

## HOW TO BE A CORPORATE DRUG DEALER

by Shane Ellison M. Sc.

The growth in knowledge of biochemistry, physiology, organic chemistry, and chemical process methods has yielded millions of new synthetic (man-made) drug targets. These new discoveries have the potential to bring billion-dollar profits to any pharmaceutical company who can convince medical doctors, the FDA and the American public of the necessity of these new patentable drugs in ensuring health. Considering that these drugs have toxicity profiles that make marijuana and crack look like candy and that natural, inexpensive medicine derived from food are easily accessible and extremely effective, this endeavor looks impossible at first glance.

### About the author:

Shane holds a Master's degree in organic chemistry and has first-hand industry experience with drug research, design and synthesis. He knows American's want and deserve natural medicine not prescriptions. E-Mail: [shane@health-fx.net](mailto:shane@health-fx.net)

However, I want to make it clear to my fellow pharmaceutical entrepreneurs that several proven methods for success in corporate drug dealing exist. These methods are readily available to us, and have proven so effective that if done properly, naive Americans will be begging us for the latest and greatest synthetic drug. More exciting, once used, their blind loyalty to our drugs will undoubtedly lead to further drug use as a means for treating the negative side-effects associated with the initial drug we push on these fools. So, go by a new house, hell, buy two. Buy your wives a vacation to a tropical island. Pay cash for your new Lexus and private jet. While the stock market drops at record speeds, our profits will be soaring. In no time, we will have an amount of money that would make every industry in the world envious.

First and foremost, we must gain the trust of medical doctors. They haven't been trained on the use of natural medicine for over 75 years, so convincing them will be like feeding candy to a baby. The secret is known as "Medical Ghost Writing". In order to convince doctors that our

drugs are extremely safe and effective we will find academic PhD's (poor, hungry and driven) to write favorable reports about our drugs. Considering that these reports will be false it is unlikely that the PhD's will be willing to put their name on the paper, maybe even reluctant to write them. To push them into doing what we say, we'll offer them \$20,000 for each report! Don't worry; this is pennies compared to what we'll make. And

considering how overworked and underpaid these PhD's are they'll beg us for the opportunity. Since they won't put their names on the false reports, we'll simply find complacent, high-paid doctors (a

dime a dozen) looking for prestige to list their names as authors. Once done, we'll publish these reports in peer reviewed medical journals like the Lancet, British Medical Journal, and New England Journal of Medicine. Other medical doctors will read these and succumb to the scientifically written propaganda and ultimately begin feeding our drugs to the public!

Second, we want the public to go along with the charade and eat whatever drug the medical doctors feed them. To this end, we will deceitfully and tirelessly advertise directly to all of America via radio, magazine and television. We'll call this guerrilla drug marketing. Every single ad will focus on how safe and effective our drugs are. We'll throw in a few antidotal negative side-effects to make the ad appear "more real". Over time, taking our drugs and becoming an FDA approved drug addict will be the norm. In fact, becoming an FDA approved drug addict will be so common place that to refuse our drugs will make one look like a "fool". We can then convince America that they are "quacks" with no scientific basis whatsoever.

I assure you, this type of Direct-to-Consumer advertising is the Holy Grail for success in corporate drug pushing. According to the United States General Accounting Office (GAO), drugs that are promoted directly to consumers are often the best-selling drugs despite their safety and effectiveness. As shown by the GAO in its report to congress, sales for DTC advertised drugs increase faster than sales for drugs that are not heavily advertised to consumers. Specifically, between 1999 and 2000, the number of prescriptions drugs dispensed that underwent heavy DTC advertising rose 25 percent. Conversely, drugs that did not undergo heavy DTC advertising only increased 4 percent.

Who said getting rich wasn't easy? This is going to be a breeze!

Future tactics can be employed if necessary, there's nothing wrong with being greedy. Once the aforementioned techniques are in place we can begin other routes of guerrilla drug pushing. We can invent diseases characterized by common everyday symptoms. We can convince parents that their kids should be docile robots and if not that they must feed them central nervous system stimulants to make them "normal". We can brainwash the public into thinking that everyone should have the exact same cholesterol levels or face the consequence of early death, thus causing

them to take our cholesterol-lowering drugs. We can elicit the help of the DEA to make natural drugs illegal to possess. This will force the more intelligent persons to take our drugs as a last ditch effort to procure health rather than taking inexpensive natural medicine. And finally, we can engage an army of pharmaceutical rep's onto the front lines by having them visit every single medical doctor in the nation to distribute our drug propaganda. These rep's will be paid handsomely as to curve any ethical or moral question they might have about dealing our drugs.

#### References

1. As reported by Erica Johnson of CBC news, medical ghostwriting is the practice of hiring PhD's to crank out favorable drug reports while leaving out negative side effects for drug companies. Once the report is complete, drug companies will get doctors to put their name on the report as authors. The carrot? Ghost writers can receive up to \$20,000 per report while the doc's are enticed with money and prestige. These reports are then published in the most prestigious medical journals such as the Lancet, British Medical Journal, and New England Journal of Medicine.

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