



MJA

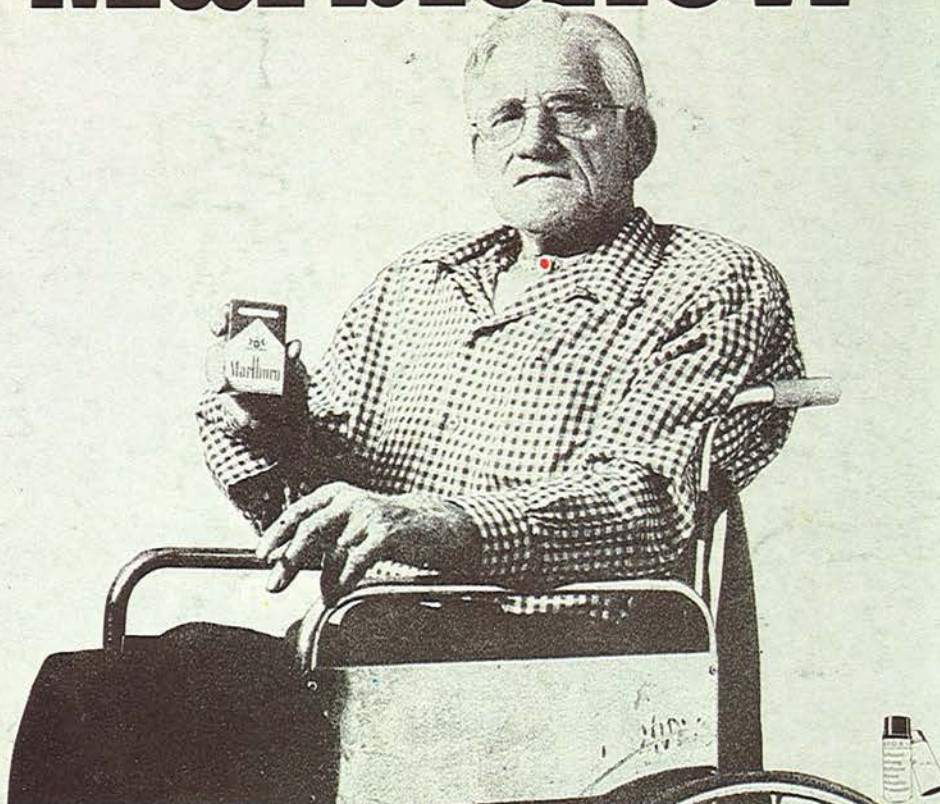
THE MEDICAL JOURNAL OF AUSTRALIA

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SEWER SIZE

\$25,000 REWARD For the MarbleRow Man.

MarbleRow



Mr. Frank C. of Darlinghurst in Sydney is a lifetime smoker. Due to an operation (tracheotomy) he now smokes through a hole in his neck. Frank is B.U.G.A. U.P.'s entrant in the \$25,000 Philip Morris' Marlboro Man Competition, someone they describe as having 'a strong and distinctly individual masculinity — that unique difference that personifies the flavour of Marlboro'.

DO YOU THINK FRANK WILL WIN?

If you want to help B.U.G.A. U.P.'s fight against the tobacco companies write to: B.U.G.A. U.P., BOX 78, WENTWORTH BLDG., UNIVERSITY OF SYDNEY, 2006, N.S.W. AUSTRALIA.

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some observations

■ **Intravenous
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NEXT
ISSUE

Australian doctors and nuclear war
A dialogue on disarmament

Amplified music

What does it do to young people's hearing?

Tobramycin and gentamicin

Relative nephrotoxicity assessed

COVER: A poster designed and funded by BUGA-UP, with the willing aid of the patient, to mobilise public ridicule of a Philip Morris poster competition to find the "Marlboro Man" of Australia.

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Editorial

The subject of advertising

IN RECENT MONTHS, authors in medical journals^{1,2,3} as well as certain advertisers or their representatives, have expressed concern about the advertising policy of the Australasian Medical Publishing Company and the editorial discussion of advertising in the *Medical Journal of Australia*. Now we must respond.

Advertising is important. Without it the Journal risks not being able to serve the medical profession as comprehensively as it should. The Journal's position of respect is the source of its advertising. That particular advertisers might from time to time want a particular piece of editorial content reconsidered seems reasonable only when they have forgotten where the ultimate priority must lie. The Journal's only permanent obligation is to the medical profession.

As Australia's premier medical publication, the Journal must address any relevant issue. Sometimes, the conduct of a clinic or the success of a drug or the actions of a government will raise issues that every medical practitioner must consider. The Journal has no bias against governments or pharmaceutical companies or clinicians. But to serve the medical profession, it must be able to evaluate and discuss freely.

