

Pharma is the New Bacon - How to Cover the Rapidly Growing Pharmaceutical Industry in a Constructive Way

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Part One: An Introduction

Swiftly, Denmark is becoming a household name within pharmaceuticals, a real heavyweight with companies like Novo Nordisk, Lundbeck, and ALK. Especially Novo Nordisk has become an ‘uncontrollable beast’ - not my words - and is drawing attention around the world.

But with growing attention comes growing media exposure and scrutiny. Within the past years, Danish reporters have covered the industry closely, the ups and downs, the triumphs, and the scandals.

Last year, Danish Broadcasting even assigned a journalist the role of '[Novo Nordisk reporter](#)' - to solidate the company's mammoth influence in society - and their products even caught the attention of former US-presidential candidate Bernie Sanders who wrote an opinion piece in [Danish Politiken](#) in May criticizing the US price of the diabetes-2-medication Ozempic.

But how do we - with the somewhat limited resources in Danish Media - ensure thorough, critical, nuanced, and fair coverage that brings perspective to the people?

Over the next 40-something pages, I will look at how the Danish pharmaceutical industry is portrayed in the media today, and how the industry has developed since the 1970s. I will introduce you to different actors in the sphere who will give their perspectives on the issues and the solutions and most importantly: I will explore how constructive journalism can improve the coverage to better serve the public.

But why do I even bother with this subject? I will tell you in one sentence:

Our health is our life, and therefore we need correct, unbiased, nuanced and diverse coverage about the pharmaceutical industry and the medicine they produce - and we consume - to make informed decisions.

The following is based on national and international research papers, my experience as a journalist covering pharma and health, and more than a dozen interviews with people

from the industry, the media, and academia. Some I will quote, others are present between the lines.

I have chosen to include the industry, since they are the ones we are talking about. As I'm sure you, the reader, is aware of - the industry has their own best interest at heart. Just as the other people I've interviewed have their own biases - including first and foremost myself (even if I try to strip it away).

So, I implore anyone reading to take this with a grain of salt, to view it as a splatter of opinions and ideas that hopefully will create a nuanced picture of the current coverage.

Before digging into it, I want to introduce myself. My name is Amalie Thieden. I have a BA and an MA in journalism from Denmark and the US. I've worked for the Danish national paper Berlingske - in Denmark and from Russia - and for Dagens Medicin, a niche paper focused on different healthcare industry sectors, including pharma. Currently, I'm a fellow at Constructive Institute where I've been focused on this very topic, and once I've finished my fellowship, I'll start as business reporter at the Danish national paper Jyllands-Posten.

But enough about me.

The first thing we have to do is talk about bacon.



Part Two: A Brief History of the Danish Pharmaceutical Industry

One of the familiar faces of the pharmaceutical industry in Denmark is Ida Sofie Jensen. Now in her sixties, she is the chief director of LIF, Lægemiddelindustriforeningen - a lobbying organization for the industry, along with being a board member of several big institutions such as Danmarks Statistik (Danish Statistics). She also knows the health sector from the inside, having been the hospital director of Herlev Hospital.



I met her at her office in the Life Science House in Copenhagen, and to my great surprise Ida Sofie Jensen had time - and the intent - to explain how the pharmaceutical industry went from almost unknown to becoming an empire in 50 years.

So, here's a brief history lesson from Ida Sofie Jensen, through me, to you.

Back then - around 1970 - our main exports were bacon and butter (as well as machines from producers such as Danfoss and Grundfos), she explains.

As a kid growing up in the countryside in Herning, western Jutland, Ida Sofie Jensen often heard the phrase: “If it’s good for the bacon industry, it’s good for Denmark.”

Bacon and butter were our bread and butter. Then something exciting happened in 1972.

“What happened that year?” she asked me as an engaged teacher but as a shy student, I hesitated.

“We joined the EU!” she exclaims.

When we joined the union we went from only exporting to Sweden, Germany, and Great Britain to exporting to the whole region through the inner market. We expanded our business and boosted our exports of meat and dairy.

But:

“If we still only relied on those industries (meat, dairy, and machinery) to this day, Denmark would be in a recession,” Ida Sofie Jensen explains.

So what happened? You’ve guessed it, of course. The pharma industry boomed.

Bye Bye Small Pharma

Back in the 1970s and 1980s Danish pharmaceutical companies such as Novo Nordisk and Lundbeck had existed for many years but they were small by comparison. According to Ida Sofie Jensen, that changed around the late 1990s and early 2000s.

A major change was that the industry decided to expand from the neighboring countries to Europe as a whole - just like the meat and dairy industry did after 1972 - a decision made possible by the [establishment of EMA](#), the European Medicines Agency, in 1995 along with several expansions in the coming years.

It meant that if a product was approved by EMA, Danish companies were able to export to all the European countries. The development had the Danish pharmaceutical industry explode, and the exports rose as never before.

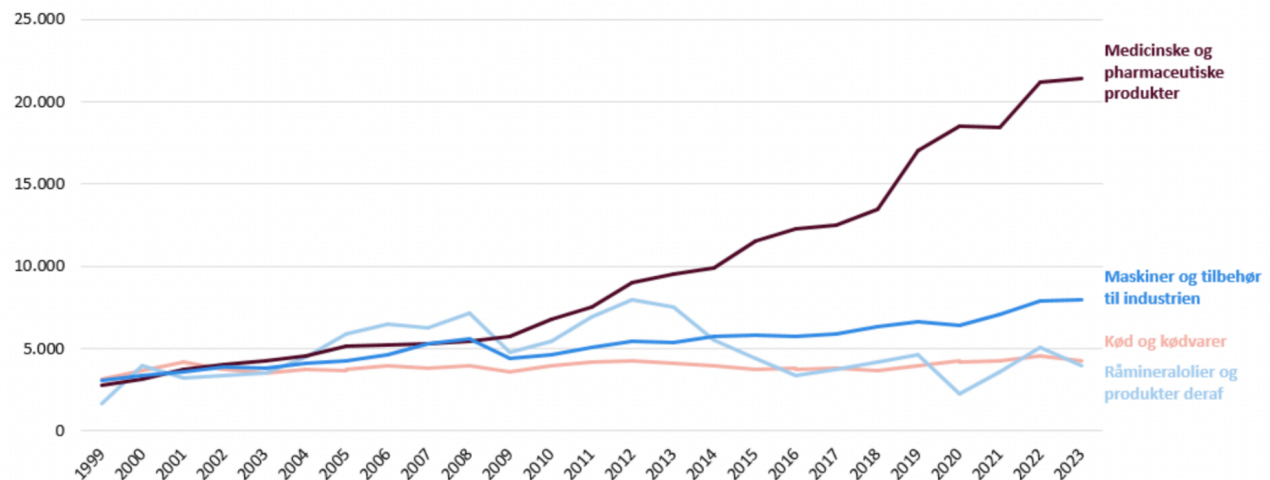
Ida Sofie Jensen gets up and walks to the whiteboard in her office to draw the exponential growth curve to make sure I grasp just how insane the development has been. And rightly so (see graph below).

Lægemidler er blevet den største eksportvare



Udvikling i de største danske eksportvarer

Mio. euro



Kilde: Eurostat

Another reason for the boom was the fact that the industry started to focus on hospital medicine and not only prescriptions. [Between 2005 and 2009](#), the Danish state doubled the expenses on hospital medicine due to increased use and a focus on specialized medicines. So again the industry found a new market to serve, and yet again the exports rose.

According to an [analysis from Dansk Industri](#), the pharmaceutical industry grew in the 2000s mainly due to one thing:

“This is not least due to the fact that the pharmaceutical industry has invested intensively in research and development over a number of years. In these years, the pharmaceutical industry is reaping the benefits of many years of large investments,” said the analysis.

Today, more than [35,000 people](#) are employed within the Danish pharmaceutical industry. Last year the Danish GDP grew by 1.8 percent. If it hadn't been for the pharmaceutical industry, [it would have fallen by 0.1 percent](#).

And as Ida Sofie Jensen said, and as [The Economist](#) confirms in a big piece published earlier this year - Denmark would probably be in a recession if it wasn't for Novo Nordisk.

