

Needs oriented research at a standstill

The annual Prescrire Drugs Awards describe the degree to which new drugs marketed in France during the previous year represent a true advance in treatment. For several years there has been a noteworthy lack of products offering important benefits (see page 64).

Drug companies may argue otherwise, but our continuous scrutiny of the world pharmaceutical market suggests that few new breakthroughs are expected in the next few years. Even gene therapy is unlikely to have much impact on the situation. The pharmaceutical industry's "glorious forties" - the four decades from the 1950s to the 1980s - were a time of rapid innovation and breakthrough treatments. But these times are now far behind us.

Drug companies have devised a wide range of solutions to this difficult situation. They are demanding ever-higher prices and accelerated marketing approvals (despite the risks this entails for patients), engaging in statistical trickery and blatant disinformation, abandoning unprofitable drugs even when they are still useful to society, obtaining massive state subsidies, and pushing for protectionist policies that hinder access to care in poor countries.

Drug regulatory agencies are buckling under this pressure, tending to become little more than service providers to the pharmaceutical industry.

And yet it is perhaps not surprising that, after 40 to 50 years of major breakthroughs, drug research should be temporarily at a standstill. Rather than raising our arms in despair, perhaps we should accept the situation and engage in a little lateral thinking. This might entail improving the use of the plethora of therapeutic and diagnostic tools we already have available; developing new non drug approaches (including for example better provision of social welfare); discouraging unnecessary treatments and diagnostic testing; preventing iatrogenic harm more effectively, through improvements in health care organisation and health product quality, better communication among caregivers and better information for patients; reinforcing primary prevention through nutritional, environmental and behavioural measures; stimulating basic research, which has been left behind in the race towards short-term profits; and encouraging research on neglected diseases and neglected patient subgroups, in rich and poor countries alike.

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