Position Statement on Direct-to-Consumer Pharmaceutical Advertising

Approved by the Board of Trustees, July 2022
Approved by the Assembly, August 2022

“Policy documents are approved by the APA Assembly and Board of Trustees.... These are...position statements that define APA official policy on specific subjects....” – APA Operations Manual

Issue:
The American Psychiatric Association (APA) recognizes that the matter of direct-to-consumer pharmaceutical advertising (DTCA) is complex. DTCA can be defined as “an effort (usually via popular media) made by a pharmaceutical company to promote its prescription products directly to patients.” At present, DTCA is only legal in the United States and New Zealand.

DTCA can influence patient behavior as well as physician behavior. This influence can be exerted directly, as through consumption of advertisement messaging, or indirectly, as through a discussion between a patient and a physician regarding advertisement messaging. In particular, DTCA may influence a physician to prescribe a medication that is inappropriate to a patient’s condition or for which a less expensive and equally effective alternative treatment is available.

In the landscape of rapidly evolving technology and communication modalities, it is inevitable that physicians and patients will continue to be exposed to information about products through numerous channels, including printed media, television advertisements, radio advertisements, online advertisements, and social media streams. As previously observed by Mary Helen Davis, M.D., there “has been a major change in the [p]ast few decades, from an authoritarian medical model to a more collaborative model. Patients have taken more responsibility and have the capacity to do research.”

There may be some benefits associated with DTCA. DTCA can increase awareness of health conditions and treatment options. Such advertisements may provide an opportunity for patient empowerment and/or educational discussions between patients and their physicians about symptoms, treatment options, and side effects of medications. The American Medical Association (AMA) Code of Medical Ethics’ opinion on DTCA states: “Direct-to-consumer advertising may raise awareness about diseases and treatment and may help inform patients about the availability of new diagnostic tests, drugs, treatments, and devices.” One survey found that DTCA may have “promoted discussions with physicians resulting in diagnoses that might not have been made otherwise” and that it is “a factor causing a lot of people to seek a physician to talk about problems they hadn’t talked about before.”
However, advertisements can be problematic in that they are profit-motivated for pharmaceutical companies and not public service announcements that aim to promote patients’ best interests. It has been observed that “information provided to consumers/patients through DTCA may be designed to persuade rather than inform. DTCA may not provide the necessary balance and objectivity required for consumers/patients to make informed choices.” It is vital that physicians be aware of the potential impact of such influences on their decision-making in medical care and that they prioritize scientific evidence and findings, rather than commercial influences, in treatment decisions. Patients will bring questions and concerns to physicians regarding material arising in DTCA and physicians should be prepared to field and support these discussions.

As rightly stated by the Australian Medical Association, “pharmaceutical or other commercial industry should not be the main supplier of patient information and education regarding health, disease, and treatment options.” Physicians can respond to these questions and concerns through provision of evidence-based information. The AMA has called on physicians to “[r]emain objective about advertised tests, drugs, treatments, and devices, avoiding bias for or against advertised products...[t]o engage in dialogue with patients who request tests, drugs, treatments, or devices they have seen advertised...[t]o educate patients about why an advertised test, drug, or device may not be suitable for them, including providing cost-effectiveness information about different options...[a]nd to resist commercially induced pressure to prescribe tests, drugs, or devices that may not be indicated.”

Of note, the AMA supports a ban on DTCA for prescription medications and implantable medical devices, noting that until such a ban is in place, it opposes DTCA that does not follow certain guidelines, including that DTCA “should not encourage self-diagnosis and self-treatment, but should refer patients to their physicians for more information.”

APA Position:

The American Psychiatric Association (APA) opposes direct-to-consumer advertising of medications prescribed for the purpose of treating psychiatric disorders. The APA does not support direct-to-consumer advertising of any prescription medications. The APA supports continued research regarding the effects of direct-to-consumer advertising on patient care.

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