



PAL News

The Prescription Access Litigation Project

A Community Catalyst Initiative

The FDA and Big Pharma fight to close the Courthouse doors to consumers

Merck is facing thousands of lawsuits from consumers. These consumers claim that Merck's arthritis drug, Vioxx, caused them to have heart attacks and that Merck failed to warn them about this risk. What if consumers had no right to hold drug companies accountable in this type of situation, and couldn't force drug companies to compensate them for injuries caused by dangerous drugs? What if states could not pass laws to ensure that doctors and patients received full information about the risks and benefits of drugs? These incredible scenarios are playing out right now in Courts across the U.S. because of a legal concept known as "preemption."

Under the Constitution, national laws passed by Congress trump (or "preempt") laws passed by state Legislatures when

the two conflict or contradict each other. For instance, a state can't pass a law that sets the minimum wage below \$5.15 per hour, which is set by Congress. However, federal laws have traditionally been considered a "floor," not a "ceiling." States are generally free to pass laws that are more protective of the public's rights than a federal law. So, for instance, a state could pass a law setting the minimum wage in that state higher, say \$6.50 per hour.

This system, called "federalism," is a bedrock principle of the American legal system. But "preemption" is now being used to prevent consumers from protecting their rights and to shield drug companies from responsibility when they deceive or injure prescription drug users.



Consumers pay the price as the FDA and PhRMA topple the scales of justice

The states have been described as the "laboratories of democracy." Many important national policies originally started at the state level, such as environmental laws and minimum wage laws. In times when corporations have been successful at blocking reforms at the national level, states have led the way in passing innovative laws to protect the public's health and safety. But in the past few years, corporations and the federal

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Alex Sugerman-Brozan, *Director*
Renée Markus Hodin, *Associate Director*
Julie Bizzotto, *Project Associate*
S. Stephen Rosenfeld, *Senior Legal Advisor*
Robert Restuccia, *Executive Director*
Susan Sherry, *Deputy Director*

30 Winter St., Ste. 1010/Boston MA 02108
T: 617.275.2931 F: 617.451.5838
E: pal@communitycatalyst.org
www.prescriptionaccess.org
www.communitycatalyst.org

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Generics Education Program gets Additional Cy Pres Funds

In Issue #13 of PAL News (Winter 2006), we reported that Community Catalyst (PAL's parent organization) and Brigham & Women's Hospital had received a Court award in the Relafen antitrust litigation. This award was to create **Generics are Powerful Medicine**, an innovative program to educate consumers about the safety and value of generic medications. The program is an exciting collaboration with the Brigham and Women's Division of Pharmacoepidemiology, which is headed by Dr. Jerry Avorn, author of *Powerful Medicines: The Benefits, Risks and Costs of Prescription Drugs*. (interview in PAL News, Fall/Winter 2004).

Generics are Powerful Medicine recently received a second Court award, from a class action lawsuit concerning GlaxoSmithKline's prescription antibiotic, Augmentin. That lawsuit alleged the GlaxoSmithKline had filed duplicative patents to prevent a generic version of Augmentin from coming to market, depriving consumers and insurers of a more affordable generic version. The case settled in 2004 for \$29 million. Since the number of consumers who actually fill out forms to get reimbursed in such cases is always quite low, there is frequently money "left over" in the settlement.

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With great sadness, PAL reports that Marty Berger, President of PAL member organization **Pennsylvania Alliance for Retired Americans (PARA)**, died on June 18, 2006. Marty was 76 years old and is survived by his wife Helen, a son in Boston and 3 stepchildren.

Marty was instrumental in creating and growing PARA into one of the most vibrant organizations in Pennsylvania representing the voice and concerns of retirees and seniors. Under his leadership and guidance, PARA grew to include over 145 affiliated organizations. PARA is the state affiliate of the Alliance for Retired Americans, a national grassroots organization representing 3 million retirees.

