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“Why don’t people like you?”

Stephen Nicola

As blog titles go you would be forgiven for thinking you had ‘accidentally’ clicked through to the latest self-help article, or the next wave of exposés outlining some random celebrity’s daily routine (see Mark Walberg) that ‘inexplicably’ continue to permeate your filter bubble. Alas, for those souls in search of clues as to why you have ended up alone, hapless and hated by the vast majority of people you encounter – “these aren’t the droids you’re looking for”. And if you smiled at that reference, that might be something worth reflecting upon.

Regrettably, this blog can’t provide you with the five exercise routines to boost your likeability auras, and no it doesn’t provide the seven mantras Tom Hanks swears by to achieve universal likeability – I would actually quite like to read that one. – As the “you” at issue pertains to a more specific audience and is in reference to the very question being asked of five major biopharmaceutical companies during a panel discussion at Forbes’ 2016 Healthcare Summit by journalist and panel moderator Matthew Herper.

For a panel titled “Pharma All-Stars: Restoring Pharma’s Reputation” the five panellists – representing Gilead Sciences, Pfizer, Eli Lilly & Company, Astellas Americas and Regeneron – would probably have prepared for a potentially rough ride. Marked by one dismissive shrug and a few accompanying sniggers that allayed the questions impact somewhat. However, the pertinence of such a question, posed to an industry that fundamentally exists to help people, is a bitter pill to fathom let alone swallow. One that, if asked of me, would certainly send me into an abyss of self-reflection and on a quest for answers.

Now, you may be wondering why I would revisit a panel discussion that happened over three years ago? Surely if someone asked why no one liked you last week you would have hopefully moved on by now. Well, for one you have obviously never met me, but more importantly the controversies used to emphasise the justification in questioning the biopharmaceutical industry in such a way are still woefully relevant today.

Back on the 2016 “All-Stars” panel, and first out to defend the biopharmaceutical industry – note, defend rather than directly answer – was Gilead Sciences. A company that, as Herper describes, had an “interesting experience in this arena”. ‘Interesting’ was putting it mildly. In 2014, Gilead Sciences launched the medication Sofosbuvir, a drug able to effectively treat and potentially cure Hepatitis C. A launch that should have been met with fanfare and reverence. Unfortunately, this new medication would cost \$84,000 per course of treatment and left the vast majority of patients without access. Cue scorn and derision.

Not wanting to let the team down, another member of the 2016 “All-Stars”, Eli Lilly & Company, courted its own controversy about the price of its diabetes medication. One that intensified after US senators investigating the rise of insulin prices revealed that the Eli Lilly’s 20-year old insulin product, Humalog, increased from a list price of \$21 per vial in 1996 to \$255 in 2016.

Fast forward to 2019, and despite increased competition, the price of Gilead's Hepatitis C drugs is still too high for several governments to initiate mass treatment programmes, while the price of Gilead's HIV drugs has also recently hit the headlines. On a brighter note, Eli Lilly have recently announced plans to sell a half-price version of Humalog. Yet, this was in March 2019 and followed years of intense patient and government scrutiny. Lest we forget the years of heartbreak and turmoil that stoke that scrutiny, or that half-prices are still some way north of the \$21 list price paid in 1996.

Looking back to the 2016 panel, it is no surprise that "why don't people like you?" is as relevant today as it was three years ago. In reference to the criticism that followed the launch of Sofosbuvir, Gilead stipulated that "from our perspective it was very good value". Towing the "All-Star" line, Eli Lilly were also quick to suggest that "insulin represents an enormous value for what it is". Unfortunately for the biopharmaceutical industry, like a deranged man screaming that climate change isn't real because he can still see snow outside his window, the lens through which you view the world does funny things to something like "value". It might even lead you to misconstrue the argument completely.

So, when the biopharmaceutical industry responds to a question like "why don't people like you" by using existing beliefs and evidence to refute the basis of said question, it could either mean one or two things. One, the biopharmaceutical industry just doesn't care, or two, they need some help to properly reflect on the situation.

Although many would disagree, I like to think of myself as an optimist, and I believe that it would be too easy to suggest the former. Too often we forget just how hard it is to step back and reflect upon a situation through a lens other than our own tailored window. Why would you, when you have invested so much time and effort creating systems, languages and structures in order to make sense of that view? It is exactly why you sometimes need help; you need people to keep challenging those structures and highlight the windows that offer new understandings.



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That is why the research at MISFIRES is so important. We want to understand how issues such as overpricing or limited access to medicines are diagnosed and voiced. Be able to explain what 'value' means in different contexts, and what practices and discourses make these different contruals of value count. Discover how and what systems and structures are in place that obscure or silence conflicting understandings. So, perhaps we can start to bridge those understandings and create a more inclusive and collaborative healthcare market.