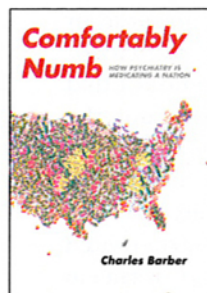


Comfortably Numb

Charles Barber
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Reviewed by
 DANIEL N. GALLUCCI



In *Comfortably Numb: How Psychiatry Is Medicating a Nation*, Charles Barber recognizes what lawyers who handle pharmaceutical products liability litigation have known for years: Drug companies create a marketplace using direct television advertising and attractive salespeople to push samples on physicians, who in turn prescribe these heavily marketed drugs to their patients.

Barber, a Yale University School of Medicine psychiatry lecturer, documents in great detail how the pharmaceutical industry works and how it relies on flimsy science. He believes that prescription medications such as selective serotonin reuptake inhibitor (SSRI) antidepressants, like Prozac, have their place but should be used as a last resort. Instead, Barber advocates cognitive behavioral therapy, which recognizes that all people experience highs and lows as a natural part of life.

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Big pharmaceutical companies promote a vision of constant happiness that Barber believes is an illusion that Americans have bought and that has made the drug companies rich. SSRIs have become their most reliable profit-maker. Drug company profits have averaged about 18 percent since 2004; the primary source of those profits has been SSRIs and cardiovascular medications.

The book begins by explaining how pharmaceutical companies market “lifestyle” drugs. The trend started with Prozac, which was promoted with the phrase “cosmetic psychopharmacology.” Since then, the industry has grown by pushing SSRIs and benzodiazepines

to achieve happiness, Viagra for “lifestyle enhancement,” and drugs that allegedly promote weight loss and delay aging.

Barber observes that while SSRIs were once prescribed on a small scale as treatment for mild depression, the pharmaceutical industry has marketed them so aggressively that they that are now used to treat a wide variety of ailments. He points out that the studies justifying the use of these drugs seldom show any real benefit over placebos. He postulates that if drug companies were truly interested in developing products that help people instead of creating profits, they would spend money on research instead of marketing.

He notes that Eli Lilly stopped developing Prozac seven times before taking it to market because of concerns about limited market size and the difficulty of demonstrating efficacy. Originally, the German equivalent of the FDA found that, under a risk-benefit analysis, Prozac was “totally unusable for the treatment of depression.” When Prozac came to market, just 1 percent of the U.S. population was diagnosed with depression. Since then, that number has increased to around 15 percent.

The book describes how drug companies use ghostwriters to write articles for leading researchers at major academic institutions. In fact, he says, a 1998 review of the *Journal of the American Medical Association* and the *New England Journal of Medicine* found that 11 percent of all articles promoting the use of drugs were ghostwritten without appropriate disclosure to the reader.

Barber also takes issue with the current FDA, asserting that under the Bush administration it no longer protects consumers but instead protects big pharmaceutical companies’ profits. Because most drugs are fast-tracked without sufficient research, one in five drugs introduced since 2000 has either been withdrawn or had a “black-box” warning placed on it.

The book’s major weakness is that it fails to address the FDA’s claim that the agency can preempt state causes of action against pharmaceutical companies because the FDA is the expert on safety. The book makes it clear, however, that the FDA is little more than a rubber stamp for whatever big pharma wants.

Barber says he has witnessed a revolution in the insurance industry. Under managed care, he notes, insurance companies would rather pay for prescriptions, particularly generic SSRIs, than for cognitive behavioral therapy even though such therapy is more effective in treating depression.


Barber is concerned that SSRIs are overprescribed, creating a population that feels neither the highs nor lows of life. For example, he notes that the drugs are now given to people diagnosed as suffering from generalized anxiety disorder, a diagnosis that did not even exist 10 years ago.

The United States is the only country in the world where most doctors recommend antidepressants as a first line of treatment for depression—most advanced countries pay for therapy first. The result, of course, is that pharmaceutical companies do not make as much money in other countries as they do in the United States.

Barber understands that cognitive behavioral therapy and other forms of therapy will not fund advertising campaigns, employ tens of thousands of sales representatives, or host conventions to hawk new pharmaceutical products. While his approach, at times, comes across as a bit Pollyannaish because he places too much faith in therapy and too easily dismisses the effectiveness of medication, his view is much more realistic than the American Medical Association’s current position, which relies heavily on drugs.

Many of the stories Barber relates about drug safety are well known to lawyers practicing in the pharmaceuti-

Big drug companies promise a vision of constant happiness that has made them rich.



cal arena. Lawyers have taken a leading role in promoting public safety by bringing cases highlighting the dangers of drugs like Zyprexa, which can cause diabetes, and Paxil, which has been linked to suicides in young adults. The lawyer's role in keeping drug companies honest is not discussed, but it would have been a healthy addition to the book.

Still, any reader would find this book enlightening for its discussion of how pharmaceutical companies manipulate the American public. Most consumers do not realize how the Bush administration has jeopardized pharmaceutical product safety, nor do they realize that many new drugs have little clinical research to support the safety and efficacy claims made for them. ■

DANIEL N. GALLUCCI *practices law in Lancaster, Pennsylvania.*