

PILLS TO DIGEST POLITICS

As Ireland adopts the [toughest smoking ban in the world](#), Europe watches; if such extremism works in a country with a pub culture, it will work everywhere in the European Union. Already by law the Irish cannot drink in public, therefore they cannot take the glass outside. Now they'll be forced to guzzle the beer (yes, because a campaign against leaving a half full glass on the table is in progress as well) and then go out for a smoke. The Irish are being studied by the EU and by the World Health Organization as if they were mice in a giant social laboratory. Ireland is the great test for EU. If the Irish, historically famous for their hot blood and their inclination to the use of weapons for political ends do not use them against health gangs and in defence of their freedom and lifestyle, one can be certain that that will not happen in any other country in the world, and all cultures will be squashed with impunity.

But this is just the beginning of the great cultural conditioning plan by the tandem Big Pharma-WHO, [long-time official partners against smoking](#) which, among other things, pursues the transformation of a world into a prescription drug arena. The greatest scientific fraud in history, [that of passive smoke](#), has already been rooted in world culture. The fraud is used as a tool to combat active smoke, which is also the product of an [enormous manipulation of data](#) and of the [manipulation of most epidemiological](#) and biological rules to make figures square with agendas. The tobacco industry has been already bent and made servile with excellent results (now, [it even supports all the epidemiological and scientific statements of "public health"](#)). The "public health"-pharmaceutical tandem is now [turning to Big Tobacco's customers](#) – 1.3 billion people in the world who are being harassed to fall into the net of "replacement therapies" as if they were anchovies attracted by the lamps of a night-fishermen's boat. And at this point, it is time to move on to other "behaviours", since the demonisation of smokers has not only gone smoothly but has become the fetid boutonniere of "civil progress" and the base of planetary politics.

The ambitions of the pharmaceutical giants are clear, and only the naive today could still believe that we're talking about conspiracy theories. Pharmaceutical conglomerates have at their disposal the WHO and the ministries of health of nations. Those institutions have become their new cultural and commercial marketing departments, far more important than those within the industry itself and much more effective, because they are perceived as disinterested. They are also more economical than conventional marketing and advertising alternatives because they are paid for with citizens' taxes.

Even the basic political program is clear: no pleasure and joy of living can go unpunished (better, unexploited) without a "therapy", a prohibition and an appropriate super-tax. It is in this environment that a new drug called *Rimonabant* has been introduced: it promises to eliminate the pleasure of smoking, drinking and eating in one single stroke. There is a frenzy of activity to position it for what could prove to be the largest pharmaceutical market in history: *the market for behaviour control drugs* (behaviour has been officially considered by the WHO as **potential disease** since 1997). The program ensures:

- a) enormous income to state treasuries through exorbitant punitive taxation justified by fake social costs stemming from questionable epidemiological attributions that cannot at any rate be demonstrated;
- b) vast and capillary political control of behaviour without the bother of dealing with *reactions and armed revolts* – rather, with the approval of the people, who, being constantly conditioned by the media, democratically approve the suppression of freedom, tradition and individual values if in conflict with the agendas of "public health";
- c) reinforcement and confirmation of junk science as state science. That is indispensable for the continuing creation of "statistical epidemics" that justify the intervention of "public health" in the life of individuals and the administering of "therapies" to those individuals;
- d) immense income for pharmaceutical multinationals, which use part of that income to further extend their political influence over nations and use the collaboration of those nations to gradually suppress any objection and opposition to the program.

Here is a quick panorama of today's situation.

1. In May, the WHO will launch the "World Plan Against Obesity" (written on the same model as that against tobacco), overcoming the resistance of the poor countries, especially those that produce sugar. Recently, Brazil seems to have changed its attitude because it has "officially understood" that "public health is more important than state economy" [in the same way that Turkey "understood"](#) that it had to institutionalize the antismoking a couple of years ago. The persuading elements were the pressures of the World Bank and the International Monetary Fund, which [worked in strict cooperation with the WHO and its pharmaceutical friends](#). As usual and as in the case of tobacco, even for sugar [the poorest countries are victims of the](#)

[agendas of the richer countries where those multinationals reside](#). The pharma-health forces have deep roots in Brazil, which was the first country after Canada [to adopt the “shock images”](#) that [misleadingly represent the consequence of smoking on health on cigarette packs](#). It is only a question of a short time before we also see the institution of **World Day Against Obesity**, just as we now have one against tobacco.

2. The above-mentioned Rimonabant is not a derivative of marijuana as some media have reported; never believe what the media say, especially when it comes to public health. The “scientific” reporters probably got confused by the term [“endocannabinoid”](#) which reminds them of “*cannabis*”. That should give us an idea of the reliability of the media when they report on smoking. Rimonabant is instead a synthetic drug created in the laboratories of the French company [Sanofi-Synthelabo](#). It has already reached phase 3 of experimentation and will be put on the market under the name of **Acomplia** as early as next year. It acts on the brain by inhibiting the CB1 receptor. The danger of widespread fooling around with the brain has been fully demonstrated with antidepressants including Zyban, [the antismoking pill which continues to harm people](#) with the silent assent of the ministers of “health”. But God forbid that a few hundreds of thousands of real deaths in the world stop the advancement of the “cultural revolution of health”, armed with pseudo-ideological white booklets and millions of deaths statistically “caused by...” – although not even one can be scientifically fully demonstrated. But scientific demonstration problems have been solved at the root: all we need is to redefine science and methodologies to adapt them to political and commercial agendas. It’s sort of analogous to what happened to our ideas about liberty: in the post-war world, we felt safe to be free – now, considerably diminished, we merely feel “free to be safe”. With a convenient marriage of political and commercial interests, we can take from real science the little that is convenient and from junk science the bulk of material that we need to convince people of whatever we want.

