

Just Say Yes to Drugs



MANY OF US ALREADY HAVE. Many more are joining the club every day. And why not? With the promise of putting aside our pains and discomforts, if only for a while, the allure is great. And when our own doctors urge us to do so, who's to argue?

I'm referring, of course, to those drugs ubiquitously advertised on television and in print.

Reduce pain. Prevent heart attacks. Rid yourself of anxiety, and have sex more often and more enjoyably. Have we truly found the fountain of youth?

There's no question that the lives of many people have been made longer and better through the use of proper medications. But as the variety and power of these medications increase, individual decisions about the risk and reward of taking them become more complex. With recent controversies over drugs like Vioxx and Celebrex, we continue to learn that there's no free lunch.

The case of Celebrex, originally developed to treat arthritis pain, is one that illustrates the confusion that can surround the emergence of a new drug. A recent Web search at www.webmd.com turned up opinions and studies showing that Celebrex "may reduce the pain related to tennis elbow and Achilles' tendon injury"; "shows promise for the treatment of breast cancer"; "may hold the key to preventing colon cancer"; and "more than doubles the risk of heart attack."

Drugs really do have side effects. The molecular manipulations in the lab and the carefully controlled trials leading up to a drug's release give some indication of what these might be. But once a drug hits the streets, a different storyline can emerge:

- Will patients take the drugs as prescribed?
- Will dosages be missed or multiplied?
- Will drug company representatives oversell their benefits?
- Will manufacturers fully disclose all safety concerns?
- Will physicians prescribe them only as indicated?
- Will advertisements influence patients to demand newer (and riskier?) drugs when more tried-and-true remedies are available?

It's difficult to see how our time-constrained physicians can carefully track a particular drug's effect on each patient. And unless a patient is well informed, will he or she even recognize a potentially significant side effect when it does arise?

Consumers Union has recognized the growing need

for better (and unbiased) information about the effectiveness, safety, and costs of prescription drugs by launching a series called "Consumer Reports Best Buy Drugs." This series relies

on independent reviews by physicians and researchers at the Oregon Health & Science Evidence-based Practice Center, which are available free of charge at www.crbestbuydrugs.org.

Nonetheless, each drug may react differently with each person depending on the individual's chemical make-up and current state of health. And each drug may also interact with every other medication that person is taking.

When one considers that senior citizens average 20 to 30 filled prescriptions per year, the numerical complexities become apparent. When one considers that "seniors are going to multiple physicians and getting multiple prescriptions and using multiple pharmacies" (as suggested by Dr. Robert Epstein, chief medical officer of Medco Health Solutions Inc in *Reuters Health*, May 21, 2003), patients may feel they need a personal actuarial consultant to assess the risk of negative interactions.

Evaluating such risks from an academic standpoint is an intriguing intellectual exercise. But when this decision becomes a personal one, it can be downright scary. Observing a professor write out a risk/benefit equation on a chalkboard is one thing. Watching that equation play out within your own body or that of a loved one is quite another.

In his book, *Powerful Medicines*, Jerry Avorn writes: "Benefits, risks, and costs don't exist inside a given drug molecule; they become real only when that molecule is inserted into the life of an individual patient, as he or she interacts with clinicians and moves through the health care system Even when a medicine's risks and benefits are well defined, balancing them against each other can be a task of Talmudic complexity Pharmacology must consort with game theory, decision science, and the psychology of risk assessment. . . to decide which benefits are worth which side effects."

In this era of great medical and pharmaceutical progress, we are pioneers on a road that holds great promise. Our physicians and pharmacists can guide us to wonderful, new remedies. But hazard and risk lie along that road as well, and only by being well informed and respectful of those hazards will we be prepared to personalize the risk/reward equation when it's our turn to enter the ever-widening circle of drug users.

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