

The Doping of America: A Patients' and Doctors' Guide

DEFINITIONS

Perfect Crime (mystery) n. a violation that is not perceived for what it is, as the murder that is taken for a suicide or an accident 2) an imitation of (something) that is passed off as genuine, as an art forgery 3) the dismissal of your health problems as a natural event beyond your control for which you need a drug.

Scene of the Crime (mystery) n. the place where some criminal event has occurred, e.g., in this case, your body is the scene of the crime.

Welcome back once again to the ongoing investigation of *The Perfect Crime*. This is a crime that is SO well-executed, you don't even know it has been committed! In this case, many people have had their health stolen and they don't realize it. If someone stole your wallet, you'd know it; but stealing your health, little by little, while convincing you it's "normal", is something so gradual that most people don't even know it's happening.

The way it works is people simply give up their well being a little here, a little there. This slow degeneration can take years, rolling into decades, taking a toll on the individual's ability to enjoy life; and this kind of physical decline is generally accepted as *inevitable, unavoidable, and inescapable!*

More and more (you'll see why later on) Americans are becoming victims of the old "Dimmer Switch Syndrome". You know, the one where the lights are turned down ever so slowly. Your eyes adjust, and they're turned down a little more. Your eyes adjust again, and they're turned down even more. And so on. Pretty soon what's accepted as "normal" is VERY dark.

Derailing Our Thinking

The other day I opened up a *Reader's Digest*, and I was appalled! The first page I opened to was an ad for Nexium (an antacid) on a cardboard insert. Two pages later there was an ad for Astelin nasal

spray. Two pages after that was an ad for the American Medical Association. Now, why should *they* be advertising? On the very next page there was an ad for Aleve, followed by an ad for Crestor (a cholesterol-lowering medication), followed by a Campbell's tomato soup ad. Turning a few more pages, I saw consecutive ads for Humira (a treatment for rheumatoid arthritis), a Pfizer Relief Guide for Diabetic Nerve Pain, and Lantus (a once daily 24-hour insulin).

Ironically, the feature article in this April 2006 issue of *Reader's Digest* was titled, "I Can't Afford To Be Sick", which points out that the Bureau of Labor Statistics calculates America's health care costs to have risen at twice the rate of inflation since 1970. Consumers, including employers are getting hit hard by escalating prices.

What's going on here? The feature article in the *Reader's Digest* can sure scare people about how adequate their insurance coverage really is, but what about all those ads? Why are there so many people with health problems? Even as recently as 15 years ago, I don't remember so many people having health problems and taking so many drugs. Also, prescription ads didn't fill up so much magazine space back then.

I'm certainly not alone in observing these changes, I do find, however, that the majority of people don't think there's anything *wrong* with them. Most peo-

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ple feel that “This is just the way it is. It’s progress.”

I disagree.

But when you’re told, “this is the way it is” from so many legitimate sources, it’s hard not to believe it. Let’s you and I examine some scenarios from daily life, and see what could be causing you to accept what’s going on. How many times have you picked up a family magazine and read different articles that peak your interest? Once you get past all the drug ads, you’re often likely to find a feature article about someone with a grave medical condition that, initially, was under-diagnosed or under-treated, like social anxiety disorder. But, because they took a certain drug, these people were *finally* able to lead a normal life.

Then you might be drawn to read articles in the local or a national newspaper either written *by* or written *about* experts who are telling you what the latest research is concerning a disease and what drug has now been found to cure it!

You turn on the television and you’re bombarded with drug commercials for all kinds of ailments, including some you really wish you didn’t have to think about on a daily basis, like: “erectile dysfunction” or “overactive bladder” or “premenstrual dysphoric disorder”. If you watch enough ads, you’ll eventually find out that even your occasional heartburn is a warning sign for a serious medical condition.

Or, what about the ad that’s telling you that 8 million men have diabetes, 28 million men have high blood pressure, and 50 million men have high cholesterol. But wait! This ad says that these men might just have one *more* disease: ED (Erectile Dysfunction) There it is again.

What about the celebrities who appear for an interview on some talk show you’re watching. Suddenly, he or she starts talking about a health problem that a friend or a spouse or maybe even *they* have, and how this wonderful drug cured it. Well, it appears that the celebrity was so excited that a “sharing” just couldn’t be helped. It seems like *everyone* has health

problems, even celebrities.

