Adam LaCaze Barbara Os<u>imani *Editors*</u>

Uncertainty in Pharmacology

Epistemology, Methods, and Decisions



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Adam LaCaze • Barbara Osimani Editors

Uncertainty in Pharmacology

Epistemology, Methods, and Decisions



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Preface

Pharmacology is the science of drug action. Combined with other biomedical sciences, it underpins clinical drug development, drug regulation and clinical use of drugs and informs broader interactions between drugs and society. Many deep and practically important philosophical questions arise in this domain: How should pharmacological theories be understood? How should diverse lines of evidence in the biological, medical and clinical sciences be amalgamated to inform the care of individuals? How should drugs be evaluated and regulated? What is the appropriate role of the pharmaceutical industry? to name just a few. Work from the philosophy of biology, epistemology, philosophy of science, philosophy of medicine and ethics is relevant to these questions. In recent years, the quantity of work that engages with the practice and specific problems that arise in pharmacology and the use of drugs has increased. This work examines the foundations, methods and values of clinical and experimental pharmacology and contributes to our understanding of the science and its implementation in clinical and regulatory decision-making. This volume seeks to showcase the depth and breadth of work broadly characterised as philosophy of pharmacology and to present it within a single volume for the first time.

The contributions are diverse in terms of the disciplinary backgrounds of the authors, topics and methodological approaches. The volume contains work from philosophers, clinicians, regulators and statisticians. Some tackle practical issues as they arise within their discipline, while others take a more theoretical focus. The topics range from the appropriate way to think about evidence of mechanisms in clinical medicine to the normative foundations of pharmaceutical regulation, taking in inference patterns when evaluating the effects of drugs, the role of values in pharmacology and the history of masking treatment allocation in clinical trials along the way. Contributions are presented according to the following topic themes: EPISTEMOLOGY; METHODS; and DECISIONS. The methodological approach of many of the contributions fits under the broad umbrella of analytical philosophy. Some of the methods employed include the in-depth exploration of a case (Bueter and Jukola, Chap. 20), historical analysis (Holman, Chap. 17) and formal epistemology (Poellinger and Landes, Chaps. 5 and 11).

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The role of mechanisms and evidence of mechanisms in medicine is an important topic in the philosophy of pharmacology and one that many of the contributions in this volume touch on. The first four chapters in the EPISTEMOLOGY section explore this topic. Aronson provides a clinical pharmacologist's perspective on the definition of "mechanism" and then differentiates two types of relation between mechanisms and evidence: evidence of mechanisms, which he labels "evidence-based mechanism", and the use of mechanisms as evidence, "mechanism-based evidence". The distinction highlights the different ways that mechanisms are discussed and used in pharmacology and clarifies some aspects of the debate regarding the role of mechanisms in evidence-based decision-making. Rocca, Anjum and Mumford take a different perspective, focusing on how mechanistic knowledge can develop in cases of *causal failure*. Causal failure occurs when the treatment fails to deliver the expected outcome. They also argue that instances of causal failure provide an opportunity to learn more about the context-sensitive, intrinsic, tendential and complex mechanisms by which drugs produce effects.

The next two chapters explore the role that mechanisms play in extrapolation. Parkkinen and Williamson compare strategies for extrapolating causal claims from model organisms to humans using atherosclerosis research as a case study. They argue that evidence of mechanisms plays an important role in the key strategies employed when extrapolating from model organisms: comparative process tracing, phylogenetic reasoning and robustness analysis. The importance of evidence of mechanisms to these strategies, they argue, provides further support for the Russo-Williamson thesis—the epistemological claim that evidence of mechanisms and evidence of difference-making are typically needed in order to establish causal claims. Belzung, Billette de Villemeur and Lemoine provide an analysis of drug development in psychiatry to argue for a different set of conclusions regarding extrapolation from animal models. Belzung and colleagues argue that the use of previously successful animal models in the development of psychopharmacology frequently relies on a form of *statistical extrapolation* and that the received view of extrapolation tends to underestimate the importance of this kind of extrapolation.