Life Science Sounds Better

With the booming industry came a need for a political strategy. So Ida Sofie Jensen thought ten years ago.

Along with colleagues she went to England on a study trip in 2015 and was 'amazed' at how far the country had gotten with creating a concrete 'Life Science Strategy' - a strategy for improving conditions for the country's companies.

She wanted to bring that back to Denmark - including the term 'life science'.

“It sounds modern, and just the words 'life' and 'science' are amazing, so we asked the government for a life science strategy,” she explains. I agree that it sounds better than 'lægemiddelindustrien'.

She got her way and life science is now a term widely used within Denmark, and in [2018 the government introduced the first 'Life Science Strategy'](#). Currently, they are working on the third strategy with guidance from the [Danish Life Science Council](#) where Ida Sofie Jensen obviously has a seat at the table.

Together with representatives from different ministries, businesses, patient organizations, and the healthcare sector, the council presents recommendations for the government when developing a new strategy.

So how are the media and the public dealing with the giant successes within Danish life science? Not too great, according to Ida Sofie Jensen.

Janteloven in the Media

With the growing pharmaceutical business, we've seen a growing coverage of the industry. It makes sense: When power grows, so should our attention to it.

But according to Ida Sofie Jensen, there are a few issues.

The first issue, which influences reporters as well as the public, is *Janteloven*, 'The law of Jante'. The sort of social understanding or contract that no one is above the community - we achieve as a whole and not as individuals as per our social-democratic values. Ida Sofie Jensen believes that we as a country have a disdain towards companies that make too much money - even if we as a public also benefit.

Take the biggest success of all: Novo Nordisk, which has more than [21,000 workers](#) in Denmark.

"If Novo Nordisk had been French, the public would have declared themselves as victors and puffed themselves up. In the US, they had honored the company and their work ethics. But here in Denmark, we're skeptical and ask: Why do they have to make so much money?" says Ida Sofie Jensen:

"Why are we so distrustful towards the industry? Instead, we should say: 'Wow, they do a really good job', and congratulate them," she continues and mentions recent stories that in her opinion are misunderstood and products of distrust.

Ida Sofie Jensen makes sure to let me know that of course, we have to have critical coverage. When there are wrongdoings in the industry - which happens - journalists

have an obligation to bring the information to the public. But she also believes that sometimes critical stories are based on the reporter's lack of knowledge about the mechanisms of the industry.

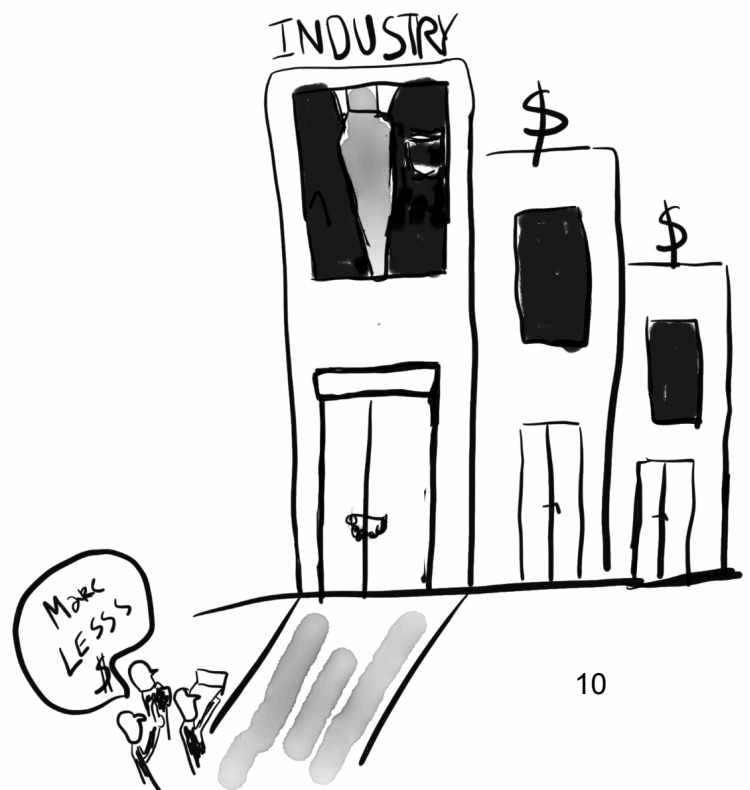
“When I try to explain the value chain to reporters, they abandon the mission because it is complicated. Therefore, it’s easier to do a classic story about a villain and a hero. The industry often being the villain,” she says.

So, for the last 20 to 25 years, [Danish pharmaceutical companies have exploded](#). They have become big players in the international market. Other than contributing to the image of Denmark abroad, including having very qualified researchers and production teams, the industry has a significant influence on the Danish GDP and has contributed not just with cold hard cash but also investments and jobs.

Still, according to Ida Sofie Jensen and LIF, Lægemedelindustriforeningen, the media often depicts the industry as black-and-white.

It’s either evil or God-sent. Whether the media is influencing the public, or it’s the public perception that influences the coverage - I don’t know. Likely, it’s somewhere in between.

This brings us to the next chapter: Public opinion and media analysis.



Part Three: Why Is It Like This? A Small Study of Public Opinion and a Micro Media Analysis

Just as with politicians and journalists, the reputation of the pharmaceutical industry at large is spotted. [Back in 2019, Gallup](#) asked Americans to rank 25 big industries. The pharmaceutical industry scored terribly and went to the absolute bottom place. Ranked worse than the airline industry, than big tech and worse than banking.

From being praised for developing drugs that could combat the AIDS/HIV epidemic in the 1980s to experiencing several high-profile [scandals in the 2000s](#) and beyond, often involving inappropriate marketing of drugs, falsifying data, unethical trials, high drug prices, and so forth.

A more recent example is from 2020 when Johnson & Johnson agreed to pay \$2.2 [billion in a settlement](#) over allegations that the company had promoted an opioid painkiller for uses that were not approved by the FDA.

Not surprisingly, [research](#) shows that there is a connection between a company's wrongdoings and the public's perception of the company and the drug in question.

As an executive at a big Danish pharma company, whom I talked to for background, said:

“It's our own fault.”

For years now, the industry has been trying to regain public trust and improve its reputation. Research highlights initiatives such as [increased transparency and community building](#).

During the pandemic in 2020 and the following year or two, the US media coverage of the industry rose - according to one paper published in the International Journal of Pharmaceutical and Healthcare Marketing [by 145 percent](#) during that time - and the coverage was generally more positive, focusing on the developments to secure vaccines for the global public. After the pandemic, however, it seems that the coverage has gone back to 'normal'. Assumably we've seen the same pattern in the Danish coverage.

The somewhat bad reputation has not gotten better by the fact that scandals make for great TV. And there have been quite a few scandals. Welcome to Hollywood.

In the past few years, the industry has been the subject of several movies and TV shows. Productions such as the 2022 series ‘The Dropout’ about the real-life founder of the company Theranos, Elizabeth Holmes, who made millions on a product that didn’t work, or the 2021 Emmy-awarded TV series ‘Dopesick’ about Purdue Pharma and the American opioid crisis.

So, there are the scandals, and there’s Hollywood. And then there’s the media. Both researchers and industry people I’ve talked to believe, maybe rightly so, that journalists tend to look for the ‘holes in the cheese’ and cultivate them. If there is a critical story, the media keeps writing about it for days, sometimes weeks, and that likely influences the public:

If we continuously read negative stories about an industry, it’s probable to think it influences our view of that specific industry.

But then again, reporters don’t create the scandals, they just cover them.

Let’s take a look at the numbers.

Many Don’t Know Much

At LIF, they’ve kept an eye on the public’s view on the Danish pharmaceutical industry for years.

They recently had a poll conducted - by YouGov in March 2024 - among a group of 1,003 representative Danes. I got a physical copy of the report that was used internally in the organization. Before getting to the numbers, I’ll mention that the results of the newest poll are very similar to previous studies, which to me increases the validity of it.

According to the poll, 35 percent of Danes say that they pretty much don’t know anything about the pharmaceutical industry. 48 percent say that they know only a little, and 17 percent say that they know it well or really well.