3. During a [congress of the American College of Cardiology in New Orleans](#), two clinical trials were presented that illustrated the presumed effectiveness of Rimonabant in the obese and smokers. One gets the impression from reading the piece we link to above that these results have been “accelerated”, which might not be surprising, given that Sanofi-Synthelabo is engaged in a financial clash against the German-French competitor Aventis, which is said to have been acquired by Novartis. The French government and the EU have also intervened in the quarrel.

4. The [National Institutes of Health in the United States are enrolling volunteers that are healthy and strong and drinkers](#) to experiment with Rimonabant in the reduction of alcohol consumption. Since the drug inhibits brain receptors, there is little doubt that it will work somehow and the side effects will be at any rate swept under the rug, just as is happening with Zyban. After all, we really need some miracle pill that removes the desire for everything the state doesn’t like, isn’t that so? That will make humanity much easier to control by governments, which are already very much controlled themselves by the pharmaceutical colossus. Everyone wins, right?

5. [The financial investment by the pharmaceutical giants](#) to influence or buy out politicians, universities, scientific committees, activists and media that stimulate scientific disinformation and popular paranoia to obtain an inversion of social and cultural values about smoking, [alcohol](#), and [food](#) as well as the idea of self-determination is [increasingly well-documented](#) and growing. To be fair, we have to say that those investments are often in the open, but the vast majority of people are either ignorant of them -- thanks to the silence of the media, or approve them in principle. After all, people have been conditioned by high level national medical figures who, with the most incredible gall, represent statistical frauds as if they were real science. The junk science is honoured by talk show hosts who have become incapable of leading a show without being instruments of health propaganda and dispensers of false information.

6. The market for dietary drugs just last year and just in the U.S. [was \\$417 million. The projections after the marketing of these new drugs are \\$1.4 billion](#). In the meantime pharmaceutical advertisement has gone wild, while the advertisement of cigarettes and soon fatty foods will be forbidden. The promotional budgets spin the head of any sane person: [three billion dollars only in the US, and only in 2003](#). But the WHO and the ministers of “health” -- so worried about people who smoke in the movies -- have nothing to say about the out-of-control advertisement campaigns of the multinationals that control **them** – a kind of advertisement that is accessible to all, children included, so that the “therapeutic culture” can be formed.

The lack of organized opposition to the pharma-health front has allowed it to firmly root itself into the halls of power. Armed with unlimited funds from the multinationals and from taxpayers’ pockets, the colossal pharma-health structure now pilots world culture and openly declares its intent, having nothing to fear even from public opinion anymore. [In this WHO document of 2003](#) we read starting from page 14 a very detailed *list of instructions imparted to 192 member states on the tactics to use to condition the cultures of their countries and to impose “healthy lifestyle” through laws, taxes and labelling of all kinds*, while *the*

behaviour of the media is established. The word “awareness” has become a euphemism for *propaganda*. The power of Big-Pharma-Public-Health is such as to *harmoniously control from a central point the internal politics of nations on a world scale and down to the level of individuals who live in those nations and with the assent or the indifference of the majority* – a spectacular result that has absolutely no precedent in human history.

In the document it is interesting to observe that bureaucrats who have never been elected *totally bypass the constitutional and democratic system* and impose what in reality is pure politics (the control of behaviour and culture is the ultimate end of all politics) ***without any legitimate and proper democratic mandate from the populations affected***, a subject which is not even vaguely mentioned. That is obtained by presenting “public health” as such a supreme social value as to transcend culture, democracy, liberty, economic laws and constitutional procedures, which must all instead *submit to* (and be “educated” by) it. The effect is that **the word of the Minister of Health carries more weight in the decisions of the state and of the masses than that of the political parties or the President of the state itself**. In fact, if between pharmaceutical commercials the minister of “health” or one of his colleagues tells us that sugar, smoking, and alcohol “kill” (but that there is hope because “therapies” are available in the drug store), while the talk show host nods (small but important subliminal touch, because he represents the masses) we often put the cigarette out, spit out the candy we are chewing and do not finish our beer, because all of a sudden we feel guilty. And for this reason, soon we’ll rush to the drug store to buy the new three-in-one pill. Let’s think about it: **which politician** has such power over our most intimate personal lives? Only that politician we do not perceive as such.

The machine controlled by pharmaceutical multinational continues to produce new “diseases” and “epidemics”, which are “discovered” *ad hoc* for the drugs – another manifestation of the cultural and moral inversion based on the institutional prostitution to Big Pharma. Meanwhile, we will become more and more obedient to “public health”, which now holds the keys to the conquest and maintenance of power: **tell the people they are sick to make them feel cared for**. This is a power that the naive will continue to believe they can fight with little complaint letters written in the spare time of weekends, while the coward will continue to find excuses for not using the **force** required to react. And every day that goes by the force that is necessary to unhinge this corruption, which is sustained by the legal violence of the state, continues to grow.

But here comes the good news: soon Big Pharma will invent the pill that “cures” even violence...although it is difficult to believe that “Public Health” will ever be counted amongst the statistical patients.

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