

## Pharmaceuticals: Limitations of Left Perspective

WHAT are the issues that arise when we are discussing the relationship between pharmaceuticals and health? There are three types of issues. First, the issue of the general relationship between pharmaceuticals and health. Second the role of pharmaceuticals in capitalism, and especially monopoly capitalism, as well as that in state socialism and revolutionary socialism. Third, the objective and the standpoint of the Left movement in India as regards this issue of pharmaceuticals and health. Let us take a brief overview of the various sub-issues involved in these three aspects of this problem.

Contrary to what the drug industry or the technocratic ideology would like us to believe, drugs have played a marginal role in improving or maintaining the health of the people. In a way this is obvious because it is clear that health-status basically depends upon food, water, sanitation, environment, working-conditions and cultural atmosphere. Moreover, until recently, therapeutic efficacy of medicines was very low. In ayurveda, the ancient Indian approach to health and disease, what is notable, (given the primitive tools of enquiry available in those days and given the dominance of idealist tradition), is its materialist outlook—not much scope for spirits and the like. It is however a controversial issue as to what extent ayurvedic medicines have been effective and safe. That they have been used for hundreds of years does not necessarily mean that they have been effective and safe. In the west things were probably worse. Medical professionals had very few useful medicines to offer to the patients (less than the folk-people had) till as late as late 19th century. Many of the remedies were of the nature of blood-letting, branding and the like or use of corrosives or other drastic and harmful substances as medicines.

The era of safe and effective antimicrobials, anti-biotics, started from 1930s and most of the antibiotics and other 'wonder drugs' came after the second world war as a part of the third industrial revolution and post-war restructuring of the imperialist system and its boom. By this time, however, most of the major infectious diseases in the west had already declined substantially. Now it is well-known in informed circles that modern drugs have thus not played an important role in the improvement of the health-status in the west. It is basically the improvement in the general living standards (food, sanitation, housing, work, education, etc.) which did the job. In the developing capitalist societies, these powerful catalytic agents—the modern pharmaceuticals including most importantly the vaccines—have hardly realised their potential because the socio-economic conditions are inimical. This can be seen from the case of megapolis like Bombay. Here we have drugs and doctors (including specialists) available in every lane, but tuberculosis, leprosy, venereal diseases and even polio show to sign of the respite. China, which is a quite comparable out of the capitalist straight-jacket has shown how modern drugs can be a powerful aide in the rapid control over the scourge of infectious diseases when social conditions are favourable for such a control.

The so-called 'diseases of industrialisation' (which are the diseases of monopoly capitalism and the culture it breeds—cardiovascular diseases, injuries due to accidents, cancers,

diseases due to obesity and psychiatric problems—cannot be cured with drugs. On the contrary, the overuse of drugs in such disorders lead to a number of iatrogenic health problems.

It may be argued that the above is a rather simplistic statement. Yes, indeed, it is; it being a brief statement of a standpoint about a historical phenomenon or trend. There are some phenomenon which do not quite fit into this scheme. But that does not alter the overall picture. Secondly, to point out the marginal role of medicines in improving health status of population is not a criticism of modern medicines but of technocratic, self-servicing ideologues who overplay the role of medicines. There is no doubt that modern medicines have a tremendous catalytic potential and even in absence of favourable social conditions, they have made human life more tolerable than what it could otherwise be. But its wrong to attribute more than this to medicines.

The question of the role of non-allopathic medicines is a perplexing one. Homeopathic and allopathic medicines have entirely different presuppositions, are of entirely different nature, both qualitatively and quantitatively; yet both help in different degrees and instances the human body in its recovery from illness. It is a theoretical puzzle as to how this can happen. This discussion cannot, however, be separated from the one about different disciplines of medical care—homeopathy, ayurveda, unani and others. Secondly, this question is also related to the question of the very method of science. Statistical criteria are used to decide the efficacy of medicines in allopathy. How can this be done in homeopathy and ayurveda when their basis is that of individualisation? Is there a way out? Is the very notion of scientific criteria as used in allopathic science open to question? Is there any alternative scientific method? Can there be? There are a long list of such questions which do not seem to lead us anywhere.

One thing is, however, definite. Research into these systems needs to be given more resources—financial and otherwise. At the same time, unless the efficacy and safety of the non-allopathic medicines have been proved through research, by some intelligible criteria proposed by the authorities in these systems, these drugs should not be allowed to be commercially produced.

