

# Death and Harm from Prescription Drugs



## AN AAQM SYNOPSIS OF PHARMACEUTICAL DECEPTION & DEATHS FROM PREVIOUS WDDTY published articles

EDITOR - LYNNE MCTAGGART - **WHAT DOCTORS DON'T TELL YOU (WDDTY)**

EDITORIAL PANEL: Dr. John Mansfield, Dr. Jonathan Wright, Dr. Patrick Kingsley, Dr. Jean Monro, Dr. Annemarie Colbin, Dr. Ellen Grant, Dr. Harald Gaier, Dr. Melvyn Werbach, Dr. Michel Odent, Dr. Keith Mumby, Dr. Vicki Rippere, Prof Gordon Stewart, Sally Bunday

### *What happened to the Principal Precepts Taught in Medical School "First, do no harm?"*

Award-winning medical journalist and editor of WDDTY, Lynne McTaggart has consistently warned people regarding the dangers and deceptions of pharmaceuticals and medical treatment. This AAQM review article summarizes past WDDTY journals and gives credit to excellent investigative research of WDDTY's editor and editorial panel. In a recent August 2008 issue of WDDTY, Mc Taggart stated: "A study in the *Journal of the American Medical Association* once famously likened deaths from medical errors to three jumbo jets crashing every two days. If this were the death rate for passenger flights, no one would ever get on a plane and the airline industry would be closed until a government inquiry had figured out the problem. So why doesn't something similar happen in medicine? The only people who have any idea of the extent of the problem are the health insurers."

Hippocrates stated "Let food be thy medicine and medicine be thy food." One the primary tenets of the famous Hippocratic Oath taken by physicians is "I will apply dietetic measures for the benefit of the sick according to my ability and judgment; I will keep them from harm and injustice." Despite these moral and ethical pronouncements, a staggering 783,936 deaths a year are iatrogenic (induced by doctors). McTaggart says that prescription drugs are like "...a silent killer that never attracts the headlines, never interests the politicians..." One study found that 2,216,000 Americans suffer a serious reaction and are permanently disabled from a prescribed drug every year (*JAMA*, 1998; 279:1200-5). These figures are just the tip of the iceberg. Leading medical researchers say only 1 in 20 adverse reactions are reported for fear of a lawsuit (*JAMA*, 1998; 279:1216-17) and a French study found that just 1 out of every 24,433 adverse drug reactions are reported (*Br J Clin Pharmacol* 1997). According to McTaggart "The vast majority of drug-related deaths are never reported at all." Risks outweigh benefits because risks are never assessed and are neglected in modern medicine. Beatrice A. Golomb, MD, PhD of the University of California explains that this is because the only true way to weigh risks against benefits is to evaluate all-case morbidity (sickness) and all-cause mortality (death) and these are rarely ever reported in medical journals. One out of every 5 prescriptions made in the ICU are in error (*Crit Care Med*, 2006). Consider just a few of the following examples:

