

Biotech and Big Pharma Dodge a Bullet With FDA Nominee



By Kelleigh Nelson

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The field of U.S. cancer care is organized around a medical monopoly that ensures a continuous flow of money to the pharmaceutical companies, medical technology firms, research institutes, and government agencies such as the Food and Drug Administration (FDA) and the National Cancer Institute (NCI) and quasi-public organizations such as the American Cancer Society (ACS). –John Diamond

The principal villain in rising health care costs is the government. Not pharmaceutical companies, not doctors, but government. –Neal Boortz

I am not against the pharmaceutical companies. I love them. That's not the issue. The issue is, in some cases, when they do these clinical trials, they control the data. They analyze the data. In some cases, they even write the article. And that leads to at least the perception, if not the reality, that there's a conflict of interest. –Catherine D. DeAngelis

It is simply no longer possible to believe much of the clinical research that is published, or to rely on the judgment of trusted physicians or authoritative medical guidelines. I take no pleasure in this conclusion, which I reached slowly and reluctantly over my two decades as an editor of The New England Journal of Medicine. –Dr. Marcia

Angell

[Big Pharma won](#) when Dr. Dave Weldon's name was withdrawn to head the Centers for Disease Control. Senators Collins (R-ME) and Cassidy (R-LA) refused to vote for the man who was perfect for the position. With the confirmation Of Dr. Marty Makary as head of the Food and Drug Administration (FDA), Big Pharma wins again.

Dr. Marcia Angell is an American physician, author and the first woman to serve as editor-in-chief of the formerly trustworthy New England Journal of Medicine. Angell trained in both internal medicine and anatomic pathology and is a board-certified pathologist.

She has had a lot to say about the FDA and Big Pharma.

Angell commented on the 1992 [Prescription Drug User Fee Act](#) which allowed the FDA to collect fees from drug manufacturers to fund the new drug approval process. Angell has stated, "It's time to take the Food and Drug Administration back from the drug companies. In effect, the user fee act put the FDA on the payroll of the industry it regulates. Last year, the fees came to about \$300 million, which the companies recoup many times over by getting their drugs to market faster."

FDA estimates the base revenue for [FY 2025](#) for the Prescription Drug User Fee Amendment (PDUFA VII) at \$1,358,764,346 before factoring in inflation and other factors.

The charges of FDA bias include allegations of undue pharmaceutical industry influence, pressures to allow pharmaceuticals, and viewing the pharmaceutical industry as FDA clients.

The FDA's tactics during Covid, the lack of authorization for the use of safe and inexpensive drugs, Ivermectin and

Hydroxychloroquine, and their promotion of Big Pharma's untested and Operation Warp Speed (OWS) produced "vaccines" clearly shows their connection to Big Pharma.

Angell is also a critic of the [pharmaceutical industry](#). With [Arnold S. Relman](#), she argues, "The few drugs that are truly innovative have usually been based on taxpayer-supported research done in nonprofit academic medical centers or at the National Institutes of Health. In fact, many drugs now sold by drug companies were licensed to them by academic medical centers or small biotechnology companies."

The pharmaceutical industry estimates that each new drug costs them \$800 million to develop and bring to market, but Angell and Relman estimate the cost to them is actually closer to \$100 million. Angell is the author of [The Truth About the Drug Companies: How They Deceive Us and What to Do About It](#).

That's not all...

In her 2004 article "The Truth About the Drug Companies", published in [The New York Review of Books](#), Angell wrote, "The combined profits for the ten drug companies in the Fortune 500 (\$35.9 billion) were more than the profits for all the other 490 businesses put together (\$33.7 billion). Over the past two decades the pharmaceutical industry has moved very far from its original high purpose of discovering and producing useful new drugs. Now primarily a marketing machine to sell drugs of dubious benefit, this industry uses its wealth and power to co-opt every institution that might stand in its way, including the US Congress, the FDA, academic medical centers, and the medical profession itself." (Marketing efforts are focused on influencing doctors, since they must write the prescriptions.)

The U.S. pharmaceutical market size was estimated at USD 634.32 billion in 2024 and is expected to grow at a Compound Annual Growth Rate of 5.72% from 2025 to 2030, to reach an

estimated value of USD 883.97 billion by 2030.

Like OWS injections, the end result of those rushed “vaccines” have caused massive health problems including death.

The [National Childhood Vaccine Injury Act](#), signed in 1986 by President Reagan, gave vaccine manufacturers immunity from product liability lawsuits. And...

[The Horrible History of Big Pharma](#) tells the story of the failures of various pharmaceutical companies throughout the years. It covers Big Pharma’s Covid “vaccine” manufacturers.