The results are similar to other big industries such as the finance sector or the food production industry, but it still means that most of us ‘regular people’ don’t know much about our country’s biggest export business.

When it comes to the reputation of the industry, most Danes say that the industry has a ‘good reputation’ or that the reputation is ‘neither good nor bad’. According to LIF’s report, 53 percent of Danes have a positive view, which is better than last year when 49 percent said the same. However, every other person in the country finding you ‘alright’ isn’t astounding, so the industry still has some convincing to do.

Part of the issue is highlighted in the report. 43 percent of Danes say that they disagree or partly disagree that the price of medicine correlates with the value for the patient. 64 percent agree or partly agree that the industry makes too much money on producing medicine. In other words: Danes think medicine is too expensive, and that the industry shouldn’t be making as much money as it currently does.

The report also states that only half the population believes that medicine can help a patient and that almost seven out of 10 are worried about the side effects or long-term effects of using medicine.

Now, what do all these stats tell me as a reporter on the subject? First of all, the fact that most people don’t know anything about the industry tells me that we have to do better. We can’t only have pharma-reporting in the business sections of newspapers where only a very specific segment of the public reads it. We have to strive to make the pharmaceutical industry relevant for the average citizen.

Why? Well, not only is it currently our biggest export, but it also impacts our personal lives and the lives of our loved ones. Most of us, if not all of us, will be in touch with the industry at some point during our lifetimes. It’s important to understand how medicine travels from research to a shelf at the pharmacy 20 years later. It’s important to understand how the price of the product is set in order to critically evaluate if the price is too high or not. And it’s important to understand what the side effects of our medicine are - but also how common or rare it is to suffer from them. If nothing else, for us to make informed decisions about our own health.

I don't mind that people believe the industry has grown too rich or that medicine is too expensive. I think those are relevant discussions to have and I might even tend to agree with them. However it does worry me that half the population doesn't think medicine actually helps, and the amount of people who worry about side effects from medicine is very troublesome to me. Cause what is the alternative? The growing skepticism can hurt people's health and others around them. We saw it with vaccine skepticism around the world during COVID-19.

People's fear or distrust of pharmaceuticals might be (at least partly) due to stories in the media.

[A Danish study from 2018](#) showed that negative press about the HPV vaccine in Denmark back in 2013 meant that people were less likely to get the vaccination - or have their children have it. A discussion that spiked again in 2015 with the TV2 documentary 'De vaccinerede piger' (The Vaccinated Girls), where girls described various conditions that they believed was a result of having had the HPV vaccine. The film, and other reporting on the subject, have since been criticized as the side effects cannot be supported by science. Studies have shown that people were less likely to get vaccinated when the subject was being debated, which means that bad or incorrect reporting can have detrimental consequences.

To me, it means that journalists must keep repeating facts, be critical of research as a measure to ensure that it's not biased and find ways to reach the readers, viewers, and listeners so they can obtain the correct information.

A Brief Media Analysis

Now, people get most of their information about the pharmaceutical industry from the media, but how does the media convey stories about medicine? I've taken a look at 201 articles published in 2022 to get a sense of the media's attitude toward the industry today. Are we as journalists, in fact, biased in our reporting?

I used Infomedia to identify stories about 'pharma'. It is important to note that the chosen stories are from the written press and mainly the big daily newspapers. Neither

DR nor TV2 is represented in this analysis even though they would be extremely relevant as they reach pretty much everyone in Denmark.

After logging the articles, I came up with three categorizations. I call them: Business, negative, and constructive. These are harsh categorizations, so I feel the need to explain the different categories:

Business articles are short, to-the-point updates on the business aspect of the industry. Which stocks have gone up, which have gone down, who has made the most and the least revenue, and so on. Also, a lot of 'career stories' - who got what position?

The negative stories are very different in subject, everything from a lack of women in the chief staff of companies to incorrect authorization of medicine, to dirty lobbying. These stories are often characterized by a lack of nuances and solutions.

The constructive stories, however, include perspective and nuances. They can still be critical, but they don't sell themselves on negativity. And some of them include solutions.

Before starting the analysis, I assumed that I would find an overwhelming number of negative stories about the industry and a lack of constructive stories - since I don't often see them myself. I also had a notion that most of the coverage would be from business sections.

Let's look at the results: I originally looked at 237 articles but excluded 36 of them since they weren't actually about the industry. Apparently a racehorse is called 'Pharma' and it's getting a lot of coverage...

So, of the 201 relevant articles, 102 were what I categorize as business stories. They were about stocks, revenue, and jobs and were all written in neutral and objective language.

In 80 of the articles, the pharma industry or a pharmaceutical company is mentioned, but the article is about something else. It could be about political pressure on companies following the Russia/Ukraine war. Since they weren't really about the industry, it's

difficult to detect any form of bias. This fact obviously weakened my analysis, since the stores weren't very relevant.

11 of the articles had very negative angles/views on the industry. They were stories about "Death's Merchant" (opioids), incorrect authorization of medicine and too few females in top positions.

Eight articles were more or less constructive. They weren't necessarily positive or solutions-based, but they were nuanced and had perspectives without a clear bias.

Obviously, this media analysis is way too small and limited to use as any sort of solid evidence, so why even mention it? I believe that it can be used to identify categories and narratives. So I'll repeat: Business, negative and constructive.

To test my limited results I looked at actual academic papers that have tried to do the same thing on a bigger scale. It was actually a bit difficult since not many have looked at coverage of the pharmaceutical industry specifically, but I found a paper about the US coverage. The analysis is older, so it's just to reference my own results. It was an [analysis of US online articles](#) about the industry between 2014 and 2016. It found that more than half of the articles (63 percent) were neutral, 24 percent were negative, and 14 percent were positive - and among the financial/business stories, there were no negative stories.

So, where does that leave us?

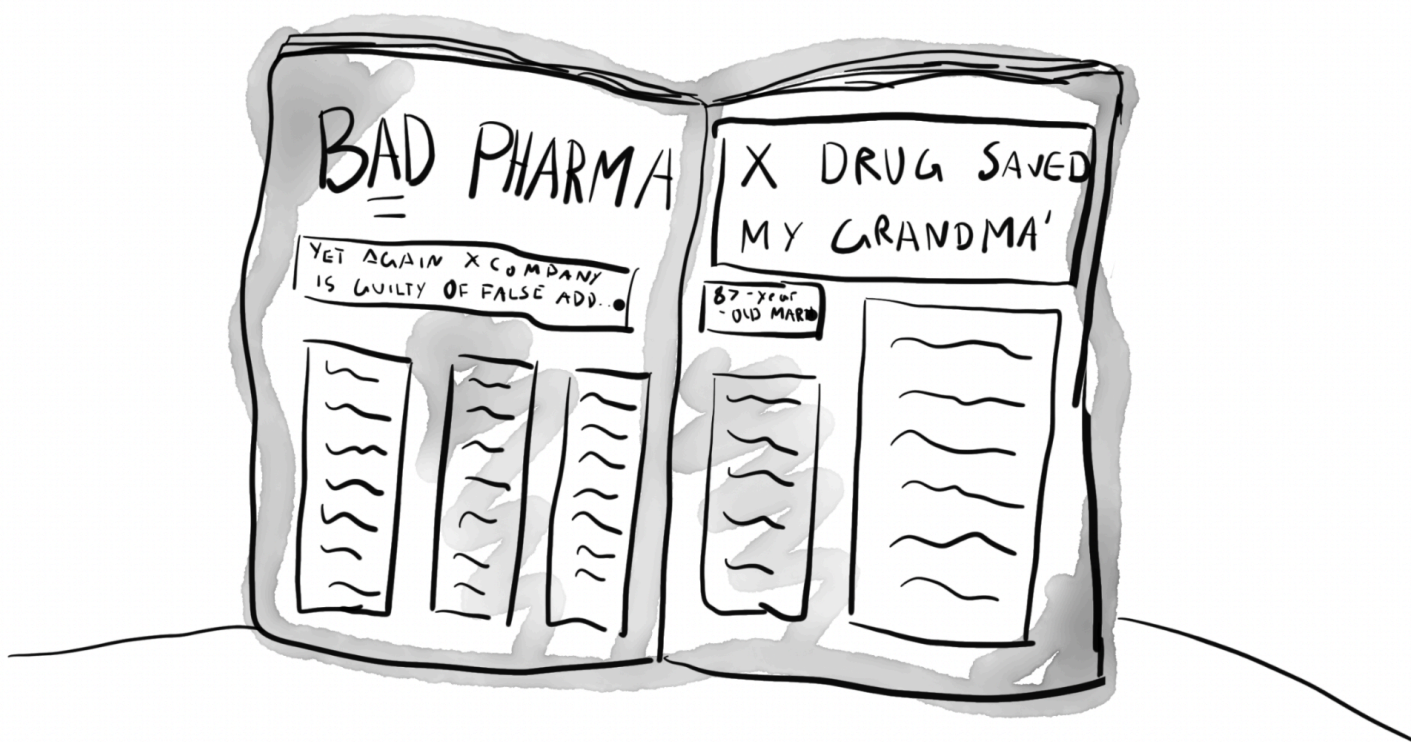
Even though the coverage wasn't as unbalanced as I had expected it still seems that the industry is still battling a bad image - mainly due to scandals in the past and present, and it does look like the media tends to have a negative lens on the industry as a whole. I was also struck by the lack of information, or rather explanation. I still felt a huge lack of knowledge after reading the hundreds of articles. Maybe, journalists don't believe it's necessary to explain the hows and the whys, or maybe - which is more distressing - they don't quite understand it themselves, and how do you explain something you don't understand?

