

Meeting to form coalition against fraudulent claims about medicines

By *moderator*

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A group of scientists, activists, regulators, lawyers, doctors and academics met at the University of Cape Town's Centre for African Studies Gallery on 26 September 2006.

The meeting examined the abundance of unsubstantiated and false claims being made about medicines across South Africa. These unproven remedies, for AIDS, cancer, obesity, heart disease and many other ailments, are currently being actively marketed and sold to vulnerable people who are given false information about their therapeutic benefits. At best these deceptive marketing practices create false hope and waste money. At worst they exploit people and encourage poor treatment decisions which result in avoidable illness and death.

Several presentations were made:

- Fatima Hassan of the AIDS Law Project explained the legal framework that regulates claims about medicines.
- Leon Grobler of the Advertising Standards Authority (ASA) explained how the ASA deals with complaints about claims for medical treatments. Delegates acknowledged the excellent work of the ASA but there was a lively debate about whether the advertising code needs to be modified to stop what some delegates saw as loopholes being exploited by unethical dietary supplement advertisers.
- Boniswa Seti and Nathan Geffen of the Treatment Action Campaign presented case studies of false marketing for AIDS treatments: Matthias Rath's multivitamins and Zebulon Gwala's Ubhejane respectively.
- Professor Peter Folb of the Medical Research Council addressed issues of striking a balance including the need to work with traditional healers. He also pointed out that South Africa's regulatory authorities have a duty to uphold the Medicines Act.

Formation of informal coalition against fraudulent claims about medicines

A group of delegates at the meeting has agreed to form an informal coalition against fraudulent claims about medicines.

The coalition noted that the Minister of Health has a duty to ensure that the Medicines Act is enforced. This includes stopping the plethora of false claims about medicines and prosecuting those who fail to do so. This duty of the minister

is critical to public health. However, the Minister is failing in these duties and is not acting in the public interest. Instead she has created an environment in which false marketing thrives.

The coalition noted that many public sector patients receive poor service. We also examined inadequacies in the social grant system and how these create the conditions for unethical medicine marketeers to take advantage of vulnerable people.

The coalition also noted the difficult circumstances under which health workers operate, especially due to the increasing burden of HIV. Lack of training and poor conditions of service create perverse incentives for some health workers to market unproven medicines. All health workers should be informed about the well-established science of HIV/AIDS as well as that of other high incidence diseases such as TB, cancer, heart disease and diabetes

The coalition agreed on the following principles:

- We support access to medicines of high quality that have been shown scientifically to be safe and effective.
- We support the right of people to make choices where they seek healing and treatment but that those choices should be informed by accurate public information. It is the duty of the Minister of Health to ensure that there is public information about the treatment of diseases and that such information is accurate.
- We note that traditional healers play an important role in South African health-care. We support the need for research into traditional medicines and call for further such investment which must benefit traditional healers and their communities.

We undertake to:

- Provide information to the public about unethical and unsubstantiated medicine marketing practices. We will mobilise communities against marketeers who make false claims.
- Provide information to the public about how medicines should be tested scientifically and ethically, and within the legal framework.
- Expose unethical marketeers.
- Lodge complaints with the regulatory authorities against unethical marketing practices including the ASA and the Department of Health.
- Make submissions to Parliament to improve legislation aimed at preventing unethical medicine marketing

practices.

- Make submissions to the ASA to improve the advertising code.
- Promote research into traditional medicines and work respectfully with traditional and other complementary healers, but stand firm on the principle that medicines must be tested scientifically and appropriately regulated before being promoted.
- Urge and assist nursing unions and professional medical organisations to provide education to health workers on evidence based medicine.
- Not be influenced in our actions by vested interests in the pharmaceutical, complementary or alternative medicine industries.

The coalition's first task will be to compile a detailed complaint against the distributors of Ubhejane, a medicine being touted as a cure for AIDS by truck driver Zeblon Gwala (the manufacturer of this product) and Herbert Vilakazi (a sociologist who advises the Kwazulu-Natal government). This product is being sold as an alternative to antiretrovirals to poor people with AIDS for R340 per month.

For queries related to the coalition, please contact:

Ms. Nokhwezi Hoboyi (TAC): 021 788 3507

Prof. Nicoli Natrass (UCT): 021 650 3567

Dr. John Gosling: 072 040 9730

Ms. Fatima Hassan (ALP): 083 279 9962

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