes in detergents

Dusts from tea, coffee, cereals

Glutaraldehyde – antiseptic

Azodicarbonamide – foam plastics

ANTIBIOTICS

Poisonous Prescriptions

Herald Sun, Friday, August 5, 1994

Scientist blames asthma on drugs

ANTIBIOTICS might cause asthma and insulin-dependant diabetes, a scientist has claimed.

Dr Lisa Landymore-Lim, a British chemist who has specialised in immunology and biomedical chemistry, also claims in her book, *Poisonous Prescriptions*, that some antibiotics are toxic to the ears and can cause hearing loss.

National Asthma Campaign spokesman, Monash University medical lecturer Dr Michael Abramson said he thought it was extremely unlikely.

He said people who were occupationally exposed to powder antibiotics which were inhaled — such as doctors, nurses and manufacturers — could become allergic to antibiotics and some could develop asthma.

"She is putting forward a hypothesis but most medicos would be sceptical although perhaps studies should be done," he said.

Poisonous Prescriptions

OPINION • OPINION • OPINION • OPINION • OPINION

ARE WE HELPING THE ASTHMA EPIDEMIC?

By scientist and author of *Poisonous Prescriptions*, Dr. Lisa Landymore-Lim (BSc., DPhil)

The usual official line to concerns raised about a chemical that may have disastrous consequences on health, is that monitoring systems are operational and there is not a problem. A study of the history of medicine when limbs were once amputated and cleaned with the same sponge that was sitting in a bucket of water and had been used on several previous patients; the common use of mercury, arsenic, strychnine and opium before it was realised that they caused more health problems than they cured; the addictions caused by morphine which was even used for babies (*Mrs Wintona's Soothing Syrup*) who were weeping; and blindness in premature babies who were given oxygen therapy, reveals that since scientists and doctors are not infallible, iatrogenic (doctor-induced) health problems can result from medical practices.

Often with the availability of a new drug or technique which is being heavily marketed by some of the wealthiest companies in the world, there are many eager professionals and patients ready to offer to try it out. Take radiation for example, just this century, following the introduction of X-rays, one doctor who was keen to attempt to make his secretary more attractive, irradiated her armpits. This resulted in the development of ulcers with the eventual amputation of both her arms. From my research experiences, I now believe that medicine is one of the best self-generating businesses available today. The basis for some of my concerns are published in *Poisonous Prescriptions*.

In view of the current international epidemics of diabetes and asthma, for which there have been no definitive causes identified, I am unable to uncover a sound reason for precluding the possibility that prescription drugs are a major factor in the aetiology of both diseases. Genetic predisposition which is perhaps thought to be a predominant factor, is not necessarily a cause, as may be exemplified by smoking and lung cancer. The genetic susceptibility of an individual may play a role, but in the absence of tobacco smoke as a trigger agent, there is far less risk of the development of lung cancer.

My hypothesis which suggests that medicinal drugs are to blame for the bulk of diabetes and asthma in industrialised countries, evolved following a pilot-study to look at whether smoking during pregnancy was implicated in the development of insulin-dependent diabetes in children in the UK. With over 4000 chemicals in tobacco smoke, I included in my questionnaire a control question: "Did you take any medicines during pregnancy?" A later study also asked for details of drugs during labour. Within a few months, this awesome idea that drugs such as oxytocin, ergometrine, amoxycillin could be making children diabetic, was the start of my nightmare back in November 1991. Results of these studies are detailed in *Poisonous Prescriptions* and unfortunately having had discussions and written communication with pharmaceutical companies and senior medical professionals and scientists, I can find nothing which can vindicate these drugs from

possibly being instrumental in the onset of diabetes. The response from companies questioned, was that no long-term follow-up studies of babies or children exposed had ever been undertaken. Therefore, there is every possibility that some toxic effects of the drugs have gone undetected.

farmers have been known to develop asthma from giving their cows penicillin injections; chickbreeders have become asthmatic from handling feed laced with antibiotics; and workers in the pharmaceutical industry manufacturing antibiotics (eg. spiramycin, erythromycin, cephalosporins, ampicillin, amoxycillin) can be considered for compensation if they become asthmatic.

