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Editorial

The risk of biased patient information on prescription drugs

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Two prominent gastroenterologists complained bitterly about many reports in the lay press suggesting that eradication of *H. pylori* is the only successful way to heal not even gastric or duodenal ulcers but even a frequently upset stomach and to prevent gastric carcinoma or lymphoma. Obviously the lawmakers in many countries as well as the EC had such cases in mind when they insisted on a total ban on advertising for prescription drugs. In the USA, the partial lifting of such a ban on advertising pretending to inform patients of previously unknown therapeutical possibilities in treatment of their disease, proved not to be successful.

Insiders of the pharmaceutical business were well aware that pressure of the patient on the doctor to prescribe a certain medicine did considerably enhance the promotional effort among the health profession. One of the most efficacious means proved to be reports on new (or known) medicines in the lay press, especially home or family media. It is highly commendable that a group of social scientists from the Groningen Institute for Drug Studies (GIDS) undertook a study to clarify the role of press and public relations managers of seven of the leading pharmaceutical companies in the Netherlands (domestic and foreign) in establishing contacts with the lay press. As expected, the public relations managers (not specified whether they were MD's or pharmacists) felt unanimously that information on medicines to the general public had become progressively more important for two reasons: (i) patients are becoming increasingly emancipated, and (ii) to improve the image of the pharmaceutical industry. As to the first development: this has been fostered not only by the "therapeutic alliance" between doctor and patient but also by the present legal opinion of the

patients right of his(her) own choice. But the doctor/patient relationship is not uniform. It ranges from full confidence to overt mis-trust in the doctor. When, for example, four out of five press reports on eradication therapies speak of a professional error if the physician does not do it, confidence is lost. There was agreement that the patient's interest should come before commercial motives. But one agreed too that through the press many potentials 'users' could be reached. The sceptical and exacting attitude of leading journalists was emphasized but quality and newsworthiness of information given as the only attraction for journalists. A code of ethics for journalists, like the "European Code of Practice for the Promotion of Medicines", would be welcomed by the authors of the study, but would be difficult to control. Since the setting and the hospitality of a press conference are often more important than the attractiveness of the topic, manipulation may never be fully excluded. The role of the mass media as an early warning system on adverse drug reaction is also dealt with. The interviewed public relations officers said it depended on the kind of problem whether they call the press or not. In fact the dailies play an important role in disseminating drug alerts since, even in most developed countries, there is no ideal system to warn the health profession beforehand. The study leaves no doubt that physicians and pharmacists should have all the facts — positive or negative — before the public is approached. There is no more devastating threat to the doctor/patient relationship than if the latter knows more facts than his doctor. The authors conclude therefore: "it is clear that information to the public on prescription drugs will never be more than secondary to the information which goes to doctors and pharmacists. The basis for sound drug use will be the proper information of health care professionals about the latest developments and new drugs, whether the information be favourable or otherwise. They should be able to educate their patients about the pros and cons of a particular therapy. Patients who ask for (new) drugs in response to mass media publicity may know exactly the name and the supposed merits of the drug but at the same time they may be uninformed as to its possible side-effects, interactions and contraindications."

Van Trigt AM, De Jong-Van den Berg LTW, Willems J, Tromp TFJ, Haaijer-Ruskamp FM. The pharmaceutical industry and the lay press: the industry's point of view. *Int J Risk Safety Med* 1995;7:1-15.