### Capitalism and Pharmaceuticals

Drug technology was one of the branches of technology, which stagnated for quite sometime even after the advent of the industrial revolution in Europe. The knowledge of human body in health and disease and the development of chemistry was too meagre for quite some time. It is only in monopoly capitalism—the advanced stage of capitalism—that enough resources could be pumped into research in these complicated sciences and it is only then that diagnosis and treatment of diseases could flower into a discipline solidly based on modern science. Modern pharmaceuticals is essentially a product of monopoly capitalism. This same monopoly capitalism has, however, at the same time, become an

obstacle in the path of the full and proper use of modern pharmaceuticals. Monopoly drug companies restrict production and jack-up prices to ensure monopoly profits by using methods characteristic of monopoly capitalism, a lot of irrational and even harmful drugs are pushed onto the consumers. In India and other peripheral countries, this occurs in a very crude manner wherein the market abounds in useless, irrational, harmful products which fetch higher rates of profits. This is at the expense of essential drugs which are at least under some price-control. In the rest, this phenomenon takes place in a more subtle form through a technocratic consumerist ideology of 'pill for every ill'.

The full flowering of the science of pharmaco-therapeutics is also adversely affected by monopoly capitalism. A lot of resources are wasted in inventing 'me-too' drugs which have no significant advantage over the existing ones, but which can be marketed as 'new and better' through aggressive monopolistic marketing techniques. Social resources are also wasted in attempts to prove through 'scientific research', really harmful drugs as safe, or useless drugs as very effective.

Monopoly multinational drug companies represent a classic case of how modern imperialism operates. These monopoly MNCs have on the one hand introduced the fruits of the development of modern science of pharmaco-therapeutics into the third world countries. On the other hand, their monopoly, imperialist interests demand that a part of the surplus value created in the drug industry be pumped off to the imperialist centre; that the drug industry in the peripheral countries be dependent on the imperialist centre so that this sector remains one of the channels of more profitable investments and easier markets. The methods employed to achieve this aim are scandalously bad-production and marketing of the most irrational, irrelevant, and even harmful products at rapaciously high prices through blatantly unethical marketing practices; and the suppression of development of indigenous technology by recourse to 'fair' and foul methods characteristic of monopoly capitalism. The results are more disastrous than they are in the west, since the wastage of and suppression of resources means too much pressure on a weak economy and the impact of cheating and exploitation is much more significant for the poor people who constitute the majority in these peripheral capitalist countries. The contrast between the potentiality of using modern science and technology for the betterment of humankind and the reality of a stunted, distorted development is much more poignantly seen in case of the drug industry in the peripheral capitalist countries.

Contraceptives as a group of drugs need a special mention. The invention of the birth-control pill is regarded by many as one of the important milestones in the path of women's liberation. In reality it is only a defence mechanism for women in the world of patriarchal capitalism in which safe, effective male contraceptives are neither developed nor used adequately. Contraception is considered as the woman's responsibility. The availability of the effective pill in a society wherein women are seen as objects of sexual gratification for men has also meant women's bodies being available 'anytime' without the fear of them getting pregnant. This is convenient for patriarchal men since they can achieve the twin benefit of free sex, and small number of children, without any responsibility or botheration of use of contraceptives.

For the women in peripheral countries and of the ethnic minorities in the imperialist centres, hormonal contraceptives are becoming in addition, a burden on their already poor health. Patently unsafe injectable contraceptives and subdermal implements have given the capitalists, patriarchal state a powerful instrument to enforce its programme of population-control in these countries—at the expense of health of the poor women. Pharmaceuticals which are supposed to enhance femininity are another example of the crude sexism practised by the drug industry.

### Pharmaceuticals in Socialism

Human beings would of course continue to fall ill under socialism and communism. The pattern of diseases would, however, be quite different from those in undeveloped capitalism or in monopoly capitalism since this pattern is decided primarily by the nature of social production and the set of relations encompassing it. It would be an idle speculation as to what kind of health problems would exist then and which drugs would be used. All that we can say with certainty is that in socialism and communism, there will be less and less of illnesses and hence less and less necessity of use of drugs in diseases.

In 'existing socialisms' alias state socialist societies (USSR, China, etc.) conditions are, of course, quite removed from this ideal. But the use of pharmaceuticals in these countries is not vitiated by the narrow needs of a profit-hungry drug industry and hence is quite rational. But there are some problems. For example, the widespread use of the injectable contraceptive, Net-En in People's Republic of China shows that patriarchal relations are present there to quite a substantial extent. In more developed societies—USSR and countries in the eastern block, the disease pattern is not qualitatively different from that in the capitalist west. This, however, does not mean that drugs are overused and misused like in the west since there is no profit-mongering drug industry in these societies. It would be interesting to study the precise nature of use of pharmaceutical in these societies, whether, and to what extent there is any irrationality in the production and use of drugs and why.

