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Heading: **Hey, Doc, Try Just Saying, 'No'**

Hey, Doc, Try Just Saying, 'No' **[Original Article]**

A California doctor told an American Medical Association committee Sunday that things were "catastrophic" in his office, what "with patients coming in and demanding a drug they saw on television." To spare himself and other physicians the hassle, Dr. David Priver argued that prescription drug ads should be banned.

Indeed. And when the AMA finishes that task, maybe it can go after the Susan G. Komen Foundation and its affiliates, which have sponsored messages urging that women get mammograms. Some might actually request them, you know!

Or how about bicyclist Lance Armstrong, who's been seen on TV preaching the idea of getting checked for testicular cancer? But why stop there? Why not go after eye doctors who advertise - people might opt for contact lenses, oh my! - or plastic surgeons who plug laser treatments or sports medicine clinics that preach rehabilitation? Better shut down the medical web sites, too. A little information in untrained minds can be dangerous.

Indeed it can. It is the nature of advertisements to exaggerate, and it is the obligation of readers and viewers to separate the help from the hype in ads for drugs like Viagra. Some do it better than others. But that does not mean we should prefer ignorance, about medicine or anything else.

And if it's catastrophes doctors are focusing on, they might save the terminology for the asthma sufferer who goes untreated because she doesn't know about the latest medications or the Alzheimer's patient who could have held onto his mind a few more years had he learned of new drug therapies and called a doctor. Granted, the patient who demands drugs that won't help him, and might even hurt him, can be a pain in the neck to a doctor who knows better. But what's the big deal with just saying no?

In simplest form, this argument is about the patient's right to be independently informed vs. the doctor's right to be the sole source of medical wisdom. As a matter of law and expectation, that issue was resolved years ago, and the patient was the victor. The AMA should find a better battle to fight.

Helen's response:

Dear Editor:

I am responding to your June 20th editorial about approving the advertisement of pharmaceutical drugs and using examples of health education programs to support the approval.

Please don't use examples of strong, well done health education programs geared for prevention of disease to support your stand for approval of drug advertisement.

These are two different things. Health education programs that are geared for the *prevention of* disease should not only be continued but greatly increased.

Drugs are used for pathology, after the disease has occurred. Prevention is too late here!

There are good reasons for doctors to be in charge of pharmaceutical drugs. Are you not aware of the very thick PDR that lists all the possible adverse side effects and contraindications? If the public were **more** aware of these side effects, they may be less eager to encourage their doctor to prescribe the medicine.

Let's not forget that advertisement of pharmaceutical drugs accounts for 1 /3 of the cost of the drugs. If we want to seriously contain the cost of pharmaceutical drugs, let's skip the advertisements and easily reduce the cost of drugs by 1/3.

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