- **ASPIRIN & NSAIDs Against Inflammation** - Consider the fact that aspirin and non-steroidal, anti-inflammatory drugs (NSAIDs) like ibuprofen lead to 7600 deaths a year in 1992 (*Scand Journal of Rheumatology* 1992; 92:21-4) and now the death toll at 100,000 deaths a year worldwide with 500,000 needing hospital care to treat serious life-threatening reactions to the drug (*Proceedings of the Annual Scientific Meeting of the American College of Gastroenterology*, 15 2007). Despite the fact that the true dangers of aspirin have been known for 12 years and published in reputable medical journals where it has been known to cause internal bleeding (*British Medical Journal*, 1995, 310:827-30; *Journal of Clinical Epidemiology* 2002; 55: 1057-63; *BMC Medicine*, 2006; 4:22); and gastrointestinal disease (*Lancet*, 1996; 348: 1413-6; *Alimentary Pharmacological Therapy* 2007), these lethal and health-destroying effects are ignored by the overwhelming majority of doctors. The Thrombosis Research Institute (TRI) uncovered a long list of errors—including the shabby quality of the individual studies pooled, mistakes in reporting results and even basic errors in arithmetic. The TRI concluded that there is not adequate evidence to justify the widespread use of aspirin to prevent stroke (*British Medical Journal*, 1994; 309: 1213-17). McTaggart states "aspirin not only fails to stop the thief in the night—it itself is the thief, responsible for hemorrhagic stroke." (*American Heart Journal* 2005; 149; *What Doctors Don't Tell You* 2008).
- **Statins & Cardiovascular Disease** - Cholesterol-Lowering Drugs (Zocor, Mevacor, Lescol, Pravachol, Lipitor, Crestor) increase cancer risks say Tufts University School of Medicine researchers "...the risk of cancer is significantly associated with lower achieved LDL levels may in part be offset by an increased risk of cancer." (*American Journal of Cardiology*, 2007, 50 409-18) and cause cancer in rodents (*JAMA*, 1996, 275: 55-60). In *The Lancet*, Dr. John Abramson, a Harvard Medical School professor stated that statin studies do not measure "clinically and critically important outcomes like hearts attacks, serious adverse events, or all-cause mortality. You can lower cholesterol with a drug, yet provide no health benefits whatsoever. And, dying with corrected cholesterol is not a successful outcome." The drug and food industry make over 50 billion a year on cholesterol-lowering fats (SMART) and drugs. The cholesterol hypothesis is fueled by 20 billion/year of sales on statin drugs. Dr. Ancel Keys, professor emeritus at the University of Minnesota states "There's no connection whatsoever between cholesterol in food and cholesterol in blood. And we've known that all along. Cholesterol in the diet doesn't matter at all unless you happen to be a chicken or a rabbit." Dr. George Mann pronounced the LDL theories dead in an editorial in the *New England Journal of Medicine* in 1977, referring to it as the "Greatest scam in the history of medicine." A massive study of 350,000 men at high risk of heart disease cut cholesterol consumption by 42 percent, saturated fat consumption by 28 percent and total calories by 21 percent and nothing happened! In fact, no clinical trial on reducing saturated fat intake has ever shown a reduction in heart disease. Instead, we read: "As multiple interventions against risk factors for coronary heart disease in middle aged men at only moderate risk seem to have failed to reduce both morbidity and mortality such interventions become increasingly difficult to justify (1991 *British Medical Journal*)." A 10-year follow-up of this original 5-year trial found that men on a low saturated fat diet were twice as likely to die of heart disease as those who didn't. Isn't this exactly the opposite of what pharmaceutical companies and doctors are telling us! After the age of 50, the lower your cholesterol level is, the lower your life expectancy as lower cholesterol increases the risk of dying of anything, including heart disease and cancer. The danger of a falling cholesterol level was first discovered in the prestigious Framingham study: "There is a direct association between falling cholesterol levels over the first 14 years [of the study] and mortality over the following 18 years." Despite this impressive mainstream medicine data, AMA doctors and drug companies lie about the dangers of high cholesterol as a scare tactic to get people to take drugs. The data in their own journals states that lowering cholesterol is far more dangerous than a high level. Now Zetia or Vitorin are also used to lower cholesterol with no data to weigh risks against benefits and fraudulent information on cholesterol-heart disease correlations.
- **Anti-Depressants for Depression?** - Antidepressants are the most commonly prescribed drug on the market and children age 5 and younger, represent the fastest growing group of antidepressant users in the U.S. (*Psychiatric Services*, 2004) and a 2004 study in the *British Medical Journal*, found that the entire class of antidepressant medications (more than 30 different drugs) are not as effective as advertised and unsafe. This study proved that drugs exaggerate the benefits and downplay the health-damaging side effects. These findings prompted the FDA to force drug companies to include a "black box" public safety health warning: Antidepressants increase the risk of suicidal thinking and behavior, etc." The Harvard Mental Health Letter stated these drugs "should be neither a first choice nor a last resort." Depression is a multi-billion dollar business based on the unproven theory that low serotonin levels cause depression. A multi-billion dollar market of best selling drugs called SSRI's or serotonin selective reuptake inhibitors such as Prozac, Paxil, and Zoloft fuels the idea that serotonin is behind depression. An honest meta-analysis of both published and unpublished trials funded by drug manufacturers reveals they put an unwarranted positive spin on the results and/or suppressed the negative results (*New England Journal of Medicine* 2008; 358; 252-60). There is no merit to

