



Direct-to-consumer advertising and the patient-physician relationship

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Abstract

Background: Differences in attitudes of patients and physicians toward direct-to-consumer advertising (DTCA) of prescription medications may influence the patient-physician relationship, which may in turn influence health care outcomes.

Objective: The objective of this study was to provide empirical evidence to show how the patient-physician relationship may be influenced by DTCA.

Methods: The study used a cross-sectional research design. Pharmacists at 71 pharmacies were asked to distribute self-report survey instruments to patients who used either a proton-pump inhibitor or a nonsedating antihistamine by prescription. Data were collected between March and June 2003. Hierarchical multiple regression was used to assess the research propositions.

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Results: A usable response rate of 7.3% (n = 326) was obtained. About 95% of the sample had seen an advertisement for either a proton-pump inhibitor or a non-sedating antihistamine. Response to DTCA was significantly related to the patient's satisfaction with the physician and the patient's evaluation of communication, even after controlling for demographic variables and length of the patient-physician relationship. Other outcome variables (trust, relationship commitment, and average visit time) were not significantly related to DTCA response. Post hoc analyses revealed that DTCA responders, who asked their doctor to prescribe a specific product after seeing its advertisement, rated satisfaction and communication lower than the DTCA nonresponders. Additional follow-up analyses showed that these findings were largely attributed to patients in the proton-pump inhibitor group.

Conclusion: The findings suggest that response to DTCA may be significantly related to patients' evaluation of communication quality and their satisfaction with the physician. However, these findings may not generalize to all medical conditions or types of patient. Furthermore, DTCA response does not appear to be related to other patient-physician relationship outcome variables. Given these findings, key variables to explore in future DTCA research with respect to its effect on the patient-physician relationship include patient expectations and disease/condition type.

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1. Introduction

The interaction between a health care provider and a patient has been described as the most common and defining transaction in which medical care occurs.¹ As such, the patient-physician relationship and the communication between health care providers and patients have been studied widely. Over the last few decades, increasing consumerism has brought about a paradigmatic change in the model underlying interactions between patients and health care providers.²⁻⁴ Many individuals want to be more involved in the decision-making process, seeking to provide input on what treatment to undergo and which medications to take.⁵ However, research shows that health care providers such as physicians and pharmacists may not meet patients' information needs regarding their health care. For example, in a survey of the US adult population, only 54% reported that they usually received information about their medication's risks and side effects from their physician or the pharmacist.⁶ The result of this discrepancy between patients' information needs and health care providers' activities has been termed as a "medication information gap."⁶

Pharmaceutical companies in the United States recognized a potential to help fill this gap while simultaneously increasing revenues by informing the public about different diseases and available treatments through advertising

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