“Although Marty ultimately lost his battle with cancer, he succeeded in creating a life long legacy that continues to benefit the union and retiree movement in Pennsylvania” said Danielle Pere, Field Organizer with the National ARA. Under Berger’s leadership PARA played a major role in building grassroots support for Pennsylvania Governor Rendell’s expansion of PACE/PACENET, which extended affordable prescription drug coverage to hundreds of thousands of

additional seniors in Pennsylvania. In 2005, Governor Rendell appointed Marty to the Pennsylvania Council on Aging representing retirees and seniors on issues and programs.

Marty’s work on behalf of seniors extended to another PAL member organization, the Action Alliance for Senior Citizens of Greater Philadelphia, where he served on the Board of Directors. Pedro Rodriguez, Executive Director of the Action Alliance, said “Marty’s fierce passion for the rights of working people, the elderly and all of those who care for social and economic justice, is a trait to be imitated. He defended his friends at his own peril and castigated the enemies of the movements with words and actions that left no doubt at where to point the finger.” Rodriguez recalled Marty’s passionate protest outside the headquarters of GlaxoSmithKline (GSK), during the “Tums Down” campaign against GSK’s decision to ration their drugs to Canada: “He pointed his finger at the glass building, bullhorn in the other hand and he shouted ‘those greedy bastards.’”

Marty also had a long career in organized labor. Through his work with the

International Ladies Garment Workers Union (now part of UNITE/HERE!) he helped hundreds of thousands of workers join unions to achieve better living standards, dignity and respect on the job. Marty also served as a Vice President of the Pennsylvania AFL-CIO. “Marty Berger never quit working for the labor movement and the working people of Pennsylvania... He helped build the labor movement and helped it become what it is today, a powerful voice for economic and social justice for all workers. His energy and leadership have helped millions of workers achieve a better life for their families and communities. Marty Berger will be missed but he won’t be forgotten,” Pennsylvania AFL-CIO President William George said.

Marty was a force to be reckoned with. His loss is felt throughout the country, by all those who were touched by his passion, his commitment and his integrity. In the words of the Action Alliance’s Rodriguez: “Viva, Marty Berger!”

Sources: Action Alliance for Senior Citizens of Greater Philadelphia; Pennsylvania AFL-CIO; Pennsylvania Alliance for Retired Americans

Ask Pharmie

In each issue, Pharmie, your guide to all things pharmaceutical, answers your questions about the drug industry. Comments or questions may be sent to askpharmie@communitycatalyst.org.

Why are there so many ads on TV for diseases I have never heard of before?

These days, pharmaceutical companies are advertising not only drugs but also diseases. Many times, drug advertisements highlight conditions and diseases that are rare, exaggerated or not even clearly “diseases.” For instance, you may have seen commercials for a drug to treat “**Restless Leg Syndrome**” (RLS). This is a very uncommon condition in which a person has a compelling urge to move and a creepy crawly feeling in their legs. Last year, GlaxoSmithKline won approval to a drug called Requip for RLS. Requip was originally approved to treat Parkinson’s Disease. The company then spent around \$27 million to advertise the drug in 2005, which included “disease ads” that described RLS but that didn’t mention the drug.

Drug companies have also been accused of actually “creating” new diseases, specifically to sell drugs to treat them. Often, these new “diseases” are normal human experiences dressed up in medical disease jargon. Critics have pointed to **Premenstrual Dysphoric Disorder** (PMDD), **Female Sexual Dysfunction** (FSD), and **Social Anxiety Disorder** (SAD) as particularly egregious examples. This “medicalizing” of normal conditions has been called “**disease mongering**.”

Such marketing is raising concerns. Drug companies today seem to be expanding the definition of what is a disease. Mild or occasional problems are hyped up to be more serious than they really are. New “diseases” are created, and powerful prescription drugs are being promoted to address them, when often cheaper generic

drugs, over-the-counter drugs or lifestyle changes will do just as well. Restless Leg Syndrome is a bona fide condition that can make the small number of people who suffer from it extremely uncomfortable. However, the ads for Requip and RLS run the risk of convincing healthy people that they are affected by the disease. This will, in turn, lead more people to take the drug than need it.

