Big Karma or Big Pharma

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I don’t make a lot of money as a graduate student. Every day I ride to work on my crap bike, and I have a reputation in the lab for finding the cheapest places to buy food. Yet I feel I have enough money, because every year I manage to stay in the black, barely.

I’m pretty content to live this way for the moment, because the work seems meaningful. I just require that it is enough that I don’t slowly sink into debt. Then I would feel like a chump. I must say I felt like a bit of a chump last year when the head of the University Health Network Tom Closson announced his retirement to “spend more time with his family” and I realized he was annually paid $710,000, he who constantly complained that the UHN required an extra $15,000,000 from the Ontario government to scrape by. (1) Wasn’t that excessive? Was he really worth being paid thirty times more than me? Ten times more I could accept—I’m not the greatest PhD student in the world—but thirty times? What is he thinking when he receives his pay-cheque each month, equivalent to a year’s pay for one or more nurses working in the hospital: “I’m worth it,” or “My negotiator did a great thing by getting me this much money,” or “I wish I was making as much as that V.P. from General Motors I met last month,” or was it “I’m contributing to the collapse of universal health care”?

When I graduate I hope to find a job that serves me financially. What I don’t want is a job where the burden of meaning is laid solely on my pay-cheque, where there is no rationale except “more is better” and you judge your worth by how much you can siphon out of the system; where it is inconceivable, impossible to think “this is too much.”

As PhD students in the life sciences, we are expected by our supervisors to become researchers like them, but few of us do. For those of us who are not driven enough, lucky enough, and smart enough to reach that position we have to cast around for some other career after graduate school.

Bearing this in mind, I went to the Life Sciences Career Day Seminar in June. I attended a panel discussion group called Law and Tech Transfer. On the panel were a patent lawyer, a patent agent trainee, a manager of business development, and a VP of business development.

All four gave speeches, yet by the end I was still somewhat bewildered about what exactly the business developers did. The students around me asked questions like “Would the MBA programs take someone with no business experience?” and “How many IT guys does a large law firm have?” I realized I knew less than the students around me, not knowing what an IT guy was. Instead I asked the following painfully naïve question: “Do you find that your work is ethically satisfying?”. I figured these people had made their choices and were locked into their careers. Their paths were set, but ours are not, and they could warn us if they felt they had made a mistake.

The lawyer on the panel said some of his work was for Big Pharma, but some was for individuals. He had a client who had been fighting for fifteen years to keep an idea of his from being stolen; that’s what made it all worthwhile. His answer implied that the work he does for the big drug companies requires some sort of antidote.

I know a Ph.D. graduate who works for a drug company and he says his ethical concern is for the investors. In addition, he says he plans to move to Africa and teach people about HIV safety to “regain my karma” which I think
sounds completely ridiculous. It suggests he is not comfortable with what he is doing.

My concerns about working in the drug industry spring from a simple thought: new drugs are very expensive, disturbingly expensive. I worry that in the hands of Big Pharma the cost of essential drugs will cripple public health care in Canada. A Nature Review article earlier this year stated that colon cancer therapy in 1996 cost less than $100, and that with new therapies the same eight weeks of treatment would now cost over $30,000. (2) The article states, “Cancer drug development has transformed from a small, mostly public effort...to become a major international industrial effort.” Is that reasonable? According to the former editor of the New England Journal of Medicine, Marcia Angell in The Truth About Drug Companies, the cost of new drugs is artificially high. (3) For a drug that makes your hair grow the cost is not so disturbing, but for a drug that prevents you from dying of a heart attack or cancer, grossly inflating the cost of a drug seems evil.

I’ve been told that Closson’s salary is low compared to other CEOs. It appears puny when compared to the compensation for the CEO of Pfizer (CAD$35 million). The mistake is in making such a comparison. The irony is that the people in health research, the students, the post-docs and most of the principle investigators, we all work together for a common goal, which is ultimately related to the betterment of humankind. You don’t see too many papers ending with “and this research could ultimately lead to better biological weapons.” We are not in this “business” for the profit of the few at the expense of the many, so why should we accept that in others, or be forced to support such a model?

Is this the only choice available to us? The Salk polio vaccine was developed at a non-profit institute. (4) A method of growing the vaccine in cell cultures was developed in the Netherlands, at a government research lab. (5) Would the vaccine be affordable worldwide today if it had come from a modern pharmaceutical company? When I arrived at the Life Science Career Day there were different seminars to go to, including one titled “Merging Business and Science,” I couldn’t find the one I was looking for, which would have been called “Separating Business and Science”. There is a non-profit drug company today, called the Institute for OneWorld Health. I might try to get a job there, yes, that’s what I should do when I graduate, work for the non-profit drug company. Too bad they only have 40 employees! (6)

References:


Hypothesis - 20