A Critique of Commodified Healthcare

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With the advent of modern medical technology, it is now possible to keep people alive longer, in chronically sicker states of health, at higher rates than ever before. Think of technologies like left ventricular assist devices, organ transplants, extracorporeal membrane oxygenation, and monoclonal antibodies. These therapies come with a hefty price tag. For example, Aducanumab, a monoclonal antibody, was recently approved by the FDA to treat Alzheimer's disease. Its yearly cost is \$56,000 and if it were to be given to every indicated patient, the estimated cost to Medicare would be \$29 billion a year. To put this in perspective, in 2019, total Medicare spending for all physician-administered drugs was \$37 billion. With this in mind, we can see why 100 million people in the U.S., or 41% of all adults, have healthcare debt. It's the number one cause of personal bankruptcy in this country. It is no coincidence that the progress we have seen in medical technology has paralleled this rise in healthcare debt. Simply put, these two realities coexist because healthcare has become a commodity.

A commodity is an item that is created to be bought, sold, or traded. They're the most basic ingredients of the economy; if the economy is an engine, then commodities are the fuel. In turn, the economy has transformed even our health into an item than can be bought, sold, and traded. However, there's a crucial difference between healthcare and every other commodity: *individuals are willing to spend unsustainable sums of money to obtain more life.* At no fault of their own, patients will empty their savings and as a collective, bankrupt hospitals and insurance companies to use medical technology towards the pursuit of a longer life. Private healthcare corporations and pharmaceutical companies inherently recognize this and use it to generate massive profits. They recognize that their products and services, if efficacious, can be consumed indefinitely. This is not the case for most other commodities, where consumers will limit their spending to save for a time when they can afford the item. Healthcare is the one commodity that individuals are willing to spend a near *infinite* amount to obtain. And so, it must be treated in a fundamentally different way.

Only once we understand this can we then appreciate that our society needs a structure to control the amount of buying and selling of life that can occur. It needs to be regulated. There must exist a

central regulatory body whose role is to limit the unrelenting power of commodified healthcare. This can only occur in a system where healthcare is run at a state or federal level. A public healthcare system can regulate the use of these life-prolonging medical technologies in a way that accounts for both individual autonomy and social justice. In turn, it can invest in scaling institutions to handle the influx of these medically complex patients once they reach the outpatient setting.

It is often said that a new technology can surpass a society's ability to handle its consequences. This is also true for healthcare. The commodification of healthcare combined with the advent of modern medical technologies, while keeping people alive longer, can lead to devastating social consequences if left unchecked. The public infrastructure to sustainably pay for these products must be in place before they hit the market. If we fail to develop this infrastructure and continue on a path of largely unregulated spending, our nation's financial institutions will be unable to handle the cost of healthcare and eventually, may collapse under the weight of their own consumption.