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Despite controversy and rising external pressures, pharmaceutical companies spent \$4.5 billion on direct-to-consumer advertising in 2004.¹ Now the AMA wants to tackle the big-money issue, voting at its annual meeting this summer to study the ads and their impact.

Clearly DTC advertising has shortcomings. Anecdotal reports—now attaining the stature of urban legends—feature sweet old ladies indeed asking their physicians if Viagra is right for them. That's the obvious downside of ads that only reinforce a brand name, often with great success, while avoiding full disclosure of drug indications and risks. Remember, a manufacturer who makes no claims of efficacy doesn't have to claim adverse effects, either.

This approach is just one of many designed to circumvent the letter and the spirit of current marketing regulations. Companies are even hiring real-life doctors to discuss their drugs in 30-second spots, describing adverse effects in gentle, reassuring tones. At the same time, manufacturers and FDA are issuing warnings about or pulling drugs at a somewhat alarming rate.

Done properly, DTC advertising can serve a useful purpose. Several companies now sponsor public service announcements that educate the masses about a particular disease, its impact, and the fact that treatments are available. These advertisements send patients to their doctor's office where a qualified physician—not a hired announcer, actor, or celebrity spokesperson—can render an accurate diagnosis and propose an appropriate treatment plan. Of course the manufacturer's name, website, or hotline takes prominence in the ads, but the companies who spend so much money on these educational spots deserve to benefit from the investment.

Physicians have the right to weigh in on DTC advertising, and I'm glad the AMA is addressing a potentially thorny issue. Rather than decry the DTC trend outright, however, I hope medical professionals will encourage companies to sponsor more educational spots and fewer hard sells. When manufacturers invest their dollars in educational ads they drive patients to their doctors, where they receive appropriate care from a qualified source. Physicians benefit from the influx of patients. And manufacturers will invariably see increases in script writing, especially if they re-invest some of the money from their consumer budgets back into programs for physicians. In short, everyone can play his/her proper role and everyone can benefit. ■

Paul Winnington

Paul Winnington,
 Editor-in-Chief



MedAd News, June 2005, p.8.