Traditionally, in the course of open discussion in original articles, letters and editorials, challenges are made to advertisers' claims or to the manner in which they are presented. This is exemplified in almost any volume of *The Lancet*, the *British Medical Journal* and *The New England Journal of Medicine*. Surely, this last journal has withstood the possible few slings and arrows of outraged advertisers as a result of an editorial such as "Shortcomings in the evaluation and promotion of hypnotic drugs."⁴ The authors discussed methodologic inadequacies in trials of hypnotic agents that were glossed over in the advertising. In another editorial, "Advertising: informational but not educational,"⁵ it was suggested that advertisements are not educational, but rather "an unabashed attempt to get someone to buy something".

Similarly, the *Journal of Medical Education* has been fulfilling its duty to the medical profession by publishing contributions such as "Selling drugs by 'educating' physicians".⁶ In this 23-page article, illustrated with reproductions of advertisements (including those for five antibiotic agents of the era), the author scrutinised the methods used in the promotion of drugs to doctors. Economic and legal aspects of the pharmaceutical industry, trade practices, research funding, sponsorship of medical meetings, the multiplicity of brands and preparations, criticism of marketing techniques, and censorship of criticism were all discussed.

The stature of the *Journal of the Royal College of General Practitioners* can only have been enhanced by the publica-

tion of its editorial, "Advertising Reform".⁷ The pharmaceutical industry was praised for introducing important new drugs and for helping to support most scientific medical journals. But the following also was written:

However, there have been problems about the advertisements appearing in medical journals. The complaints have centered on the taste and scientific accuracy of the advertisements, and the quality of the supporting information. Stimson (*J Roy Coll Gen Pract* 1976; 26, Supplement 1: 76-80) has produced evidence which suggests that the references for example are often not satisfactorily available or always appropriately chosen for the benefit of general-practitioner readers. Others have commented on the lack of emphasis on contraindications and adverse effects and on the occasional difficulty in identifying generic names of drugs. The impression has too often been given of an advertisement designed more to sell a drug than to inform a profession.

Throughout its history, *The Medical Journal of Australia* has openly discussed the subject of advertising.^{8,9} The questions raised in the Journal are similar to those posed by medical journals throughout the world. No statement in *The Medical Journal of Australia* about individuals or governments or advertising of medical products has been knowingly untrue, irresponsible, or arbitrary.

We must avoid misconceptions of the Journal's role. A journal that serves the medical profession cannot be allowed to decline to the service of governments, privileged individuals, or even the most efficient and honourable of manufacturers. We must affirm that the viability of this journal depends upon the free and open editorial discussion of all the contents of the Journal by all observers who choose to share with us their deeply felt views about the practice of medicine.

ALAN BLUM, MD,

Editor,

The Medical Journal of Australia,
and

THE BOARD OF DIRECTORS,
Australasian Medical Publishing Company.

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Short Paper

A tracheostomy for the Marlboro man

Renee Bittoun

IN RECENT YEARS, attempts at banning billboard advertising of cigarettes have proven so unsuccessful that for at least one group, BUGA-UP (Billboard Utilizing Graffitiists Against Unhealthy Promotions), defacing or re-facing them was the only alternative recourse (see below). I report here on a highly successful and entirely legal sabotage of cigarette promotion.

In Great Britain, although attempts have been made to legislate against all forms of cigarette advertising, the tobacco lobby succeeded last year in blocking a bill before the House of Commons that would have substantially

reduced overt and covert tobacco advertising.¹ In Australia, recommendations have been made to State and Federal governments in the form of a report of the Senate Standing Committee on Social Welfare of 1977, "Drug Problems in Australia—an Intoxicated Society?"² One of the 17 recommendations is that "State governments and local government authorities be encouraged to ban the advertising of tobacco products". Failure to implement these recommendations may stem less from a lack of concern on the part of individual State governments than from aggressive lobbying on the part of tobacco producers and manufacturers (as well as the mass media, since cigarette advertising represents a major source of revenue).

In September 1981 a nationwide advertising campaign was commenced by Philip Morris (a multinational organisation

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Reprints: Ms R. Bittoun.



BEFORE SURGERY



POST OP.

FIGURE 1: On Christmas Eve, 1981, "It's a bore" greeted Sydney drivers, unaccustomed to seeing such a candid pronouncement from Big Brother Marlboro man. BUGA-UP's Fred Cole says, "We are in the business of changing the public consciousness. The automatic reaction is that property is sacred. More so than people's lives. When you think about it and realise the harm they're doing, where does the morality lie? You have to change community attitudes and they are changing because they've been made to think about it. A lady recently thanked me because she said that it helped her so much when she was giving up cigarettes. She'd go past the billboards at White Bay every day and it reinforced her determination to give it up. In turn that reinforced my determination to keep on doing it."

(From an interview with Berwyn Lewis, *Adgauge*, January, 1982.)



