



# Exposure to disease awareness campaigns in Dutch printed media

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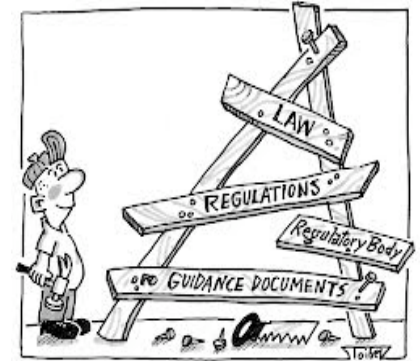
# Background

- 1988 - World Health Organization established Ethical Criteria for Medicinal Drug Promotion

*'promotion' includes all informational and persuasive activities of manufacturers and distributors, that affect the prescription, supply, purchase and/or use of medicinal drugs*

- Health topics covered in the media, including disease information and medicines' promotion
- Promotion of medicinal products: a driver for irrational medicines use

# Legislation & Regulation



- Direct-to-consumer advertising of prescription-only medicines is not allowed in Europe
- Campaigns are allowed as long as manufacturers inform the public about diseases and health, but do not refer directly or indirectly to a medicine.<sup>1</sup>
- In the Netherlands medicines' advertising is self-regulated:
  - Inspection Board (KOAG) - promotion to the public
  - Foundation for the Advertising of Medicinal Products (CGR) - promotion to health professionals
  - April 2011: Guidelines on provision of information on prescription-only medicines to the public were published

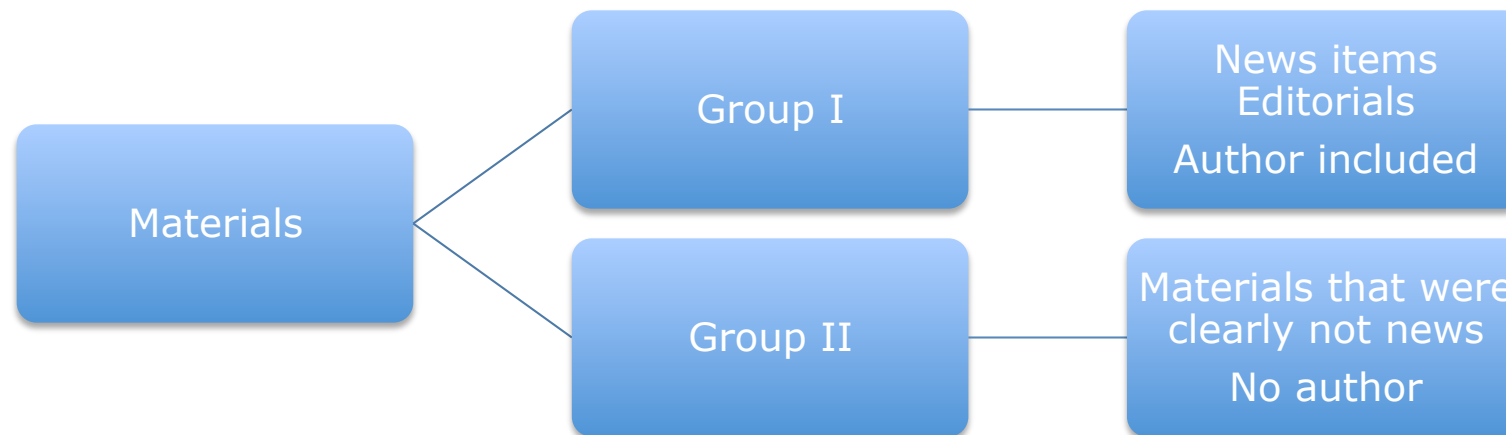
(1) EU Directive 2004/27/EC

# Research objectives

- To **develop** a user-friendly **instrument** to assess the compliance of disease information campaigns with the WHO Ethical Criteria and the KOAG Guidelines for Information on Prescription-only medicines.
- To **assess** exposure to medicines' promotion and disease awareness campaigns in printed media in the Netherlands.
- To **measure** the compliance of medicines promotion and disease information, possibly disseminated by pharmaceutical companies, in Dutch printed media.