Disease mongering typically comes in two forms. The first is when a drug company takes a normal experience, like occasional sleeplessness, and portrays it as a disorder that requires a prescription drug. The second type of disease mongering occurs when a drug company creates a new disease, and markets a drug to treat the disease. An example of this is Premenstrual Dysphoric Disorder (PMDD), which is described by drug companies as an extreme form of Premenstrual Syndrome (PMS). It is hotly debated if PMDD is a real disease or not. It is often estimated that only 3%-8% of women will experience the symptoms that supposedly constitute PMDD. However, drugs to “treat” this “disease” are advertised to women of all ages who experience regular PMS-like effects.

Don’t ads for such drugs and diseases educate people about conditions they might not have known they had?

It is true that these ads may help some people learn about a condition and a treatment for it. Yet, such ads are ultimately promoting particular drugs – they are not public service announcements. For the many relatively healthy people who see these ads, it may provoke them into believing they are suffering from the advertised disease or that they need a powerful and expensive prescription drug. For example, over 20 million people took Vioxx, even though it was no better than ibuprofen for most of them. While some people who really have the disease

might learn about it, many more will be misled.

The rarer the condition, the more that ads will convince people that don’t actually need a drug that they do. There are better ways to educate the public about diseases than self-promoting ads sponsored by drug companies.

Such marketing is selling the idea that everyday experiences are medical conditions that require prescription drugs for treatment. This “pill for every ill” mentality is driving more and more people to seek drug treatment for normal life situations that often can be alleviated through lifestyle changes, usually more cheaply and safely.

The ultimate goal of drug companies is to generate profits. Their ads aim to expand their market and to convince consumers to buy their products, just as all ads do. Yet, prescription drugs are not like everyday consumer products – they are potent chemicals that affect our health. When you see an ad that describes symptoms that you feel you are having, whether it mentions a particular drug or not, be skeptical. Ask your doctor how prevalent the condition really is, whether you really meet the criteria for that disease, how safe the drug is and if there are any alternatives to a taking a prescription drug for it.

To learn more about “disease mongering,” visit <http://collections.plos.org/diseasemongering-2006.php>





Welcome New PAL Groups

Please join PAL in welcoming the following organizations to the PAL Coalition.

- **Patients Not Patents**
(www.pateintsnotpatents.org)
- **Health and Welfare Trust IUOE Local 877 & 70**
- **Coalition of Wisconsin Aging Groups**
(www.cwag.org)
- **Gray Panthers of Oregon**
- **Oregon Association for Retired Citizens**

We're pleased to have them aboard! If you know of other organizations that are working on prescription drug issues and should be part of PAL, call PAL Associate Director Renée Markus Hodin at 617.275.2810 or e-mail her at hodin@communitycatalyst.org.

PAL on the Road and in the News

New York City Bar Association Meeting

– On May 17th, PAL Director Alex Sugerman-Brozan participated in a panel at the NYC Bar Association Committee on Consumer Affairs, debating Direct-

to-Consumer Advertising of prescription drugs with **Pfizer's Senior Corporate Counsel** and a lawyer who defends drug companies against lawsuits.

KQED Talk Show – On June 6th, Alex Sugerman-Brozan was a radio talk show guest on the largest NPR station in the US, KQED. He debated and discussed Direct-to-Consumer advertising with Dr. Paul Antony, Chief Medical Officer of **PhRMA**, the lobbying arm of the pharmaceutical industry, and Dr. Sharon Levin from **Kaiser Permanente**.

CN8 "Your Morning" – On June 23rd, Alex Sugerman-Brozan appeared on a New England-wide morning news program, "Your Morning," on CN8: The Comcast Network. He was interviewed about Merck's recent deals with the two largest health insurers to put brand-name Zocor on their cheapest drug co-payment tier and the new generic version of Zocor on their most expensive co-payment tier.