Many other industries have the same issue, so is there any reason to find this case unique, or even see it as a problem?

Again, I'll stress that when we talk about health, it is extremely important, and in my opinion even more important than with many other beats we cover, that the facts are correct, and that we as reporters promote science. People's lives can actually depend on it. Isn't that something that we as journalists should be worried about? We should at least be aware of the impact - good or bad - our coverage has in the real world.

And I'll end this chapter by stressing one more thing. As my small analysis showed, and as the US report showed: Most coverage of the industry is found in the business pages... And let's be honest, many of us don't spend time reading financial papers or sections - so let's make sure, we also bring the coverage to the people. If they don't read it, what is the point?

In chapter five, I'll talk about what we can do to secure good reporting on the pharmaceutical industry, but first: What do I mean by constructive journalism? Up next.



Part Four: What Do I Talk About, When I Talk About Constructive Journalism?

First, let's get something straight: What do I mean when I talk about 'constructive journalism'? I refer to a way of thinking and doing journalism that has a slightly different focus than what most of us learn in school and newsrooms around the country and across the world.

Instead of focusing on the conflict and the waves it often creates, I want to focus on the layers, the nuances, and the possible solutions to the conflict. In the media we tend to escalate a conflict by illustrating two opposing views - often two people who are not looking to get along but instead trying to be the loudest. To me, that isn't interesting.

In constructive journalism we try to do something else. We say: Let's look at how we got to a certain point and why. Let's look at the areas where there could be a reconciliation between views and - most importantly - let's look at how we move on.

It's not rocket science but it is 'constructive'. To do that, to actually change our coverage, we have to change the way we think about journalism and what the role of a journalist is. We shouldn't throw away traditional principles of journalism such as being critical - that is a profound pillar of good journalism, we should however adjust our lenses a little bit to see what lies behind, or rather after, a conflict story.

I'm afraid that if we don't, our society will continue to become more polarized, fake news will continue to spread, and so will news avoidance and news fatigue. In the end, journalism might not hold any sort of authority or trust, and then what will happen?

My peers working with constructive journalism might not agree 100 percent with my definition. You can read more about constructive journalism in various books and reports, but this is how I understand it after having been a fellow at the institute for ten months - and how it makes sense to me in my work.

To be more concrete, I'll give you four aspects of constructive journalism that I've chosen to focus on - at least for starters. We all know that if you try to quit smoking,

drink less, eat more healthy and exercise five times a week all at the same time, you set yourself up to fail.

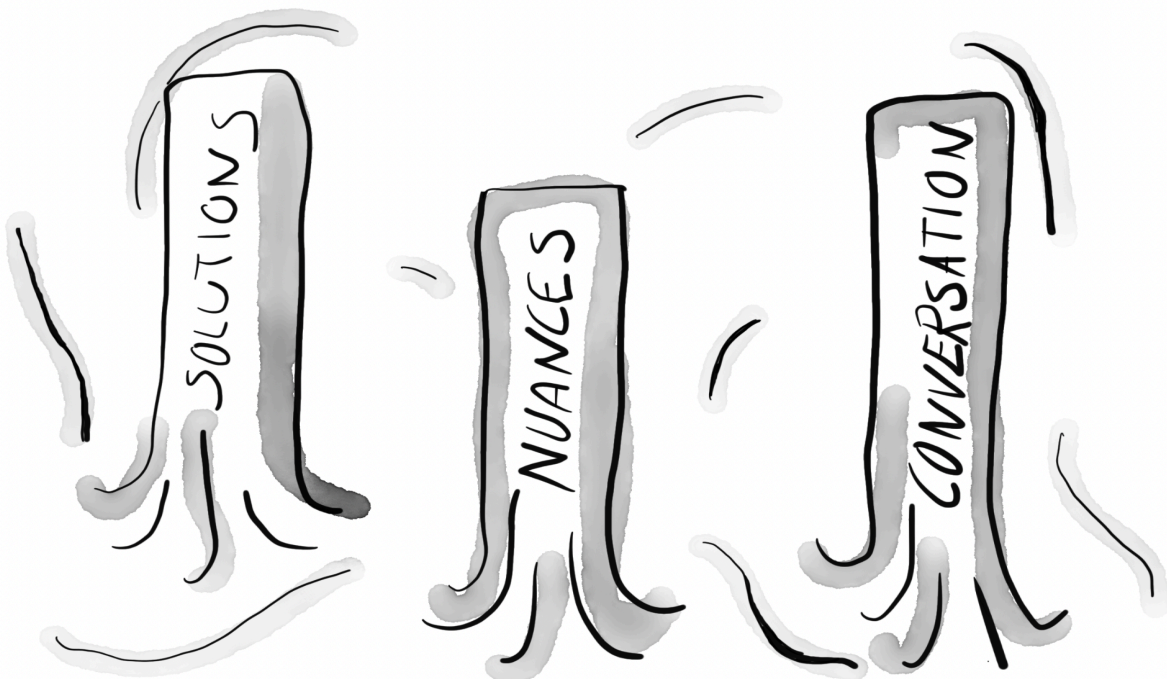
So, we have to start somewhere, and here's where I'm starting in order to produce more constructive journalism:

1. We need more nuances and should shy away from the classical hero-villain scenarios.
2. We need more explainers to show the audience how systems work.
3. We need more transparency: With our own biases and where we get our information from.
4. We need to bring the coverage to the public where they are.

I believe focusing on those four areas, continuously remind myself of them whilst I report and whilst I write, my reporting will get better, and more constructive. But that's just me.

Remember this chapter, because I'll reference constructive journalism several times in the coming pages.

Now - in the following chapter I've talked to people in research, in the industry and in the press who identify what they believe is wrong with the coverage today and how we might change it (and make it more constructive).



Part Five: What Can Journalists (and Everyone Else) Do to Improve Coverage? A Constructive Approach

I apologize in advance, this chapter is a bit long. But it was important for me to show you different views on the subject. Therefore, I've divided the chapter in four: The professor, the associations, the industry, and then a little response from a journalist. Bear in mind that there are many different views out there, but I promise that the ones I've chosen don't stand alone.

The Professor



This sub-headline is actually a little bit misleading as Lars Ehlers doesn't work as a professor anymore, but bare with me:

Lars Ehlers is an experienced health economist who worked for years as a professor at the Clinical Institute at Aalborg University. Now he has started the Nordic Institute of Health Economics - a research institution in Aarhus, where he and his colleagues do consulting for a myriad of companies and institutions, from big pharma companies in the US to small tech start-ups and Danish government agencies and universities.

