

BINGO! Fun with pharmaceutical advertisements **What can they teach us about marketing?**

Steven R. Brown, M.D.
Banner Good Samaritan Family Medicine Residency
Phoenix, Arizona
steven.brown@bannerhealth.com
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Background: Pharmaceutical advertisements are ubiquitous in medical journals. In fact, in *JAMA*, 34% of the pages are ads. In 2003, the pharmaceutical industry spent \$448 million on journal drug ads. It pays off. Journal drug ads effectively increase sales and yield a return on investment for industry of \$5 for every \$1 spent. While we think we just “flip by” the ads and pay them no attention, they seem to matter.

So, how can we learn to be better readers of journal drug advertising? This fun activity will encourage students and residents to be better journal drug ad consumers by learning many of the commonly used techniques of pharmaceutical advertising.

Objectives: At the conclusion of this session attendees will be able to:

- Have fun reading journal drug ads as taught by “Drug Ad Bingo.”
- Recognize common sales techniques used in journal pharmaceutical advertising.
- Understand the difference between rational and non-rational sales pitches.
- Apply lessons learned from interpreting journal drug advertising to other pharmaceutical sales techniques such as “detailing” and direct-to-consumer advertising.

Workshop Description:

Introduction (5 minutes)- I include discussion of the scope and purpose of pharmaceutical advertising in journals. Much of the background information I use for this portion of the presentation can be obtained from [reference 1](#).

Bingo! (30 minutes) – I distribute “Bingo” cards and many printed journal pharmaceutical advertisements to all learners. Attendees evaluate drug ads to identify key ad features found on their “Bingo” cards. Players pass ads around the group. The first person to complete a pre-defined number of boxes (one row? two rows? black out? depending on time) on their “Bingo” card yells, of course, “BINGO.” This lucky player then describes to the other attendees which key ad features (s)he identified and gets a prize.

Scavenger Hunt – In a larger group, or if time is restricted, I use the “Scavenger Hunt” instead of “Bingo.” I give each participant one ad and ask them to find key features of their ad and then present to the group. I distribute multiple copies of up to six ads, numbered 1-6. If there is time ads can be passed around to multiple participants and features can be “scored” in the columns at the right of the “score sheet.”

Further discussion and questions/answers (15 minutes) – Topics for discussion include:

- A description of additional journal advertisement features.
- A demonstration of the thickness of a journal with ads compared to a journal with the advertising ripped out (it's impressive.)
- Rational reasons to prescribe medicines (e.g. STEPS) compared to non-rational, reasons, as featured prominently journal advertising.
- Some background on the scale and impact of journal pharmaceutical advertising
- How lessons from interpreting journal drug ads can be applied to other pharmaceutical sales techniques (see reference 4).

References:

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9. Gutknecht DR. Evidence-based advertising? A survey of four major journals. *JABFP* 2001;14:197-200.

Drug Bingo Card

Pseudographs	“Invents” new disease or diagnosis	Numerical distortion- axes not numerical	Misleading claim (as later determined by FDA)	Outcome-disease oriented evidence
Insufficient information to interpret data	Bandwagon appeal	Very small FDA mandated prescribing information	Chart junk	Appeal to authority
Appeal to celebrity	Reference to “data on file”	Red herring (factual but irrelevant information)	Uses similar graphic/theme as direct to consumer television ad	Non-medical catchy slogan
Disease “education”	Cutesy character	Uses generic name of competitor	No mention of a drug	Down-played black-box warning
Brand name much larger than generic name	Heavyweight paper	Use of “p-values” to mask marginal clinical significance	Numerical distortion-truncated graph	Irrelevant comparison

Drug Advertisement Scavenger Hunt

	Advertisement #					
	1	2	3	4	5	6
Drug touted as unique						
Disease-oriented evidence						
Down-played black box warning						
Invents new disease or diagnosis						
Brand name of drug, generic name of competitors						
Chart junk						
Touted as “new” or “first”						
No drug mentioned						
Appeal to authority						
Uses similar theme as direct-to-consumer advertisement						
Bandwagon appeal						
Numerical distortion (graph axes not numerical)						
Very small FDA-mandated prescribing information						
Printed on heavyweight paper						
Data not available for review						
“Education” about disease						
“Me-too” drug						
Data from study with little relevance to your patients						
Appeal to fear						
Numerical distortion (truncated graph)						
“Straw man” comparison						