Investors Business Daily - On June 12th, Alex Sugerman-Brozan was interviewed in Investors Business Daily on the subject

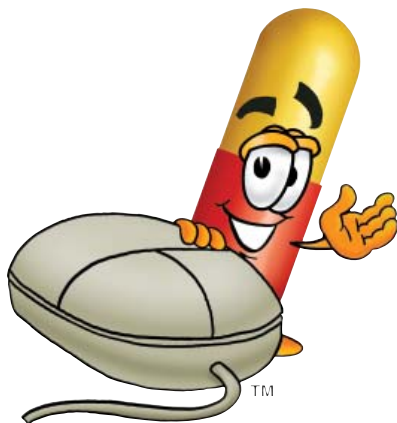
of how drug ads harm investors as well as patients and consumers.

PAL convenes new Working Group

– On June 16th, PAL and the **National Legislative Association on Prescription Drug Prices (NLA/Rx)** hosted the first meeting of the newly-formed **Working Group on Prescription Drug Litigation and Policy**. This group includes PAL, NLA/Rx, AARP Foundation Litigation, several state PIRGs, Public Citizen Litigation Group, Trial Lawyers for Public Justice and Consumers Union. The group will work together on issues such as fighting FDA preemption of state law claims (see article on p.1) and defending state prescription drug legislation that drug companies challenge in court.

Staff Changes

At the end of August, Julie Bizzotto, the PAL Project Associate, will leave PAL to begin a year of graduate studies in Victorian Literature at the University of London, Birkbeck College. We thank Julie for her dedication to PAL and its mission. She will be sorely missed!



VISIT US ONLINE
WWW.PRESCRIPTIONACCESS.ORG

Contact the Prescription Access Litigation Project

PAL Program Associate
[pal@communitycatalyst.org/\(617\)275-2931](mailto:pal@communitycatalyst.org/(617)275-2931)

Learn More about Community Catalyst

Community Catalyst, home to the PAL Project, is a national advocacy organization that builds consumer and community participation in the shaping of our health system to ensure quality, affordable health care for all by providing legal, technical, and policy assistance to organizations that advocate on behalf of health-care consumers.

A full catalogue of our reports, newsletters, and other materials can be accessed at <http://www.communitycatalyst.org>

FDA AND BIG PHARMA

Continued from Page 1

government have been arguing that federal law is the “ceiling,” and that states cannot pass any laws that even address the same issues as a federal law. US PIRG reports that “Just in the last few years, we have seen the federal government trump state laws on issues ranging from privacy to prescription drugs to air pollution, always with negative consequences for the public interest.”

Part of this is an attempt to keep consumers from using the Courts to defend their rights. Consumers lawsuits against drug companies usually allege that they have violated particular state laws, such as laws prohibiting deceptive advertising. But now pharmaceutical companies and the Food and Drug Administration (FDA) are trying to slam the Courthouse doors by arguing that consumers’ legal claims are “preempted” by the Food, Drug and Cosmetic Act (FDCA), the law that created the FDA and that gives it the authority to approve and regulate prescription drugs. This is part of an ongoing campaign by corporations to deprive consumers of their legal rights. The passage of the totally-misnamed “Class Action Fairness Act” in 2005 has already significantly limited consumers’ ability to defend their rights in Court.

This preemption push is a serious threat to the types of class action lawsuits that PAL’s members file. For instance, in May 2005, PAL members and others sued AstraZeneca in federal court in Delaware for allegedly deceptively marketing its blockbuster heartburn drug, Nexium (See “Current Cases” at prescriptionaccess.org). The Judge dismissed that case on the grounds that the legal claims were “preempted” by the FDCA. (That decision is currently being appealed). But many believe that the FDA is failing to protect the public from unsafe drugs or deceptive drug ads. A recent report showed that the number of warning letters the FDA sent to violators of food and drug safety laws has fallen by more than 50% in the past five years. So when drug lawsuits are “preempted” by the FDA, there’s no guarantee that consumers’ rights or safety will be protected at all. The arguments by the FDA and drug companies that consumer lawsuits on prescription drugs are preempted amounts to saying “only the FDA can take action when a drug company lies, but the FDA will do little or nothing, so consumers are out of luck.”

