Why Big Pharma’s “latest, greatest” wonder drugs usually aren’t your best bet

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Plus a dozen tried-and-true medications that are still the best in class

At New Year’s, conventional wisdom counsels “out with old, in with the new.” But when it comes to choosing medicines, that advice is often dead wrong. This year, in true Insiders’ Cures fashion, we’re starting off with some counter-current ideas. You know that I’m an avid proponent of disease prevention and natural health. But for the times when pharmaceutical drugs are necessary, I want you to be informed so you can make the safest, most effective choices. Which often are at odds with what the pharmaceutical industry is trying to sell you.

As a matter of fact, despite what the flashy new pharmaceutical ads would have you believe, you are often better off holding on to proven, safe, and effective drugs that have been around since the early 20th and even 19th centuries. Not the new, blockbuster drugs. And the good news is that most of the oldie but goodie “drugs” actually come from nature in the first place!

If you pay attention to the research—and not just the glitzy ads—the facts are clear. For instance, a recent analysis from Harvard showed that over the past three decades only 10 percent of new drugs approved by the FDA are more effective than their predecessors. Even worse, a full 50 percent of them are actually less safe.1

I can think of at least a dozen drugs for common medical conditions that have simply never been improved upon. Most go back to the mid-20th century. But some have been around since the early 1900s—and even the 1800s.

And why should that be surprising? After all, the human body has not changed over the last 200 years. So it makes sense that early medical research yielded some of the best drug treatments long ago. Most were based on nature anyway. And nature had it all figured out long before the pharmaceutical giants began to rule the world.

The question is: Why haven’t most doctors figured it out yet?

Until they do, here is a list of the excellent “oldie but goodie” drugs that are still available. These tried and true, proven medications have passed the period of post-marketing surveillance by the FDA (as I’ve often recommended)—sometimes by a century.

Age-old pain remedies

The natural world is replete with analgesic and anti-inflammatory compounds, and we humans have been taking advantage of them for as long as we’ve been around. In fact, the human body is even capable of producing its own natural pain killers, as my late friend and colleague at NIH and Georgetown University Candace Pert discovered. These substances—enkephalins and endorphins—bind with pain receptors to block pain in the brain. Some drugs we take to control pain do essentially the same thing.

And the best, most effective pain-controlling drugs are derived from natural plant sources.

The best example is the opium poppy, which produces morphine—still the most effective pain killer ever produced. Morphine was first sold in 1827 by Merck, which was a small chemist’s shop at the time.

The reason morphine and its derivatives are so effective is that our brains and central nervous systems have built-in receptors for the opiates in these medications. It’s a match made in pain-relief heaven.

Thus, morphine has since been formulated into drugs using every possible method of delivery, including oral tablets, rectal suppositories, intravenous (including self-administered drips for patient-controlled pain relief), and transdermal patches.

But, unfortunately, like many good things, opium also has a history of abuse. And that’s where the focus has been for the past century. So outside of a hospital setting, you’re less likely to get this gold-standard pain reliever. At least, not without extensive scrutiny.

The good news is, there are also many other effective natural pain relievers. In fact, I’ve devoted an entire report to this topic—The Insider’s Ultimate Guide to PILL-FREE Pain Cures. You can learn more about it or order a copy.

In the meantime, aspirin is yet another “great grandfather” drug for pain. Originally derived from the bark of the willow tree, aspirin also occurs naturally in meadowsweet grass, a much more abundant and harvestable source. Aspirin has been marketed as a drug since 1899 and is widely available over-the-
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Aspirin has faced its share of criticism (much of it misinformed, as I’ve mentioned many times before, both here in Insiders’ Cures and in my Daily Dispatch e-letter). But the truth is, it’s much safer than most other pain relievers. Especially acetaminophen, which you should avoid at all costs. (In the November 18, 2013, Daily Dispatch I told you about recent research linking acetaminophen to autism, ADHD, and asthma. It’s also the leading cause of acute liver failure in the US).

History’s best blood sugar fix

Diabetes has become a modern-day epidemic. And the pharmaceutical industry is doing its best to keep cashing in, with a whole slew of new blood sugar drugs from which to choose. But just because they’re new doesn’t mean they’re “improved.” In fact, the new, expensive anti-diabetes drugs are proving to have a number of problems with safety (see the October 2013 issue of Insiders’ Cures for more). Which is why the oldest blood sugar balancing options are still the best choices.

First and foremost, you have insulin. Of course, insulin is a natural substance made by the pancreas to drive glucose from the blood into the tissues. It was actually first discovered in the mid-1800s, but it wasn’t until the 1920s that it was isolated for therapeutic use. Canadian medical student Charles Best, working under his professor, Frederick Banting, was awarded the Nobel Prize for this ground-breaking discovery.

