

Pills a Poppin': Our Medication Nation



by Mitch Albom | | Detroit Free Press

Last week, my father, who is 83, suffered a medical emergency. At the hospital, he was asked this question: “How many pills do you take?”

His answer: aspirin and Zocor. “That’s it?” came the reply.

Days later, after he’d been prescribed a daily blood thinner, a blood pressure drug and a stronger cholesterol drug, a therapist asked, “How many pills do you take?” He answered with the three new medications.

“Wow,” he was told. “You’re doing great for your age.”

Both responses are telling. We live in the Age of Prescription, when anything and everything has a pill assigned to it. If you’re not swallowing something, doctors are surprised.

Did you know the average American fills 12 prescriptions a year? Our medicine cabinets are stocked with small brown bottles. From heartburn to heartache, there is a pill you can pop.

And that's how the drug companies want it.

"It's a huge business," says **Alessandra Rain**. She should know. At one point in her life, Rain took more than 100 pills a day – the result of an injury and personal issues that led to one prescription after another. "I took pills for insomnia, for anxiety, for sleep, for depression."

She blames doctors. She blames herself. "I wanted my pain handled instantly," she admits.

And plenty of drugs promised to do it. Think about how many kids are already on attention deficit disorder medication, how many adults are on weight-loss or sexual function pills, how many senior citizens have plastic dispensers labeled Monday through Sunday to organize all their prescriptions. Nearly half of Americans older than 65 take five medications a day, and a third of them will suffer adverse side effects.

Yet we keep swallowing.

Diagnosis by TV

America wasn't always a pill-popping nation. It used to be that if you had a problem, you saw a doctor, and if the doctor felt it was serious enough, he prescribed something.

Today, TV ads trumpet drugs straight at us. You're asked if you have a problem. You're told there is a way to deal with it. You see actors smiling in suggested healing. Next thing you know, you're asking your doctor for those pills.

There's a reason the pharmaceutical industry typically spends nearly twice as much on advertising as it does on research.

It works.

Here's the mentality of our country now: If you have a problem, open a vial. Cholesterol rising? A pill for that. Can't sleep? A pill for that. Feeling blue? A pill for that. Never mind that these issues were once dealt with by diet, exercise or facing our problems. Today it's easier – and better for the drug industry – if you just ingest something.

"The HMO system has crushed us," says Rain, who eventually told her doctors "Enough," quit all her medications, and started a group called Point Of Return to help others with drug-dependence issues. "Doctors today don't have time to figure out what's wrong. They just write a prescription."

Of course, they have motivation, as we learned in the recent humongous \$3-billion judgment against GlaxoSmithKline. It revealed that doctors were often enticed to prescribe drugs through perks and kickbacks. This, on top of the fact that Glaxo wrongfully marketed anti-depression medicine to teenagers.

It's clear why the drug companies would push those limits. The younger you hook 'em, the longer you have 'em.

Side effects

Did you know only America and New Zealand even allow direct-to-consumer drug ads? Think about it. Why should average citizens be seeing ads for drugs? Shouldn't that be limited to the physicians who then determine whether they are appropriate?

But the drug industry leapfrogs the process, counting on those in pain, in sadness, overweight or overindulgent to head for the pharmacy.

Who's watching the side effects? Who's checking for drug interaction – especially when people take so many medications?

And then there's this issue: What standards are being set for "problematic?" What level is truly too high for cholesterol? How long is too long for depression? What really determines ADD? The lower the bar, the faster the medication gets prescribed. And if you don't think the drug industry exerts pressure on those levels, you might want to take another pill: for na~vet~.

My hope is that my father is not on his pills for long. This may dismay certain doctors, but so be it.

"How many pills do you take?" The answer ought to be: "Only as many as I need." Sadly, as our medicine cabinets prove, that is not always, or even often, the case.

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