When considering diabetes that appears in older persons, it should be of concern to learn that there are many top-selling drugs containing fructose, aspartame or chlorothalidate that have been documented as being linked to the onset of diabetes. If antibiotics are also involved, it is not surprising to find a rapidly escalating incidence of diabetes. If a toxic effect of a commonly prescribed drug affects some 5% of patients, for every 100,000 prescriptions taken, this amounts to 5000 people being affected. Any study designed to look at the drug/

diabetes association, would ideally need information on total lifetime exposure to all drugs. Incidentally, the antibiotic streptomycin and chemical alloxan are used routinely in laboratories internationally to make animals diabetic. Examination of the structure of alloxan shows that it is structurally very similar to the drug phenobarbitone. *Poisonous Prescriptions* explains how these drugs may destroy the zinc containing beta-cells of the pancreas.

In the course of studying the health records of diabetic children, records of non-diabetic children were studied for comparison. As a scientist, with no prior knowledge of asthma, the pattern that I saw caused me to suspect that antibiotics were causing some children to start coughing, develop respiratory problems and finally become "asthmatic". My observations are supported by reports in medical literature starting in 1944, a few years after penicillin was discovered. For example, farmers have been known to develop asthma from giving their cows penicillin injections; chickbreeders have become asthmatic from handling feed laced with antibiotics; and workers in the pharmaceutical industry manufacturing antibiotics (eg. spiramycin, erythromycin, cephalosporins, ampicillin, amoxycillin) can be considered for compensation if they become asthmatic. On the cover of *Poisonous Prescriptions* I quote the Department of Health, W. Australia, as saying:

"There is no doubt that the medical profession accepts that exposure to antibiotics during manufacture can

cause asthma."

From my experience, even doctors, pharmacists and drug information officers of pharmaceutical companies are unaware of this association. Some groups consider this asthma to be "occupational asthma" and either fail to see the connection, or have chosen to ignore what could be a vital clue in trying to discover the cause of our present epidemics of asthma. As I explain in *Poisonous Prescriptions*, I believe that we have situation similar to asbestos, which was once considered to be an occupational disease. A representative of the Health Department of W.A. when asked whether he had considered that antibiotics might be the cause of the present epidemic, was sufficiently open-minded to say that "It's possible".

Information currently available and the response of learned bodies, has done nothing to appease my fears. And until this happens, I shall continue to endeavour to forge links with professionals and the public who are interested to work with me to put my hypothesis to the test. For if I am correct, we could be on the verge of a breakthrough in both diabetes and asthma.

Scientist and author of a recently published book *Poisonous Prescriptions*, will be giving a public lecture on Saturday 17th September at Murdoch University at 2pm. To reserve seats (\$5), obtain details of further lectures or if you would like to host a talk, please phone 367 6623. Copies of *Poisonous Prescriptions* (\$20 post-free) may be ordered by phoning 367 6623 or by sending a cheque to PODO, PO Box 1237, Subiaco, 6008.

farmers have been known to develop asthma from giving their cows penicillin injections; chickbreeders have become asthmatic from handling feed laced with antibiotics; and workers in the pharmaceutical industry manufacturing antibiotics (eg. spiramycin, erythromycin, cephalosporins, ampicillin, amoxycillin) can be considered for compensation if they become asthmatic.

Poisonous Prescriptions

ASTHMA: Is your puffer making you sick?

**Australia 1991 - 8,000,000 prescriptions
for asthma medication sold.**

**Recent study found that for every
puffer/container used each month, the
risk of DEATH from asthma increases to a
level 250% higher than among those
who do not use puffers.**

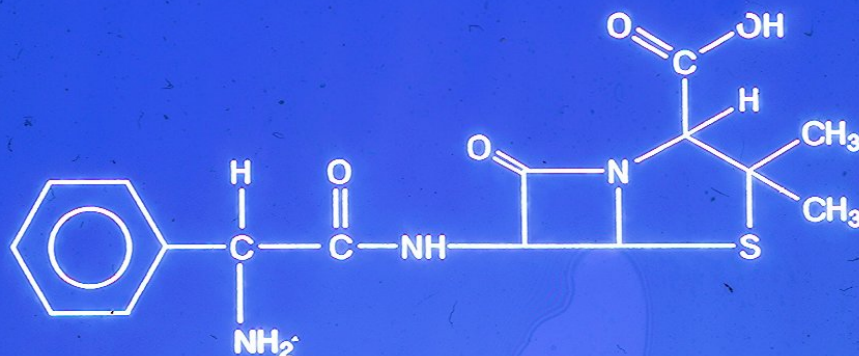
Poisonous Prescriptions

Chapter 2 DRUG THERAPY & HEALTH

"On the appearance of any new drug an interesting cycle of events may often be observed. A trickle of favourable reports develops into a stream, and the drug then becomes fashionable. Then the stream of favourable reports dries, and accidents claim attention. The drug falls into relative disrepute, and its use may even be abandoned..."