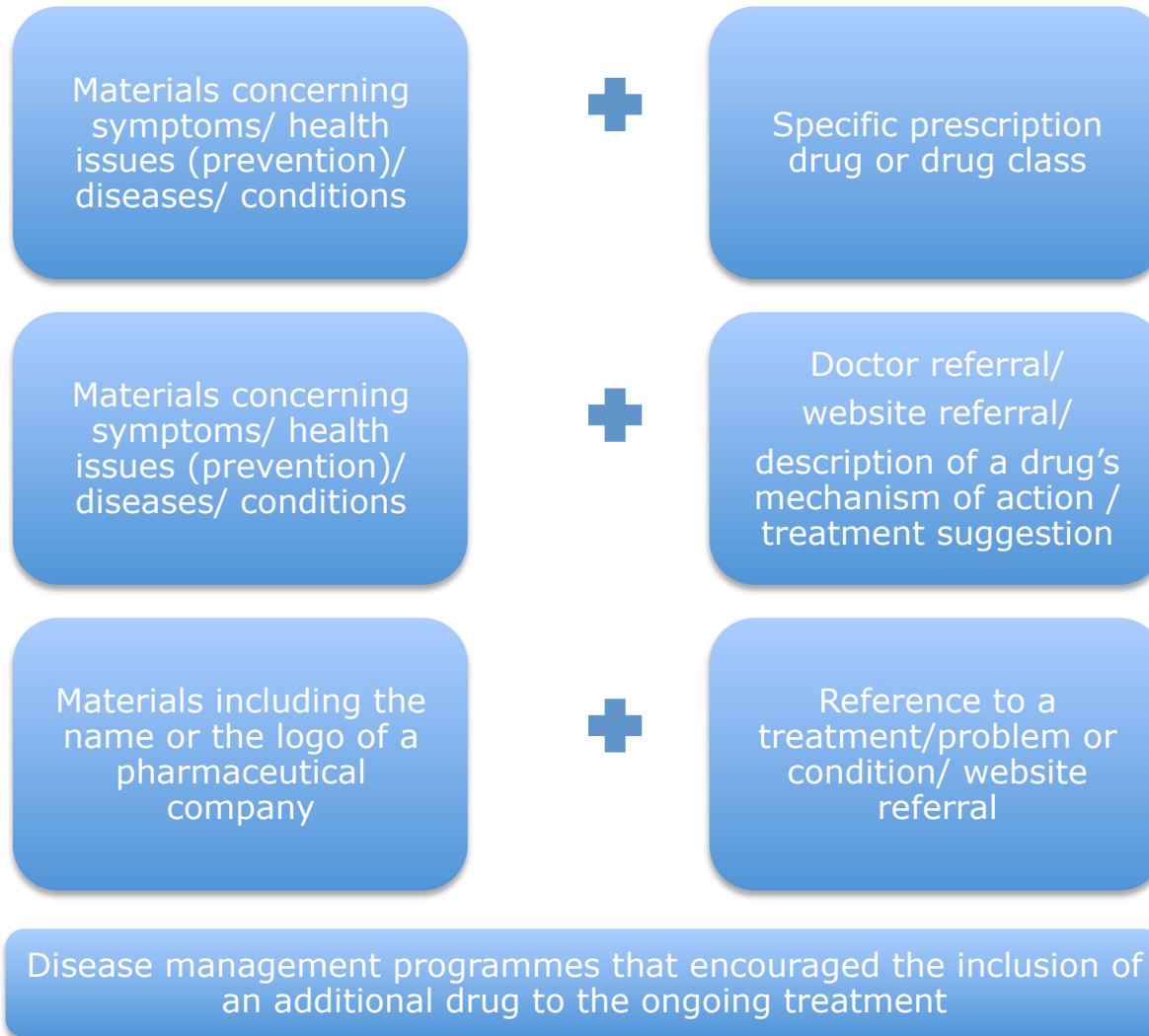
# Methods: Data Collection

- Study period: March to May 2012 (3 months)
- High circulation printed media <sup>(2)</sup>: 3 paid daily newspapers + 3 free daily newspapers + 8 monthly magazines
- News items VS 'materials' to be assessed using the instrument



(2) – Dutch Institute for Media Auditing (HOI), 2012.

