

## **Position Statement Direct to Consumer Advertising**

It is the position of the Health Charities Coalition of Canada (HCCC) that product claim Direct to Consumer Advertising (DTCA) should not be permitted in Canada. Advertising of prescription drugs to consumers by corporations with a financial interest in the outcome does not serve Canadians well.

Education of consumers about their health and about how they can access the best medications is a legitimate service that can most appropriately be provided by the health system, with governments working in conjunction with health organizations and the pharmaceutical sector.

*The HCCC believes that any changes to the current practices in Canada related to the education of consumers about medications should be based on the following principles:*

### **Transparency**

The process of developing, implementing and evaluating new policies on DTCA must be visible and accessible to all Canadians and must respect their right to make informed choices about their health needs, in partnership with health professionals.

### **Inclusiveness**

The process must provide interested Canadians and stakeholders with opportunities for meaningful involvement in the development and implementation of any revised federal policy on DTCA.

### **Accountability**

The impact of any policy change regarding DTCA as it relates to health outcomes for Canadians and/or financial gains for industry must be regularly reported to Canadians.

### **Evidence-Based**

The federal government must base its policies and decisions on DTCA on the best available evidence and must ensure that Canadian experts who have been involved in developing evidence-based guidelines are included in the decision-making process.

## **The HCCC recommends that:**

- Canada should maintain the current prohibition of product claim DTCA, which is defined as advertising that includes both the product name and specific therapeutic claims.
- The federal government should develop, in cooperation with health organizations, including health charities and the pharmaceutical sector, an online information portal for the public on existing prescription drugs.
- In the event that prohibition of product claim DTCA is lifted, the federal government, in cooperation with health organizations, including health charities and the pharmaceutical sector, should develop a comprehensive regulatory framework for DTCA.

# Background

## What Is DTCA?

Direct to consumer advertising (DTCA) of prescription drugs refers to the practice of targeting advertisements for prescription medication directly at the public, generally through print and broadcast media, as well as through the Internet. This practice is controversial from the perspective of the public health community.

The accessibility and safety of pharmaceutical products is a key public policy priority identified by HCCC members who represent millions of Canadians living with chronic and often life-threatening diseases. Medications, devices and supplies are important to Canadians to effectively manage their conditions, prevent further complications and disability, control pain and enhance their quality of life. Medications, devices and supplies are important for Canadians to effectively manage their diseases.

Those in favour of DTCA argue that it provides consumers with knowledge that can help them make better decisions about their own health care. Those critical of DTCA believe that it presents consumers with potential risks as a result of the increased demand for medications, puts an additional strain on doctors and leads to increased costs to the health system.

The ethical dilemma pertaining to DTCA exists in the competing interest between marketing and health objectives. There is a tension between ensuring optimal use of medication to improve health, and the goals of marketers to increase product sales. In question is whether consumer health or commercial interests will be given priority by the marketer. Further, training in diagnosis, health conditions, and how medications work are required for informed treatment decisions. It is unlikely that any media advertisement, no matter how earnest, could convey the depth of information required for a consumer to make such decisions.

In Canada, DTCA that includes product claims linked to a specific drug (as allowed in the US) is prohibited. The Canadian Food and Drugs Act prohibits DTCA of any prescription drug where it promotes a drug as a treatment, prevention or cure for the most common medical conditions. Currently Health Canada allows reminder advertisements and help seeking messages but prohibits product claim advertisements. Specifically, the three types of advertisements are:

1. Reminder advertisements which mention the name of the drug but make no claims about its use and effects (allowed);
2. Help-seeking messages which refer to a medical condition and typically advise consumers to speak with their doctors about available treatments. No mention can be made of a specific drug or treatment (allowed);
3. Product claim advertisements which include the product name and makes specific therapeutic claims (prohibited).

With increased use of the Internet and with US media feeds viewable by the Canadian public, Canadians will continue to see advertisements approved in the US.