FIGURE 2: Philip Morris promotional material. "Reward" poster for a new breed of adolescent outlaw?

with a net profit in Australia of \$18.4 million in 1978-1979³) to find the "Marlboro man" of Australia. Posters of their current model were distributed to shops and other tobacco outlets with the relevant details and entry forms. The competition sought someone with "a strong and distinctly individual masculinity" who would win \$25 000 in prize money (Figure 2). State winners were also to be chosen. Each would receive \$2500.

In recent Australian studies, recall of advertising for Marlboro cigarettes was almost universal among 10 and 11 year old children,⁴ and the brand was a preferred one among adolescents.⁵ Concerned about these findings, a group of Sydney health workers was motivated to enter the photograph of a willing patient who for many years has smoked through his tracheostomy tube. Mere entry into the competition was felt to be an inadequate response, so with the permission of the entrant, a large look-alike poster was designed and printed. This was funded by BUGA-UP.

The objective was to mobilise public ridicule of the Philip Morris competition rather than just to produce an educational "anti-smoking" poster. Within a few days of the circulation of the first printing of this counterposter, articles appeared in several Sydney newspapers on the subject of cigarette advertising and the counteradvertisement in particular. Notable was the *Sydney Morning Herald* issue of October 31, which reproduced the MarbleRow poster in an article entitled "How to keep your pack in the picture." In an interview, Mr Frank Hunt, head of advertising for the Philip Morris account, stated that the BUGA-UP creation was "a bit annoying". He expressed his hope that "laws would be passed to counteract them".

The cost of this competition to Philip Morris was at least \$50 000 in prize money and untold thousands of dollars for its promotion. Costs to BUGA-UP were \$1000 for the printing of 10 000 posters. This expenditure was quickly recouped by subsequent sales of many of the posters, which were particularly popular among schoolchildren and teenagers.

The success of the counterposter can be measured not only by the feed-back to BUGA-UP and the public embarrass-

ment to Philip Morris, but also in the failure of the cigarette company's campaign to capitalise on the Marlboro brand's "masculine" image.

On November 26, a small article appeared in the *Daily Telegraph* (Sydney) called "Shhh! It's a Smoke Puff" which published the name of the winner(?) of the contest and described the presentations of the awards held in "secret" to a "crowd" of 50 people. To my knowledge, this was the only intentional item of publicity achieved by Philip Morris for its promotion.

If the scientific community at large were to take a more active role in mobilising ridicule of cigarette advertising in general (and public relations gimmicks addressed to young people by individual companies in particular), then efforts to reduce cigarette sales may meet with greater success than the finger-wagging campaigns of the past.

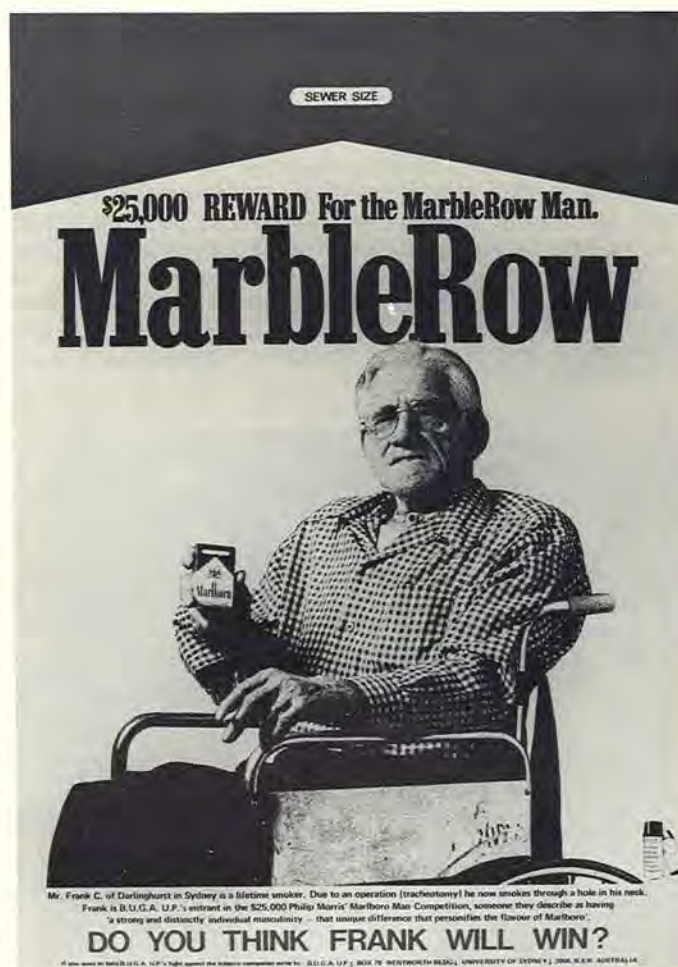


FIGURE 3: The MarbleRow spoof. Truth in jest.

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