



Swine Flu – Winners and Losers

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What do you get if you cross pharmaceutical executives chasing sales, a government eager to change the never-ending stream of negative headlines, and a normal antigenic shift of an influenza virus? A Swine Flu Pandemic.

By the time you read this, the public's stamina for Swine Flu Panic will be faltering, the junior schools across the country will be re-opened and those sneezing on the tube will no longer be ostracised their fellow passengers. Britain will return to normal, except for a multi-million pound dent in the public purse.

Long before the World Health Organisation declared a pandemic imminent, Gordon had signed yet another big cheque for 16 million additional doses of Tamiflu, at an estimated £256 million. Between our hoards of Tamiflu and Relenza, our national stockpile now stands at just under 50 million doses, and the total cost of building it now exceeds the cost of more than three fully-equipped medium-sized hospitals.

It seems the children who enjoyed their unexpected holidays were not the only ones to benefit from Swine Flu. Shareholders of both Roche and GlaxoSmithKline, buoyed by the eagerness our Government displayed in increasing our Tamiflu stockpiles, saw the value of their investments soar. Many have articulated concerns that drug companies are the sole beneficiaries of widespread illness; very few suspected they could see such a boost to their bottom line from widespread non-illness.

Of course, an increase in drug sales during mass hysteria is not a new phenomenon. Who remembers the Bush administration's backing of figures which claimed that 150 million people would die from Avian Flu? The same administration duly spent \$2billion on Tamiflu vaccines. They were noticeably more bashful when it came to revealing later on that only 60 died across the globe. They were quieter still on the subject of defence secretary Donald Rumsfeld's personal interests in hyping up Avian Flu – in 2006, he declared £2.9m in capital gains from selling the same shares in the Tamiflu developers that shot up in value in response to the government's huge vaccine purchase.

In the five days leading up to April 28 this year, Roche (manufacturers of Tamiflu) saw their share price rise by 9%, whilst GlaxoSmithKline (Relenza) made gains of 8% on the back of government plans to increase their stockpiles of flu vaccines. Is it just a co-incidence that Health Secretary Alan Johnson announced Britain would be increasing their Tamiflu stockpile to 50 million doses just hours before his keynote address to the Association of the British Pharmaceutical Industry?

Another discussion point is whether the close ties between government officials and the pharmaceutical industry contribute to the blanket refusal of our health authorities to

publicly acknowledge the WHO's studies, that clearly show that H1N1 strains quickly become resistant to Tamiflu? Is this because it would show how little we are getting for a £800 million? Or could it be because they were never interested in disease and health, only figures, favours and headlines?

If that wasn't enough to question who is really pulling the strings in this debacle, another notable co-incidence is that there is just three and a half years between this monumental purchase and the government's first colossal outlay for our existing Tamiflu stockpile (which followed non-event that was bird flu). What makes this an interesting co-incidence is that Roche quote a shelf-life of 36 months for their flu drug. The initial stockpile was about to expire. It becomes harder not to draw certain conclusions; whilst it has been said that you can't put a price on good timing, big pharma's £256m sales order says otherwise.

The handling of the supposed Swine Flu threat has been widely criticised, but there is very little questioning of why we would even make a fuss over this issue in the first place. Has no-one noticed that since April 4, when the first media reports of swine flu emerged, there have been just 65 confirmed cases in Britain? This has resulted in zero seriously ill people, zero deaths. To put these figures into perspective, seasonal flu – the type we have all experienced at some point – kills 4,000 people every year in this country. That's an average of 11 per day, or 427 in total since the first report of swine flu. With just that one comparison, both the public's fear and our government's reaction are shown to be completely disproportionate. The question is not why this simple comparison has not been made, but who's share price is dependent on a continued climate of fear?

Wendy Barclay, of the Imperial College, says that this strain is milder than the seasonal flu virus.

Bernd Muelhbauer, head of the Institute of Pharmacology at the Bremen-Mitte clinic, had warned against the use of drugs that have yet to be shown effective in humans (Tamiflu has yet to pass this test). As mentioned above, WHO have shown that H1N1 strains quickly develop resistance to Tamiflu, making our multi-million stockpile potentially worthless.

We may be blessed with a 24-hour news culture, but no opinions that contrasted the official viewpoint were given the time of day, at least until some time after the government had shelled out on a massive new stockpile. Sky News hosted debates over the handling of the crisis, but the possibility that there was no crisis was not even considered. Even when it became clear that Centre for Disease Control (a US federal agency) had significantly overstated the risks of swine flu, their own Dr Anne Schuchat continued to articulate the value that anti-viral drugs had to play in prevention for those whose immune systems were weakened.

The same editorial policy dictated that the public should continue to be subjected to speculation on worst-case scenarios and other cursory predictions. Following the closure of Paignton Community and Sports College, viewers were also treated to sombre interviews featuring 12-year-old friend of Amy Whitehouse, a pupil who had been diagnosed with swine flu. The friend voiced concern at the apparent demise of the Devon pupil. The public, no doubt, gasped with horror at the sheer inhumanity of it all. Meanwhile, where were the interviews with real 'victims' of the outbreak? Clearly, reports of normal-looking individuals taking a day on the couch - perhaps wrapped in a blanket and clutching

some kleenex - would do little to increase public fear. A normal response to a normal flu just isn't scary.

The editorial consistency suffered disruption just once. On 28 April, the day Thomson and First Choice suspended outbound flights to Cancun, BBC correspondents at Manchester airports took the opportunity to interview returning holidaymakers who had survived the swine flu outbreak. Two interviews were broadcast live, both yielding the same story; despite the ongoing reports of chaos across Mexico, despite the experts suggesting that this could be the most serious pandemic for 90 years and despite newspaper headlines warning us of widespread deaths across London, neither family had noticed anything during their stay in Mexico. In fact, both confirmed that the first they had heard of swine flu was the leaflet handed to them by staff on their homebound flight. No news channel chose to make reference to these statements again.

Whilst the modus operandi amongst the government, media and pharmaceutical companies has been to simultaneously talk up the gravity of the situation whilst espousing the many benefits of anti-virals, there has been much less focus given towards the potential downsides of such an aggressive approach. The side effects listed on Roche's website include 'mild to moderate nausea and vomiting', together with a warning of increased risk of self-harm.

If history tells us anything, it should be this: we should expect some sort of flu scare in 2012 (A deadly pandemic pre-Olympics, anyone?), we should see a steady stream of pressure from pharma-sponsored charities to introduce compulsory flu vaccines and we should definitely expect questionable policies at the top level until the entire system is overhauled.

Or maybe I'm just being cynical!

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