In addition, in 2005 a media organization (Canwest) launched a legal challenge of the Food and Drugs Act and Regulations regarding DTCA. It argued that restrictions on DTCA are inconsistent with provisions of the Canadian Charter of Rights and Freedoms which guarantee freedom of expression. As a result of Canwest's bankruptcy, no ruling was ever made. Nevertheless, this made it clear that the issue of DTCA is likely to continue to be contentious, including from a media perspective, and that similar challenges by other organizations are possible.

Other Canadian organizations have taken positions against liberalizing the regulation of DTCA in Canada. They include the Canadian Medical Association, Canadian Nurses Association, Canadian Pharmacists Association, Best Medicines Coalition, Health Council of Canada and Consumers' Association of Canada.

### *What do Other Countries Do?*

Currently, only the US and New Zealand allow product claim DTCA and both are reviewing the practice. In New Zealand, DTCA is permitted only for products that are not paid for by the government-funded drug program.

### *Evidence*

Empirical evidence suggests that DTCA affects requests for drugs and physician prescribing patterns. Studies have found significant increases in the number of prescriptions for the drugs that had been the subject of advertising campaigns<sup>1,2,3</sup> DTCA appeared to affect both the number of prescriptions and the likelihood that a specific brand is prescribed. Physicians are more likely to prescribe a drug requested by a patient.<sup>4</sup> In one study, seventy-one percent of family physicians stated that DTCA pressured physicians to use drugs they might not otherwise use and that DTCA was not beneficial.<sup>5</sup> As well, critics have suggested that brand specific DTCA is "designed to instill product preferences in people who do not have the information, training, or incentive to compare the risks, benefits and costs of available treatment options."<sup>6</sup>

While some studies have attempted to analyze DTCA in respect of health effects and the overall cost-benefit to the health care system, overall, the results have been inconclusive<sup>7,8</sup>.

HCCC calls on the federal government to maintain the current prohibition of product claim direct to consumer advertising and to develop an online information portal for the public on existing prescription drugs. Any changes to current practices should be based on the principles of transparency, inclusiveness, accountability and be evidence-based, as outlined in this paper.

*Approved by HCCC's Governing Council – November 22, 2011.*

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<sup>1</sup> Zachry W Mr, Shepherd MD, Hinich MJ, et al. Relationship between direct-to-consumer advertising and physician diagnosing and prescribing. *Am J Health Syst Pharm* 2002; 59:42-49

<sup>2</sup> Basara LR. The impact of a direct-to-consumer advertising campaign on new prescription volume. *Drug Inf J* 1996; 30:715-729

<sup>3</sup> Law MR, Malumdar SR, Soumerai SB. Effect of illicit direct to consumer advertising on use of etanercept, mometasone, and tegaserod in Canada: controlled longitudinal study. *BMJ* 2008;337:11055.

<sup>4</sup> Mansfield PR. How does pharmaceutical company promotion affect prescribing? *International Conference on Improving the Use of Medicines*, April 1-4, 1997

<sup>5</sup> Lipsky MA and Taylor CA. The opinions and experiences of family physicians regarding direct to consumer advertising, *J Fam Prac*, Dec. 1997; 45:6, 495, 495-499

<sup>6</sup> Morgan, SG. Direct-to-consumer advertising and expenditures of prescription drugs: a comparison of experiences in the United States and Canada *Open Medicine*, 2007; 1 (1):E37-45

<sup>7</sup> Gilbody S, Wilson P and Watt I. Benefits and harms of direct to consumer advertising: a systematic review. *Quality and Safety in Health Care*, 2005;14;p.249

<sup>8</sup> Mintzes, B. Direct-to Consumer Advertising of Prescription Drugs in Canada. What are the Public Health Implications? *Health Council of Canada*. 2006;p. 27

HCCC, a member based organization, is dedicated to advocating for sound public policy on health issues and promoting the highest quality health research. HCCC strives for excellence in health policy and seeks to ensure that the federal government and policy makers look to the Coalition and its members for timely advice and leadership on major health issues of concern to Canadians; and that they recognize the competence, commitment and contributions of health charities in improving the health and well-being of Canadians.

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