

Part 3: DRUGS

[excerpt]

Looks Like You Need Something Stronger

Mainlining the facts about drug advertising and your fatal inadequacies

Know what I love? When companies sitting on mountains of cash throw temper-tantrums over the consumer's "right to know" about their products. When corporations manufacturing controlled, potentially dangerous substances insist that regular folks can make their own decisions about how their health is managed. When behavior manipulation is presented as public service. LOVE THAT. So happy to live in a modern, enlightened era in which pharmaceutical mega-corps are looking out for the little guy. And telling the little guy to ask his doctor about Lunesta.

Quick reminder: Drug companies didn't always market directly to consumers in the United States. (And, aside from New Zealand, they're not allowed to market directly to consumers anywhere else at all.) Up until the 1980s, companies communicated with doctors and pharmacists almost exclusively,ⁱ trusting actual, trained professionals to consult with patients about their medication choices. Then, as American culture began to morph and patients demanded a more active role in treatment decisions, print and TV ads for prescription meds began to appear.ⁱⁱ Today, of course, they're as common as ads for Taco Bell and Target.

Of course, it's worth noting that marketing prescription drugs directly to consumers was *never actually illegal* in the United States. Regulatory legislation passed in 1969 stipulated that any drug advertisements must hit four, rudimentary, marks:

- They must not be false or misleading. (No lies.)
- They must present a "fair balance" of information describing both the risks and benefits of a drug. (No sugar-coating.)
- They must include facts that are "material" to the product's advertised uses. (No ... inserting random facts about random stuff? Like that the human head weighs eight pounds?)
- They must include a "summary" that mentions every risk described in the product's labeling. (No masking the hazards. Which accounts for the ridiculously rushed, auctioneer-style list of ghastly side-effects tacked onto EVERY drug ad ever.)ⁱⁱⁱ

And that's it. Four loose guidelines. As was the case with the alcohol industry, the U.S. Government recognized that the pharmaceutical industry was loaded and powerful, and decided it was much safer

(and, likely, profitable) to stand down. And, as was the case with alcohol marketing, the industry was largely trusted to make the right moral choices and simply self-regulate.

And for many decades, it did.

Until it didn't.

Because why the hell shouldn't multi-billion-dollar pharmaceutical companies be able to tell uninformed consumers about pills that will make them thin, virile, strong, and happy? Why shouldn't people with zero medical training be entrusted to pick their own meds, and demand them from doctors? (Doctors who are paid off by those same multi-billion-dollar pharmaceutical companies for their "support."^{iv}) Why shouldn't the pharmaceutical industry take Ralph Nader's crusade for prescription drug labels that warn patients of potential risks, and twist it into a larger crusade to ensure that drug consumers were "aware" of all their drug-taking options?^v

Drug manufacturers poured \$6.1 billion into direct-to-consumer marketing across television, magazine, digital, newspaper, radio, and out-of-home advertising in 2017 ALONE.^{vi} But, clearly, they did that for our own good.

The National Conference of State Legislatures reported way back in 2000 that sales of the top 50 most heavily advertised drugs rose 24.6 percent that year, compared to 4.3 percent for all other drugs combined.^{vii} But, clearly, drug companies just wanted us to know about our options.

Critics of direct-to-consumer pharmaceutical ads argue that they can trick consumers into demanding drugs they don't actually need from their harried physicians. And, taking the logic a step further, these marketing campaigns knowingly transform normal human experiences (hair loss, occasional insomnia, shyness) into fearful "diseases" that merit drug-based treatment.^{viii} This phenomenon is so widespread that it's earned the sinister name "disease mongering." But, clearly, we just didn't realize how much we *needed* those drugs until we learned about them. You know, through ads.

Of course, you knew this already. You knew that Big Pharma has been pulling our strings and playing on our insecurities for decades. No surprise there.

The newsflash is this: Now, Big Pharma is digging deep into gamification and customization of its marketing efforts to make its ads even more effective. (Read: manipulative.) Now, Big Pharma is hiring behavioral scientists to work on its campaigns.^{ix} Now, Big Pharma is pushing for permission to market off-label drug uses; uses for which a drug wasn't originally formulated and for which it may not be fully tested.^x

Now, it's getting serious.

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ⁱCenter for Drug Evaluation and Research. "Prescription Drug Advertising - Background on Drug Advertising." *U.S. Food and Drug Administration Home Page*, June 19, 2015,

www.fda.gov/Drugs/ResourcesForYou/Consumers/PrescriptionDrugAdvertising/ucm071964.htm.

ⁱⁱVentola, C. Lee. "Direct-to-Consumer Pharmaceutical Advertising." *National Center for Biotechnology Information*, October 2011, www.ncbi.nlm.nih.gov/pmc/articles.

ⁱⁱⁱVentola, C. Lee. "Direct-to-Consumer Pharmaceutical Advertising." *National Center for Biotechnology Information*, October 2011, www.ncbi.nlm.nih.gov/pmc/articles.

^{iv}Tigas, Mike, [Ryann Grochowski Jones](#), [Charles Ornstein](#), and [Lena Groeger](#). "Dollars for Docs." *ProPublica*, June 28, 2018, projects.propublica.org/docdollars.

^vDonohue, Julie. "A History of Drug Advertising: The Evolving Roles of Consumers and Consumer Protection." *National Center for Biotechnology Information*, December 2006, www.ncbi.nlm.nih.gov/pmc.

^{vi}Entis, Laura. "DTC Pharma Ad Spending Slipped 4.6% in 2017: Kantar." *MM&M*, March 12, 2018, www.mmm-online.com/commercial/dtc-pharma-ad-spending-slipped-46-in-2017-kantar/article/750421.

^{vii}"Marketing And Direct-To-Consumer Advertising (DTCA) Of Pharmaceuticals." *National Conference of State Legislatures*, July 1, 2015, <http://www.ncsl.org/research/health/marketing-and-advertising-of-pharmaceuticals.aspx>

^{viii}Donohue, Julie. "A History of Drug Advertising: The Evolving Roles of Consumers and Consumer Protection." *National Center for Biotechnology Information*, December 2006, www.ncbi.nlm.nih.gov/pmc.

^{ix}Tom, Kottler. "Marketers Discuss Catalysts for Use of Behavioral Science Techniques." *MM&M*, April 4, 2018, www.mmm-online.com/sponsored/marketers-discuss-catalysts-for-use-of-behavioral-science-techniques/article/754156.

^xLazarus, David. "Direct-to-Consumer Drug Ads: A Bad Idea That's about to Get Worse." *Los Angeles Times*, February 15, 2017, www.latimes.com/business/la-fi-lazarus-drugadvertising-20170215-story.html.