The remaining chapters in the EPISTEMOLOGY section examine a range of theoretical and practical topics regarding pharmacological knowledge. Poellinger seeks to illustrate and distinguish analogy-based inference patterns in the causal assessment of drug harms. Boem, Malagrinò and Bertolaso examine the role of in silico clinical trials in addressing complexity in pharmacology. Sözüdoğru and Clarke examine the use of Lipinski's rule of five as a heuristic strategy within drug discovery and explore what this means for standard mechanistic and capacity accounts of causation. And finally, Ruthenberg completes the section with a discussion of underdetermination in chemistry and pharmacology.

Contributions within the METHODS section examine the role and limits of randomised trials and the challenge of reliable biomarkers and consider a range of approaches to amalgamating pharmacological evidence produced by different methods. The first two chapters in this section explore the logic of randomised trials. Festa, Tambolo and Cevolani suggest that the principles governing the assessment of efficacy hypotheses, and, more generally, hypotheses of statistical causality,

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are provided by an appropriate statistical version of the method of difference put forward by John Stuart Mill. Annoni and Boniolo examine assumptions regarding specific and non-specific treatment effects and question the commonly held view that these effects are additive and easily separated for the purposes of efficacy assessment.

The contributions from Landes and LaCaze and Winckel look at the application of evidence hierarchies. Landes approaches the problem of ranking drugs for a particular outcome using diverse lines of evidence as a multi-criteria decision problem. This chapter employs the formal machinery of decision sciences to provide a ranking of drugs based on the available evidence. Using metformin-associated lactic acidosis as a case study, LaCaze and Winckel argue that a causal approach to drug safety assessment along the lines of the Russo-Williamson thesis is superior to the method-focussed approach advocated within evidence-based medicine.

The next two chapters explore methods to reduce uncertainty in clinical trials. Keyser and Sarry analyse the methodological use of clinical biomarkers in pharmacological measurement. Their contribution presents a systematic methodology for assessing the reliability of multiple biomarkers underpinned by robustness analysis. Mansmann and Boulesteix continue this theme by examining four standard statistical methods to reduce and model uncertainty about individual response to treatments. Mansmann and Boulesteix propose ways to improve the analysis and presentation of heterogeneous treatment outcomes. Osimani's contribution closes the second part of the volume and introduces the last one by addressing (implicit) strategic dimensions related to how evidence is gathered, evaluated and used. The chapter analyses the dissent around evidence standards in medicine and pharmacology as a result of distinct ways to address epistemic losses and to conceptualise reliability in distinct scientific paradigms and philosophical schools of thought.

The final section, DECISIONS, considers the relations between science, policy and regulatory decision-making. Hansson begins the section with a consideration of the appropriate role of non-epistemic values in pharmacological science. The next four chapters approach pharmaceutical regulation, pharmaceutical markets and the influence of industry and society more broadly. Holman discusses the development of standards for assessing therapeutic claims and the contribution of the American Medical Association's Council on Pharmacy and Chemistry on a growing pharmaceutical market prior to the establishment of the US Food and Drug Administration. Teira examines two normative principles that underpin pharmaceutical regulation: a liberal argument for protecting pharmaceutical markets in terms of quality control and a paternalistic argument for protecting consumers of medicines. Teira argues for a paternalistic approach to pharmaceutical regulation based on the need for impartial information regarding the benefits and harms of medicines. Solomon's contribution considers the issue of industry bias and offers both qualitative and quantitative proposals to reduce the impact of this bias. Bueter and Jukola close out the volume with an analysis of the FDA's decision to approve flibanserin as a treatment for a "hypoactive sexual desire disorder". Bueter and Jukola suggest that criticising the approval of flibanserin primarily in terms

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of medicalisation is problematic and argue in favour of institutional rather than conceptual safeguards against unnecessary pharmaceutical medicalisation.

We would like to thank the contributors for submitting their work, the reviewers for their contribution to the volume and the editorial team at Springer for their assistance. It has been a pleasure to put together this volume. We believe it well illustrates the breadth of work in the emerging subdiscipline of philosophy of pharmacology.

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Brisbane, Australia Ancona, Italy May 2019 Adam LaCaze Barbara Osimani

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