An experienced gentleman, who luckily for me, agrees with the constructive way of thinking in journalism. The lack of nuances and solutions in the current coverage worries him because it can cause damage to otherwise important debates. He gives me an example:

The debate about prioritizing in the health sector. Back in 1999, Prime Minister Poul Nyrup Rasmussen (a social democrat) [decided to make beta interferon](#) available for sclerosis patients. The problem was that the medicine was extremely expensive, in fact, the most expensive drug at the time to ever be introduced to Danish patients.

This decision came back to [haunt the prime minister](#). Not only were there speculations as to whether he decided to introduce the drug because his wife's daughter suffered from the condition, but more critically: According to experts, the effects of the expensive drug were very uncertain.

According to Lars Ehlers, when the debate hit the media, some points of view - the view that we couldn't afford the medication and shouldn't approve it for use - were being squashed, and it ended up ruining an important debate in society. For more than 15 years politicians, researchers, and others avoided talking about the issue of prioritizing in the healthcare sector, he says.

“Up until the election in 2015, the politicians completely ignored the issue. They told the public: ‘We Danes can afford the world's best healthcare system’ and, ‘we can afford it all’. And the politicians got away with it, even though we had long waitlists and sometimes actually did say no to new medicines,” says Lars Ehlers.

True enough. During the election in 2015, then prime minister, Helle Thorning-Schmidt (S) [was quoted](#) for saying:

“I can't imagine a situation where we have to prioritize. The citizens expect world class treatment in the Danish health care sector.”

[In a poll by the Danish daily Kristeligt Dagblad](#) from 2017, 65 percent of doctors believed that prioritizing was either non-existent or random. According to the newspaper, many doctors said that the prioritizing (that was happening) was fueled by politics and not medical knowledge.

Sure enough, it seems that there was an aversion to having a public debate about prioritizing, but how was (partly) to blame for the polarized debate, I asked Lars Ehlers.

“There were a lot of opportunistic journalists who ran single-case stories, where a patient didn’t get the treatment they wanted and scolded the health care system. Stories like that can be detrimental because they don’t show the actual challenges and problems facing the sector. We heard - and still hear - the same narrative time and time again. It’s not constructive and it doesn’t show a nuanced picture of reality,” he says.

In my words: The media didn’t dig into the perspective that maybe we in fact couldn’t afford it all, and the media didn’t do enough to call out politicians’ bluff. If journalists to a larger extent had looked into the nuances of the debate, the validity of the arguments, maybe the debate would have been fruitful. Obviously, it’s a big maybe, but I believe the ex-professor has a point: Part of the role as a constructive journalist is to facilitate - not force - a nuanced debate, and from what Lars Ehlers is telling me, and from what I’ve read from the archives, that didn’t happen back in 1999.

Now, off to a different issue. The issue of reporters often having an angle when contacting researchers:

As a young researcher starting out, Lars Ehlers was frustrated. He would spend a long time talking to journalists, helping them with their stories but in the end, they wouldn’t quote him in their articles.

“I thought: Alright, I just helped you with your entire story but you end up quoting Kjeld Møller Pedersen (known as the ‘first’ health economist in Denmark),” he says.

After he became a professor, journalists started quoting him - so all is good - but Lars Ehlers believes reporters should be careful not to 'misuse' researchers' time.

“Journalists should be very transparent from the beginning, telling their sources exactly what they need them for and what they hope to get out of it because I think a lot of researchers have felt used at times.”

Said in a different way: In order to have a good reporter-researcher relationship, openness from both parties is key.

Another challenge Lars Ehlers has with journalists is the notion that they've decided the angle of the story before reaching out to him:

“Sometimes it feels like they've already written the story and just need a quote from me that supports their angle,” he explains.

This is particularly a problem with news reporters who work with tight deadlines. Lars Ehlers is aware of the difficult working conditions that many journalists have to abide by, but it can be frustrating as a researcher.

If Lars Ehlers then tries to give them ideas for other stories or angles, they usually don't pursue them. These journalists are - again - usually newsroom journalists who cover different beats and who don't necessarily have the time to do follow-up stories, which Lars Ehlers completely understands, he says, and we agree it's difficult for either of us to do much about the current state of the country's newsrooms.

To sum up his points: Journalists should think more about the sort of debate they facilitate in the media and how they do it. Journalists should be transparent when contacting sources and be more open to changing their angle if reality demands it.

So does the ex-professor have a suggestion for how to improve the relationship between research and journalism to create better coverage?

“The researcher can collaborate with journalists. I’ve done it a few times, where I’ve spent a long time talking to the reporter about how to cover an issue from different angles, and good things have come out of it,” he says:

“But it requires that the researcher and the reporter commit the time and stay open-minded.”

I myself have a bit of experience working together with researchers. What does ‘working together’ entail, you might ask.

Mostly just time. Time to go through different aspects of the subject, to bounce ideas off each other. That doesn’t mean that the researcher can dictate what goes in the article, it is merely a way to ensure diverse coverage.

The Associations

I could have contacted many different associations for this report but I decided to contact two. One of them being Diabetesforeningen (association for people with diabetes), and the other being Apotekerforeningen (associations for pharmacists).

My reason for choosing Apotekerforeningen was to get the point of view from somebody in the middle of it all. Someone who’s not involved with a company, who’s not a researcher and not a patient. Pharmacists are on the threshold of the public and the industry, they know when the media report poorly or perfectly - and through their interaction with the public, they get an idea of possible misconceptions that exist out there.

The reason I chose Diabetesforeningen is because it’s one of the biggest patient associations in Denmark (with more than 90.000 members), and the fact that they are linked to Novo Nordisk - through the medicine their members take - was intriguing to me. I could have chosen to talk to doctors instead, but we always talk to doctors, so I decided against it.

Because they both have interesting - and different - takes on the coverage, I’ve chosen to introduce you to both. So here we go.



I'll start by introducing you to Merete Wagner Hoffman who's the head of press at Apotekerforeningen, and who previously worked for the healthcare logistics company Nomeco.

She often talks to journalists and they often ask the same questions, she says:

“No one can figure out this system, because it's so complicated and difficult to understand - for example, how medicine prices come about. A lot of journalists I talk to don't understand how it's all connected,” says Merete Wagner Hoffmann:

“They'll ask me: ‘Why has the price of X medicine suddenly increased? Is it because the pharmacist has raised the price?’ They don't know, and I can understand them, because why would they?”

Meret Wagner Hoffmann has more than 25 years of experience with communication within the healthcare sector, and like many others I've talked to, she has also noticed a change in recent years.

The coverage has become more polarized, she says, and that is due to the claim to fame of the big Danish pharmaceutical companies.

“It means more journalists pay attention. Novo Nordisk now takes up more space in the media than other big companies such as Mærsk and Lego. It's really become a heavyweight.”

She distinguishes between three ‘types’ of reporters who cover the industry: Business journalists, health journalists, and news journalists.

“News journalists - in my opinion - have a tendency to look for the mistakes and the conflicts. And of course, they do, because that's part of the news criteria - conflicts and sensation,” she says and adds:

“Maybe that's also because of the development in the media, where we now have fewer specialized reporters and more generalists.”

Merete Wagner Hoffmann and I discussed the need for more journalism that covers the industry through a ‘health lense’ and for that coverage to be part of the ‘normal’ content and away from the business section - so more Danes get the information. Just as I wrote in my points about constructive journalism: We need to bring the coverage to the public where they are.

But as she stated before, if we want to avoid mistakes, reporters need more knowledge, so perhaps we need more dedicated health reporters at the news desks? According to Merete Wagner Hoffmann, that could be the solution.



Now, Claus Bøggild, who's the head of press at Diabetesforeningen.

He explained that their members are people with diabetes type 1 and 2, but also relatives to people with diabetes. They are members for different reasons. Some want to support the organization in order for them to work politically under the umbrella of improving conditions for diabetes-patients. Others support largely to receive advice on a variety of issues related to the disease.

For a while we discussed how the organization works with the press and how they themselves have a constructive approach with their press-material: Focusing on things people can do to avoid, postpone or treat type 2 diabetes.

And then we talk about Novo Nordisk. As I'm sure everyone knows by now, one of the company's main sellers is medicine for people with diabetes. So even though Diabetesforeningen doesn't have any (financial) ties with the company, their members are reliant on Novo Nordisk's products. For that reason, Claus Bøggild has followed the coverage closely.