The FDA recently issued its opinion that all lawsuits alleging that drug companies failed to warn consumers about known

dangers of prescription drugs are preempted. But the FDA’s failure to pull Vioxx from the market before tens of thousands of people had heart attacks shows that the public can’t necessarily rely on the FDA to protect them from unsafe drugs. It is ironic that the agency charged with protecting the public from unsafe drugs is going to such great lengths to instead to protect the pharmaceutical industry.

The Courts are the last refuge for consumers when corporations hurt them and the government agencies that are supposed to protect them don’t do their job. The pharmaceutical industry’s campaign to kick consumers out of the Courts is a cynical distortion of legal principles aimed at protecting the bottom line. Corporations are using preemption to undermine consumer rights on a wide variety of issues, including food safety, environmental protection, health care, and financial privacy. It is time for consumers and advocates must raise the alarm about the dangers of preemption run amok, and for government officials to stop siding with corporate special interests at the expense of consumers’ health and safety.

GENERICS EDUCATION PROGRAM

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In drug cases, those funds that are unclaimed by consumers sometimes go to insurance companies and other “third party payors” who were also overcharged for the drug. PAL successfully fought to ensure that a percentage of the funds would not go to these “third party payors” but instead would go to non-profit organizations. This is called a **cy pres** distribution, from a French phrase meaning “as near as possible.” Community Catalyst and Brigham & Women’s Hospital submitted a proposal to the Court for cy

pres funds. In May, the Court awarded approximately \$112,000 from this case to Community Catalyst and Brigham & Women’s. Four other nonprofit groups also received funds from the case.

This award is a significant boost to **Generics are Powerful Medicine**. The program seeks to counter the brand-name drug industry’s marketing to both doctors and consumers that seeks to convince them to buy only the newest and most expensive brand-name drugs. The program will distribute

educational materials on generic drugs written and designed by experts to consumer organizations around the country. It will also provide small grants to consumer groups around the country to educate their members about generic drugs. The award from the Relafen case was to create the program in 29 states. The new Augmentin case award will allow the program, and the grants, to expand to all 50 states. We are in the early planning stages of this program. Stay tuned to PAL News and prescriptionaccess.org for updates.

PAL ONGOING LITIGATION UPDATE

Please visit the PAL website www.prescriptionaccess.org for more background information about each case listed below