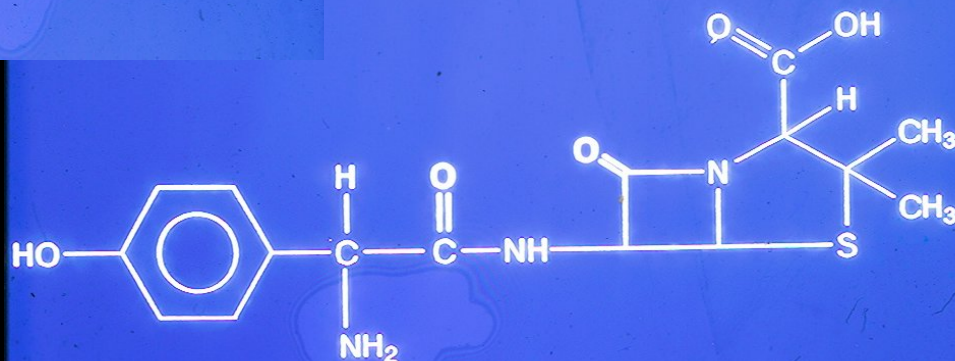
British Medical Journal, 1956.

Poisonous Prescriptions



Ampicillin
Introduced into the UK in 1961

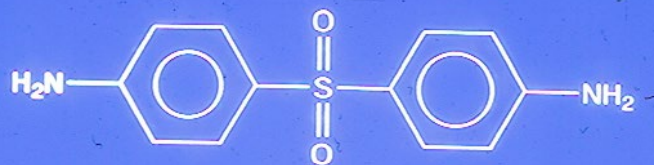
Ampicillin 1961



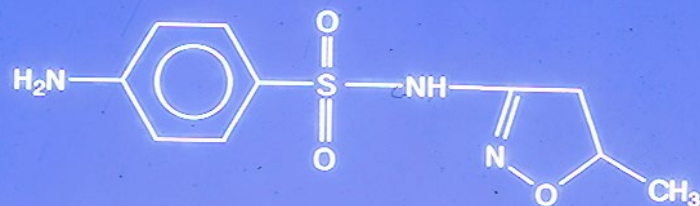
Amoxycillin 1972

Amoxycillin
Amoxil introduced in the UK in 1972

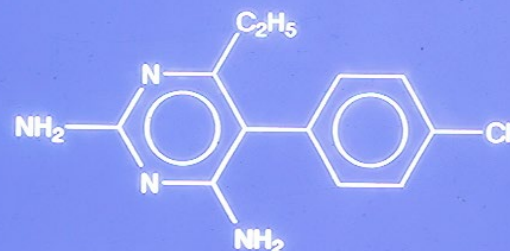
Poisonous Prescriptions



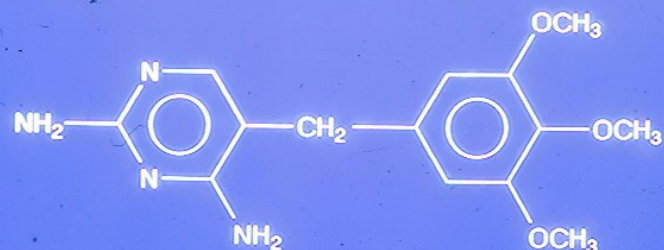
Dapsone



Sulfamethoxazole
(Constituent of Septrin)