The result of nearly a hundred years of Congressional tinkering, government meddling, terrible communication, added responsibilities, inadequate staffing, mixed signals, and plain confusion is a dysfunctional FDA. The FDA is requesting a \$7.2 billion budget for fiscal year 2025.

Under both Presidents Obama and Biden, Robert M. Califf, MD, was the FDA Commissioner. He had strong ties and stock holdings in Big Pharma.

“Nine of the FDAs past 10 commissioners went on to work for the drug industry or serve on the board of directors of a drug company,” according to a [recent BMJ report](#).

FDA Commissioner, Dr. Marty Makary

Martin Adel Makary was born in Liverpool, England, and grew up in Baltimore and central Pennsylvania, where his father was a hematologist at the Geisinger Medical Center. “The culture of rural Pennsylvania was extremely gracious and welcoming, even for an Egyptian guy from Liverpool,” he says.

Dr. Martin Adel Makary is an author, a Fox News commentator, professor and practices surgical oncology and gastrointestinal laparoscopic surgery at Johns Hopkins Hospital. He is a Mark Ravitch Chair in Gastrointestinal Surgery at [Johns Hopkins School of Medicine](#). Makary is also their chief of Islet

Transplant Surgery.

Robert F. Kennedy Jr., head of the U.S. Department of Health and Human Services (HHS), has railed about the risks of food additives for years and has said he wants to end “[the mass poisoning of American children](#).”

At a March 6th confirmation hearing, [Dr. Makary](#), also expressed concern about foods “with a lot of molecules that do not appear in nature.”

The FDA often leaves it to food companies to determine whether their ingredients and additives are safe. Companies do not have to tell the FDA about those decisions, and they don’t [have to list all ingredients](#) on their product labels, even those containing powdered insects.

In February 2020, Makary said on television that the United States needed to take the threat of Covid-19 seriously and that people should [stop all non-essential travel](#). He agreed with the national lockdown insisting it would help to slow the spread of the virus whereas many dissident physicians believed herd immunity would be of great effect.

In May 2020, Makary advocated for universal masking in an effort to enable businesses and schools to re-open to minimize economic and educational damage across the United States. Yet, [Forty-five years of mask studies prove they are worthless](#).

In October of 2021, Makary called for new leadership at the FDA stating that Covid has given us a clear-eyed look at a broken FDA that’s mired in politics and red tape.

Makary believed in one dose of the Covid vaccine for teens but not the second dose which caused high rates of myocarditis. He did not agree with the Covid mandates, but promotes the regular vaccine regimen for children.

Benjamin Rushe’s article in American Thinker tells another

story, [Marty Makary's Pro-COVID Vax Stance Means He's Fundamentally Wrong for FDA Commissioner](#).

"The fact that he kept pushing the mRNA COVID vaccine long after problems with it were obvious should be an insurmountable barrier to confirmation.

"In social media posts and through widely circulated video and news interviews, Makary repeatedly promoted just about every Biden White House talking point about the Covid modified RNA vaccines. Even as he did this, he never addressed the thousands of peer-reviewed mRNA vaccine injuries described in the literature and the thousands of un-retracted Covid-era journal publications."

Makary is the first author of the original scientific publications describing "[The Surgery Checklist](#)". He worked with the World Health Organization to develop the official World Health Organization Surgical Checklist.

Dr. Makary also serves as a board member or adviser to several companies, including one that offers compounded GLP-1 drugs such as Ozempic.

Makary holds board seats and advising roles with several companies. He serves as a [public adviser](#) to health policy research organization Paragon Health Institute and advises insurance provider [Sidecar Health](#) and benefits [brokerage Nava](#).

Perhaps most notably, he is the [chief medical officer at Sesame](#), a telehealth company that offers compounded GLP-1 medications among other services.

The connection to Sesame could become a point of contention as the FDA wrestles [with GLP-1 drugmakers](#) over how to handle compounded versions of the blockbuster weight loss and diabetes drugs. RFK Jr. regularly [argued against](#) researchers with industry ties receiving federal funding or serving on advisory committees to the FDA or U.S. Department of

Agriculture.

GLP-1 drugs include Ozempic. Calley Means has exposed not only the side effects of this drug, but the strong connections between Big Pharma, the food industry and how our politicians are paid to ignore the problems.

Obama's Geisinger Hospitals

In 2008, Dr. Makary donated \$1,000 to Barack Obama's presidential campaign according to Federal Election Commission records.

Makary's father was a hematologist at Geisinger Medical Center in Pennsylvania. Geisinger was considered a [model for Obama Care by President Obama](#) and he desired all American hospitals to [follow their system](#).

