

Direct to Consumer Advertising (DTCA) of Prescription Drugs

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Perceived benefits of DTCA

1. Patient education → informed patients are more involved in their healthcare.
2. Tackling under-treatment and getting people to visit their doctor.
3. Better outcomes → improved economic value
4. Improved drug treatment compliance
5. Improved physician-patient relationship (Auton 25)

Claimed harmful effects of DTCA

1. Marketing is for profit, not consumer education and health.
2. Leads to increased drug budget costs
 - DTCA increases demand and price of drugs.
 - Health expenditures have grown more rapidly for prescription drugs than for any other type of medical care. (Doonan 1, 5)
3. Misleads patients if advertisement is unbalanced in disclosing benefits versus side-effects.
4. Increased patient risk from new drugs (e.g. Vioxx; Celebrex).
5. Damages the doctor-patient relationship.
6. Increases pressure on doctor visits and workload of patients.
7. Medicalizes conditions common to human existence and aging (Auton 25).

Physician survey conducted by the FDA regarding the impact of DTCA on the physician-patient relationship.

- Prescribers respond to patient requests for a prescription 75% of the time.
- Beneficial effects doctors reported: better discussion with patient; patient more aware of treatments
- Problems doctors encountered: time to correct misconceptions; drug not needed/did not have condition.

Physicians reported that patients are aware: That the drug is available only by prescription, of possible benefits and positive effects

However, patients do not have a clear idea of: Possible risks and negative effects, who should not use the drug.

WMS Position

DRU-011: WMS supports efforts to control DTCA of prescription drugs and AMA actions to strengthen federal efforts to more effectively regulate such advertising. (HOD, 0405)

Takeaways

1. DTCA increases healthcare costs

- Drug companies are an industry that use DTCA to increase profits
- Most of what they sell is NOT innovative (77% are “me-too” drugs)

2. DTCA can harm the public health

- New drugs have less history, unknown side effects (e.g. Vioxx)

3. DTCA can impair physician-patient relationship

- Should be free from outside influence and put patient well-being at the forefront

4. Support measures that retain the benefits of DTCA but eliminate the harmful side effects

5. Protect the health of the people of Wisconsin and vote in support of AB-56.



Prescription Drug Marketing: What Consumers Need to Know



Pharmaceutical companies spend \$5 billion a year selling prescription drugs to consumers. *Direct-to-consumer* (DTC) promotion of medications includes advertisements in newspapers and magazines, TV ads, coupons, and industry-funded websites, newsletters, and patient support services.

Turn on your television and you are likely to catch a commercial for the latest sleep aid or depression medication featuring happy, attractive people. On average, an adult in the U.S. is exposed to 100 minutes of DTC television ads for every minute spent seeing a doctor. DTC promotion focuses only on a handful of drugs – the ones that are most profitable. Marketing dollars are primarily spent on the newest, most expensive drugs, for which some risks may not yet be known.

In the United States, direct-to-consumer ads are regulated by the Food and Drug Administration (FDA). However, the FDA does not approve ads before distribution and lacks the staff to monitor the accuracy of all DTC ads. When the FDA learns of a misleading ad, the agency can complain in writing and require the company to stop using the ad. But such letters are rare, and it may take many months for the FDA to force a drug company to stop circulating a misleading drug ad.

Television and radio ads for drugs don't provide consumers with all known risks. The drug companies are not required to provide such information as long as the ad refers the consumer to an internet site, a print advertisement, a toll-free telephone number, or a health care provider. The Food and Drug Administration (FDA), which regulates prescription drugs, does not regulate so-called help-seeking ads, which sell diseases rather than drugs.

Branding Conditions

Inventing – or reinventing – diseases and conditions enables drug companies to market diseases under the guise of education; “disease awareness” ads do not mention any drug risks. Osteopenia, or low bone mass, is one example of an invented disease. Real conditions are sometimes renamed in order to increase diagnoses or to link a specific diagnosis to a specific drug. Renamed conditions include heartburn (renamed GERD, for gastroesophageal reflux disease), incontinence (now Overactive Bladder Syndrome), impotence (now Erectile Dysfunction), and shyness (now Social Anxiety Disorder). Restless legs syndrome, a real but rare condition, was redefined in order to expand the market for a treatment. “Branding” a condition may be done by a company with the best-selling (or only) drug for a condition. Sometimes companies work together to brand a condition to create as large a market as possible for a class of drugs. These advertisements, disguised as education, are designed to drive worried consumers into physicians' offices for diagnoses – and treatments - that may be unnecessary.

Advertised Drugs May Not Be the Best For You

In the first half of 2005, pharmaceutical manufacturers spent more on media campaigns than any other industry except the automobile industry. Studies show that when a patient requests a specific drug, doctors may prescribe it even if the drug is not in the patient's best interest. Your doctor, not a drug company, should be deciding about your diagnosis and treatment. You may not need a drug at all.

If you do need a drug, the advertised drug may not be best for you. Consumer Reports Best Buy Drugs found the four best drugs for treating high blood pressure to be *generic* drugs, not costly brand-name products. The most-promoted drugs are usually the newest drugs, about which the least is known. Half of all drug withdrawals and black-box warnings (the FDA's most severe warning



about adverse effects) take place within the first two years a drug is on the market. New drugs should be prescribed cautiously until more is known about their safety; drug marketing encourages reckless use of drugs. Consider asking your doctor to prescribe a time-tested drug. More safety information is available on drugs that have been available for seven years or more. (See our factsheet on generic drugs).

Relationship Marketing

DTC ads are only one aspect of DTC promotion, which now includes a heavy dose of customer relationship marketing – services meant to increase loyalty to a brand. Examples of industry-funded programs include “In Your Corner,” a support program for women living with breast cancer from the manufacturers of Arimidex, the “Us Against Athero” campaign from the makers of Crestor, and the “GetQuit” program from the manufacturers of Chantix. Under the guise of education, these programs are designed to increase sales of specific drugs. Industry is also experimenting with product placement, including Zoloft in the movie *The Sixth Sense* and Nuvaring in the TV show *Scrubs*.

The Bottom Line

Prescription drugs can be important for our health, but only if they are the right drugs, used the right way. Choosing treatments that affect your health is too important to leave in the hands of marketers. Prescribers and consumers must rely on unbiased sources of information on drugs. Don't rely on industry for drug information or personal support. Be skeptical of new diseases. When a prescription is called for, don't ask your health care provider for advertised drugs. Instead, ask if an older, classic drug is available.

Good sources of unbiased information include:

Consumer Reports Best Buy Drugs (Consumers Union)

<http://www.consumerreports.org/health/best-buy-drugs/index.htm>

RxFacts Independent Drug Information Service <http://www.rxfacts.org>

Worst Pills, Best Pills <http://www.worstpills.org/>

The Cochrane Collaboration <http://www.cochrane.org>

Agency for Health Care Research and Quality (AHRQ) <http://www.ahrq.gov>

For more sources, see Drug Information at <http://pharmedout.org/topic.htm#druginfo>

The National Women's Health Network—one of the few consumer advocacy groups that takes no money from pharmaceutical companies—improves the health of all women by developing and promoting a critical analysis of health issues in order to affect policy and support consumer decision-making.

PharmedOut.org is an independent, publicly funded project that empowers physicians to identify and counter exposes inappropriate pharmaceutical promotion practices.

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