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Drug Advertising – Configurating Factors and Communication Strategies: A Case Study on Television Broadcasted Advertisements in Romania

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Abstract

The study consists of both a review and a critical analysis of the factors that structurally influence drug advertising. These factors are determined, on the one hand, by defining characteristics for pharmaceutical industry field and, on the other hand, by specific communication roles, stakes and characteristics which customize and differentiate drug advertising as compared to other types of persuasive communication. One of the main goals of the study is to identify and analyze the communicational strategies used in Over-the-Counter (OTC) drugs advertising directed to consumers (DTC) in Romania. In this respect, a content analysis was carried out on a sample of 45 medicaments advertisements broadcasted by Romanian televisions, focusing on the strategies and creative techniques used in constructing the advertising discourse.

Keywords: drug advertising; pharmaceutical industry; communication strategies; case study; Romania

Overview of the pharmaceutical industry and factors influencing drug advertising

The pharmaceutical industry is a significant part of the medical care sector, which, under the control of international and national regulations, contributes to the population public health through the discovery, development, marketing and

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distribution of pharmaceutical products. It is an industry based on and sustained by research and development activities, which remains dependent, as any other industry, on an economic dimension, driven by income and profit. The competition that exists on this market is configured by at least two dimensions: the development of new drugs and the marketing activity - responsible with the distribution, promotion and sale of medicine (Morse, 2003: 637). The marketing, promotion, sale and actual consumption of a medicament represent only the tip of the iceberg. One of its hidden parts consists of both financial resources and time invested in the pharmaceutical research and development phases. But often the resources allocated to the research and development of a new product represents a less costly component, compared to the financial and time expenditures needed for its marketing authorization grant. According to the Pharma & Biotech Industry Global Report 2011, the time lag of drug launch between the discovery and its authorization for market entrance is between seven and 14 years, and the costs of this process can vary between 50 million dollars and 250 million dollars (in the case of the large pharmaceutical companies). Retrieving the invested sums of money and the maximization of profits depend to a great extent on carrying out intensive and aggressive advertising and promotion campaigns. Even more so, given the fact that a characteristic of this market is the competition between the original drug, known also as reference drug, and generic drugs or generics. Generic drugs are medicaments developed in order to be similar to already authorized drugs and contain the same active substances as the reference ones, being used in identical dosage and for the same medical conditions. The commercial characteristics of the reference medicament – name, appearance (for example: color and shape), and packaging - can be most often different from those of the original medicament. Generic medicaments don't forego the research and development stages, and in order to be approved only need to show proof of studies of bioequivalence with the reference medicament. Usually, generic medicines are marketed in 12-16 months after the original drugs have been launched. Generics represent major competitors, their selling cost being considerably lower than that of the reference drugs. After their entrance on the market, both the prices and the marketing expenses of the reference brand begin to decline. (Sen, 2011: 251). The high costs for marketing a new drug and the competition with generics can explain to a good extent three structural characteristics of drug advertising: the large share of these expenses compared to the total sale income, a growing dynamic of promotion budgets and the fast and aggressive advertisement of the new drugs on the market. On the one hand, marketing expenditures typically amount to 20-40% of sales revenues, often exceeding R&D expenditures (Brekke, Straume: 2009). Accordingly with data presented by Donohue, Cevasco and Rosenthal (2007), in USA between 1996 and 2005, the real spending on promotion grew from \$11.4 billion to \$29.9 billion and nearly all advertising campaigns for the most heavily advertised drugs began within a year after FDA approval of the drug. On the other hand, the relationship between drug advertising and the pharmaceutical industry

is on of circular causality. The amount of advertising expenses influences the investments in research and development of new drugs, the orientation of this influence been arguable and dependent on the patterns and variables being considered. Advertising and R&D might be considerate as substitute expenditures, overinvestment in advertising representing a strategic instrument used by an incumbent in order to reduce the probability for a new product being developed by a potential competitor (Brekke, Straume: 2009; Kaiser: 2005). As a consequence, the cost of a new entry would be too high relative to the expected return and the majority of pharmaceutical innovations are follow-on drugs rather than new medical treatments. Kwong and Norton (2007) highlighted a different perspective by analyzing the effect of advertising on product innovation and examining the effects of advertising expenditures on the types of products entering into clinical investigations. They pointed out that markets with more detailing activities are more attractive to new product entries because they offer more opportunities for product differentiation.