Drug/Issue	Defendant	Case Type	Court	Status
Average Wholesale Price	39 different drug companies	Fraud (gaming the drug reimbursement system)	U.S. District Court for the District of Massachusetts (Judge Saris)	Hearing on summary judgment motions held 5/23/06. Awaiting decisions. Plaintiffs' motion to certify second set of Defendants filed 5/8/06. Hearing scheduled for 9/12/06. Third-party payor trial regarding first set of defendants scheduled for November 2006. Trial regarding Zoladex to be held March 2007.
Celebrex	Pfizer	Deceptive advertising	U.S. District Court for the Northern District of California (Judge Breyer)	Hearing on Defendants' Motion to Dismiss held on 6/30/06. Court requested additional briefs, which were filed 7/14/06 and 7/21/06.
First DataBank	First DataBank; McKesson	Fraud (gaming the drug reimbursement system)	U.S. District Court for the District of Massachusetts (Judge Saris); U.S. District Court for the Northern District of California (Judge Armstrong)	<u>Massachusetts case:</u> Motion to dismiss denied 12/05. Hearing on certifying class of plaintiffs scheduled for 9/06. <u>California case:</u> Dismissed 5/11/06.
K-Dur 20	Schering-Plough; Upsher-Smith Laboratories; American Home Products	Suppressing generics	U.S. District Court for the District of New Jersey (Judge Greenaway)	On 6/19/06 a Special Master assigned to the case issued a decision on three pending discovery motions. A number of additional motions remain to be decided.
Lipitor	Pfizer	Deceptive advertising	U.S. District Court for the Southern District of Florida (Judge Jordan)	Awaiting hearing date on Defendants' motion to dismiss.
Neurontin (patent)	Pfizer; Warner-Lambert	Suppressing generics	U.S. District Court for the District of New Jersey (Judge Lifland)	Defendants' motion to stay the case to await decisions in underlying patent litigation between Pfizer and generic manufacturers is pending.
Neurontin (off-label Promotion)	Pfizer; Parke-Davis	Deceptive advertising	Superior Court of California, County of Los Angeles (Judge Mohr)	Case stayed pending California Supreme Court's decision on retroactive application of Proposition 64 (which changed requirements for bringing a case under the state consumer protection statute).
Nexium	AstraZeneca	Deceptive advertising	Superior Court of California, County of Los Angeles (Judge Chaney) Massachusetts Superior Court, Suffolk County (Judge van Gestel) Third Circuit Court of Appeals, on appeal from the U.S. District Court for the District of Delaware (Judge Robinson).	<u>California:</u> Class certification discovery is proceeding. <u>Massachusetts:</u> Discovery is proceeding. <u>Nationwide:</u> Appeal of dismissal fully briefed. Awaiting date for oral argument.
Norvir	Abbott Laboratories	Unfair competition	U.S. District Court for the Northern District of California (Judge Wilken)	Defendants' Motion for Summary Judgment denied on 7/6/06.
OxyContin	Purdue Pharma	Suppressing generics	U.S. District Court for the Southern District of New York (Judge Stein)	On 2/1/06, Federal Circuit Court of Appeals overruled lower court decision that OxyContin patents were unenforceable. Case on hold until lower court makes additional rulings.
Pharmacy Benefit Managers	Advance PCS, Express Scripts, Medco Health Solutions	Fraud (gaming the drug reimbursement system)	California Court of Appeals, Second Appellate Division, on appeal from the Superior Court of California, County of Los Angeles (Judge Lichtman)	Case dismissed in 4/05. Plaintiffs appealed, but are awaiting California Supreme Court's decision on retroactive application of Proposition 64 (which changed requirements for bringing a case under the state consumer protection statutes).
Serostim	Serono	Deceptive advertising	U.S. District Court for the District of Massachusetts	Defendants filed Motions to Dismiss on 4/28/06. Plaintiffs opposed the motions on 6/16/06. Hearing scheduled for 9/14/06.
Tamoxifen	AstraZeneca; Barr Laboratories	Suppressing generics	Second Circuit Court of Appeals, on appeal from the U.S. District Court for the Eastern District of New York (Judge Glasser)	Case dismissed 5/03. Court of Appeals affirmed dismissal 11/05. Plaintiffs have requested a re-hearing by full Appeals Court.
Vioxx	Merck	Deceptive advertising	U.S. District Court for the Eastern District of Louisiana (Judge Fallon); Superior Court of California, County of Los Angeles (Judge Chaney)	<u>Louisiana</u> Hearings on Defendants' motion to dismiss held 2/2/06. Awaiting decision. <u>California</u> Hearing on Defendants' motion to dismiss held 6/5/06. Awaiting decision.
Wellbutrin	GlaxoSmithKline	Suppressing generics	U.S. District Court for the Eastern District of Pennsylvania (Judge Kauffman)	Discovery is proceeding. Plaintiffs' motion to certify end-payor class filed 6/29/06. Defendants' opposition due 9/27/06.

Prescription Access Litigation Project (PAL) Coalition

Alaska

ASEA/AFSCME Local 52 Health Benefits Trust

California

Breast Cancer Action
California Alliance for Retired Americans
California Citizens for Health Freedom
California Public Interest Research Group
Congress of California Seniors
Council on Aging Services for Seniors (Sonoma County)
Greenlining Institute
Gray Panthers of Sacramento
Legal Assistance to the Elderly
San Francisco Senior Action Network

Colorado

Colorado Progressive Coalition
Colorado Public Interest Research Group

Connecticut

Connecticut Citizen Action Group

District of Columbia
District of Columbia Primary Care Association

Florida

The Annie Appleseed Project
Florida Alliance for Retired Americans
Florida CHAIN
Human Services Coalition of Miami-Dade County

Idaho

Idaho Community Action Network
Living Independence Network Corporation

Illinois

Campaign for Better Health Care
Champaign County Health Care Consumers
Citizen Action/Illinois
Illinois Alliance for Retired Americans
Illinois Public Interest Research Group
Metro Seniors in Action
South Austin Coalition