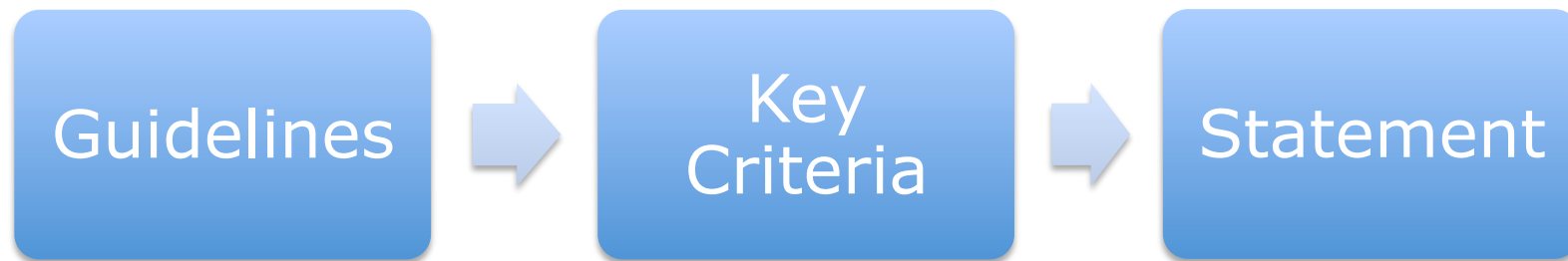
# Inclusion criteria



- Excluded: Materials on nutraceuticals, homeopathic products, over-the-counter medicines and vaccines.

# Methods: Instrument development

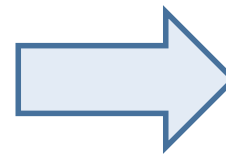
- Extracted 7 key criteria from the WHO Ethical Criteria for Medicinal Drug Promotion and the KOAG/CGR guidelines:
  - Promotion, misguidance, use of fear, language, poise, use of testimonials, name of source.



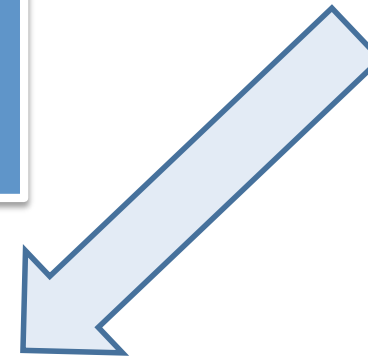
## Guidelines

WHO: While they [advertisements] should take account of people's legitimate desire for information regarding their health, they should not take undue advantage of people's concern for their health.

KOAG: Information may not boost or strengthen feelings of fear or superstition, and must be realistically displayed.



