

Drug advertising criticized by researchers

In recent years, drug companies have saturated the print and broadcast media with ads for every conceivable prescription ad. They claim the promotions help "educate" people about medical conditions and treatments.

But, the controversial ads actually teach very little, according to a new analysis by researchers at the University of California (UC)-Davis and UCLA. The researchers call on drug companies to voluntarily improve their advertising or face regulation. The analysis and recommendations appear in the December 2000 issue of *The Journal of Family Practice*.

"No English-speaking country other than the United States permits direct-to-consumer prescription drug advertising," said Dr. Richard L. Kravitz, director of the UC- Davis Center for Health Services Research in Primary Care and a study author.

"A leading argument in favor of allowing this advertising is that the ads are educational; however, our research shows that in practice this argument often falls short," he stated.

Dr. Kravitz and his co-authors examined 320 print ads promoting 101 drug brands. The ads appeared in 18 popular magazines between 1989 and 1998. On an 11-point scale of educational content, the average ad scored only 3.2 points.

Most ads failed to provide information about how a drug works, its success rate, how long it must be taken, alternative treatments, or helpful lifestyle changes. A few ads didn't even reveal the drug's name.

According to the study:

- 9% of the prescription drug ads reported the drug's success rate
- 9% helped to clarify misconceptions about the medical condition the drug is prescribed to treat
- 11% told how long the drug typically must be taken
- 12% talked about the condition's prevalence
- 20% revealed how long it takes for the drug to work
- 24% described lifestyle changes patients can make to improve the condition, either alone or with the drug
- 27% provided information about the condition's causes or risk factors
- 29% acknowledged the existence of one or more competing treatments

"These ads are designed to encourage patients to request the advertised drugs from physicians," Kravitz pointed out. "That can have three outcomes. The patient can request the drug, and the drug can be appropriate, in which case the outcome is good. The patient can request an inappropriate drug, and the doctor can acquiesce and prescribe it, which could cause the patient's health to suffer.

"Or," he continued, "the patient can request an inappropriate drug, the doctor can refuse to prescribe it, and the patient and doctor can get locked in an argument that imperils the doctor-patient relationship."

In reality, most doctors have difficulty refusing a patient's request for specific drugs, even when not appropriate. This has become a particularly serious situation in regards to antibiotics, which are often prescribed merely because the patient expects them.

If the pharmaceutical industry improves the educational content of its prescription drug ads, further research will be needed to assess the impact of that change on physician-patient interactions, the authors said.

"The medical community should exert pressure on the drug industry to incorporate more information about conditions and treatments in its advertising... If such information is not provided voluntarily by the industry in future advertising, the medical establishment should lobby for regulation," the article argued.

SOURCES: "Direct-To-Consumer Prescription Drug Ads," University of California, Davis Medical Center, December 1, 2000.

The Journal of Family Practice, December 2000.