Indiana

United Senior Action of Indiana

Kansas

Kansas Association for the Medically Underserved

Maine

Consumers for Affordable Health Care
Maine People's Alliance

Maryland

Maryland Citizens' Health Initiative

Massachusetts

ABCD Health Services
Boston Building Service Employee Trust Fund (SEIU Local 615)
Commonwealth Care Alliance
*Health and Welfare Trust Fund IUOE Local 877 & 70
Health Care For All
Health Law Advocates
Lynn Health Task Force
Massachusetts Breast Cancer Coalition
Massachusetts Public Interest Research Group
Massachusetts Senior Action Council
New England Regional Council of Carpenters
Pipefitters Local 537 Trust Funds

SEIU Local 615
Sheet Metal Workers Local Union 17 Insurance Fund
Women's Health Institute

Michigan

Public Interest Research Group in Michigan

Minnesota

Minnesota COACT
Minnesota Senior Federation

Mississippi

Mississippi Human Services Coalition
Mississippi Health Advocacy Program

Nebraska

Nebraska Appleseed

New Hampshire

New Hampshire Citizens Alliance
New Hampshire Alliance for Retired Americans

New Jersey

New Jersey Citizen Action
New Jersey Public Interest Research Group
Public Interest Law Center of New Jersey

New Mexico

Health Action New Mexico
Senior Citizens' Law Office

New York

AFSCME District Council 37 Health and Security Plan
BWICA Education Fund Inc.
CAIRE
Center for Medical Consumers
Central New York Citizens in Action
Citizen Action of New York
JPAC for Older Adults
Gay Men's Health Crisis
Independence Care System
Ithaca Breast Cancer Alliance
Labor Health Alliance
Long Island Coalition for a National Health Plan
Metro New York Health Care for All Campaign
New York State Alliance for Retired Americans
New York Statewide Senior Action Council
Rockland County Senior Health Care Coalition

North Carolina

North Carolina Fair Share
North Carolina Health Access Coalition
North Carolina Public Interest Research Group

Ohio

Universal Health Care Action Network of Ohio
Working in Neighborhoods Senior Action Coalition

Oregon

*Gray Panthers of Oregon
*Oregon Association for Retired Citizens
Oregon Consumers League
Oregon Health Action Campaign
Oregon State Public Interest Research Group
SEIU Local 503
SEIU Local 49

Pennsylvania

Action Alliance for Senior Citizens
AFSCME District Council 47 Health and Welfare Fund
Consumer Health Coalition
Mon Valley Unemployed Committee

Pennsylvania Alliance for Retired Americans
Pennsylvania Public Interest Research Group
Philadelphia Unemployment Project

Rhode Island

Health Care Organizing Project
Ocean State Action

South Carolina

South Carolina Appleseed Legal Justice Center

Tennessee

Tennessee Health Care Campaign

Texas

Texas Alliance for Human Needs

Utah

Utah Issues: Center for Poverty Research and Action

Vermont

Vermont Public Interest Research Group

Virginia

Virginia Poverty Law Center

Washington

Washington Citizen Action
Washington Public Interest Research Group

West Virginia

West Virginia Citizen Action Group

Wisconsin

*Coalition of Wisconsin Aging Groups
Wisconsin Citizen Action

National Organizations

The Actors' Fund of America
AIDS Action
Alliance for Retired Americans
AFL-CIO (American Federation of Labor—Congress of Industrial Organizations)
AFSCME (American Federation of State County and Municipal Employees)
Association for Community Affiliated Plans
Commercial Alert
Community Catalyst
Government Accountability Project
Medicare Rights Center
National Women's Health Network
Our Bodies Ourselves
*Patients not Patents
Public Patent Foundation
SEIU Health and Welfare Fund
United Scripts Administrators
USAction

*New PAL groups

For more information on PAL:

Julie Bizzotto

Community Catalyst

Tel: 617-275-2931

E-mail: bizzotto@communitycatalyst.org



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