**Fear**

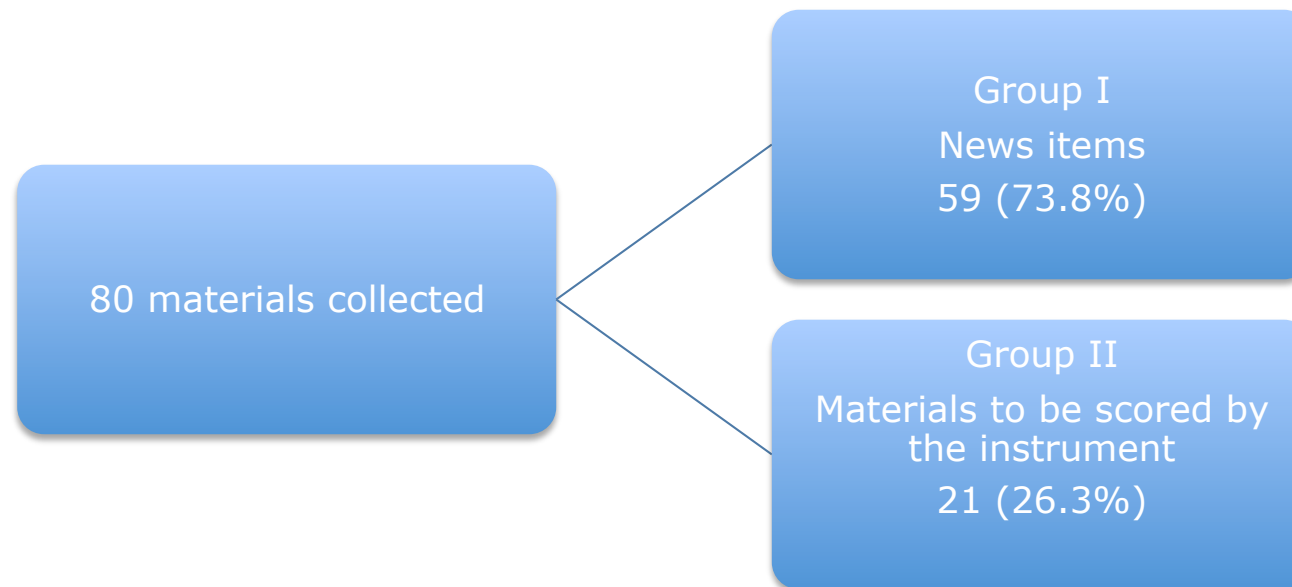


Criteria	Compliant (C)	Non-compliant (NC)	C	NC	Not applicable
Fear	There is NO reference to fatal events or disability caused by not treating the disease (through a pharmaceutical intervention).	The text and/or picture refers to fatal events or disability resulting from non-treatment or the disease			



## Results: Exposure to medicines' promotion and disease awareness campaigns

- Average: 6 materials/week
- Large majority of items on allergies and respiratory diseases (27,5%)
- No difference in exposure between paid and free media.



- Materials to be scored were more frequent in free media.

# Results: Information included (1)

Information included	Group 1 News (n=59) (% within group)	Group 2 Instrument (n=21) (% within group)
Non-pharmaceutical interventions in addition to therapy	19 (32,2%)	6 (28.6%)
<b>Suggestion to visit the general practitioner</b>	10 (16.9%)	<b>7 (33.3%)</b>
<b>Key opinion leader</b>	14 (23.7%)	3 (14.3%)
<b>Website</b>	9 (15.3%)	<b>13 (61.9%)</b>

## Results: Information included (2)

Information included	Group 1 News (n=59) (% within group)	Group 2 Instrument (n=21) (% within group)
Patient or support group	9 (15.3%)	6 (28.6%)
Pharmaceutical <b>company</b>	8 (8.47%)	<b>6 (28.6%)</b>
<b>Brand name</b>	10 (16.9%)	<b>0 (0 %)</b>
New medicine or treatment option	15 (25.4%)	6 (28.6%)