MORE

anti-depressant claims cited in these studies. Not only has neuroscience been unable to prove the SSRI theory but Dr. Jeffrey Lacasse states *"there is not a single peer-reviewed article that can be accurately cited to directly support claims of serotonin deficiency in any mental disorder."* Another study entitled "Serotonin and Depression: A Disconnect Between the Advertisements and the Scientific Literature" was published in *PLoS Med*, 2005; 12; 1211-6. Despite the fact that no SCIENTIFIC or CLINICAL EVIDENCE exists, sales are skyrocketing on SSRI drugs with a surge of 353% in sales reported between 1981 and 2000. Over 22 studies produced negative results with SSRIs. Researchers from the Oregon Health and Science University discovered that the manufacturers either tried to hide the fact or put a positive spin on negative research data. The overwhelming truth: Studies failed to demonstrate any significant differences between the drug and a placebo (sugar pill) (*Preventive Treatment 2002;5; Arch Intern Med 1999; 159; 2349-56*) and anti-depressants can drive people to suicide (*J Am Acad Child Adolesc Psychiatry*, 2001; 40).

- **AntiHypertensives & Blood Pressure** – McTaggart states *"More people suffered a stroke with an ACE inhibitor than with a diuretic and patients taking the costly angiotension-II receptor blockers ended up with more heart disease"* and this statement was supported by solid research (*Can Med Assoc J*, 2000; 163). Diuretics causes low blood pressure and premature deaths (*Ann Intern Med*, 2002; 136) and can have serious side effects such as cancer of the kidneys (*Cardiovasc Drugs Ther*, 2000; 14). Exercise and stress reduction have been shown to lower blood pressure far more effectively with no dangerous or lethal side effects (*Hypertension*, 1996; 28; *In J Physiol Pharmacol*, 1998; 42; *J Alt Complement Mee*, 1999; 5; *J Trad Chin Med*, 1986; 6)

### Fraud and Deception: The Multi-Billion Dollar Industry

A study in the *Scandinavian Journal of Public Health* 35:6, 648-54, 2007 stated *"There is evidence that commercial interests promote risk interventions, that patients may misunderstand risk information, and that risk information can cause unnecessary anxiety. The authors have found no empirical data on the amount of time primary healthcare providers spend on risk interventions."* Dr. John P.A. Ioannidis at Tufts University School of Medicine stated that nearly one-third (14 out of 49) of original medical research studies he examined were either false or exaggerated. Dr. Curt Furberg, a well-known cardiovascular epidemiologist says *"Studies can be designed and interpreted in ways that make even ineffective drugs seem like lifesavers."* Furberg estimated 39,000 to 60,000 heart attack deaths in just five years anti-inflammatory drugs like Vioxx. Marcia Angel, the former editor-in-chief of the prestigious *New England Journal of Medicine* says *"Let me tell you the dirty secret of medical journals. With a rejection rate of 90 percent for original research, we were hard pressed to find 10 percent that were worth publishing. So you end up publishing weak studies because there is so much bad work out there."* Jerome Hoffman, MD a professor of medicine at UCLA studied medical literature and stated *"Some studies just didn't make sense to me. I was reading all these things that came to opposite conclusions....there were studies that didn't represent what I was seeing in clinical practice."* Daniel L. Brown, MD chief of cardiovascular medicine at the State University of NY says it's *"a brilliant marketing tool...presented in ways that mislead both doctors and the general public."*