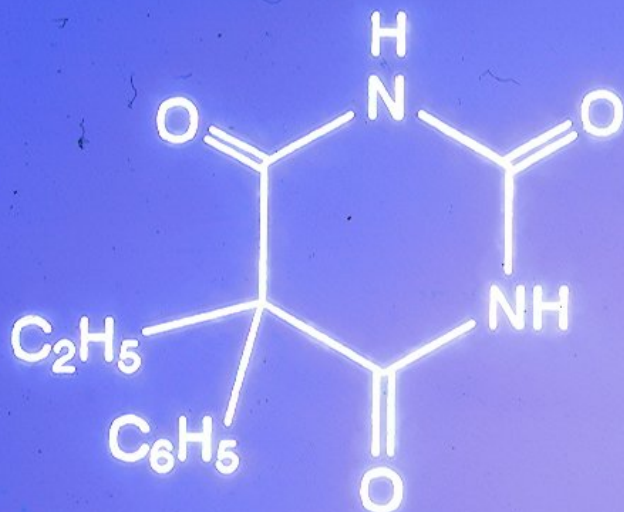
Pyrimethamine
Anti-malarial



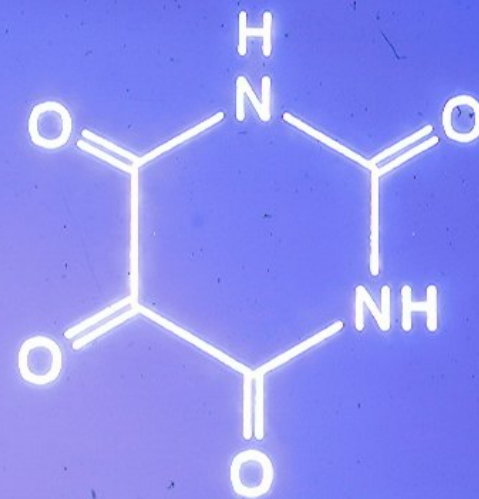
Trimethoprim
(Constituent of Septrin)

Structural similarities between drugs

Poisonous Prescriptions



Phenobarbitone



Alloxan
Diabetogenic

Structural similarities between phenobarbitone and alloxan

Poisonous Prescriptions



Poisonous Prescriptions

Chapter 4

Drug Use during Pregnancy and Labour

"With every medical treatment there are risks, and a lot of those risks are unknown at the time."

Professor Wilfred Butt, UK, 1993

(Pioneer of pituitary hormone therapy now thought to be responsible for deaths from Creutzfeldt-Jakob "Mad Cow" Disease).

Poisonous Prescriptions

BIRTH INTERVENTION

**"I have never seen anywhere
in the world with as much
intervention as W.A."**

Dr. Marsden Wagner, Consultant to WHO (1994)

**WA figures - women in private hospitals more likely to
have surgery.**

Metropolitan area -	15%	public patients have a caesarean
	23%	private patients

Poisonous Prescriptions

WHERE *DOES* DIABETES COME FROM?

DB021	Induced. Syntometrine Penicillin V
DB022	None
DB023	Ergometrine
DB024	Induced
DB025	Antibiotic. Epidural. Induced.
DB026	Antibiotic for UTI.
DB027	None
DB028	Induced. Epidural
DB029	None
DB030	Induced
DB031	Induced. Drugs-haemorrhage
DB032	Induced. Epidural.
DB033	Induced
DB034	Induced. Epidural. Benzodiazepine
DB035	Induced. Epidural
DB036	'Penicillin' drug at 8 weeks.

In-utero and delivery drug exposure of diabetic children

Poisonous Prescriptions

ID	Family History	Drugs taken by mother during pregnancy, labour or immediately after delivery if breast-feeding
T1	None	Asacol 1200mg daily for ulcerative colitis.
T2	Cousin	Progesterone injections weekly to prevent miscarriage.
T3	None	Antibiotic for oral infection at 8wks.
T4	None	Septrin. Induced.
T5	None	Maxolon for gastroenteritis.
T6	None	Paracetamol on average 1000mg daily.
T7	None	None
T8	None	None
T9	Niece	None
T10	None	Induced

Table 6.10 Summary of in-utero and birth drug exposure of respondents of the *The Daily Telegraph*, England with children diagnosed as diabetic before the age of three.

Daily Telegraph diabetics <3yrs

Diabetics <3yrs from diabetic groups

ID	Family History	Drugs taken by mother during pregnancy, labour or immediately after delivery if breast-feeding
L001	Uncle	Induced
L002	Grandmother	Natracalm (herbal remedy containing alkaloids)
L003	Grandfather	Syntometrine (oxytocin & ergometrine)
L004	None	None
L005	None	Induced (Syntocinon)
L006	None	Antibiotics for chest infection. Induced

Table 6.11 Summary of the in-utero and birth drug exposure of children diagnosed as diabetic before the age of three, and attending local diabetic groups.

