

Intellectual Property and The Globalization of Big Pharma

Big Pharma's Profits Over People & How to Hit Back

By Tony Cartalucci Global Research, February 15, 2014 localorg.blogspot.com Theme: <u>Global Economy</u>, <u>Poverty & Social</u> <u>Inequality</u>

In Slashdot's "Big Pharma Presses US To Quash Cheap Drug Production In India," it states:

"Pharmaceutical Research and Manufacturers of America (PhRMA), are leaning on the United States government to discourage India from allowing the production and sale of affordable generic drugs to treat diseases such as cancer, diabetes, HIV/AIDS and hepatitis. India is currently on the U.S. government's Priority Watch List — countries whose practices on protecting intellectual property Washington believes should be monitored closely. Last year Novartis lost a six-year legal battle after the Indian Supreme court ruled that small changes and improvements to the drug Glivec did not amount to innovation deserving of a patent. Western drugmakers Pfizer, GlaxoSmithKline, Novartis, Roche Holding, Sanofi, and others have a bigger share of the fastgrowing drug market in India. But they have been frustrated by a series of decisions on patents and pricing, as part of New Delhi's push to increase access to life-saving treatments in a place where only 15 percent of 1.2 billion people are covered by health insurance. One would certainly understand and probably agree with the need for for cheaper drugs. But don't forget that big pharma, for all its problems still is the number one creator of new drugs. In 2012 alone, the U.S. government and private companies spent a combined \$130 billion (PDF) on medical research."

And while Slashdot claims that "big pharma, for all its problems still is the number one creator of new drugs," it should be remembered <u>that much of that money comes from</u> <u>federal grants</u>, or in other words, out of the pocket of tax payers. Once these new drugs are developed, big-pharma's business model is defended stalwartly by regulators, the media, and other facets of the corporate-financier oligarchy ruling over the Western world. The immense profits generated by the West's health care racket are not merely helping recover R&D costs – the immensity of "big pharma" in and of itself is testament of this.

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gsk GlaxoSmithKline	ORTHO BIOTECH	Wyeth

Image: Big pharma and big health – there is nothing they can do that we the people can't do better. Unwrapping the enigma in which our health care exists is step one in medical liberation.

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So for big pharma to hold profits and the contrived notion of "intellectual property" over the lives of impoverished people abroad is truly indefensible.

Several barriers prevent this skewed formula from being balanced or indeed, tilted in favor of the people.

For one, the notion of "intellectual property" prevents both the knowledge derived from research and development from passing into the hands of others who could potentially improve both the process of developing drugs as well as the very drugs produced in the first place. Since this knowledge is in part paid for by the people, it should be accessible to the people.

Another barrier are regulatory bodies that do not in fact function for the benefit of the health

and safety of the people, but the profits and reputations of the corporations utilizing them. The US FDA has literally approved poison for human consumption on more than one occasion – not the result of incompetence, but the result of collusion with profiteering monopolies.

Hitting Back - Open Pharmaceuticals

Circumventing these barriers will require creativity and ingenuity on the part of the people. Legislation simply will not work, since the legislators are easily and continuously bought off – nor will protests. Instead, we must unwrap the enigma within which pharmaceutical R&D exists, and begin developing our own medical treatments through professional cooperatives.

There are already people working toward this goal – multidisciplinary professionals seeking to circumvent the frustrating pipeline of pharmaceutical and treatment development.



One of these people is <u>Andrew Hessel</u>, who is currently working on a project called the "Pink Army Cooperative."

Cancer is perhaps the most frustrating condition with which one can be inflicted. It is also a disease that generates millions for the health care industry and pharmaceutical giants despite the fact that treatments are generally ineffective, and worse still, devastating to those who take them before their inevitable demise.

The Pink Army Cooperative seeks to leverage advances in biotechnology through a cooperative model of R&D as well as implementation, to bring treatments that are both effective and affordable to the people who need them most. It short-circuits the political battle between big pharma and its victims, and goes straight for pragmatic solutions.

From the <u>Pink Army Cooperative's website</u>, it states:

Can you imagine a cancer treatment made just for you, in a day, for free? One with almost no side-effects?

It sounds like science fiction but I believe it's within reach if we work together. Here's why.

When you think about it, cancer is just an infection of your body with some of your own cells that have gone rogue. Not unlike a bacterial infection, which have been treated successfully since penicillin, turning a once-deadly disease into a trivial, take-a-pill-and-go-home fix.

With cancer, treatment requires killing just the rogue cells while leaving the good ones untouched. The challenge is specificity – the ability of the treatment to affect one type of cell and not another. The agents we use today aren't specific. They're broad. So broad that they're akin to busting a few bad guys in New York by nuking the entire city. It's effective, but there's a lot of collateral damage. We we really need is a molecular police force able to distinguish good cells from bad – and these were impossible until we had biotechnology.

It is highly recommended that readers <u>continue on with the introduction</u>, as well as browse the rest of the<u>Pink Army Cooperative website</u>.

The promise offered by Hessel's proposal is not merely theoretical. Cancer has been cured through the use of a "molecular police force able to distinguish good cells from bad." Gene therapy carried out against a variety of blood cancers have already successfully (and so far permanently) cured 120 patients. AP reports in their article, "<u>GENE THERAPY SCORES BIG</u> <u>WINS AGAINST BLOOD CANCERS</u>," that:

In one of the biggest advances against leukemia and other blood cancers in many years, doctors are reporting unprecedented success by using gene therapy to transform patients' blood cells into soldiers that seek and destroy cancer.

A few patients with one type of leukemia were given this one-time, experimental therapy several years ago and some remain cancer-free today. Now, at least six research groups have treated more than 120 patients with many types of blood and bone marrow cancers, with stunning results.

"It's really exciting," said Dr. Janis Abkowitz, blood diseases chief at the University of Washington in Seattle and president of the American Society of Hematology. "You can take a cell that belongs to a patient and engineer it to be an attack cell."

In one study, all five adults and 19 of 22 children with acute lymphocytic leukemia, or ALL, had a complete remission, meaning no cancer could be found after treatment, although a few have relapsed since then.

These were gravely ill patients out of options. Some had tried multiple bone marrow transplants and up to 10 types of chemotherapy or other treatments.

While the advances being made against cancer right now are driven by institutions and government funding, the technology that is resulting will lay the infrastructure for Hessel's Pink Army Cooperative. Manning that infrastructure may be ordinary people from around the world, being educated and trained in all matters biological at their local DIYbio laboratory.

The diving costs and simplicity of modern biotechnology is opening doors to make it as accessible and affordable as personal computing. The "killer app" for personal biotechnology will surely be health care cooperatives that give the masses a truly appealing alternative to the variety of big-business "solutions" being offered now by immense pharmaceutical corporations (costly, ineffective drugs), insurance providers (Obama care, rationed care in the EU), and others parasitically profiteering from the misfortune of others.For readers today, looking into the world of DIYbio and finding a local laboratory (or starting one) can be the first step on the journey toward health care liberation. Like the media monopolies now crumbling in the face of advances in IT, pharmaceutical monopolies will likewise fall. Building bridges to the many dedicated professionals lining these industries will be essential in establishing alternatives that truly serve the best interests of the people.

Remembering that biotechnology is a double-edged sword, able to cut in any direction

depending on the hands that wield it, should encourage us to pick it up and ensure it stays in our hands. Technological disparity breeds injustice, and the only true means to reduce this disparity is to put technology into as many hands as possible.

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