Everyone appreciates the value of doctors and hospital staffs in trauma or in emergency and heroic, life-saving surgeries. However, in health care, the unprecedented horrors and callous disregard of human life are not out of ignorance as citations in this article from traditional medical journals clearly indicate. These warnings have been sounded as early as 1948 (*Science* 108; 1948,1-5) *"No experiment should risk death or disabling injury."* Their recommendations included that patients must be given *"sufficient knowledge and comprehension to make an understanding and enlightened decision."* Yet, radiation levels of 45mSv from CT or CAT scans cause cancer (*New England Journal of Medicine*, 2007, 35). These doses are almost equal to the atomic fallout levels at Hiroshima, proven to cause cancer (*Radiat Res*, 2007; 168:1-64). One study of 400,000 workers in the nuclear industry exposed to only 20 mSv had higher rates of cancer than those working in non-nuclear industries (*BMJ*, 2005; 331:77).

Side effects of many drugs cause diabetes by depleting zinc from the hormone insulin (*Pharmacol Rev*, 1979; 2; *J Rheumatol*, 1987, 14). The evidence against many drugs is mounting to the point that over the past six years, ten FDA-approved drugs have been withdrawn from the market due to deaths and injuries while leading lawmakers represent that the FDA of not doing its job in protecting the public from unsafe drugs. Lawmakers are searching for ways to stop pharmaceutical companies to stop **concealing adverse reactions and death by medicines** that surface during drug trials. Like the false unproven theories of depression, lowering your cholesterol too low can actually cut your life dramatically shorter. The cholesterol myth and other myths propagate lies for money and show a reckless disregard for the health and lives of millions of Americans. For example, in a congressional hearing last November, David J. Graham, and FDA drug safety reviewer, estimated that as many as 55,000 Americans may have died as a result of taking Vioxx. In a recent *Scientific American* article we read *"the financial contributions of the drug companies have also made the FDA less likely to confront them. The FDA has lost its will and courage"* asserts Drummond Rennie, deputy editor of *JAMA (Journal of the American Medical Association)*.

### SUMMARY

Thousands of credible scientific and clinical studies demonstrate that nutrient deficiencies and man-made chemical toxicity underlies inflammation, cardiovascular disease, depression, hypertension and other diseases. These university-based studies also show that the wonderful gifts of God's creation (herbs, foods, homeopathics) are the only way to nourish and cleanse the body and are safer and far more effective than the death-dealing and harmful side effects of man-made pharmaceuticals. This concept echoes the logic of the "Father of Medicine," Hippocrates, known for his ethical and moral views of medical practice who stated *"As to diseases, make a habit of two things—to help, or at least do no harm. Let food be thy medicine and medicine be thy food."*

When faced with sickness, every patient has the legal right to use their God-given free will to make intelligent, informed and safe health care choices. After all, who can argue that the wisdom found in God's creative works (food, air, water, sunshine) is inferior to the short-sightedness of man-made pharmaceuticals used after 1914 or more precisely in 1928 when Fleming first discovered penicillin? Any God-fearing physician should be guided by the highest moral and ethical standards in the bible which explicitly teach us to avoid any defilement of the flesh and to have intense love for one another. These scriptural principles mandate that each physician use the safest and least harmful way to help sick patients. What good is it if we block a symptom and "band aide" a condition that kills a patient shortly thereafter? Honoring God's creation can help prevent physicians from harming or killing their Christian brothers with pharmaceutical prescriptions, documented to cause death and harm. No longer can doctors state they are ignorant of these statistics! The studies cited herein and in WDDTY are from many of the so-called "prestigious" medical journals that used the "gold standard" in their research. Current statistics on death and harm from prescription drugs make it crystal clear that *risks outweigh benefits* in the overwhelming majority of drugs. On the other hand, no published studies show that risks outweigh benefits when using God's creation of foods, herbs and homeopathic medicines.