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The ethical implications of utilizing advertising techniques to increase biologic treatment willingness in patients with psoriasis

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Abstract

Certain techniques used in the advertising and marketing setting may enhance patient willingness to initiate and adhere to treatment. Some methods include manipulation, nudging, bandwagon effect, testimonial effect, and framing. While these tools may improve patient adherence to certain medications, and thus overall health-related outcomes, the ethical implications of utilizing advertising techniques in the medical setting should be explored. We suggest physicians can maintain their ethical duty to act in the patient's best interest, while simultaneously maintaining the principles of informed consent and utilizing advertising techniques based on human psychology to present treatment options.

Keywords: ethics, adherence, psoriasis, biologics, treatment, advertising, marketing, psychology

To the Editor:

The findings of "Advertising techniques increase biologic treatment willingness in patients with psoriasis," demonstrate how methods used in marketing may be utilized by physicians to improve medication adherence. This study was based on the idea that drug advertisements use effective marketing tools and physicians might identify new and better ways to improve patients' outcomes

using similar techniques. We found certain advertising techniques (e.g. bandwagon effect, testimonial effect, and positive framing) can encourage patients to accept treatment. However, the ethical implications of utilizing advertising techniques to convince a patient to take a medication should be considered.

Manipulation may be inherent to advertising and may sound evil, but it is not always a negative concept. Manipulation can be defined as an intentional, successful alteration of a person's choice by means that are neither coercive nor persuasive; manipulation may simply involve an appeal to emotion or other use of some other psychological influence [1]. For example, physicians may try to ensure that the informed consent process has the best outcome for the patient by emphasizing selective information or using language chosen for a particular emotional effect [1]. Nudging patients by framing a risk as occurring in 1/100 patients could discourage a particular choice, whereas framing the same risk as 99/100 do not get the adverse outcome could be used to encourage a choice [2, 3]. Although these two proportions are mathematically identical, the latter is more likely to be interpreted favorably and provide reassurance to patients [2].

Although it is necessary to inform patients, it may never be possible to present information neutrally; subjective interpretation is inevitable. Common subjective ways of presenting data include when

physicians provide anecdotes of other patients' experiences or use social expectations when explaining to adolescents what other teenagers are doing [4, 5]. Beneficence must be weighed against autonomy: doing what is needed to give patients the best outcomes should be balanced with the requirement to let patients be in control of their decisions.

From an ethical standpoint, we suggest physicians can provide appropriate information (e.g. side effects and relevant clinical data) in ways based in understanding of human psychology (e.g. positive framing, bandwagon effect, testimonial effect and many others) to help patients achieve the best possible outcomes. Physicians have an ethical duty to act in the patient's best interest. Although physicians are expected to engage in a thorough conversation about the benefits and limitations of a treatment, this can be done while utilizing nudging techniques, recognizing both patients' autonomy

and physicians' duty. Tools used by marketers may be appropriately applied in medicine to improve patients' lives.

Potential conflicts of interest

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References

1. Oberlander J, Buchbinder M, Churchill L, et al. The social medicine reader. Vol. 1, 3rd ed. Duke University Press; 2005. p. 167-191. [DOI: 10.1215/9781478004356].
2. Lewis DJ, Cardwell LA, Feldman SR. Applying behavioural economics to psoriasis treatment: interventions to improve patient adherence to biologics. *J Eur Acad Dermatol Venereol.* 2018;32:65-66. [PMID: 28776767].
3. VanEpps EM, Volpp KG, Halpern SD. A nudge toward participation: Improving clinical trial enrollment with behavioral economics. *Sci. Transl. Med.* 2016;8:348. [PMID: 27440726].
4. Gonzalez C, Dana J, Koshino H, Just M. The framing effect and risky decisions: Examining cognitive functions with fMRI. *J. Econ. Psychol.* 2005;26:1-20. [DOI: 10.1016/j.joep.2004.08.004].
5. Nadeau R, Cloutier E, Guay JH. New Evidence About the Existence of a Bandwagon Effect in the Opinion Formation Process. *Int. Polit. Sci. Rev.* 1993;14:203-213. [DOI: 10.1177/019251219301400204].