Poisonous Prescriptions

Case B1: Jeremy, born January 1980.

<u>Date</u>	<u>Prescription</u>	<u>Condition treated</u>
Sept 1980	Keflex	
Jan 1981	Septtrin	URTI
May 1981	Piriton syrup given by chemist for hayfever.	Mother wants antibiotic. None given.
July 1981	Pen-V	URTI. Cough++
Sept 1981	Emergency call-out.	Grizzly and refusing to eat or drink.
Dec 1981	Bactrim	
Jan 1982	Bactrim	
Mar 1982	Keflex	URTI. Cough++. Catarrh+
May 1982	Amoxil	Wheezy
Sept 1982	Penbritin	URTI
6.4 1983	Keflex	Chesty cough. Vomiting
27.4 1983	Amoxil	URTI
June 1983	Erythroped	Chesty
1.8 1983	Amoxil	Emergency call-out
10.8 1983	Hydrocortisone cream	
Sept 1983	Erythroped Maxolon	Emergency call-out Vomiting. URTI. Off food for some time. Emergency call-out.
Oct 1983	Keflex	Pharyngitis
Nov 1983	Hydrocortisone cream	
Dec 1983	Vallergan syrup	Allergic rash. ?cause
Jan 1984	Keflex	Emergency call-out. URTI.
Apr 1984	Keflex	Coughing. URTI.
June 1984	Cephalex. Alupent	
July 1984	Keflex	
July 1984		Cough
Sept 1984	Erythroped	Bronchitis
Oct 1984	Diprosone cream	
Nov 1984	Vallergan	
Dec 1984	Ceporex	Bronchitis
Jan 1985	Ceporex Diprosone cream	Chesty cough. Eczema on back

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<u>Date</u>	<u>Prescription</u>	<u>Condition treated</u>
Feb 1985	Amoxil	Wheezy chest
June 1985	Amoxil	Wheezy bronchitis
July 1985	Triludan syrup	Hayfever
Sept 1985	Keflex Ventolin	Asthmatic
Oct 1985	Distaclor Ventolin	
Nov 1985	Amoxil Ventolin	URTI
Dec 1985	Amoxil	URTI
Dec 1985		6 months facial itching
Jan 1986	Hydrocortisone cream	
Jan 1986	Fucidin cream	Impetigo
Jan 1986	Ceporex	URTI
Feb 1986	Keflex. Ventolin	Asthmatic wheeze
Mar 1986	Ventolin	Asthmatic
Mar 1986	Ventolin	
Apr 1986	Ventolin	
Apr 1986	Erythroped	Chicken-pox.

Discussion

Before the age of 6.5 years, Jeremy had received 14 courses of cephalosporins, 7 courses of Amoxil, 3 courses of erythromycin, and 5 courses of other antibiotics, making a total of **30 courses of antibiotics**, an average of **one course of antibiotics every 2.6 months**. By one year of age, Jeremy had received two courses of antibiotics; it was only after exposure to antibiotics and an antihistamine (Piriton) that he is brought to the doctors complaining of a cough. As his exposure to antibiotics increases, Jeremy is reported to be suffering from catarrh, *wheezing* and *chest complaints*, until he is finally diagnosed as asthmatic. **Jeremy's first prescriptions for hydrocortisone cream in Aug. and Nov. 1983, are received immediately following a prescription for an antibiotic.**

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Drug exposure profile of a diabetic child from birth to diagnosis

Poisonous Prescriptions

AUSTRALIAN MALE born 1986

June 1989	Ear infection	AMOXIL
14.8.89	Gastro problems	
25.8.89	Chest infection	AMOXIL
07.3.90	Chest infection	AMOXIL VENTOLIN
06.07.90	Sinus problems	
10.08.90	Croup	ERYTHROMYCIN
08.11.90	Chest infection	AMOXIL
20.11.90	Bad ears	Got drops
24.01.91	Bronchitis	VENTOLIN
31.01.91	Bronchitis	Nebuliser 1 wk
01.03.91	Bronchitis	ERYTHROMYCIN
26.03.91	Fever, vomiting, abdominal pains. Pain continued for 3 months.	
03.02.92	Abdominal pains	
12.07.92	Thick yellow mucus	SEPTRIN
05.08.92	Tonsillitis	AMOXIL
03.11.92	Chronic sinusitis	AUGMENTIN
22.11.92	Virus	
27.11.92	AUGMENTIN (1 dose). Then ERYTHROMYCIN & Nilstat for thrush.	
28.11.94	STEVENS JOHNSON SYNDROME	

