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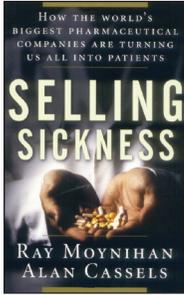
Book Review: Selling Sickness: How the World's Biggest Pharmaceutical Companies are Turning Us All into Patients

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Selling Sickness: How the World's Biggest Pharmaceutical Companies are Turning Us All into Patients. By Ray Moynihan & Alan Cassels. Vancouver/Toronto: Greystone Books. 2005. 272 pp. ISBN 1553651316.

Ray Moynihan and Alan Cassels's *Selling Sickness* is a welcome and accessible exposé of profit-driven pharmaceutical companies and their extensive influence in selling sickness to the "healthy well." The authors argue that "the pharmaceutical industry is working behind the scenes to help define and design the latest disorders and dysfunctions in order to create and expand markets for their newest medicines" (p. vii). They contend that this process turns "too much ordinary life into medical illness, in order to expand markets for medications" (p. xix). The authors reveal how so-called sicknesses, ranging from high cholesterol to female sexual dysfunction, are invented and marketed, in order to sell their corresponding medicinal cures.

In aggregate, the ten chapters explore how the pharmaceutical complex makes use of advertisers, celebrity endorsers, patient groups, medical professionals and associations, and even federal regulators, to ensure that their drugs get sold. The strengths of this volume are its journalistic style, accessibility, and breadth.

According to the authors of this study, medical conditions have been routinely broadened so as to increase the number of possible candidates for prescription medications. For instance, the number of depressed persons has been highly inflated with revised definitions of depression; ADD has been increasingly diagnosed in adults; and personality qualities like shyness are now explained as social anxiety disorders. Other illnesses such as high cholesterol are not really illnesses in and of themselves. Rather, as the authors explain, they may be indicators or risk factors for future illnesses, but only when combined with other indicators. Defining high cholesterol as an illness promotes the fear that high cholesterol is synonymous with heart disease and allows pharmaceutical companies like Pfizer to expand its market to the healthy and insured in order to profit from their best selling drug Lipitor. As the definitions of disorders expand and, as we are offered more and more drugs to deal with them, we are all more readily interpellated into the subjectivity of sickness.

In order to broaden their markets by expanding the definitions of sickness, pharmaceutical companies often work with their "thought-leaders," prestigious academics and researchers who are "on drug company payrolls as advisers and paid speakers" (p. 6). Drug companies employ celebrities and "real people" to proffer their ailments and their attendant drug cures. In a chapter discussing menopause and entitled "Working with Celebrities," the authors discuss the prevalence of well-known stars such as Cybil Shepard and Lauren Hutton who have publicized their experiences with menopause and their preferred pharmaceutical treatments, without disclosing their paid affiliation with the sponsoring drug companies. Celebrities are paid handsomely for their endorsements and yet they are not beholden to the same FDA regulations as the drug companies. Celebrities are not the only ones on the payroll. The chapter, "Partnering with Patients: Attention Deficit Disorder," tells us that patient advocacy groups such as Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD) receive much of their funding from pharmaceutical companies like Shire, the makers of Adderal. In return, these patient advocacy groups are often called upon to represent "real people" in advertisements and to raise awareness of their disorders and its drug treatments.

Doctors, along with their professional organizations and regulatory bodies, are also held in the grip of pharmaceutical companies as described in “Doughnuts for Doctors,” a chapter on depression, which explores the pharmaceutical industries’ intimate relationships with doctors. The chapter examines the role of pharmaceutical representatives and the fact that these relationships result in higher prescription rates. (Beginning January 1 of this year, the pharmaceutical industry has instituted a voluntary moratorium on giving to medical professionals.) Moreover, the study reveals how the drug companies have fostered an entangled relationship with professional organizations like the powerful American Psychological Association through conference sponsorship.

As the authors contend, “Industry does not crudely buy influence with individuals and organizations—rather its largesse is handed out to those considered to be most commercially helpful” (p. 171). Shockingly, the Federal Drug Administration (FDA) is funded by the very drug companies that it is charged with regulating. The authors tell the story of Lotronex, a drug that was developed to treat irritable bowel syndrome and was approved by the FDA, then taken off the market when it was found to be harmful to patients, and then was subsequently returned to the market in response to the outcry from patient groups. In this and other cases, Moynihan and Cassels reveal the inner workings of the FDA, detailing how many in supervisory positions acquiesce to the desires of the pharmaceutical companies and their sponsored patient groups, even going so far as to bury research that shows the harms of the medications that they approve.

Interestingly, most of the “illnesses” or “disorders” discussed in this study involve women. Whether it be conditions such as depression, social anxiety or irritable bowel syndrome or other conditions specifically concerned with the workings of the female body such as menopause, pre-menstrual dysphonic disorder, osteoporosis, and female sexual dysfunction, women seem to be the primary target of pharmaceutical campaigns. The authors note that “there is a complex interplay of images and ideas back and forth between society and the world of medicine, fed by deep-seated and wide-spread anxieties about ageing, femininity and sexuality” (p. 48). Unfortunately, the significance of the female body as always already “ill” is not adequately addressed, nor is the reasoning behind why female dysfunctions may be easier to “sell” than sex/gender neutral dysfunctions. Is it because women are the primary consumers of healthcare? And how did that come to be? Are women conditioned by the medical profession to see their body’s functioning as abnormal? The reader is left uncertain as to why the female and her body are prime targets for constructed illnesses and their pharmaceutical cures.

Many in communication studies, including scholars of health communication, critical communication, and policy and media studies, will find this volume useful for their own work as well as an accessible text for their students. Moynihan and Cassels provide a wealth of information in a concrete and accessible fashion. The short chapters complement one another and work to construct a holistic view of the selling of sickness. Although the concluding chapter on “What Can We Do?” is relatively brief, the fact remains that we must all be critical consumers of sickness and dedicated caretakers of our own health. Reading *Selling Sickness* reveals why this is absolutely necessary.

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