

## BOOK REVIEW

# Drug deals

B C RAO

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John Grisham. *The king of torts*. Mumbai: Arrow Books, Random House Group Ltd, 2003. Rs 225, pp376. ISBN 0-09-941617-4

Clay Carter, a lawyer who holds a none-too-well paying job, that of defending an indigent in the office of the public prosecutor, is asked to defend a teenager who has committed a murder. What initially appears to be a fairly simple, open and shut case of one street junkie killing another, turns out to be a case of murder without a motive. Why would a criminal, who has never gone beyond petty shoplifting, suddenly murder a person, and that too, while on a de-addiction programme? A bit of investigation reveals that these de-addiction centres have more such cases and are trying to hide some facts. When Carter is at this stage of the investigation, a representative of a major pharmaceutical company approaches him and makes an astounding proposition. This man, Max Pace as he calls himself, is a fire-fighter, one who solves a problem before it flares up. In this case, it involves a drug major that experimented with a de-addiction pill called Tarvan without following the necessary protocols. The drug succeeds in de-addicting a considerable proportion of patients, a figure high enough to become a major selling point in the pharma market. There is, however, a major side-effect, one that will bury the drug—and the potential profits—entirely. Max Pace swings into action and... I shall not spoil the interest in the book for future readers by revealing more of the plot.

The stakes in this episode and in the rest of the book are so huge that the lawyer's conscience is quickly buried and the unfolding story is one of the meteoric rise of Clay Carter and what follows. To add spice to the intrigue is a romance that has twists and turns as the story progresses.

There are some lessons here for doctors who are ever ready to prescribe any drug without reading the fine print. Avaricious drug companies may market drugs without

proper safeguards, push clinical trials and hide facts. An established drug in the market, such as the one mentioned in this book causes tumours—a fact that may have drawn the attention of the medical community. The question that arises is: why did the medical profession not complain? The author makes a pertinent comment: 'doctors and pharmaceutical companies sleep together!' The other reason is that undesirable side-effects are seen by doctors only rarely, whereas if one takes the population as a whole these side effects form a sizeable proportion and tort lawyers are experts in harnessing these numbers. Imagine a scenario wherein 500 patients suffer a untoward disabling side-effect and the drug company that wants to settle with them pays a compensation of one million dollars each. The total 'cut' the lawyer representing all of them would get would be colossal compared to one person fighting the case for which he may not have the wherewithal to do so. This is what mass action is all about.

What makes the novel attractive to a medical reader is that it so very possible in real life. Indeed, perhaps it is happening in Third World countries. I refer to the ongoing cisapride story, which I wrote about in 2000 (1) as well as its variations (2). With poor laws and ineffective machinery to enforce them, it is conceivable that major pharma companies might try out their experimental drugs on our population as Ackerman did with their anti-addiction drug Tarvan in the far East initially, and then with poor African–American patients in rehabilitation homes in the US.

This is the usual John Grisham story—eminently readable, but with a message to all of us. 'Think twice before prescribing, and prescribe only if it is based on evidence.'

### References

1. Rao BC. Withdrawing drugs: Need for global uniformity. *Natl Med J India* 2000;**13**:165.
2. Pai, SA, Lakshmi PK, Rao BC, Sahni P. Pharmaceutical companies and the third world [Correspondence]. *Lancet* 2003;**361**:1136.