**Child diagnosed with Stevens
Johnson Syndrome after drug
exposures**

Poisonous Prescriptions

‘ The fact is dispensing drugs can be a lucrative business ’

She cites an article published in The Bulletin in 1992 which reveals that Australians are on a drug binge, consuming twice as many antibiotics per capita as Sweden and far more than the USA and Britain.

Australia is out-consuming the USA, considered a major drug-consumer of the world with revenues from the health industry exceeding \$360 billion a year, second only to those of the defence industry.

In the USA the 'vicious cycle' of such drug taking has been called the American Death Ceremony.

"It starts with the person taking an aspirin for their headache," Dr Landymore-Lim says.

"After a while the person may need extra aspirin to control the headache which eventually burns a hole in their stomach causing a gastric ulcer.

"That, in turn, may end up in infection requiring penicillin which eventually messes up the immune system — and so the whole cycle keeps repeating itself."

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HIGH
MEDIUM
LOW

Distribution of regions of varying incidence of diabetes in under 15s in England occurring during 1988.



HIGH
MEDIUM
LOW

Distribution of regions of varying density of dispensing doctors in England as at 1st October, 1989.

Regions of varying incidence of diabetes in children in England showing correlation with density of prescribing doctors

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Is the medication you're taking the one that's best for you?
Or the one your doctor's been bribed to prescribe?
Ray Moynihan reveals how the world's drug companies
co-opt doctors with everything from free pens to luxury
holidays – and why you might be paying the price.

Sweetening the pill

by Ray Moynihan Sydney Morning Herald May 31,
2003

Poisonous Prescriptions



Bribes to prescribe

How the big drug companies woo doctors with junkets, cash and dancing girls

It's everywhere: the kickback pandemic

● In Germany, more than 1000 doctors and hundreds of employees of SmithKline Beecham – now part of GlaxoSmithKline (GSK) – are being investigated over incentives to doctors. Since the scandal broke, GSK has announced new guidelines.

In Italy, 3000 doctors and scores of GSK staff are under investigation over alleged payments of illegal incentives, including trips abroad and large cash payments with fictitious justifications. According to news reports, more than 10,000 hours of phone taps revealed examples of sales reps offering gifts in return for increased prescriptions. Police raids have uncovered documents suggesting "lavish gifts such as stereos, books and personal computers". A senior prosecutor was quoted saying that some company executives could face jail sentences of up to five years if found guilty of illegal gift-giving, and GSK officials were reportedly

co-operating with authorities. Italian police have since announced the investigations have widened to include other pharmaceutical companies.

In Holland in 2001, Merck Sharp & Dohme (MSD) was fined by authorities for funding phoney educational meetings at holiday destinations, where doctors enjoyed dinners, bike tours, walks and performances, along with listening to "thought leaders" talk about MSD's latest migraine product, according to the Dutch daily newspaper *Trouw*.

In 2001, the Health Care Inspectorate in Holland analysed the marketing strategies of 10 companies, finding that doctors were offered computers as part of dodgy scientific studies, sponsored educational activities were not "independent", lavish hospitality was regularly provided, and payments to "thought leaders" could be seen as illegal inducements.

The New York attorney-general has just launched a major criminal case against GSK, alleging that the company engaged in "commercial bribery" and "repeated fraudulent acts" by offering financial kickbacks to doctors to induce them to prescribe GSK drugs, including the well-known Ventolin. GSK rejects the allegations and is defending itself vigorously.

California's attorney-general is taking action against several large companies, including Wyeth and Abbott Laboratories (parents of TAP), alleging they offered doctors an "unlawful financial inducement ... in order to increase their market share and profits".

Like the New York investigation, this case allegedly involves doctors being offered free or cut-price drugs, which they can then resell at greatly inflated prices to patients or the government. Both companies say they have abided by the law, and are fighting the action.

