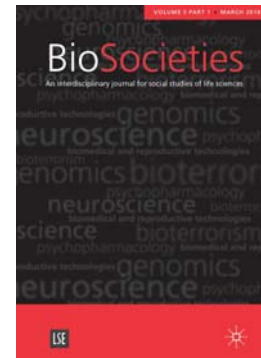


## Big pharma and big philanthropy set global health agenda

Special issue of *BioSocieties* examines growing role of pharmaceutical corporations and philanthropic organizations in fight against 'diseases of the poor'

When pharmaceutical manufacturers launched a legal action against the South African government in the late 1990s for allowing import of generic medicines which were still under patent, activists around the world accused them of putting profit before life. A high-profile campaign led manufacturers to drop the case in 2001. What happened in the ensuing 10 years has radically changed the architecture and landscape of global health assistance in resource-poor settings. Pharmaceutical companies responded to their critics by launching a range of initiatives to address lack of access to medicines in many countries. In the same period, global health philanthropy initiatives – led by the Bill and Melinda Gates Foundation – have injected much-needed resources into the global fight against diseases such as HIV/AIDS, tuberculosis, malaria as well as a number of neglected tropical diseases.



In a new special issue of the Palgrave Macmillan journal *BioSocieties*, an inter-disciplinary group of scholars critically examine the 21<sup>st</sup> century emergence of big pharma and big philanthropy on the global health scene.

"The sheer magnitude of philanthropic spending has been one of the greatest changes in global health in the past decade, dwarfing the contributions of most national governments, and radically changing the budgetary compositions of UN agencies such as the World Health Organization", say guest editors Linsey McGoey, Julian Reiss and Ayo Wahlberg.

Through a total of six articles based on original research, contributors to the issue examine how pharmaceutical options (and related biomedical research) have come to dominate in debates around how to tackle 'diseases of the poor', often at the neglect of other options – e.g. are high R&D costs, as is so often claimed, the main obstacle to more pharmaceutical research on neglected diseases? Which medicines should be considered 'essential' and thereby the focus of access initiatives? Contributors also examine how philanthropic organizations are increasingly setting health agendas without clarity over how priorities are set and decisions made – e.g. is it feasible to eradicate malaria as declared by the Gates Foundation?

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*The Global Health Complex*, a Special Issue of *BioSocieties* (6:1) can be accessed at:

<http://www.palgrave-journals.com/biosoc/journal/v6/n1/index.html>



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