



BY DAVID KWESKIN

## The Blame Game

*Given the positive impact DTC can have on patients – via helping the undiagnosed and driving persistence and compliance among those on treatment – how is it that this form of consumer promotion has earned such a negative reputation?*

**S**o who is it that feels DTC ads are wasteful, jacking up the cost of drugs – manipulating the public to request unnecessary drugs – and forcing the medical profession to treat with inappropriate medications?

No, it is not the physician. At least that's what the results of a recent study, published in this publication in December 2009, indicated. These findings show that of 12,500 doctor-patient conversations in 2008, when DTC was brought up, 54 percent of the time it was first mentioned by the *physician*. And, four out of five times, the comments were favorable. Clearly, DTC is not a physician issue.

No, it is not the general public. Did you and I miss the hue and cry in the public marketplace to halt or extremely limit advertising of pharmaceuticals / devices? I think not. It's not there. In fact, I'd wager that for the vast majority of consumers, DTC advertising is viewed as residing somewhere between an informative educational source (i.e., valuable), sometimes entertaining on a "hush-hush" topic (ED) to just another annoying advertisement that one has to tolerate. No doubt, ad placement is an issue for some (e.g., ED ads in front of young audiences) and for a few who think that advertising drives up the case of "everything." Indeed, the argument is makeable that for some, the brief summary is proof that DTC ads answer to a higher authority of accuracy / truthfulness.

Yes, it's those government-types who are having a grand-old time battering the ball of that old canard that advertising forces you blindly to do things that you really don't want to do; that DTC marketing is somehow anti-capitalistic. And, that freedom of speech only applies to those who say those things that I ascent to. So, set up unfavorable taxing mechanisms!

Amazingly, the government's own Congressional Budget Office (CBO), in a recent review of the impact of the promotional activity of 2,000 drugs from 1989 to 2008, observed that "DTC advertising (is) the least used form of drug pro-

motion" versus detailing, journal ads, professional meetings – not a surprise to readers of this publication. Moreover, the report offers the opinion that "some research suggests that DTC advertising encourages individuals to visit their doctors and increases sales for the advertised drug's class – but not necessarily for the advertised drug itself." And, "for patients already taking an advertised drug, DTC advertisements may serve as a reminder to refill the prescription."

Certainly, by anyone's measure, if DTC encourages the public to visit their physicians for conditions for which they might not otherwise seek treatment / analysis and it encourages persistence of treatment regimen, it's a hard to fault such activity. Yes, our elected officials need to read their own commissioned analyses.

Yes, the pharma industry does have itself to blame in many cases for the low position in the public eye it finds itself. The fact that such prominent firms as Pfizer and Eli Lilly (and there have been others) who last year paid huge fines to settle charges that they had illegally marketed some specific drugs for unapproved use, certainly hampers the effort to raise the public perception of pharma. Moreover, there is a continued need for pharma to explain why some drugs for specialized, limited markets are hugely expensive. There is a need to tote the incredible successes of medicines and the good that they have provided.

In short, when you look to the medical profession itself, when you look at the patient/consumer community, they are not tarring and feathering DTC and driving it out of town. Rather, it is those who need the scapegoat of DTC to foster their own gaming needs who are distorting reality.

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