And then there’s the medication that set off the modern era of oral “drug” agents to lower blood sugar. I’m referring to Glucophage, now available as the generic form metformin.

Like morphine and aspirin, metformin comes from nature. It is originally from an ancient herbal remedy known as French lilac or goat’s rue in Europe (in the US it grows wild but is classified as a “noxious weed” by the USDA). Metformin was first synthesized as a drug in the 1920s but was initially overshadowed by the development of insulin as a treatment for diabetes.

Still in Europe, interest returned during the 1940s, and in 1957 it was first tested in diabetes. However it did not become available in the United States until 1995, two generations later (largely due to FDA fumbling—which persists to this day).

As I’ve said before, metformin is a superior drug in terms of safety and effectiveness. And it’s now taken by tens of millions of people worldwide. Its main “side effects” are reducing the risk of other chronic diseases, such as cancer, including the deadly pancreatic cancer. Metformin does contribute to depletion of Vitamin B12, so it is important to take a high-quality B vitamin supplement—which is also good advice in general.

One of the big problems with diabetes is the damage to blood vessels, which can eventually progress to blindness, dementia, heart disease, kidney failure, and peripheral neuropathy. And while other diabetes treatments lower blood sugar, they do not prevent cardiovascular complications. Metformin is the only drug that has been conclusively shown to prevent these deadly and debilitating side effects of diabetes.

Old-school antibiotics still do the job

When the drug isoniazid was first synthesized in 1912, it was used to treat mental illness. It was only after it was in use for some time that doctors eventually discovered it was also an antibiotic.

In the first part of the 20th century, mentally ill patients were often sent to live in large institutional treatment facilities. Because they were so crowded, these places were also breeding grounds for chronic infections such as tuberculosis (TB) and hepatitis.

By 1945 doctors noted that patients given isoniazid for mental illness were being cured of TB. This finding was a major development as there was no cure for TB at that time, other than the Nature Cure (which nonetheless was effective about half the time). But isoniazid was able to treat the other half. In fact it was so successful that it’s what we used, in combination with other antibiotics, to treat TB when I was in Southeast Asia in the 1970s. It is still used today in some circumstances.

Of course the other antibiotic that provided a “miracle cure” for infection was penicillin. It was discovered accidentally in 1928 when Alexander Fleming noticed that colonies of Staph bacteria could not grow where mold spore contaminants had blown into them from an open window. Fleming found that the bacteria-destroying mold was Penicillium notatum and the world eventually took note indeed.

Penicillin is still the best drug today for most people against many infections (strep throat being one common example) who do not develop an allergy.

During the 1950s, research determined the chemical structure and fermentation process for tetracycline, which was then patented in 1955. Within three years, it was the most prescribed broad-spectrum antibiotic in the United States. Tetracyclines are used for urinary tract infections, chlamydia, anthrax, plague, and more. Minocycline and doxycycline (originally tested for scrub typhus and now Lyme disease) are also used for the treatment of acne. Current research is focusing on their anti-inflammatory properties and their potential for neuroprotection against Alzheimer’s disease, stroke,
Of course part of the game today is developing new antibiotics to overcome the bacterial resistance we’ve developed to old antibiotics that have been overused. During the antibiotic era of “miracle cures” for infections, magic bullets have turned into friendly fire. You can help fight the growing problem of antibiotic resistance by only taking them when necessary. Don’t demand or take antibiotics for a viral infection. Antibiotics are life-saving drugs that should often be reserved for a life-threatening illness. Unfortunately, their overuse has lead to resistant strains of truly life-threatening bacteria for which there is no cure.

The game-changer for coronary heart disease

Coronary heart disease is a common form of heart disease caused by narrowing of the coronary arteries (they’re called coronary because they form a “crown” around the top of the heart, sending descending branches to supply blood to the constantly beating heart muscle). When the heart muscle doesn’t get enough blood and oxygen, it causes a crushing chest pain. But since the brain is not used to perceiving pain coming from the heart, the pain is often “referred,” or felt, as pain in the arm, neck, or jaw from collateral nerve fibers. This pain is called angina pectoris, from the Latin “pain in the chest.”

Nitroglycerin (NG) is a simple chemical compound used in mining and excavation for its explosive properties when detonated. It was first used in medicine when William Murrell realized it could treat angina pectoris. He published his results in 1878. It became a standard symptomatic treatment for the growing problem of coronary heart disease throughout the 20th century. It wasn’t until 2002 that an enzyme was found to convert NG to an even more simple chemical, nitric oxide. Nitric oxide potently dilates blood vessels like the coronary arteries to provide more blood supply and oxygen to the heart muscle.

