. . . brought to you by . . .

By encouraging the public, especially young people, to believe that everything causes cancer or other bad health, cigarette companies have succeeded in portraying their highly profitable product as just another victim of Big Brother's trying to tell people how to run their lives. Newspapers, which blithely seek and accept cigarette advertising have done nothing to alter this situation.

Perhaps because the cigarette companies have realised that cigarettes are becoming the leading preventable cause of death and disease among women as well as men, they have become the number one financiers of Australian women's magazines. The more ostensibly health-oriented women's magazines become (many appear in doctors' waiting rooms), the more cigarette advertisements and cigarette company

promotions crop up alongside the health columns, as if to deny the very notion that cigarettes are our major health problem.

The veritable absence of journalistic investigations into the devastating economic and physical toll taken by cigarettes is striking. Has the heavy investment by cigarette companies in the apparently credible context of the mass media contributed to this? To be sure, few if any publishers or editors have openly acknowledged the ethical implications of their unchallenged acceptance of cigarette advertising.

The hypocritical examples on these pages are only a random sample. We welcome readers to submit their own.

· ALAN BLUM.





Long before the serious adverse effects of smoking on athletic ability were proven, cigarette companies have appealed to young boys. Yet more than thirty years after the establishment of the link between cigarette smoking and lung cancer, the entrenchment of the cigarette industry in amateur and professional sports in Australia is increasing. THE AUSTRALIAN (1) is only an example of the way in which cigarette smoking is associated with sports. The brands are also called cigarette "companies" by the manufacturer to avoid having to carry even the token warning and to permit the manufacturer and broadcasting company to circumvent the law against cigarette advertising on television (2 and 3).



Fleeting Hopes and Promises of Advertising

WHENEVER WE PRESCRIBE a medication, we do so In the belief—acquired through clinical experience, discussions and conferences with colleagues, and the reading of medical journals and drug advertisements—that it is the latest and best available. While hoping that the problem we are dealing with may one day be prevented, we also have faith in pharmacologic research to develop new and improved drugs in the meantime.

Yet should this thinking apply equally to the use and development of antibiotic agents? In spite of worldwide concern over increasing bacterial resistance to antibiotic agents and the overuse of these medications, most issues of major medical journals (if they are not publishing reports of poor prescribing practices) publish page after page of advertisements for one or another "new" antibiotic agent, more often than not with psychedelic colours and other arty effects that make a "Star Wars" poster look like the fine print on an eye chart (my favourite:

"Mega-Spectrum MEZLIN", mezlocillin sodium, advertised in the May 14 issue of JAMA).

Although methicillin may have become the latest casualty in medicine's own "Staph wars", we know there will be many others. In May, 1982, Leo Laboratories tells readers of the BMJ and The Lancet (and presumably this journal as well if the company so chose), "For the treatment of staphylococcal infection fucidin (sodium fusidate) knows no barriers!" and Beecham Research Laboratories adds, "When staphylococci are involved or suspected—make Floxapen (flucloxacillin) part of the treatment". Although we realise that these medications are among the best available, it is sobering to look back at some of the transient methods we have been called upon to use over the years in the treatment of staphylococcal infections.

-Alan Blum



THE MEDICAL JOURNAL OF AUSTRALIA

July 24, 1982

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." 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," 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". 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". 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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