And since the company introduced Ozempic and Wegovy, journalists have 'sharpened their knives' he says. Meaning there's been plenty of critical stories lately - along with the positive.

Working for an organization working for people with diabetes, Claus Bøggild appreciates the expansive coverage of the disease - as awareness is positive. And generally he has a positive view on reporters' coverage of diabetes.

He does however highlight the past year's coverage of Ozempic and Wegovy.

"Doing stories about Ozempic has been the 'talk of town', and sometimes it has seemingly been about finding the most troublesome numbers to do the stories," says Claus Bøggild.

That being numbers about the dent Ozempic has made in our common treasure chest, or stories about people's misuse of the drug or how people who have gotten access to Ozempic though they don't have diabetes. He adds that there's also been plenty of stories about how the medicine has had positive effects on many Danes, so it's not all Darth Vader.

The focus on the new medicines have meant that many of Diabetesforeningen's members have called the organization to ask questions about the drugs that they haven't found an answer to through the media.

Which brings me to a frustration of his: A lack of accuracy.

"There's a lack of distinction between the two products. In some articles both drugs are called weight loss medicine, and sometimes reporters simply mix them up. For us it's important to clarify that Ozempic is a drug that has many benefits to a patient with

diabetes - weight loss is just one of them, and not the main reason people take it. And it's prescribed by a doctor - due to a diabetes-diagnosis," he says.

"Wegovy is a drug you can get a prescription for based on your BMI, and you pay for it yourself. There's a massive difference between the two products. And by not making the distinction, we risk diabetes patients having to defend why they are on so-called 'weight loss medicine'. Also, when reporters don't know the difference between the two drugs it affects the credibility of the story," he says.

Then he told me something I found particularly interesting. Along with his colleagues he has noticed that the reporters working for media that are traditionally perceived as the 'serious' - such as my old paper Berlingske - tend to make more factual mistakes on the subject than the papers who are considered more... salacious and sensation driven.

What? In some sense, I almost felt offended by his observation.

"I think it's because many of our members - patients with diabetes - are amongst the readership of those (less serious) papers. So the reporters simply take it more seriously because it's something that affects the lives of their readers," he explains.

He admits that it's an observation and that he can't back it up with data, but isn't it interesting? As concerning as it is, it kinda makes sense - maybe we as reporters make more of an effort on subjects that we know our readers really want to read about.

I can't confidently say that it isn't the case with my own reporting. It might be, and that for me is food for thought.

After my initial shock evaporated, I asked him what he does to ensure that reporters get the right information.

He explained that he has a fact-sheet about diabetes and about the different medications that he sends to reporters: "Even if they don't ask for it".

The Industry



I've talked to several people from the industry - companies and associations - and most of them agree that the general coverage is pretty decent.

But they all talk about 'different kinds of reporters and media'. I've brought in the Senior Director in Global Media at Novo Nordisk, Lars Otto Andersen-Lange, to explain:

"We're lucky to have a lot of reporters in Denmark who follow us closely and have done so for many years. They know their way around the industry, including the heavy regulations. They are critical, just look at the coverage, but they are knowledgeable about the industry and pharma topics. But then we see more generalist journalists who are critical to basic and fundamental structures in the industry," he says and exemplifies with the industry's relationship with healthcare professionals, which is a process or structure that is approved and regulated by the authorities.

“It’s fair to be critical, if something is not right it should be brought to light, but it seems that some of these hyper-critical stories are being written because the reporters don’t quite have the time to understand how the industry basically works,” he continues.

Generally, Novo Nordisk has had a lot of positive coverage over the years, but since introducing Wegovy and Ozempic the coverage has been more mixed in Denmark. According to Lars Otto Andersen-Lange, that’s to be expected:

“When you enter a new disease area, there will always be a lot of debate about it in the media and in society - until it is considered an established disease area. To some degree there are similarities to what happened back in the 1990s when patients with type 2 diabetes were debated.”

Back then there was a discussion about whether or not people with type 2 diabetes should even be considered patients and therefore receive treatment, he explains. Some believed that they should just pull themselves together, eat healthy, and exercise.

So how is it being the most talked about pharmaceutical company in the country? His answer is: “A huge opportunity and responsibility, so we are busy.”

According to Lars Otto Andersen-Lange, since Novo Nordisk introduced Wegovy and Ozempic they’ve received more Freedom of Information Act requests than ever before in Denmark. And since becoming a famous global company they also have to serve the press around the globe - around 60 percent of inquiries to Novo Nordisk come from outside Denmark - and that has consequences for the Danish press:

“We have a large media relations department where we cover the press globally, but we use a big chunk of our time on the Danish press because it’s an important country for us - we’re founded and based here and almost half of our employees live and work here,” he says.

It took me quite a while to get an interview with Novo Nordisk for this paper, so it felt pressing to ask if that is always the case for journalists, because that can make good reporting difficult.

“We prioritize breaking news and large media, so sorry we didn’t get back to you on time with this one. We aim to acknowledge key media inquiries right away and answer them within their deadline - which is typically the end of the day.”

Before 2022, when the company launched Wegovy and Ozempic, Danish media could call and get an interview with the research director or the CEO Lars Fruergaard Jørgensen pretty quickly, says Lars Otto Andersen-Lange. That’s not possible anymore, he explains, because reporters elsewhere also want time.

“Danish reporters will say that they get less time with executives now than they did before, and that is true. The interest in Novo Nordisk in the media has exploded, but we still only have one CEO and he still only has 24 hours a day. But we do get back to everybody,” he says.

So, in a time where Novo Nordisk is growing bigger and bigger and the Danish newsrooms are running faster and faster, what can we do to ensure proper coverage?

Lars Otto Andersen-Lange believes that they (at Novo Nordisk) can contribute by working on making the information and the quotes they give in the media sharp and easy to understand - to ensure there are no misconceptions or misunderstandings.

But to really ensure good coverage? The answer is in the newsroom he says:

“The media needs to hire more specialists and not only rely on generalists. I know it’s a question of resources, but I still think that’s a big part of the solution. Specialists that can focus on one area and one industry will deliver a much stronger product to the audience.”

A response from a journalist



So. Overall there was a lot of praise from everyone I talked to. Danish journalists are actually pretty good, they said, but as you just read there are challenges. That's not a surprise to anyone.

And I don't think I need to explain the pressure many reporters are currently under, but I will say: We're at a time in journalism where especially print media is struggling, having to lay off journalists and work faster. I believe that - if not all then most - journalists strive to do good and accurate reporting, but we do make mistakes and sometimes we simply don't have the time to properly get into a new beat. It happens.

Through the interviews, it's clear that many people working in the sphere of pharma - from the companies themselves to researchers to pharmacists - think that journalists have a specific agenda before doing a story. Now, I'm not saying that it isn't true, but I will say that I believe their perception of reporters might hinder good reporting.

Journalism is in many ways a two-way street. Just as reporters should not be biased toward a specific issue or company, sources shouldn't be biased toward a specific reporter, news organization, or journalists in general.

Some of the reporters I talked to for this paper said that access to the industry was sometimes difficult, and that the sheer amount of regulations in the industry makes it a complex area to cover. And I agree. There are challenges for us as reporters that we should all work on.

Yes, I agree with Lars Otto Andersen-Lange that having specialists in the newsroom is ideal - but that is in the hands of editors around the country. Meanwhile, what we can do is ensure easy access to information - and that very much depends on the sources, the experts in the field. Therefore I'm happy to hear the industry, researchers and organizations say that they will continue providing that information and maintain good relationships with the press.

Because yes, sometimes the coverage simply isn't good enough, but it also feels like an easy out to just blame it solely on the media.

That said, of course, we as journalists need to know more about the sphere we're covering, and I believe we don't cover pharma enough. But maybe a better way to ensure improvement of the coverage is to find new ways to prepare news reporters.

That brings me to my simple (and not so revolutionary) idea, which I will discuss in the next chapter.

