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Opinion | Why Israel's Vaccine Deal With Pfizer Has Nothing to Do With Clinical Trials

Marek Glezerman Sep 14, 2021  Follow



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Preparing a COVID vaccine at a Clalit Health Services vaccination center in Jerusalem, last week. Credit: Ohad Zwigenberg

On Friday, Channel 12 aired a report by Arad Nir. The report was based on an unfortunate remark by Dr. Philip Dormitzer, vice president and chief scientific officer at Pfizer, in which he referred to Israel as the company's "sort of laboratory." Not only was this comment condescending, it was terribly foolish. The company's management hastened to disavow the comment, but by then it had already been seized upon by conspiracy theory aficionados and anti-vaxxers.

In the report, Nir insisted that in a democratic country, the consent of the citizens to participate in "Pfizer's clinical trial" should have been obtained. In other words, while a pandemic is raging and people are desperately waiting for vaccines, Nir thinks that Israel should have held a national referendum on whether Israelis wish to be "Pfizer's laboratory" and if we would permit the company to provide us with vaccines and to analyze the results.

Therefore, it is important to say first: Analyzing epidemiological results without identifying the participants and without intervention is a very accepted research method in the industry in general and in medicine in particular. It is called post-marketing analysis and such an analysis is not a clinical trial in any way, shape or form.

The results of Pfizer's clinical trial on 43,548 people were published on December 31, 2020. Based on these results, the FDA issued emergency authorization to the company to market the drug, thereby providing a response to the widespread demand for available and effective vaccines as the COVID-19 pandemic was raging in the world. Presumably, every country that received a supply of vaccines also committed to report the results to the

drug's manufacturer. This is the standard process, as it should be. In this way, vital experience is gained for the continued development of the vaccine. Amassing experience and a clinical experiment are two different things.

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The remaining question, therefore, concerns the nature of the information that Israel committed to provide to Pfizer in return for a steady supply of vaccines. And this question is easy to answer, because [the contract between Pfizer and Israel](#) (which was made public 11 days after it was signed, with classified information blacked out) and the data that was provided to the company are fully accessible online, and do not contain anything that deviates from accepted practice.

So, what is in the contract – signed on January 6, 2021– that is hidden from the general public's view? I don't know, just as I don't know the classified details in other contracts regarding things like security imports or agricultural exports that affect all our lives. But, common sense enables one to guess. First thing – the cost. In a competitive world, the parties obviously have no desire to reveal the prices they agreed to after negotiations. Second, ensuring a steady supply. Of course, for Israel this was a supremely vital need, and Pfizer may have demanded some kind of exclusivity in return.

Far more important is that Israel could offer a model of a vaccination project at the highest level, as it is a small country and also an “island country” with essentially no overland

access, it has an excellent medical infrastructure, highly advanced database management and a network of health funds that is among the world's best. A win for Pfizer, a win for Israel, a win for the entire world. Where is there a clinical trial on humans here?

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Finally, there is the moral question: Doesn't prioritizing Israel in the supply of vaccines come at the expense of poorer countries? Certainly, but it is hard to blame this on the details of a contract between a country and a private company that produces vaccines. If this contract didn't exist, would Pfizer be sending the vaccine shipments to Africa? The fair distribution of resources should rightly be the responsibility of international institutions, not of a private company like Pfizer or an individual country like Israel.

Prof. Marek Glezerman formerly headed the gynecology departments at Soroka, Wolfson and Beilinson/Hasharon Medical Centers, and was deputy director of the Rabin Medical Center.

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