Then the doorbell rings, and there’s a nice person standing there, collecting for the American Cancer Society or the American Diabetes Society, or a whole list of other “Societies”.

Finally, there’s the visit you or a loved one pays to your doctor, only to find out the benchmark numbers for cholesterol and high blood pressure have dropped since you last saw him (or her). This may put you at risk for heart disease, and you need to be put on a drug or two or three.

In fact, just finding out you’re “at risk for a disease” is now a “disease” itself, like “prehypertension”!

And all of this is perfectly “normal”. That’s the way it is.

The Wizard of Oz

Many concerned and knowledgeable people are getting angry about this image of “normal”. Why? Because in each of the examples listed above, the hand of the pharmaceutical industry is behind the scenes orchestrating *every little detail*.

Things are *not* what they seem. They *seem* like little snippets of life, but, in each instance, they are nothing more than marketing tools for Big Pharma. All we need is for Toto to pull back the curtain and to reveal the party responsible for what is being put on the screen of our day-to-day lives.

Let’s start with the magazine articles about “real” people with a grave condition. These are the gritty stories that make journalism come alive and live and breathe. Knowing this, public relations firms use patient advocacy groups to devote energy and influence to furthering the drug companies’ cause. What’s sad is that people who suffer from a particular disease really believe they have found a support network devoted to expanding awareness of the disease.

As a result, these groups are able to supply a steady stream of real people to the reporters, who then craft stories with *emotional impact on readers*.

These stories suddenly begin appearing everywhere in magazines as the first phase of a public relations campaign on behalf of a drug company. This phase usually starts about 3 years before the drug being promoted seeks FDA approval.

The next phase has these patient advocacy groups continuing with what is now called “awareness raising”. This involves getting publicity in the media as well as handing out literature and educating people about this new disease. As an example, CHADD (Children and Adults with Attention-Deficit/Hyperactivity Disorder) was initially started by a small group of families and psychologists in Florida. From the day of conception, CHADD has received \$700,000 a year from amphetamine drug manufacturers. As a result, CHADD is now one of the highest profile patient advocacy groups in the United States with over 14,000 members.

Although a \$700,000 investment doesn't sound like a lot in the \$500 billion world of prescription drugs, it's a tiny investment with a *huge* return. By funding groups whose public opinions match theirs, they have people that actively assist them and appear to be quite genuine. In fact, “partnering” with consumer groups has become an *important* part of pharmaceutical marketing strategies because the public usually isn't aware there's a partnership *at all*. These consumer groups don't *appear* to be selling anything, so they are believed. By working to transform public perceptions about diseases and disorders *for* the drug companies, they actually *are* selling drugs.

So, despite widespread scientific disagreement over even the *existence* of ADD, both CHADD and its drug company partners promote the idea that ADD is a proven biological disorder and has a strong “neurological basis” for which medication is the most effective form of treatment. “Partnering” like this has worked so well that “a global survey from Britain estimated that two-thirds of all patient advocacy groups and health charities now rely on funding from drug companies or device manufacturers.”¹

Each news story featuring real people puts a human face to a medical disorder supposedly best treated with drugs. (Come on, there's just no other way!) In

the case of ADD, there are stories about the families of children diagnosed with this disorder. Always the story plays the way the CHADD website portrays its humble origins: “CHADD was founded in 1987 in response to the frustration and sense of isolation experienced by parents and their children with AD/HD.”

On the flipside of the coin, there are *many* experts who disagree entirely, but who don't have the money behind them to get themselves a lot of media attention. These researchers publish in *exactly the same* scientific journals as the scientists who insist that there is no debate, no controversy, no question: ADD is a “neurobiological disorder” affecting between “three and seven percent of school age children”. But many doctors feel that, although there are *some* children with debilitating symptoms of hyperactivity or inattention or impulsiveness, to put vast numbers of children who have trouble sitting still or who drift off in class into this ADD category is ridiculous. They say there's no reliable test for this disorder, much less any reliable way to even define it.