From Time Magazine's, [The Long Goodbye](#) by Joe Klein, "Geisinger hospital is the mother ship of an extensive network of medical practitioners tending to 2.6 million patients in 44 mostly rural Pennsylvania counties. It was founded in 1915 by a widow named Abigail Geisinger and first directed by Harold Foss, a surgeon who had been an assistant to the famed Mayo brothers. Like the Mayo Clinic, it employed a team approach, with doctors paid as employees rather than independent operators cooperating on patient care. 'It's like hiring a general contractor to supervise the renovation of your house,' says Henry J. Aaron, a health expert at the [Brookings Institute](#)." (Another leftist think tank funded by Rockefeller and Ford Foundations.)

The [accountable-care-organization model](#), which is the emerging term of art for places like Mayo and Geisinger, became a pioneer in computerization of medical records and analyzing those records. [Geisinger's Proven Health Navigator](#) enrolls patients who are overseen electronically by case managers.

The elderly are even contacted in their homes by these case manager nurses to see if they're taking their medication, eating the right things, keeping their doctor appointments, and even weighing themselves (on [Bluetooth scales that send the results to the Geisinger computers](#)).

This way Geisinger can decide when "end-of-life" care should commence, or lack of life-giving care should end. A government approved health care facility will be watching over you this closely, and when you step on a scale, your numbers will go to the watchdog.

Doctors are paid salaries and "[outcome-based performance](#)" bonuses rather than by the services they perform. In fact, Joe Klein's article states that organizations who embrace these "outcome-based" death panel systems actually receive cash bonuses from the Centers for Medicare and Medicaid Services (CMS) savings plan, when they save more money by pulling the plug on granny! Much of the savings projected for Obamacare would come from a broader application of this Mayo/Geisinger model.

The bonuses these doctors receive depends upon how well they adhere to common procedures. The [Geisinger program, marketed as Proven Care](#), eliminates the physician "guesswork," or "variability," by requiring every employee to follow an agreed-upon set of best practices. (No thinking outside the box!) They achieve these goals through standardization. Science based protocols are "hard-wired" into the process. In other words, for most procedures, one size fits all. This is "cookbook medicine." (Heads up Dr. Bhattacharya, this is the NIH.)

The same hospital "protocols" were used on nearly all Covid patients.

The patients rate the doctor's performance, and since doctors are not always the most sociable human beings, Geisinger

trains them in a bedside-manner orientation program called, "Patients 101." This schools them in basic procedures with members of the patient's family; important in gaining the family's trust.

Klein states in his article, "This sort of training is especially important in a system in which doctors sometimes must try to deny care requested by patients or their families that is deemed unnecessary."

The time spent to train physicians in developing a deeper level of patient trust and satisfaction comes in handy when they talk the family into denying food and hydration in order to save those dollars for the better of American health care costs. In this manner, physicians are even able to convince the family that any resuscitation efforts should be stopped and DNRs (Do Not Resuscitate) should be placed in the patient's chart. Reports have been documented that [DNRs were placed on Covid patients without the patient's or their family's knowledge.](#)

These trained employee physicians tell the patient's family that dehydration and starvation is not painful. In fact, in Klein's article, a fee-for-service physician like we've always been used to in America would hydrate Klein's father who was in kidney failure. The Geisinger physician's attitude is that the patient would be back to the hospital in just a month or six weeks, so let him die. The physician said, "Renal failure is a good way to go. You just go to sleep." I often wonder how many of these physicians have actually watched these patients they condemn to no care.

Most of today's doctors don't like the Mayo-Geisinger way of doing business. They say, "We don't want to be robots run by your computers." They shouldn't be, but Obama Care and now Covid, has forced many of them into this new health care model, resulting in euthanasia for the elderly, disabled and infants.

Rationing of care is next.

This is the Geisinger model of health care being promoted by mainstream media liberal rags, not just for cost savings, but for quicker population reduction.

Joe Klein's article, [How to Die](#), promotes [death panels](#), [killing the elderly](#) to save money (and earning those CMS bonuses), and even yanking feeding tubes out of your own dying parents! Newsweek's article, [The Case for Killing Granny](#), discusses how curbing excessive end-of-life care is good for America!

Conclusion

We have no way of knowing whether Dr. Martin Makary was influenced by his father's employment at Geisinger even with his donation to Obama. However, Makary has wavered in areas that fail to protect First Amendment rights.

[Children's Health Defense](#) was the first organization in the nation to stand with fired New York City workers who refused the Covid jabs on religious principles and stated that natural immunity is valid. Drs. Makary and Bhattacharya also supported them.

Hopefully, they will stand for freedom when the next "exceptionally dangerous" H5N1 "gain-of-function" bird flu pandemic is hyped and Big Pharma enters the scene with their fowl play.

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