

## Rebuttal: Should medical journals carry pharmaceutical advertising?

**NO**

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Advertising pharmaceuticals is not the same as advertising commercial products such as airline flights or breakfast cereals. In commercial advertising the purchaser pays for the flight—or decides not to fly. In pharmaceutical advertising a third person, the physician, makes the recommendation and the patient either fills or does not fill the prescription. In most cases even the patient does not pay directly for the medicine, the amount being covered by provincial health insurance plans or individual plans. Even in the United States, direct-to-consumer advertisements almost never mention price.

My colleague in this debate could have made the case that pharmaceutical advertising directed at physicians is vetted by government agencies (the Pharmaceutical Advertising Advisory Board in Canada and the Federal Drug Administration in the United States). Thus to some extent the advertising claims are not “false.” Perhaps drug X does convey a relative risk benefit compared with drug Y; however, that it is 3 times as expensive, carries risk harms as well as benefits, and is not a guideline-recommended drug need not be mentioned.

Let there be no doubt: Pharmaceutical advertising works. As physicians we are influenced. The industry would not pay for 60% of the budget of *Canadian Family Physician* (CFP) if its advertisements did not influence our prescribing patterns.

*Canadian Family Physician* is not in the same category as the throw-away journals and medical newspapers that have profit as their sole objective. I understand that the publisher of CFP (indeed, any publisher) would see these throw-away publications as being in the same category as CFP, for they compete directly with the journal for the same industry advertising dollars. But they are not in the same category and they play by different rules. The throw-away publications are obliged neither to maintain standards of excellence nor to be vigilant to the subtle biases to medical education and clinical practice that come with vested interests.

The College has a responsibility to “promot[e] high standards of medical education and care in family practice.”<sup>1</sup>

Pharmaceutical advertising influences the prescribing of pharmaceuticals. Unbiased guidelines and sound clinical training and judgment are all that physicians need. ❁

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#### Competing interests

None declared

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#### Reference

1. College of Family Physicians of Canada [website]. *Mission and goals*. Mississauga, ON: College of Family Physicians of Canada; 2003. Available from: [www.cfpc.ca/English/cfpc/about%20us/mission/default.asp?s=1](http://www.cfpc.ca/English/cfpc/about%20us/mission/default.asp?s=1). Accessed 2010 Aug 16.



Cet article se trouve aussi en français à la page e360.

These rebuttals are responses from the authors of the debates in the October issue (*Can Fam Physician* 2010;56:978-81 [Eng], 982-5[Fr]).