Capsule Commentary on Faerber et al., Content Analysis of False and Misleading Claims in Television Advertising for Prescription and Nonprescription Drugs

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The study by Faerber and Kreling¹ adds to a growing literature about direct-to-consumer advertising (DTCA), a unique form of drug advertising prohibited in most of the world. They found that of television ads airing from 2008 to 2010, 33 % were objectively true, 57 % were potentially misleading and 10 % were just outright (“pants on fire”) false. There were more objectively true claims and fewer false claims for prescription than non-prescription ads.

The authors used a well-defined protocol and the high inter-rater agreement between coders was reassuring. The differences between prescription and non-prescription drugs were of interest—one has to wonder whether differences in the regulatory environment of the Food and Drug Administration (FDA) and Federal Trade Commission (FTC) account for this. Although the authors only examined a subset of claims from a subset of ads from a subset of DTCA, there is no obvious reason that this would substantially bias their results. They acknowledge that their endpoint was a proximal one—some of the claims may not have misled consumers, and consumers may have been misled without consequential changes in their clinical care.

Perhaps most vexing is that while many of the claims were misleading, they were not illegal per se. While this study may be welcome ammunition for those opposing DTCA, others will continue to argue that DTCA serves a valuable social good by leading to case-finding and by destigmatizing diseases such as depression. Interestingly, despite the volume of rhetoric, there is remarkably little evidence about DTCA’s true effects on prescription drug

utilization and health outcomes, though most research suggests DTCA is associated with an increase in drug utilization, patient requests for specific drugs, and physicians’ confidence in prescribing.²

Although DTCA remains a lightning rod for controversy, it remains highly concentrated in a small number of products and accounts for only 15 % or so of prescription drug marketing.³ Tried and true methods of pharmaceutical marketing, detailing visits, and free office samples⁴ continue to account for the lion share of promotion; this is not surprising, given how effective these methods are at changing physician behavior.⁵

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