### Standpoint of Left Movement in India

The Left parties and groups have criticised foreign drug companies as part of their anti-imperialist standpoint. During last six or seven years a lot of concrete work has been done to demonstrate how specifically MNC drug companies exploit and cheat the Indian people and how they thwart the Indian sector. There are, however, two problems in these criticisms—firstly, most of this work has been done by Left intellectuals as part of their research project or by Left activists, as part of the broader 'democratic' science or health-groups to which we belong. This has put certain limitations on the standpoint that is expressed in these analyses and has even put limitations on the very thinking of Left activists. There is a need to a pause and think about these limitations.

In certain academic institutions, financed by the government, there exists a liberalism among decision-makers and hence it is easier to get a research-project to study the impact of MNCs on the Indian drug industry. This liberalism is in tune with the interests of the Indian state; because such

studies fall within the limited anti-imperialist standpoint of the Indian state. The interests of the Indian bourgeoisie demand that MNCs be pressurised into allowing more and more leeway to Indian capital to exploit the Indian people. Studies focussing on the negative role of MNCs are, therefore, even encouraged by the Indian state. Such studies unearth a lot of valuable anti-imperialist material which can be used by people's movements in their thorough-going, revolutionary anti-imperialist struggle.

But a more or less exclusive focus in these studies on the role of MNCs by omitting a critique of the Indian sector is more helpful to the non-revolutionary anti-imperialist struggle of the Indian bourgeoisie. There is comparatively less concrete research in such studies on the anti-people role of Indian companies—and of the public sector. A critique of the Indian sector does not necessarily mean neglecting the distinction between MNCs, Indian private companies—(monopoly and non-monopoly) and the public sector. But a comprehensive critique is perhaps not encouraged. It is no accident that a majority of these studies directly or indirectly financed by the Indian state omit the Indian sector from their critique.

Popular education and propaganda, based on these studies have an ideological, political role of limiting the critique to only the MNCs. The fact that many Left analysts have a limited, anti-imperialist (understood in a narrow sense) political perspective which excludes an important role of a critique of the Indian sector, also helps to sustain this unnecessarily narrow focus. In terms of demands also, the focus of most of Left analysts is limited to the demand for nationalisation of MNCs. In our strategic demands, we should ask for nationalisation without any compensation and with workers' control/democratisation in the nationalised industry. These strategic demands are for the public education of what is possible in the coming stage of the revolution; and hence the fact that the health movement is too weak today, is no argument including this strategic perspective in our study and propaganda.

Criticisms mounted as part of a health or science or consumer group have an advantage in that such criticisms bring into focus the question of irrational and hazardous drugs,

misleading propaganda by the drug companies about the efficacy and safety of their drugs and so on. Here again, misdeeds of Indian companies are generally not mentioned. But the demand for banning of irrational and hazardous products, is such that no concession can be given to the Indian sector whose performance on this score has been no better.

As a part of the 'democratic' health/science/consumer movements, Left activists have participated in bringing forward the medical (sometimes feminist) issues and demands. But many such groups do not take a political stand against even imperialism; leave aside Indian capital even though the concrete demands made by such groups and their implications are many times anti-imperialist, anti-capitalist. But a lack of a clear political anti-imperialist, anti-capitalist stand sometimes becomes a hinderance in the progress of analysis in such groups. Part of this problem is due to the fact that people's movements and hence the political culture in such anti-establishment groups has not advanced enough. But part of the problem is also due to the fact that the perspective of the Left activists working in such groups is limited to a purely anti-imperialist standpoint, (understood in a narrow sense). That is why even among Left-journalist, analyses about the drug industry from a comprehensive standpoint are a rarity; most of the writings being from purely anti-MNC viewpoint.

The editorial perspective in RJH is meant to delineate various issues (in a somewhat comprehensive fashion) germane to the theme chosen for the current number of RJH and to make editorial comments on some of them. In the foregoing, I have merged this two-step operation into a single step by making a summary-statement of a certain viewpoint on the three types of major issues which were thought to be central to the theme of this current issues of RJH. There are, of course, viewpoints different from the one outlined above. It is hoped that there will be further discussion and debate on these issues. Obviously, in this number of RJH it has been possible to cover only some of the issues.

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