If we could even be bothered to talk about it, we would all admit that, at heart, we’re lazy.

Although few of us openly acknowledge that laziness rules our lives, signs of our perpetual inaction are all around.

In most homes, the washing-up doesn’t get done as quickly as it should. Indoors, some of us are so idle that we frustrate our flatmates, partners or spouses into hoovering, dusting and bed-making etc for us. It is also a statistical fact that 89 per cent of UK households have an urgent piece of DIY that needs doing that will never get done.

Contrary to popular opinion, human beings are intrinsically slothful, and only the truly odd, or the sadly obsessed, work hard to keep on top of things.

Benjamin Franklin once commented that: “laziness travels so slowly that poverty soon overtakes him.”

This maxim does not apply to the modern pharmaceutical industry, which has become the world’s most profitable business by being its laziest.

Since WWII, drug markets have been extremely lucrative and new products simple to develop and launch. In this easy environment, most pharma companies do only enough to keep their shareholders and the analysts happy.

Most pharma employees fail to realise that success in their industry depends upon laziness, not continually putting their noses to the grindstone.

Pharma has travelled so slowly that prosperity has easily caught up with it.

The mother of invention

Contrary to popular belief, laziness – not necessity – is the mother of invention. Inventors don’t create new products to make our lives harder; innovation occurs because we are lazy.

In most walks of life, progress is usually made by lazy people looking for easier ways of doing things not by enthusiasts running blindly at a problem.

Although we all admire the award winning, bank-filling products developed and manufactured by pharma, the truth is that most have resulted from lazy R&D.

When companies first emerged they did no research and simply branded existing drug recipes, the majority of which were, at best, less than 100 per cent effective and, at worst, dangerous.

As technology developed, the pharmaceutical industry jumped on the bandwagon of developments in clinical practice and chemistry, simply stealing ideas from elsewhere to create its wealth-generating medicines.

In recent years, as technology has changed, firms desperate to make a quick buck having been playing the genome project in the same way as the rest of us play the National Lottery.

Indeed, most modern companies hope that massive fortunes can be amassed – not through honest, hard graft – but by selecting the correct series of numbers in the human genome lottery game.

As most Lottery players know, it is easier to get one or two numbers than to win the jackpot. Monday mornings always result in a return to the office, not a trip to Tolpits Lane in Watford to collect the prize money.

The pharmaceutical industry needs to realise that the days of lazy cash will soon be over and the days of hard graft and scarce pickings are just ahead.

The American writer Christopher Morley once observed that: “the lazy man does not pass the buck, he lets the buck pass him”.

Similarly, pharma R&D departments are so used to producing slack products from lazy research that few within the industry

Darrin Baines

Is the industry growing fat and complacent while the NHS gets lean and mean?

Down Easy Street

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bother batting an eyelid when another batch of indifferent offerings are sent to marketing for launch.

As they are normally as lazy as the next man or woman, no sensible marketer worries that the products are duff.

Instead, lazy marketers simply take the route of least resistance and try to spend their way out of their problems by engaging leading advertising agencies to turn their idle products into cutting-edge brands.

As a result, millions and millions of pounds are spent annually trying to dress the latest piece of R&D mutton up as innovative, patient-saving lamb. With lots of money sloshing around the system, nobody cares whether dud drugs are launched as long as they look and sound good on paper.

Indeed, by the time a new brand hits the streets, the R&D boffins have moved on to their next project and marketing has usually been re-organised beyond recognition, with the result that no body in these departments seems willing to take the buck.

Outside of the company, the advertising agency responsible for the ineffective campaign will have won enough creative awards to put itself safely above blame.

Therefore, in this wasteful world, the buck normally stops with the company sales force who are usually so diligent and hard working that they feel it their duty to take the responsibility for the product’s failure.

**Business as unusual**

The NHS was once a lazy place. The system was introduced in 1948 with the hope of closing shop within two years once all major illnesses had been cured.

Although it was originally hoped that the NHS would finish after one short spurt, it soon became clear that patient demands would always outstrip the ability of the public purse to supply.

Despite this realisation and the panic it generated, the NHS wasn’t quick to respond. After years of struggling along, the health service wasn’t reformed until 1974, when regional and area health authorities were introduced.

Although the system had waited 26 years for its first major reorganisation, few people working within the NHS rushed to solve its problems.

Instead, the health service just plodded along until the next reforms were implemented in 1982.

Margaret Thatcher’s frustration with the slowness of NHS personnel to secure real change led to the unexpected and sudden introduction of the NHS internal market and GP fundholding in 1991.

Even though a lot of cogs have turned, little ground had been gained when Tony Blair came into power in 1997.

As he decide to make his name by championing improvements in the NHS, Tony began his first term in office with much to do and little time in which to do it.

**Tony’s elbow**

Whatever you think of Premier Blair you can’t justifiably call him lazy. Once he got hold of the NHS, his zeal for change was given full rein. Reforms that introduced Primary Care Groups and associated initiatives were announced in 1997 soon after Labour came into office.

NICE was also introduced early on to remind pharma that many of their products were too lazy to be used by the NHS as the benefits they produced did not justify their costs.

The Health and Social Care Act was introduced last year, the NHS Reform and Health Care Professions Bill was introduced in November 2001.

NHSFs, PCTs, CHI, HIMP and a host of other acronym-described initiatives will ensure that the NHS will be an extremely busy place for the foreseeable future.

There is no room for slackness so companies need to smarten-up their acts to keep up with these – and — future reforms.

Finally, I would be most grateful if you could help a lazy writer like me write an award-winning closing sentence for this article, as I really can’t be bothered...

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