# Results: Compliance with guidelines

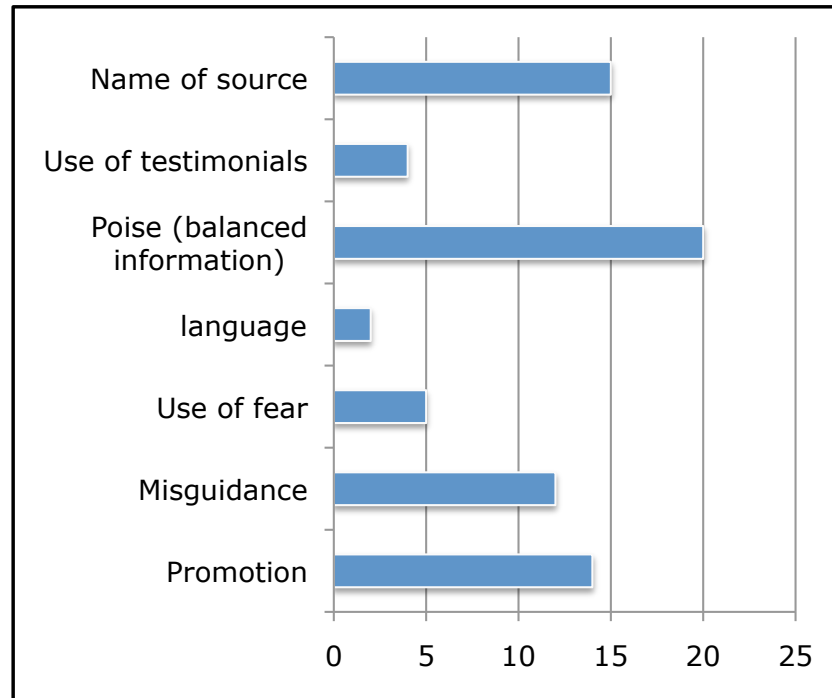
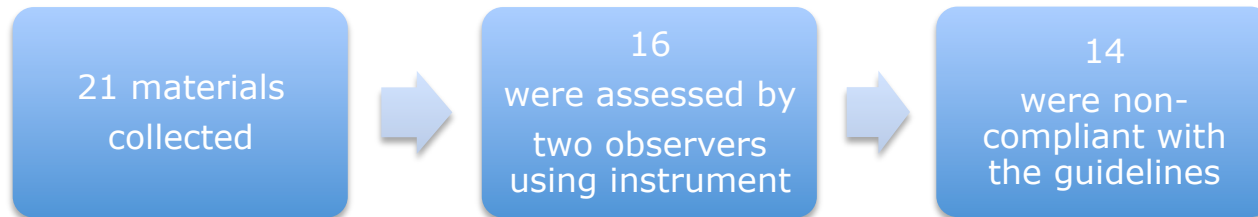


Chart 1. Non-compliance per key criteria

14 out of 16 materials were not compliant with the WHO and KOAG guidelines:

- Biased information;
- No source was included;
- Clear promotional nature.

Inter-rater agreement of 87,5%.

Cohen's kappa = 0

# Results: Compliance with guidelines

- 6 scored materials included the logo or name of a company, referred to a particular condition and indirectly to a treatment
- 4 scored materials referred to a condition and indirectly to a treatment, and included referral to website sponsored by company



Contravening the EU legislation and Dutch law!

# Every woman is different

- Sponsored by MSD
- The disease awareness add mentions treatment choices:  
  
*“You will possibly be using contraception over decades, it is important to choose the method that suits you better. Have a look at our website to find out more about the various methods from which to choose.”*
- The website includes names and photos of ALL contraceptive methods produced by the company.
- Misleading information: The new norgestrol acetate and estradiol pill – Zoely – is described as being “natural”.

Home Methoden Vragen Webwinkel Artsen

## ANTICONCEPTIE.NL

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Omdat geen vrouw hetzelfde is, vind je op Anticonceptie.nl informatie over verschillende onderwerpen die voor jou interessant kunnen zijn. Klik op het voor jou relevante vakje en laat je meenemen naar de wereld van anticonceptiemiddelen die bij jouw situatie past. Voor overige informatie klik je op één van de items in de menubalk. Succes!

