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Observations: Medicine and the Media

Online healthcare advertising needs regulation

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Internet users are at risk of inappropriate or misleading advertising from healthcare companies during internet searches, warn Marco Masoni and colleagues

The US Food and Drug Administration (FDA) requested that drug firms end "misleading" and "misbranded" advertising on Google and other search engines in several warning letters in 2009. Its routine monitoring and surveillance found that advertisements often did not include risk information. Our investigations also found that sponsored links sometimes lead to web pages that contain worrying medical claims, or to pages that contain no information relevant to the search terms.

Online advertising is attractive to healthcare companies. Search advertising, where advertisements related to search terms appear at the top of the results page, is one of the few successful internet based business models. Google, the most popular internet search engine, earns much of its revenue from AdWords, software used by those who want to display advertisements on Google's search results pages (http://adwords.google.com). Users can create advertisements (sponsored links), specify the keywords that should trigger their advertisements, and state the maximum amount that they are willing to pay for each user who clicks the link. Google then decides which advertisements to show and in what order.

Healthcare companies sometimes use AdWords in inappropriate and misleading ways by choosing keywords that maximise the appearance of their adverts alongside Google's search results. Since February 2009 we have monitored Google for advertisements triggered by the keywords "essiac" or "laetrile" (two substances that have been promoted as alternative treatments for cancer). We found these terms were used to attract internet surfers but often the healthcare company's website had no relevant information. This practice is not uncommon.

We also found that some healthcare companies inserted keywords into the hypertext markup language of their websites that misrepresented the services offered. These keywords can improve the website's rank in Google's natural search results.

Hersh points out that providing correct and honest information to patients and the public is essential for delivering efficient and effective healthcare.³ The examples we discovered are not in compliance with this fundamental principle.

The sponsored links that we retrieved were often to web pages that contained information about treatment for cancer. In

medical literature insufficient evidence exists on the effectiveness of laetrile and essiac as anticancer agents. 4 5 A

diagnosis of cancer is shocking and overwhelming and it is unethical to use advertising that targets people at a

vulnerable time in order to increase the number of visitors to a company's website.

More positive healthcare applications for internet advertising are also emerging. For example, search advertising is

evolving as an innovative marketing strategy to reach and recruit smokers to web and telephone based cessation

interventions,⁶ and to find participants for studies of prevention of sexually transmitted diseases.⁷ But regulation is

necessary to take full advantage of online healthcare advertising.

The current FDA guidelines do not cover every situation related to online healthcare advertising, and drug companies

often claim that the absence of specific guidance means it is a challenge to apply existing norms to this "new" media.

Healthcare advertising on digital media is not subject to specific regulation. Guidelines from the FDA, released in 1997

and finalised in 1999, allow drug companies to advertise directly to the consumer if such advertisements balance

supposed benefits and possible risks. If the FDA deems that an advert does not comply with its guidelines it sends

warning letters proposing changes.8

The FDA's 2009 action, in response to misuse in search advertising, started discussions about the need for regulation of

health advertising on digital media.

Regulatory agencies such as the FDA need to move from a responsive to a proactive approach and need to consider the

advert itself as well as the keyword that triggers its appearance. Regulation is difficult to implement because the internet

is an ever changing media where technology moves faster than the law. This means that particular attention must be

paid to the grey area of overlap where business ethics and medical ethics can come into conflict.

Notes

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Footnotes

We thank Antonio Conti for reading the manuscript.

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bmj.com archive Views and Reviews: Google needs better control of its advertisements and suggested links

(BMJ 2009;338:b1083)

References

1. Osborne R. FDA on warpath. Google for links. Nat Biotechnol2009;27:405.

[CrossRef][Medline][Web of Science]

2. Masoni M, Guelfi MR, Gensini GF. Google needs better control of its advertisements and suggested links.

BMJ2009;338:b1083.

[FREE Full text]

- 3. Hersh WR. Medical Informatics: improving health care through information. JAMA 2002;288:1955-8. [FREE Full text]
- 4. Milazzo A, Ernst E, Lejeune S, Boehm K. Laetrile treatment for cancer. Cochrane Database of Systematic Reviews 2006.
- 5. Ulbricht C, Weissner W, Hashmi S, Rae Abrams T, Dacey C, Giese N,et al. Essiac: systematic review by the natural standard research collaboration. J Soc Integr Oncol2009;7:73-80.
 [Medline]
- 6. Graham AL, Milner P, Saul JE, Pfaff L. Online advertising as a public health and recruitment tool: comparison of different media campaigns to increase demand for smoking cessation interventions. J Med Internet Res2008;10(5):e50.

[CrossRef][Medline]

 Bowen AM, Horvath K, Williams ML. A randomized control trial of internet-delivered HIV prevention targeting rural MSM. Health Education Research 2007;22:120-7.

[Abstract/FREE Full text]

 Vastag B. FDA considers tightening regulations for direct-to-consumer advertising. J Natl Cancer Inst2005;97:1806-7.

[FREE Full text]

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