

VIEWS & REVIEWS

PERSONAL VIEW

Big pharma often commits corporate crime, and this must be stopped

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When a drug company commits a serious crime, the standard response from the industry is that there are bad apples in any enterprise. Sure, but the interesting question is whether drug companies routinely break the law.

I googled the names of the 10 largest drug companies in combination with the term “fraud” and looked for offences on the first page for each company. The most common recent crimes were illegal marketing by recommending drugs for non-approved (off label) uses, misrepresentation of research results, hiding data on harms, and Medicaid and Medicare fraud.¹ All cases were related to the United States and involved huge settlements or fines, exceeding \$1bn (£620.6m; €769m) each for four companies.

It was easy to find additional crimes committed by these same companies and committed outside the US.¹ As the crimes were widespread and repetitive, they are probably committed deliberately—because crime pays. Pfizer, for example, agreed in 2009 to pay \$430m to resolve charges related to illegal marketing of gabapentin (Neurontin), but as sales were \$2.7bn in 2003 alone, and as about 90% was for off label use, such fines are far too small to have any deterrent effect. When Pfizer was fined \$2.3bn for off label use of four other drugs, also in 2009, the company entered into a corporate integrity agreement with the US Department of Health and Human Services to detect and avoid such problems in future. Pfizer had previously entered into three such agreements in the past decade.²

Of the top 10 drug companies, in July 2012 only Roche was not bound by such an agreement. However, over 10 years in the 1990s, high level executives in Roche had previously led a vitamin cartel that, according to the US Justice Department, was the most pervasive and harmful criminal antitrust conspiracy ever uncovered.³ Roche agreed to pay \$500m to settle charges, equivalent to about one year’s revenue from its US vitamin business.

Doctors are often complicit in these crimes, as kickbacks and other forms of corruption were common; they were induced to use expensive drugs and paid to lend their names to ghostwritten articles purporting to show that a drug works for unapproved conditions.¹

The disconnect between the drug industry’s proclamations—of the “highest ethical standards,” of “following . . . all legal requirements,” and providing “most accurate information available regarding prescription medicines”^{4, 5}—and the reality of the conduct of big pharma is vast. These proclamations are not shared by the companies’ employees or experienced by the public. An internal survey of Pfizer employees in 2001 showed that about 30% didn’t agree with the statement, “Senior management demonstrates honest, ethical behavior.”⁶ When 5000 Danes ranked 51 industries in terms of the confidence they had in them, the drug industry came second to bottom, beaten only by automobile repair companies. A US poll also ranked the drug industry at the bottom, together with oil and tobacco companies.

The consequences of these crimes are huge, including the unnecessary deaths of thousands of people and many billions in losses for our national economies every year.⁷ As doctors have access only to selected and manipulated information, they believe drugs are far more effective and safe than they really are. Thus, both legal and illegal marketing leads to massive overtreatment of the population. In the US, the most sold class of drugs in 2009 (in US dollars) was antipsychotics. Antidepressants came fourth, after lipid lowering drugs and proton pump inhibitors. It is hard to imagine that so many Americans can be so mentally disturbed that these sales reflect genuine needs.

It is time to introduce tougher sanctions, as the number of crimes, not the detection rate, seems to be increasing.⁸ Fines need to be so large that companies risk going bankrupt. Top executives should be held personally accountable so that they would need to think of the risk of imprisonment when they consider performing or acquiescing in crimes. To bring the crimes to light also outside the US, we need laws that protect whistleblowers and ensure they get a fair proportion of the fines. We also need to avoid the situation that, by settling accusations of crimes, drug companies can pretend they are innocent, which they often do.

We also need laws requiring firms to disclose all knowledge about their drugs and research data,⁷ and laws that not only allow

but require drug agencies to publish what they know, without hiding under some absurd “proprietary nature of companies’ trial results” clause, as happened with rosiglitazone⁹—with the consequence that the public was not informed that the drug causes myocardial infarction.

Last but not least, doctors and their organisations should recognise that it is unethical to receive money that has been earned in part through crimes that have harmed those people whose interests doctors are expected to take care of. Many crimes would be impossible to carry out if doctors weren’t willing to participate in them.^{1 10 11 12 13}

Competing interests: the author has completed the ICMJE uniform disclosure form at www.icmje.org/coi_disclosure.pdf (available on request from the corresponding author) and declares: no support from any organisation for the submitted work; no financial relationships with any organisations that might have an interest in the submitted work in the previous 3 years; no other relationships or activities that could appear to have influenced the submitted work.

Provenance and peer review: Not commissioned; externally peer reviewed.

A fuller account is at www.cochrane.dk/research/corporatecrime.

- 1 Gatzsche PC. Corporate crime in the pharmaceutical industry is common, serious and repetitive. 2013. www.cochrane.dk/research/corporatecrime.
- 2 Tanne JH. Pfizer pays record fine for off-label promotion of four drugs. *BMJ* 2009;339:b3657.
- 3 Barboza D. Tearing down the facade of ‘Vitamins Inc.’ 10 Oct 1999. *New York Times*. www.nytimes.com/1999/10/10/business/tearing-down-the-facade-of-vitamins-inc.html.
- 4 Kelton E. More drug companies to pay billions for fraud, join the “dishonor roll” after Abbott settlement. 10 May 2012. *Forbes*. www.forbes.com/sites/erikakelton/2012/05/10/more-pharma-companies-to-join-the-dishonor-roll-pay-billions-for-fraud-following-abbotts-settlement.
- 5 Pharmaceutical Research and Manufacturers of America (PhRMA). PhRMA code on interactions with healthcare professionals—signatory companies. 11 June 2012. www.phrma.org/sites/default/files/108/signatory_companies_phrma_code_061112.pdf.
- 6 Rost P. The whistleblower: confessions of a healthcare hitman. Soft Skull Press, 2006.
- 7 Gatzsche PC. Why we need easy access to all data from all clinical trials and how to accomplish it. *Trials* 2011;12:249.
- 8 Almashat S, Preston C, Waterman T, Wolfe S; Public Citizen’s Health Research Group. Rapidly increasing criminal and civil monetary penalties against the pharmaceutical industry: 1991 to 2010. 16 December 2010. www.citizen.org/documents/rapidlyincreasingcriminalandcivilpenalties.pdf.
- 9 Cohen D. Rosiglitazone: what went wrong? *BMJ* 2010;341:c4848.
- 10 Braithwaite J. Corporate crime in the pharmaceutical industry. Routledge, 1984.
- 11 Angell M. The truth about the drug companies: How they deceive us and what to do about it. Random House, 2005.
- 12 Kassirer JP. On the take: how medicine’s complicity with big business can endanger your health. Oxford University Press, 2005.
- 13 Newman M. Bitter pills for drug companies. *BMJ* 2010;341:c5095.

Cite this as: *BMJ* 2012;345:e8462

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