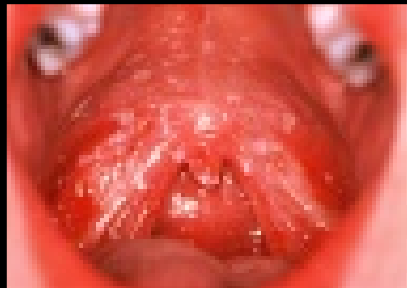
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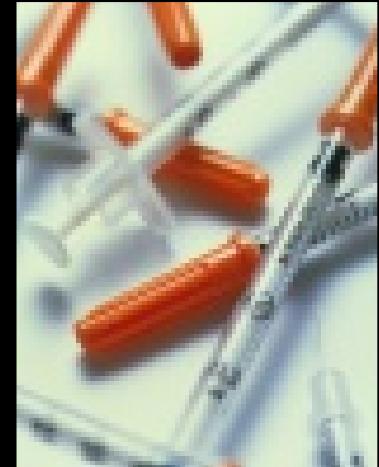
Child with Stevens Johnson Syndrome suffering from internal and external ulcers



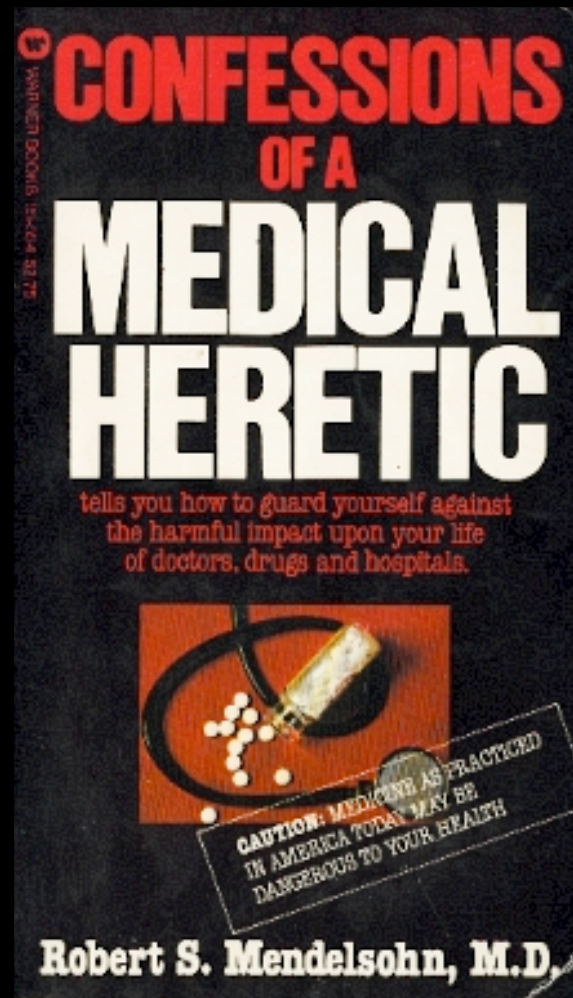
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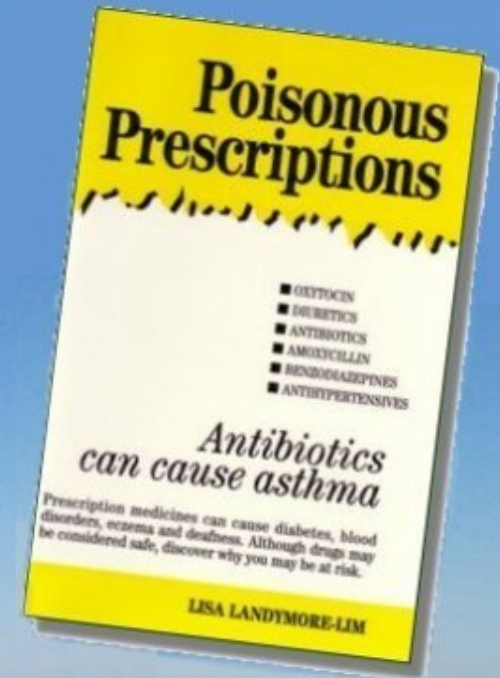
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Dr. Lisa Landymore-Lim

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Books & CD on sale



Good health starts from within