Part Six: From Research to Prescription

As you know - for a few months, I've been dabbling with the grand question: How can we improve the current coverage of the Danish pharmaceutical industry? And what does 'better' exactly mean?

As previously stated, I believe we need to make it more constructive. I tried to explain what I mean by 'constructive' and I gave you my four main principles I'm working with.

I'll remind you: Nuances, explanation, transparency and having the user in mind.

Okay, that's great. So how can I encourage others to do the same? Honestly, I've really struggled to come up with anything that might be useful, but in the end, I did come up with one idea.

An idea that can encourage nuances, explanation and transparency. The latter principle is something the reporter has to figure out on their own.

I call it '**From Research to Prescription**'.

The idea is to create a platform where busy newsroom reporters can navigate through different topics and, with the help of infographics and short but precise texts, get the most important information about a specific mechanism in the industry. The platform should be created as a collaboration between a journalist or communicator and researchers from Danish universities. All of the information available on the site should have a stamp that says 'fact approved' so the reporters out there know it's the most correct information available - stripped of potential biases.

It would be up to the journalist in charge of the site to make sure that all the information has been vetted by different actors in academia - We all know that everyone can be biased, even researchers. And the journalist should keep an eye on foreign research and new developments to update the site.

An example is how drug prices in Denmark are negotiated and set. Another example could be the different phases of research before a drug goes into production. I will return to that example later in this report.

Why do this?

Well, I can't fix the fact that we don't have many journalists in Denmark who focus specifically on the pharmaceutical industry. There is especially a shortage when it comes to newsroom reporters who write from a health perspective - in contrast to business reporters. These are the reporters that I want the site to focus on, because they have the power to convey the industry to a broader audience who don't follow business news.

How do I believe the site can help ensure more nuanced, explanatory and transparent coverage of the industry?

I believe the main component, the common denominator, is knowledge. If we as reporters have more knowledge we'd be able to challenge ourselves, each other and our biases - to create a more nuanced debate. More knowledge would also make us able to better explain the mechanism, the inner workings of the industry, to our audiences and lastly: If we're more confident in our own research, we're more likely to be transparent with the readers. Not to mention that knowledge, facts and information, would prepare us for more in-depth and critical interviews with our sources, and I mean, that in itself would create better coverage.

The reason for the 'design' of the site is to ensure that reporters will be able to access the information fast. Having been a newsroom reporter myself, I know that time is of the essence, and seeking information about a subject (when you cover many different beats) is crucial.

Therefore, my best - and only - idea is to create an information platform for journalists.

I asked people from the industry and from academia what they thought of the idea, and of course they applauded it. We all have the same goal: To enlighten the public with correct information. At least that's what one industry-guy told me.

When I asked him why they hadn't done something like that - I mean they have the capital and the knowledge inhouse - he said:

“If the information came directly from the industry, reporters wouldn't take it for facts. They would be skeptical of our bias and agenda.”

Fair point, I thought.

I also asked journalists - who write about the industry - what they thought. One very experienced editor said that most of his reporters already have the knowledge, but when hiring someone new, who's inexperienced, such a site could be very valuable.

Another reporter, who covers this specific beat, said that she could really use a tool like the site. She's been covering the industry for a while, but the sheer amount of regulations sometimes confuses her, and she could “definitely” use a platform where she knows she can get the information fast.

One researcher I talked to suggested that the site could even have examples of ‘constructive stories’ to inspire reporters to cover the industry more constructively, and highlight themes and aspects that are currently under-covered.

I liked the idea, so perhaps.

All in all, even though the idea isn't revolutionary, I was pretty satisfied with the response I got.

But to make sure you understand my idea, I've made a dummy. Coming up next, an example of how to present complex information about price-setting of medicine in Denmark.

Part Seven: The Dummy

To live up to my standards, I've produced a dummy together with Matilde Slot, who co-taught my health economics class at Aarhus University in the fall. Or she made sure I understood the mechanisms, in order to explain it to you guys.



This is supposed to show what an element on the site could look like. Mind you, I'm neither a graphic nor an interactive designer, so this is just a... Well, yes, a dummy.

But before continuing to the dummy, I'll give you Matilde Slot's take on the coverage because she emphasized something that might sound simple but it's something that many journalists, as well as the public, often forget.

“In the media, the pharmaceutical industry is often viewed as an evil business that's only in the game to make money. This often happens in case stories that focus on patients who can't afford a specific medication. In the stories it's often the fault of the industry

whose prices are too high - even though they produce (and spend billions) on the specific drug to help the patients,” she says.

And this is what we have to remember.

“There has to be a trade-off. The industry has to have an incentive to spend all of those billions on research and producing the drug. And the whole process can take up to 20 years. It’s business, it really is. They won’t produce a drug that they can’t make money on, because that would kill their business, so they have to be able to make money - within the limits of reason. It’s simply supply and demand.”

Now, with that laid out, let’s continue with the dummy.

The dummy illustrates - in a simple manner - the otherwise quite complex journey a new drug takes: From research to prescription. From when the idea is born - usually at a university, within a company or in an independent lab until it’s been approved by EMA, going through the different phases where the drug is tested on animals and patients.

I originally wanted to make a much more detailed explainer, but had to admit that it would be difficult, if not impossible, for me to do without being able to make the explainer interactive.

But imagine, come on, that you could click each box which would lead you to a new slide with detailed information about each step in the process. It could be information about funding, about regulations or about the cooperation between medical doctors and companies, that Lars Otto Andersen-Lange from Novo Nordisk was talking about earlier.

FROM RESEARCH TO PRESCRIPTION:



Now, if you for some reason don't understand the mechanism after studying the dummy, don't worry - this is just a quick draft.

Part Eight: AI and Media Coverage

An obvious question you might have been wondering about while reading this paper is the question of AI.

As one gentleman I was talking to about this project said: “Well, what your idea is offering... can’t you just ask an AI and get the answer?”

When I realized that maybe AI could in fact make my idea obsolete - not to mention the need for journalists altogether - I panicked. Therefore I here present you with arguments, as to why that’s not the case.

I can only speak of the state of AI at the moment: It’s difficult to foresee where we’ll be in one, five, or ten years in this rapidly growing technology. But as of now, an AI, such as ChatGPT, can offer a journalist an overview of the different steps from research to prescription. However, as with the nature of ChatGPT, it’s difficult to ascertain where it gets the information from and whether or not it is valid information.

This means that a journalist who doesn’t have much knowledge of the industry should fact-check the AI, which leads to further research. Then there are other AIs such as HyperWrite or Perplexity which give you academic references for the information it provides. Again, as a journalist, you would have to further check those references. There is a danger that [the AI is hallucinating](#), and in the often fast-paced newsrooms across the country, that poses a challenge to factual and objective journalism.

Recently I heard an AI-dude say: “Don’t expect AI to give you an exact correct answer straight away, but it’s good at identifying where to look.”

