



Could Television Commercials Marketing Prescription Drugs Cause Psychological Harm to the Public?

OJDA: Volume 1: Issue 1, January-2019: Page No: 01-

Open Journal of Depression and Anxiety

Editorial

Open Access

Could Television Commercials Marketing Prescription Drugs Cause Psychological Harm to the Public?

I Kenneth Royal

North Carolina State University, Department of Clinical Sciences, North Carolina, USA

***Corresponding Author:** Kenneth Royal, PhD, North Carolina State University, Department of Clinical Sciences, North Carolina, USA, Email: kdroyal2@ncsu.edu

Received Date: Jan 05, 2019 / **Accepted Date:** Jan 22, 2019 / **Published Date:** Jan 23, 2019

Cite this article as: I Kenneth Royal. 2019. Could Television Commercials Marketing Prescription Drugs Cause Psychological Harm to the Public?. 1: 01-03.

Copyright: This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. Copyright © 2019; I Kenneth Royal

Keywords: Anxiety; Media; Prescription drugs; Pharmacy; Television; Advertising; Commercials

Numerous studies have found media such as televised images and commercials may influence viewers' perceptions of self and their subsequent behaviors [1-4]. Historically, television has long presented advertisements for medicine, but these typically were over-the-counter medicines, such as medication to treat a headache, a common cold, the flu, etc. These medicines might include Tylenol, Alka-Seltzer, Pepto Bismol, etc. In recent years, however, the marketing landscape has changed dramatically with pharmaceutical companies now advertising for prescription medications. Examples of prescription medicines commonly appearing on television at this time of this writing include Cialis and Viagra for treating erectile dysfunction, Lyrica for diabetic foot pain, Otezla for plaque psoriasis, Crestor and Xarelto to prevent the risk of heart attack, Eliquis to prevent stroke, and Humira and Xeljanz to treat rheumatoid arthritis.

Each of the aforementioned medications is likely to invoke questions among viewers, such

as "Am I at risk for heart attack or stroke?" and/or "Do I have plaque psoriasis?" These questions are not necessarily harmful to viewers, as some simply address disease prevention and treatment of known problems. However, more recently, advertisements for medications such as Harvoni to treat Hepatitis C take a different approach. A transcription of the commercial [5] is provided below:

"For millions of baby boomers, there's a virus out there - a virus that's serious like HIV, but it hasn't been talked about much. A virus that's been almost forgotten. It's hepatitis C. 1 in 30 Baby Boomers has hep C, though many aren't aware they do."

Similarly, a recent commercial for Truvada [6], a drug used to treat HIV, a disease that currently has no cure, has been featured on primetime television shows broadcast in the United States. In the commercial, a transgender individual and several homosexual couples state "I'm on the

pill”, indicating they take Truvada to help prevent acquiring HIV.

These types of commercials, although presumably intended to improve health, may actually have a harmful effect on individuals that do not have these diseases. For example, many viewers may experience anxiety as they worry that they might have contracted a disease because the commercial implied they are at risk due to being born during a period time period (e.g., “Baby Boomer’s” mid-1940s to mid 1960s) or engaging in a sexual activity with someone of the same sex.

The American Medical Association (AMA) released a statement in 2015 calling for a ban on direct-to-consumer commercials relating to prescription drugs [7]. Despite the request from the medical community, these commercials persist. This author argues that these commercials persist despite potential for significant harm to the public. Anxiety disorders often are debilitating for patients, and many that suffer from anxiety are “triggered” by thoughts that invoke stress or panic. Patients suffering from anxiety not only experience mental health effects, but many also experience physical problems, such as chest pains, increased heart rate, rapid breathing, panic attacks, gastrointestinal problems, and trouble sleeping.

It is this author’s opinion that rigorous research investigating the psychological impact of direct-to-consumer prescription drug commercials and advertisements is warranted. Studies of this nature could provide estimates of the percentage of the public that is harmed by prescription drug commercials. Results from these studies could be used to inform ethics debates and other policy decisions that govern the pharmaceutical industry’s ability to market prescription drugs directly to consumers.

In conclusion, repeated requests from countless physicians, including the highly influential American Medical Association (AMA), have

failed. Should evidence emerge that individuals watching television may be subject to psychological harm because of exposure to certain types of direct-to-consumer prescription drug television commercials it could warrant government intervention and possible changes in policy. It is this author’s opinion that if the psychological risks associated with these commercials outweigh the potential benefits to public health, these commercials should not be permitted to be broadcast.

References

1. Anschutz DJ, Engels RC, Becker ES, et al. 2009. The effects of TV commercials using less thin models on young womens mood, body image and actual food intake. *Body Image*. 6: 270-276. Ref.: <https://bit.ly/2FS4sgH>
2. Cattarin JA, Thompson JK, Thomas C, et al. 2000. Body image, mood, and televised images of attractiveness: The role of social comparison. *J Soc Clin Psychol*. 19: 220. Ref.: <https://bit.ly/2FCLemQ>
3. Fallon AE. 1990. Culture in the mirror: Sociocultural determinants of body image. In T. F. Cash & T. Pruzinsky (Eds.), *Body images: Development, deviance, and change* (pp. 80-109). New York: Guilford.
4. Heinberg LJ. 1996. Theories of body image disturbance: Perceptual, developmental, and sociocultural factors. In J. K. Thompson (Ed.), *Body image, eating disorders, and obesity: An integrative guide for assessment and treatment*(pp.27-47). Washington, DC: American Psychological Association.
5. Gilead. Hepatitis C commercial. Available at: <https://bit.ly/2FFC1DI>. 2019.
6. Gilead. HIV commercial. Available at: <https://bit.ly/2AW3Tzk>. 2019.
7. American Medical Association. AMA calls for ban on DTC ads of prescription drugs and medical devices. Available at: <https://bit.ly/2W7x4IK>. 2019.