

MY ADVENTURES IN PUBLIC HEALTH



Hi, I'm your friendly neighborhood guest writer here to talk to you about career options. Namely, the career option I picked after years of struggling to break into academia.

See friends, if full-time research isn't quite your cup of tea, you might consider:

A CAREER IN PUBLIC HEALTH!

Now then, what is public health? Well, to answer that, we ought to consider the philosophy behind science first. Why would someone do science? Not "What is science?" but rather "Why is science?"

Why would someone do science? The obvious explanation is that you want an objective answer to the question in your mind that you know to be true based on evidence you've observed and analyzed.



But, of course, that's only a part of the equation. Because, as a human being, a career in science could result from a number of other motivations.

And it could be because you know that science has the power to change the world. Indeed, it has changed in world in astounding ways, and you know it will do so again.



This is where science begins to intersect with society, when people seek the truth not just for their own satisfaction, but to better the lives of others. And it's at that intersection, that the career choice of Public Health exists.

So what did I learn during my adventures into this new wonderful world of public health? Such as my internship at the Public Health Foundation of India?

I learned about the gap between ideas and implementation. It's one thing to come up with a healthcare intervention, quite another to make it accessible to everyone.



The role health insurance plays in drug pricing and accessibility can be a make-or-break factor when it comes to deciding who gets access to healthcare and who doesn't, making it one of the most politicized aspects of public health.



The Government will be the single payer that provides health insurance for all! We will do away with the confusing requirements and high premiums of private insurance companies and ensure healthcare for all.

I don't want Big Government dictating how doctors should operate and be paid! Forcing doctors to accede to your demands is SLAVERY!



But while health insurance is what drew me to public health, it is simply one part of a much larger equation. Indeed, my real focus during the internship had more to do with the intellectual property arrangements behind healthcare products such as pharmaceuticals.

Which brings us to the conflict between drug patents and generics.



This drug is PATENTED! My client shall have exclusive manufacturing and distribution rights for a fixed period of time, and everyone will have to buy it at their price! And if you need the drug, but cannot afford it, TOO FREAKING BAD!

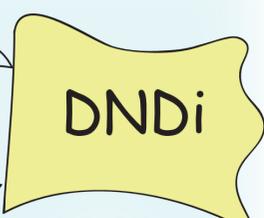
But even if the API research and clinical trials took a lot of money actually manufacturing the drug is so much cheaper! We can make a tidy profit even if we sell the drug for, like real low!

Oh no you don't! You cannot violate our intellectual properties! That is theft! AND STEALING OUR LABOR IS SLAVERY!



And finally, I looked into whether there was a way to subvert this battle. A new way of approaching drug development that removes the need for a patent-generics conflict entirely.

We're the Drugs for Neglected Disease Initiative, and we were formed as a result of the chronic neglect suffered by tropical regions. To do this, we've relied on the establishments of Public-Private-Partnerships.



In my upcoming series on Fuzzy Synapse, I'll give you all a deeper dive into the concepts behind all these numerous facets of public health, and the implications they have on healthcare accessibility and equity.

Whether or not this equity is advanced because of your actions, or in spite of them, will depend on your own values, and how you interpret my own opinions on the matter. So strap in and enjoy the ride!