Nitric oxide is now being studied for bone health (to improve bone formation and reduce bone resorption) and for healing diabetic foot ulcers. It is also being investigated for treatment of metastatic prostate cancer. This just goes to show that research is finding new potential even in very old drugs.

Modern-day relief from Nature’s oldest gout reliever

Gout is an exceptionally common—and exceptionally painful disorder. And one of the oldest remedies is colchicine, a compound found in the Autumn crocus. Its use dates back as far as 1500 BC and it was first recorded as a treatment for gout in the first century AD. When European physicians first came to America it was grown in colonial physic gardens of the 18th century.

Colchicine had been available generically after being “grandfathered” by the FDA. However, in 2009, FDA granted URL Pharma an exclusive license, which increased the price of its “new” branded version from 10 cents to $5 per tablet. While other treatments have been developed for gout, colchicine is still the best, most effective choice. And it’s also now being researched as a treatment for cancer and cardiovascular disease. (Which probably explains why Big Pharma is interested in it again…)

Centuries-old diuretics

Many plants have a diuretic effect. Early diuretic drugs were all herbal derivatives, some in use since the 1500s. They were initially key for treating edema due to congestive heart failure. When the heart is not pumping effectively, it cannot move blood into the circulation. As a result, blood and fluid backs up into the lungs, causing “congestive heart failure.” That leads to a backup, with fluid accumulating in the tissues, causing a condition known as edema.

Diuretics move fluids through the kidneys to be excreted in the urine. But a more direct approach was offered by digitalis from the purple foxglove plant. Used as a folk remedy by a “wise woman” in 18th century Shropshire, England, the physician William Withering brought it into medical use.

Digitalis acts by directly strengthening the heart muscles, causing more effective heartbeats and blood circulation. It became the standard treatment for congestive heart failure and is still one of the most effective medications for it to this day.

Nature’s anticoagulants

As you can imagine, when blood backs up due to heart failure, ineffective heartbeats, or damaged veins, there is a tendency for the pooled blood to clot. Anticoagulants prevent this clotting from happening. That’s why they’re given in many heart and circulatory conditions.

The clues that led to the discovery of warfarin—the world’s most commonly used anticoagulant—began to emerge in the 1920s. Cattle that ate moldy sweet clover hay were dying of internal bleeding. In the coming decades, that phenomenon led to the discovery of an anticoagulant compound in the mold growing on the hay. That compound, dicoumarol, was approved for prevention and treatment of blood clots and embolism in the 1950s. Now called warfarin, the drug can still be found on medicine shelves throughout the world.

Warfarin sets itself apart from newer anticoagulants in a very important way: It can be rapidly reversed to
stop bleeding when necessary unlike the newer drugs. If you have problems with blood clots you need to consult with and be monitored by your doctor. Both blood clotting and bleeding are dangerous conditions that can be rapidly fatal, which means it's not something you should try to manage yourself. Also, be aware that some common herbal remedies may contribute to bleeding when taken with other drugs or just before surgery or medical procedures.

Say no to new antidepressants

We hear a lot these days about SSRIs (selective serotonin reuptake inhibitors) for treating depression. But more than 50 years ago, drugs called MAOIs (monoamine oxidase inhibitors) were found to act on serotonin, norepinephrine, and dopamine to treat depression. Their use dropped dramatically after relentless promotion of newer SSRIs and exaggerated concerns about food reactions with MAOIs.

Of course, now we have an abundance of studies showing serious adverse effects with SSRIs. So now people are taking a second look at MAOI drugs—with good reason. It's also worth noting that a number of natural products also have MAOI properties, including resveratrol, curcumin, gingko, and coffee. St. John's wort is well established as safe and effective for mild-to-moderate depression.

What's old is new again

Some of the best "drugs" have been around for a long time as natural products. It turns out they have multiple benefits in addition to the historic uses we already knew about. Of course, since they can't be patented, Big Pharma has not had any real interest in continuing to make them available. That is, unless they can find roundabout ways to get the FDA to license them again.

The bottom line is that newer isn't necessarily better when it comes to drugs. If a medication has been around for centuries and is still in use, it's probably with good reason.

So if circumstances call for it and you need to take medication, ask about the possibility of using older drugs. They're effective, and their side effects and safety have already been well established after many years of use. Bonus: These "oldie but goodie" drugs also have the "oldie but goodie" low prices to go along with them.

Sources: