

Episode: *Author Interview: “You Are What You Eat . . . and What You Take Orally, Intravenously, or Topically”*

Guest: Christy A. Rentmeester, PhD

Host: Tim Hoff

Transcript: Cheryl Green

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[bright theme music]

[00:00:03] TIM HOFF: Welcome to another episode of the Author Interview series from the *American Medical Association Journal of Ethics*. I’m your host, Tim Hoff. This series provides an alternative way to access the interesting and important work being done by Journal contributors each month. Joining me on this episode is Dr Christy Rentmeester, the managing editor of the *AMA Journal of Ethics*. She’s here to discuss her article, “*You Are What You Eat . . . and What You Take Orally, Intravenously, or Topically*,” in the April 2024 issue of the Journal, [Global Medical Supply Chain Security](#). Dr Rentmeester, thank you so much for being back on the podcast. [music fades]

DR CHRISTY RENTMEESTER: Thanks, Tim.

[00:00:42] HOFF: So, let’s start with what is the main ethics point of your article?

RENTMEESTER: Over the last 20 years or so, we have paid closer attention, ethical attention specifically, to the origins of our foods. Michael Pollan, for example, published *The Omnivore’s Dilemma*, and this book gave us a model for thinking about our food’s origins. Specifically, he traces a few meals back to their origins in the dirt as plants or fungi or other organisms. And what I have suggested in this article is that it’s time for bioethics to do more to investigate our bioproduct supply chains, just as we have investigated our food chains. And I argue that we have good ethics reasons to ask critical questions about agribusiness practices that generate some of our medicines, including some of the medicines that are called essential medicines by the World Health Organization.

[00:01:56] HOFF: And so, what do you see as the most important thing for health professions students and trainees specifically to take from your article?

RENTMEESTER: We need to give our students and our trainees more opportunities to think about where our medicines come from. Medicines that are bioproducts or are derived from bioproducts, for example, are numerous, and they’re sourced from flowers and trees and fungi, non-human animals, and these organisms’ metabolites and cell walls and polysaccharides. So, pharmaceutical companies are bioprospecting to find these sources and to exploit them when profitable, and the ethics trouble comes in when the distinctions between bioprospecting and biopiracy can’t be clearly discerned. So, as I say in the article, bioprospecting characterizes practices of identifying bioproducts for the purpose of harvesting them to generate commercial health care and other applications. Biopiracy characterizes bioprospecting that happens without profit sharing with communities whose material and epistemic resources have been taken or whose lands or life practices have been decimated in the process of the taking. So, an ethics upshot here is that we tend to think about critical medicine supply chains in terms of manufacturing, regulation, and transportation, and these are important. And we also need to be

encouraging students and clinicians to be aware of their participation in normalizing some troubling practices and commodifying how some medicines are sourced.

[00:03:53] HOFF: And finally, if you could add a point to your article that you didn't have the time or space for, what would that be?

RENTMEESTER: Having the tools to consider whether and how we can or should source our medicinal bioproducts more justly is key to us being able to avoid participating in the vices of biopiracy. This is really a neglected theme, and there are ways, many ways, in which bioethics can help our students and our clinicians, patients, the public, and the whole health care sector, really, do better and be better. So, one reason that the phrase "we are what we eat" is so well known is that it draws our attention to the fact that what we eat says important things about who we are when we're eating what we're eating. So, just as we are what we eat, the bioproducts we make and take as medicines also say important things about who we are as a culture and as individuals. [theme music returns] And we don't think much about that when we think much about medicine supply chains, and we should.

[00:05:08] HOFF: Dr Rentmeester, thank you so much, as always, for your time on the podcast.

RENTMEESTER: Thank you Tim.

HOFF: To read the full article, as well as the rest of this month's issue for free, visit our site, journalofethics.org. We'll be back soon with more *Ethics Talk* from the *American Medical Association Journal of Ethics*.