

Translated from Rev Prescrire November 2015; 35 (385): 801

Fight inertia!

What is known of the efficacy of *oseltamivir* (Tamiflu°) in preventing the serious, sometimes life-threatening complications of influenza? Next to nothing! Clinical trials of *oseltamivir* included too few patients to perform any meaningful analysis of mortality. Fewer than 300 patients over 65 years of age have so far been included in clinical trials worldwide, which is far too few to determine the possible impact of *oseltamivir* on complications in the largest at-risk population (see p. 52).

It took nearly 15 years to discover that the company which markets *oseltamivir* had been withholding the results of clinical trials. And it took the perseverance of health professionals to force the company to release their disappointing data (see p. 55).

In the meantime, serious adverse effects reported by health professionals and patients have continued to accumulate. When these harms are placed in the balance, the claimed efficacy of *oseltamivir* fades into insignificance.

Yet oseltamivir has been purchased, stockpiled and recommended by health authorities throughout the world, and has even been included in the World Health Organization's list of essential medicines since 2013. How could so many health authorities all over the world allow themselves to be duped in this way?

The methods employed by some drug companies to promote their products are well known: repeated "messages" stressing the severity of diseases for which treatments are lacking; clever promotion of "promising" new drugs; deliberate retention of unfavourable assessment data; displays of enthusiastic opinion leaders who participate in deceptive marketing strategies based on provisional results or on biased, interim endpoints; adoption of ill-advised recommendations by decision-makers and their unquestioning acceptance by health professionals, either through complacency or through a lack of perspective; and, of course, the tendency to gloss over adverse effects.

Meanwhile, massive quantities of oseltamivir have been sold, much to the satisfaction of the manufacturer's shareholders. And revelations exposing the inadequate initial assessment of oseltamivir have made little difference: recommendations on its use in influenza have been left unchanged, while the leniency of government agencies continues.

As with other new medicines, some health professionals were not satisfied with the inadequate initial assessment, nor were they swayed by the hype. A few scientists persevered and managed to expose the company's dirty tricks. These actions are welcome, helping to protect patients from unnecessary exposure to the harms of drugs that have uncertain benefits.

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