SWITCHEN KOMPLEET GEZIN STARTEN OP REIS NA BEVALING HERSTART MIGRAINE OVERGANG MEER VRAGEN

Vind ik leuk 172 Laast bijgewerkt op 1 februari 2013 Contact | Bijluten | Print | Disclaimer | Persoonsgegevensverklaring | Sitemap MSD

### COMBINATIE PIL

**DIANE-35® (cyproteronacetaat / ethinylestradiol)**

DIANE-35 wordt gebruikt voor de behandeling van puistjes (acne), vette huid (geboroe) of lichte overbehandeling (lichte hirsutisme) bij vrouwen in de vruchtbare leeftijd, als een arts vindt dat behandeling met hormonen noodzakelijk is. Hoewel DIANE-35 ook werkt als anticonceptiemiddel, kun je DIANE-35 beter niet enkel als anticonceptiemiddel gebruiken. Vanwege de hoge hormoon dosering wordt aangeraden om de behandeling met DIANE-35 te stoppen 3 à 4 maanden nádat de aandoeningen) waarvoor DIANE-35 werd voorgeschreven h'zijn verdwenen, en het niet als puur anticonceptiemiddel te blijven gebruiken!

DIANE-35 is een combinatiepil, in een combinatiepil zitten twee hormonen: progesteragen en oestrogenen. De twee verschillende hormonen in DIANE-35 zijn 2000 microgram cyproteronacetaat (een progesteragen) en 35 microgram ethinylestradiol (een oestrogenen). Als je acne, vette huid of lichte overbehandeling hebt, wordt geadviseerd om te kiezen voor een progesteragen met een zogenaamde 'anti-androgene' werking. Cyproteronacetaat, het progesteragen in de DIANE-35 pil, heeft een anti-androgene werking en is geschikt voor vrouwen met ernstige acne.

Als je een lichtere vorm van acne, vette huid of overbehandeling hebt, wordt de voorkeur gegeven aan een anticonceptiemiddel met desogestrel (CERAZETTE, MERCLON, MARVELON), etonogestrel (ring NUVARING of staafje INFLANON NEXT) of drospirenon (YASMIN, YAZ).

Norgestinaat (CILEST) en levonogestrel (MICROGYNON, STEDIRL, LOVETTE) kunnen beter worden vermeden als je puistjes, een vette huid of overbehandeling hebt.

Als je DIANE-35 gebruikt, is het niet nodig om aanvullend nog een hormonaal anticonceptiemiddel te gebruiken omdat je dan onnodig aan een hoge dosis hormonen wordt blootgesteld.

Om de kans op het vergeten van de pil zo klein mogelijk te maken, kan het helpen om een vast tijdstip aan te houden voor het slikken van de pil. De combinatiepillen met 21 of 22 pillen per strip, zoals DIANE-35, slik je gedurende 3 weken en daarna heb je een stopweek. In de stopweek ben je ongesteld. Ook in de stopweek ben je beschermd tegen zwangerschap. Je kunt met deze pillen je stopweek en dus je ongesteldheid ook overslaan door meteen te starten met de volgende strip. Ook het verschuiven van de stopweek bijtoerbeeld omdat je op vakantie gaat, is mogelijk met de combinatiepillen met 21 of 22 pillen per strip.

**Voor- en nadelen**

# Conclusions

- Strong focus on disease and treatment, mainly in articles: need to ensure provision of quality information by journalists
- Companies willing to promote their products by promoting a disease or condition opt to reach a wider audience by publishing their materials in free media outlets.
- The large majority of the information about prescription-only medicines being provided by companies to the public during our study period did not comply with the current guidelines. Some were illegal.
- Serious information deficiencies in campaigns result in information bias. A key concern is that the context in which this information is provided will be biased towards supporting treatment with the sponsor's product.

# Conclusions (2)

- The use of the instrument may help identify disease awareness campaigns of promotional nature and encourage the effective monitoring and implementation of the regulations.
- Better sampling: Collection period of one full calendar year.
- Need to adapt the instrument to also recognize patient advocates (testimonials) as key opinion leaders.
- Further validation & testing of the instrument are needed: content validity, large pool of observers.
- The evaluation of disease awareness websites should be envisaged.





# Acknowledgements

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