

Fit to serve



Joel Sorell/Getty

For the **letter by Clinton's doctor** see <https://assets.documentcloud.org/documents/2188498/physicians-letter-on-hillary-clinton.pdf>

For the **September, 2016, letter by Trump's doctor** see https://assets.donaldjtrump.com/DJT_Medical_Records_.pdf

For the **December, 2015, letter by Trump's doctor** see https://assets.donaldjtrump.com/Health_Record.pdf

Health has consumed media coverage of the US presidential election in the past 2 weeks. Unfortunately, however, it is the physical health of the candidates, particularly that of Democratic candidate Hillary Clinton, rather than scrutiny of their health policies that has dominated coverage. The trigger for the onslaught was video footage of Clinton losing her footing at a 9/11 memorial event in New York. Intense speculation and conjecture ensued in US and worldwide media about the cause of the stumble, by not only doctors who had never treated Clinton, but also news reporters and even ex-secret servicemen; theories ranged from her having had a seizure to her having Parkinson's disease. It was the latest low point in America's poisoned political journalism.

Clinton's campaign subsequently announced that she had been diagnosed on Sept 2 with bacterial pneumonia. Still, speculation about her health escalated and, on Sept 14, her team released a two-page letter from her doctor. It states that overheating and dehydration caused Clinton to become dizzy at the 9/11 event and it gives

further details of her pneumonia and other minor health issues. On Sept 15, Republican candidate Donald Trump also released a letter from his doctor that states that Trump is in "excellent physical health". The letter is an update to a December, 2015, report from the same doctor that has come under fire for its hyperbolic style (eg, Trump's blood pressure was "astonishingly excellent" and "his physical strength and stamina are extraordinary") and for failing to mention the heel bone spurs that in 1968 earned Trump a medical exemption from serving in the Vietnam War. The latest letter also fails to mention the spurs.

There should be discussion about presidential candidates' fitness to serve. But prurient media (and public) obsession with the physical health of the candidates has been wildly exaggerated and speculative. Meanwhile, mental health has been little discussed. Part of the problem has been the absence of timely, accurate, or complete (ie, physical and mental) health information from the candidates. On health transparency, both campaigns seem to have stumbled in the heat. ■ [The Lancet](#)

Access to medicines—the status quo is no longer an option



Audrey Wale/Panos

See [World Report](#) page 1266

Last week, the much anticipated report of the UN Secretary-General's High-Level Panel on Access To Medicines, *Promoting innovation & access to health technologies*, was published. The independent panel sought recommendations to solve the disjunction between trade and the patent system with fulfilment of the right to health. This misalignment continues to be a barrier to affordable access to essential medicines.

The report's strong focus on the use of human rights as the basis of policies and on access to medicines in all countries is to be commended; as is the open documentation of statements of disagreement among the panel, or that some recommendations were not bold enough. Important were the renewed calls for an international R&D convention and more public financing for R&D. Concrete approaches to improve transparency, good governance, and accountability were all emphasised, including punitive action against parties that pressure countries that use TRIPS flexibilities.

The report was opposed by the US Government and the pharmaceutical industry whose attempts to dilute

the report's recommendations and block its release have been widely reported. These tensions are not new. The existing intellectual property (IP) system serves these parties well where public health and human rights considerations are often omitted in pricing decisions and access to medical products and technologies. It is a pity no consensus was reached among panellists on renegotiating TRIPS and a new IP regime.

Nevertheless, the panel's recommendations are an important first step and it will be imperative for Ban Ki-moon to endorse them quickly, especially as momentum to approve the Trans-Pacific Partnership, which also has negative implications for access to medicines, is gathering in the USA. The *Lancet* Commission on Essential Medicines, to be published on Nov 8, 2016, will provide a timely platform to look at health innovation and access in the much wider context of comprehensive medicine policies. It will provide actionable recommendations that will complement and possibly leverage those of the panel's and reaffirm essential medicines as a keystone of the global health and development agenda. ■ [The Lancet](#)

For the **High-Level Panel report** see <http://static1.squarespace.com/static/562094dee4b0d00c1a3ef761/t/57d9c6ebf5e231b2f02cd3d4/t/473890031320/UNSG+HLP+Report+FINAL+12+Sept+2016.pdf>

For **Essential Medicines are still essential** see [Comment Lancet](#) 2016; 386: 1061-63