

## **Slide 1: Media, Messages, and Medication: Strategies To Reconcile What Patients Hear, What They Want, and What They Need From Medications**

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### **Slide 2: Presentation of Case**

A 62-year-old man with new-onset type 2 diabetes mellitus:

- Has gained 30 pounds over 10 years; notes recent toe numbness
- Has a hemoglobin A1c = 8.4%
- Is started on metformin
- Hears about Januvia® (sitagliptin); wonders why he can't take it

### **Slide 3: Outline**

- What information sources are patients exposed to, and are they paying attention?
- Is the information they hear credible and accurate?
- When patients ask for a prescription, what do they really want and need?
- How can we reconcile what patients hear, want and need?

### **Slide 4: Sources of Health Information for Consumers**

- Interpersonal sources: family, friends, and health professionals
- Commercial sources: advertising
- Mediated sources: newspapers, magazines, broadcast media

### **Slide 5: Health Information Seeking on the Internet**

- Use of the Internet as a source for health information Is widespread and growing.
  - In a PEW survey, 80 percent of Internet users reported that they look for health information online.<sup>1</sup>
  - Information seeking focuses largely on medical conditions, but attempting to identify suitable providers is a close second.
- However, a digital divide exists—along the lines of age, education, race/ethnicity, and chronic illness—but it is shrinking.

### Slide 6: Direct-to-Consumer Advertising of Prescription Drugs

- The U.S. Food and Drug Administration opened the door in 1997 by reinterpreting own rules.
- Growth was been steady through most of the 2000s.
- Although such advertising may be leveling off, it is likely a permanent part of the health information landscape.
- Consumer awareness is very high.

### Slide 7: Consumers Are Influenced by What They See and Hear

Number of Listed Products Patients Remembered Seeing Advertised	Percentage of Patients Who Requested Advertised Drugs
0	1
1	3
2	3.5
3	3.9
4	9
5	11
6	5

### Slide 8: Marketing: Can Patients Trust What They See and Hear?

- This question is really two:
  - Do patients trust what they see and hear? (a question of perceived credibility)
  - Should patients trust what they see and hear? (a question of accuracy)

### Slide 9: Factors Affecting the Perceived Credibility of Health Information

- Source
  - Expertise
  - Trustworthiness
- Message
  - Personalization, impartiality, and richness of message features (and on the Web: design complexity)
  - Value of particular features may depend on patient factors (e.g., the need for information; health literacy and numeracy)

### **Slide 10: Even If Consumers Trust What They See and Hear...Should They?**

- Maybe not!
  - Problems with the pharmaceutical-industrial complex
  - Poor reporting of:
    - Conflicts of Interest
    - Statistical information
  - The early idealization-sudden condemnation cycle

### **Slide 11: Evaluating the Accuracy and Balance of Media Reports on Prescription Drugs**

- Journalists are now in a difficult position with regard to reporting on prescription drugs.
  - Traditional news outlets are clamping down.
  - The number of journalists who specialize in health news is decreasing.
- HealthNewsReview.org gives expert, independent review of media reports on prescription drugs and is working to make journalists more accountable.

### **Slide 12: What Do Patients Want and Need?**

- Wants – reportable
- Needs – deduced from first principles
- Requests – observable

### **Slide 13: Patient Requests or Explicit Expectations for Care**

- In a study in which 559 patient visits we audio recorded:
  - About 25 percent of the outpatients made requests for physician action.
  - Requests were made for:
    - Laboratory testing, imaging tests, or other diagnostic studies
    - A new medication or new form, dose, or route of administration of an old medication
    - A referral to a physician specialist
    - All or part of the physical examination
    - A refill or renewal of medication taken or prescribed in the past month
    - A therapeutic procedure or lifestyle prescription
    - A referral to a nonphysician

### **Slide 14: The Genesis of Patients' Expectations**

- In a study that identified 909 patients who were making visits to primary care clinicians and to cardiologists:
  - 125 patients reported unmet expectations for care after their visits.
  - Most, but not all, of the unmet expectations concerned medications, tests, and referrals.
  - When asked to explain the nature of their disappointment in a telephone interview, four key themes emerged:
    - Somatic symptoms
    - Perceived vulnerability
    - Previous experience
    - Transmitted knowledge (the media = 7%)

**Slide 15: Yes, the media are influential, but there is a lot more going on for patients.**

### **Slide 16: What do patients really need?**

- Evidence – the facts
- Discernment – sound clinical judgment
- Relationship – between the physician and patient

### **Slide 17: Reconciling Wants and Needs**

- Policy approaches
- Interpersonal (clinical) approaches

### **Slide 18: Policy Approaches**

- Improve the quality of the prescription drug information available to consumers.
- Improve the clarity of consumer-directed signals of reputational quality.
- Limit the influence of commercial bias.

### **Slide 19: What Is Being Done**

- Drug facts box
  - Presents evidence about the benefits and harms of a prescription medication in ways that patients can understand
- HON Code
  - A set of standards that are applied to health Internet sites that might help consumers better evaluate reputational signals
- HealthNewsReview.org

- Expert, independent review of health-related media reports for accuracy and balance
- Identification and transparency of conflicts of interest
  - To root out the more capricious and pernicious influences of industry on the production and dissemination of research

### **Slide 20: Clinical Approaches**

- Talk less, listen more
- When in doubt, ask
- Respond to emotions
- Be self-aware
- Give something to get something

### **Slide 21: Stop Talking**

- In a study by Beckman and Frankel (1984), doctors interrupted their patients' opening statements within 18 seconds.
- In a followup study, Marvel et al. (1999) documented interruptions within 23 seconds.
- Both studies found that when patients were allowed to complete their opening statements, those statements rarely take more than 3 uninterrupted minutes.

### **Slide 22: Ask Questions First, Provide Information Later**

- It is easy to assume that when patients ask questions or request interventions, they want action!
- The need for action may not always be the case.<sup>1</sup> (Recall Kravitz et al. Ann Intern Med 1996.)
- When asked to write a prescription, physicians will be tempted to say yes or no. They should rather say, "Why do you ask?"

### **Slide 23: Respond to Emotions**

- There are two sets of emotions to manage:
  - The patient's
  - The prescriber's
- Patients' requests for services may reflect underlying anxiety about a serious disease, loss of control, or abandonment.
- Patients may provide clues that provide an opportunity for empathetic support.

### **Slide 24: Be Self-aware**

- Patient requests and demands can provoke negative emotions in prescribers.
- Awareness of emotions can mitigate destructive consequences.

### **Slide 25: Give Something To Get Something**

- Substitution
  - Alternative diagnosis
  - Alternative approach (diagnostic or therapeutic)
- Contingency
  - “If *this* doesn’t work, then let’s try *that*.”
- Availability
  - “I’ll call you in 2 days to see how you’re doing.”
  - “If you’re not feeling well by the beginning of next week, give me a call. Here’s how.”

### **Slide 26: Summary**

- The media landscape is changing rapidly.
- Patients are exposed to massive amounts of health information; much of it biased or of questionable quality.
- Patients may seem to want medications when they actually want information, reassurance, or commitment.
- Providers should avoid the temptation to serve up more information; one good question is worth 10 good answers.