Maybe taking a quick peek at what the children had for breakfast, what's in the vending machines in school halls, or what's being offered up for lunch in the school lunchroom would yield the “scientific” results as to what could be *causing* these behavior problems. Instead, some scientists narrowly define these slight behavioral problems as a “proven biological disorder” that needs a stimulant to fix it.

More in the complete issue.

Footnotes

1. Moynihan, Ray and Alan Cassels, *Selling Sickness, How the World's Biggest Pharmaceutical Companies are Turning Us All Into Patients*, p.10
2. Angell, Marcia, M.D., *The Truth About the Drug Companies; How they Deceive Us and What To Do About It*, p.142
3. Abramson, John, M.D., *Overdosed America; The Broken Promise of American Medicine*, p.125
4. Ibid, p.115

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5. Angell, Marcia, M.D., *The Truth About the Drug Companies; How they Deceive Us and What To Do About It*, p.117

6. Moynihan, Ray and Alan Cassels, *Selling Sickness, How the World's Biggest Pharmaceutical Companies are Turning Us All Into Patients*, p.43

7. Abramson, John, M.D., *Overdosed America; The Broken Promise of American Medicine*, p.134

8. Stauber, John, and Sheldon Rampton, *Toxic Sludge Is Good For You; Lies, Damn Lies and the Public Relations Industry*, p. 196

The preceding was an excerpt from a typical 9-12 page report in Mary Frost's Investigative Health Report series, "The Perfect Crime." Other report topics include: The realities of high blood pressure medications & cholesterol lowering drugs.

This material is compiled in an effort to support the practitioner and the patient's understanding of the need for whole food nutrition. We at the Foundation believe that the biggest detriment to patient management is the shortage of sound documentation on how our health has been subverted. These Health Reports are designed to be an effective weapon in the practitioner's arsenal to combat the pharmaceutical and food manufacturer's propaganda.

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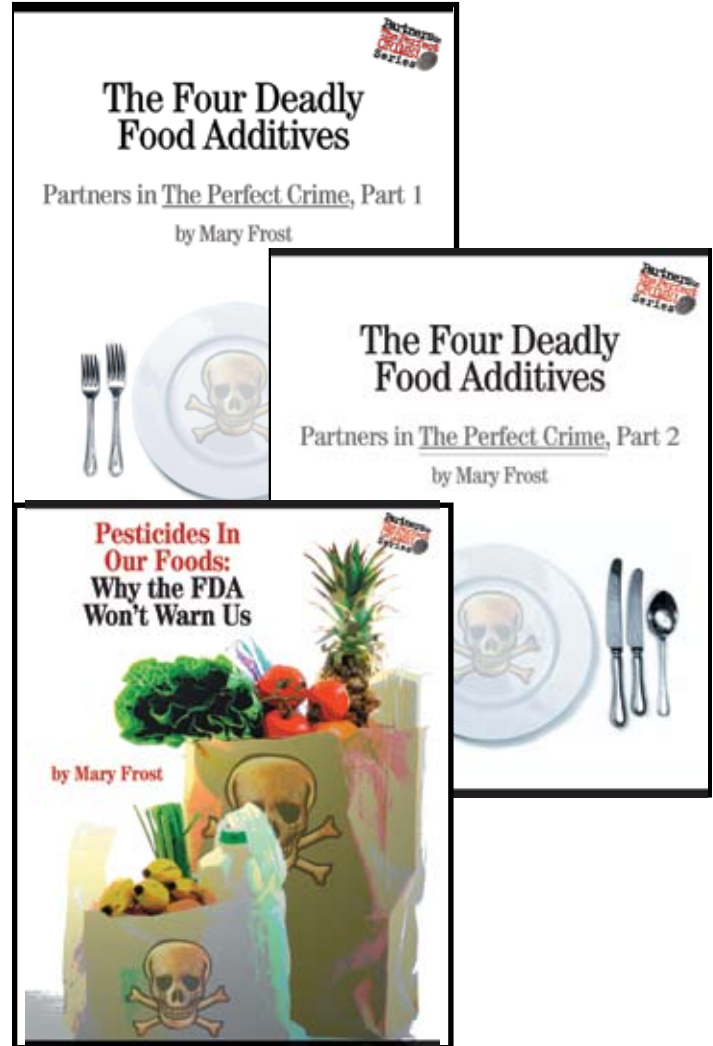
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