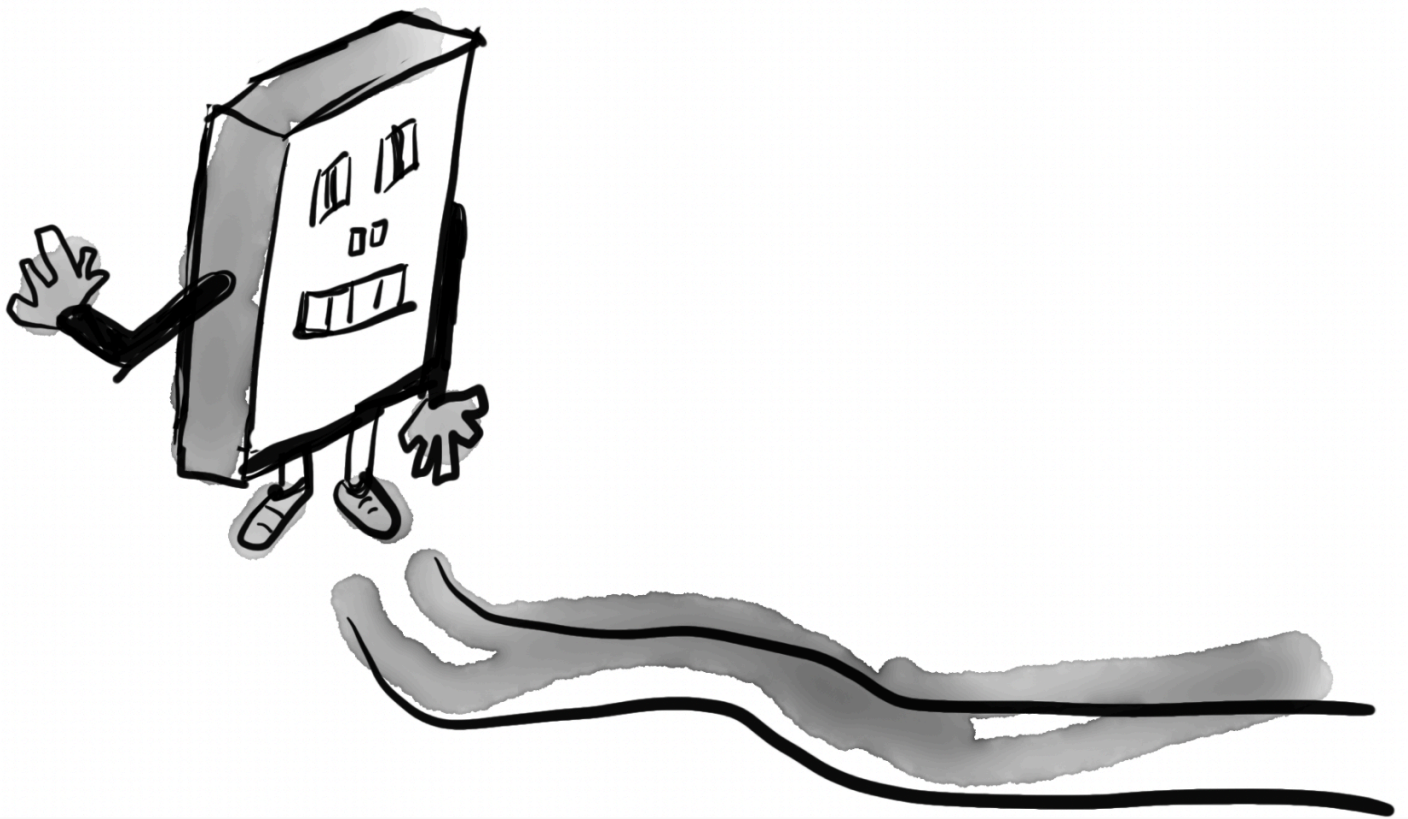
And apparently the creators of ChatGPT agrees - maybe you’ve noticed what ChatGPT states under the search field on the platform:

‘ChatGPT can make mistakes. Check important info.’

The point of my site is to have a platform where journalists can get fast and easily understood insights into the Danish pharmaceutical industry and, more importantly,

know that all the information on the site is written in cooperation with Danish academics and fact-checked by a journalist.

Therefore, I believe there is room for a platform like From Research to Prescription. A place where a reporter is assured of unskewed information about the industry, where they can find sources to contact, and good examples of constructive journalism already done. A platform that can continue to grow as the research and the world grow, and where maybe one day AI will be so advanced that it can be incorporated. Who knows?



Part Nine: My Own Bias and What I Could Have Done

There are many things I could have done and would have done had I had more time to write this report.

First of all, I want to address why I've given the industry plenty of room to talk. I addressed it in my introduction, but I'd like to explain further.

To me, talking about how the industry is covered in the media without talking to the industry would be counterproductive. I believe all views hold value and lessons to be learnt and it gave me the opportunity to ask them not only what reporters could do better, but also what they as an industry could do better.

I've tried to balance this paper by including the views of researchers, journalists and organizations to give a nuanced view of the issue. It is a tough balance - to what extent have I been fair? I'm not sure.

For transparency - I was pretty skeptical towards the industry when I started this project. I'm one of those Danes who tends to be skeptical towards big business. That being pharma, tech, fashion or anyone else making big bucks. Throughout this process I've come to understand the mechanism, the nature, of the industry and its connections to the state and to society, and it has nuanced my view.

I'm still in a gray area. And maybe that is the best place to be as a journalist - it gives me the ability to view it both ways.

I'd also like to add that my fellowship (as mentioned in the introduction) is funded by Novo Nordisk Fonden (the foundation, not the company), but they didn't choose me to become a fellow, they didn't choose my subject or influence anything in this report. They haven't even seen it before publication. So, even though I understand how easy it is to question my credibility as a reporter (I'd probably do that myself) there really is no reason to. To be honest, I'm not sure they are ever going to read this report anyway.

Secondly, I'd like to explain why I've written this paper the way I have: The language.

I considered writing an academic paper—I do know how to—but decided against it. The point of all this is to bring information about pharmaceuticals and the industry to the Danes. Therefore, I should communicate with that audience in mind. I'm sure that some people find it annoying and maybe unnecessary, just like I can find the way academic papers are written annoying and unnecessary. Still, I believe that most people will get something out of it if they understand all the content, hence the way it's communicated.

One of the things I could have done is another small media analysis—looking at how the media portrays a specific product such as Wegovy. I could have looked at a month or just a week of coverage, and concentrated on the biggest platforms in Denmark—DR and TV2. This could have contributed to even more knowledge about the current coverage.

A reason I decided not to was that all the people I've talked to for this report had the same view of the coverage—that it's often too black and white and that there's a lack of explanation of the mechanism in the industry—at least in the mainstream media. So, I felt confident drawing the conclusions I have.

Many players in the arena would have been relevant to talk to. The Medicine Council, for one. Amgros too, as well as the many different patient organizations. It might also have been interesting to get politicians' views on the case—politicians who have healthcare under their domain. And doctors. I could also have talked to more journalists. But to be fair, besides the ones interviewed specifically for this report, I've talked to many journalists in my network and believe I have a pretty good sense of their point of view.

I could also have spent time talking to citizens about how they view the industry and its coverage of it. I actually tried to, but it fell through shortly before my deadline. This could also have given me valuable information and perhaps ideas as to how to improve it.

Lastly, it would also have been interesting to see how the Danish coverage differs from the international one. Looking at Danish articles vs. American or British articles. Based on the media climate in both countries, I assume that the Danish coverage is overall more neutral. But it remains just an assumption.

But that's the thing about turning in a report: You could always have done more, talked to more people, but I believe I have enough knowledge—that I've tested on everyone I've talked to—to proceed to my conclusion.

In the next, and final chapter.



Part ten: A Sort of Conclusion and Looking Ahead

More than [80,000 Danes](#) had a prescription to Wegovey in April 2024. To me that's a stunning number and it tells me that pharmaceuticals and the way we cover it is going to be more and more pressing in the future.

That's why I've bothered writing about it for the past 40 pages. If pharmaceuticals are going to be a bigger part of all of our lives it makes sense to look at the information available to the public: How the drugs have been developed, for what purpose and to what effect. It's not my job - or within my capabilities - to conclude whether or not the development is good or bad, if we should worry or embrace. My only goal with this report was to make us think about, actually stop and wonder, if we, as journalists, are doing our audiences justice.

Looking back at the limited coverage I've done on pharma and science, I certainly haven't always done that. Now, I'm smarter and more aware.

This is by no means a fully comprehensive report. There are so many aspects and people I haven't included, and a thorough report would likely take years. But I've tried to show how much influence the industry has on our economy. I've tried to show and explain what people think about the industry and why, and then I've tried to give an overview of how we tend to cover pharma and what different actors believe reporters should work on.

Lastly, I've tried to offer a way for better coverage: Constructive journalism. If some of you are unsure if the constructive way is the way forward, I implore you to try it out. Remind yourself of the nuances, the solutions and something as simple as hope in your coverage, and I'm confident you will see and feel a difference. And maybe that's all we can do at the moment - look for steps forward, even if they are small.

Personally, I've also gained something in the process of writing this paper. It has made me think. I've become acutely aware of my own biases and how my biases have been nuanced and more informed throughout these last months. Maybe in this time and age that is the most important thing we as reporters can do: Know our own biases, challenge them and be transparent. That's how we rebuild trust with our readers, listeners and viewers. And of course have our facts straight.

That's my best suggestion.

