

BigPharma and unethical marketing of medicinal products

Citation: Myhr K. BigPharma and unethical marketing of medicinal products. *Southern Med Review* (2011) 4;2:1-1
doi:10.5655/smr.v4i2.1000

In today's environment, the main focus of the critical mass towards the multinational companies is on access to new patented and more expensive products. Many of them essential medicines, but many more non-essential 'me-too' medicines developed to get a piece of the blockbuster cake or to go from one patent to the next (evergreening). However, there are also other issues that BigPharma could be confronted with and help us solve. One of them is unethical marketing of products with no medical value or which are potentially dangerous.

We know that products being banned in some countries still exist and are actively promoted in other countries. The E-drug archives¹ and the WHO book of products² being banned have many examples of that. Often the companies' response when confronted will be that it is up to the country's regulatory authority to take action as they approved it. Of course we know that ideally that should be the case and I agree that some countries in Europe such as Germany definitely should have been able to clean the German market of such products, but in the developing world the capacity and skills are often not there. Should we accept that it is so? Or is it time to start getting tougher?

Recently, I was asked by a doctor to find Norwegian equivalents to some medicines a small child with a chronic disease had received in one of the worst conflict areas in Africa. Needless to say, whatever little money these people have should not be wasted. One of the medicines turned out to be a tonic, Mosegor, that Novartis sells in several countries in Africa and Asia (according to Google). I found it e.g. on a website (<http://thepharmaguide.com>) in Pakistan, one of many awful websites listing it.

The following indications are listed on the website mentioned above: anorexia in underweight patients, mood elevation in the elderly, prophylactic (interval) treatment of migraine. The syrup and tablets contain four B-vitamins and pizotifen, a sedating antihistamine, which was registered for migraine prophylaxis (Sandomigran) and still can be found in a few countries under the name Sandomigran or as Mosegor³. Pizotifen also has anticholinergic effects, hence it is not safe. Several websites promote it as an appetite stimulant. Even with no indication listed for use in children, Novartis gives dosage recommendations down to children aged 2 years old!

Novartis is a research-based pharmaceutical company that promotes an image of a responsible company with a public

health focus. So why then promote useless tonics for under-/malnourished children in poor countries?

This case reminds me of other useless products I have come across such as Encephabol (pyritinol) from the German company, Merck³. When I worked in Botswana in the late 1980's I received requests from doctors for this – for use in malnourished children as it 'supposedly improves glucose uptake in the brain'. Surprisingly, that product still exists even in Germany with the indication 'organic brain disorder', in other countries also with other indications such as mental function disorder, but officially, not malnutrition.

There are of course numerous examples of potentially toxic or irrational products out there and many companies besides the multinationals that market such products. As I write this editorial, I have been told that Roche is continuing to manufacture Halfan for both children and adults. Halfan contains halofantrine, an antimalarial that has serious side effects but worryingly still seems to be on the French, Portuguese and South African markets³ as well as in many low- and middle-income countries.

By pointing finger at the multinationals, I want to highlight the paradoxes in the research-based companies that on the one side claim to do so much good for public health but continue to produce products detrimental to people's health. Of particular concern is of course medicines for children. How can large research-based companies defend marketing useless products for malnourished children who need proper nutrition?

It is time we start confronting BigPharma also with this side of their business. Other examples will be most welcome on E-drug!

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References

1. E-drug archives. <http://www.essentialdrugs.org/edrug/archives.php>
2. Consolidated list of products whose consumption and/or sale have been banned, withdrawn, severely restricted or not approved by governments. *Pharmaceuticals*. 14th Issue (New data only) January 2005–October 2008. <http://www.un.org/esa/coordination/CL-14-Final.for.Printing.pdf>
3. Martindale. *The Complete Drug Reference*. 37th Ed 2011. The Pharmaceutical Press.