

# America's Love Affair with Prescription Medication



We now take more pills than ever. Is that doing more harm than good?

It turns out Americans take more pills today than at any other time in recent history and far more than people in any other country. Much of that medication use is lifesaving or at least life-improving. But a lot is not.

The amount of harm stemming from inappropriate prescription medication is staggering. Almost 1.3 million people went to U.S. emergency rooms due to adverse drug effects in 2014, and about 124,000 died from those events. That's according to estimates based on data from the Centers for Disease

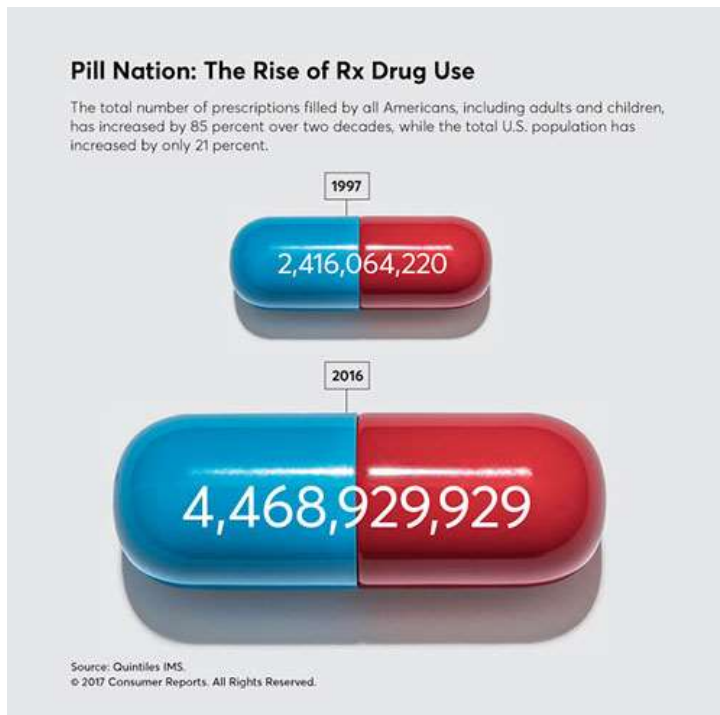
Control and Prevention and the Food and Drug Administration. Other research suggests that up to half of those events were preventable.

The nation's expensive and harmful pill habit comes in several forms:

**Taking too many drugs.** Nicole Lamber of Williamsburg, Va., says she became "completely nonfunctional"—with pain, rashes, diarrhea, and anxiety—from the adverse effects of several drugs, including some her doctors prescribed to treat side effects from her initial prescriptions.

**Taking drugs that aren't needed.** Jeff Goehring of Waukesha, Wis., suffered a

debilitating stroke shortly after he began taking testosterone, which his doctor prescribed for fatigue even though the Food and Drug Administration hadn't approved it for that use, according to a lawsuit he's involved in.



**Taking drugs prematurely.** Diane McKenzie from Alsip, Ill., had regular bouts of diarrhea and vomiting, side effects she attributed to the drug metformin, which her doctor prescribed for “prediabetes,” or borderline high blood sugar. But McKenzie found that losing weight controlled her blood sugar levels without drugs.

Why would so many people take so many potentially harmful pills?

Partly because while all drugs pose some risks, they’re often essential, treating otherwise deadly or debilitating diseases, notes Andrew Powaleny, director of public affairs for the Pharmaceutical Research and Manufacturers of America (PhRMA), a trade group.



Source: Consumer Reports National Research Center's nationally representative survey of 1347 adults, conducted in April 2017.

Still, many Americans—and their physicians—have come to think that every symptom, every hint of disease requires a drug, says Vinay Prasad, M.D., an assistant professor of medicine at Oregon

Health & Science University. “The question is, where did people get that idea? They didn’t invent it,” he says. “They were spoon-fed that notion by the culture that we’re steeped in.”

According to these experts, it’s a culture that is encouraged by intense marketing by drug companies and an increasingly harried healthcare system that makes dashing off a prescription the easiest way to address a patient’s concerns.

### Doctors Who Know When to Say No

Ranit Mishori, M.D., a professor of family medicine at the Georgetown University School of Medicine in Washington, D.C., made it her New Year’s resolution this year to prescribe fewer drugs.



Source: Consumer Reports National Research Center's nationally representative survey of 1347 adults, conducted in April 2017.

She’s part of a trend called “de-prescribing,” or focusing on keeping patients healthy by getting them off unnecessary drugs. “In med school we’re taught how to prescribe, not how to take people off drugs,” she says.

Another doctor who de-prescribes is Victoria Sweet, M.D., who spent 20 years at a charity hospital in San Francisco with few high-tech resources but lots of time for patients. “There’s a big push in our country to practice medicine as if we are fixing machines with a broken part,” says Sweet – “Take the pill, fix the symptom, move on.” “Slow medicine” means “taking time to get to the bottom of what’s making people sick—including medications in some cases—and giving the body a chance to heal.”

But for the system to change, insurance needs to evolve, too, says Cynthia Smith, M.D., vice president of clinical programs at the ACP. “A patient’s out-of-pocket costs are currently significantly less with medical therapy” than with nondrug options, she notes. “We need to make it easier for both doctors and patients to do the right thing.”