The pharmaceutical industry market has many similar aspects to other industries' markets and is governed to a large extent by the same rules, nonetheless taking into consideration a certain sensitivity of the industry that stems from the type of products it promotes (Morse, 2003: 676). The promotion strategies it uses are also similar to the patterns used in other industries. Marketing communication as a professional and complex variant of promotion includes all primary types of manifestation identifiable for any other kind of product: mass-media advertising (TV, radio, newspapers), online advertising (websites, e-mails), sales promotion (door-to-door), public relations, events planning, event sponsoring, etc. (Shimp, 2007: 4). The difference is that the marketing of pharmaceutical products is subjected to specific norms and regulations. Drugs might be considered a commodity distributed in a market defined in terms of the supply and demand ratio, but beyond this purely economic dimension, a medicament is not so much a consumer good, but a substance with remedial properties, "used or administered in humans, either for the recovery, correction or modification of the physiological functions, by performing a pharmacologic, immunologic or metabolic action, either for the determination of a medical diagnosis" (Art. 695 of Law 95/2006 regarding the health care reform). Its curative characteristic, the medical and, indirectly, social goals of drugs consumption lead to precise regulations regarding their advertising. The drug advertising to the general public is known in the literature as a type of advertising that targets consumers directly - Direct-to-Consumer (DTC) Advertisement. The DTC concept is used mainly in the US and New Zealand, where the legislation allows even the advertising of prescription drugs (Sen, 2011: 248). In Romania, according to article 17 of law 148 of 26th of July 2000 regarding advertising, it is allowed to the general public only for medicines that can be purchased without a medical prescription (Over-the Counter drugs), for which the advertising material has to be approved by the National Agency for Medicines

and Medical Devices (ANMDM – an institution active since 21st of July 2010). Therefore, advertising to the general public is only allowed for those medicines that "through their composition and indications, can be used without the intervention of a medic, for the purpose of establishing a diagnosis, prescription and treatment supervision, the advice of the pharmacists being sufficient, when needed". Alongside Law no. 148/2000 regarding advertising and Law no.158/2008 regarding deceitful advertising and comparative advertising, drugs advertising is subject to other laws and regulations as well: Law no. 95/2006 regarding the health care reform, Header XVII – The Medicine, which transposes the 2001/83/CE Directive of the creation of a European code for medicinal products for human use, the Broadcasting Law no. 504/2002 and the decision of the National Broadcasting Council (CNA) no. 220/2011 regarding the Broadcasting content regulation code, completed by the CNA Decision no. 495/2011.

An important tool in regulating drugs advertising is The Guide for the Assessment of Advertising for Human Use Medicines, approved by the ANMDM starting from 03/09/2010 (and revised in September 2011). Although the document has no normative character, it is useful both in the creation of advertising materials and in their evaluation by the ANMDM. The guide determines that the all drugs advertising and promotion activity is to be performed responsibly, ethically and within the highest standards, in order to insure the safe usage of medicines, no matter their status as regards the availability to public (with or without a medical prescription). Any advertising material aimed at the general public must be formulated so that it becomes clear the product is a medicine. Also, the guide requests that advertising for such products must encourage the rational use of the medicine, through its objective presentation, without exaggerating its therapeutic properties or qualities, must not encourage self-medication or the irrational use of the drug, must not be deceitful, subliminal or confuse through distortion, exaggeration, unjustified emphasis, omission or any in any other way (for example, suggesting that the medicine is food, a cosmetic product or another type of consumer good), etc.

Roles, goals, and characteristics of drugs advertising

Although in Romania television advertising is allowed only for the medicines that can be purchased without a medical prescription (OTCs), drug advertising is an area of persuasive communication that deserves a particular interest. The way in which the advertising discourse is constructed and conveyed in the public space has an instrumental character - related to the marketing strategies used by pharmaceutical companies. At the same time, it constructs and reflects ways in which society relates to the health issues and assesses individual and socialinstitutional behaviors of providing medical care. The social imaginary created and developed by the advertising communication leads to the emergence and diffusion of some behavioral models and representations that are shared by the public as a consequence of the fact that the main dimension of the advertising discourse is not media-related or communicational, but a *ludic and socially therapeutic* one. The therapeutic dimension is given by the fact that ,,the individual wants *to be* or at least *to seem* – and for this it's enough to buy the *prosthesis* in order to simulate it" (Sacriste, 2001: 494), which gives him the impression that he is cured. From this perspective, the analysis of drugs advertising has a particular stake and a special interest because the symbolic therapeutic value of publicity overlaps and is doubled by the advertisement of products that have the manifest attribute and defining role of the individual's relief from disease. In a critical analysis of the pharmaceutical industry, Alain Cassels and Ray Moynihan impeach the world pharmaceutical industry for mainly addressing to healthy people and insidiously exploiting the deepest fears of people: death, physical frailty, illness (Cassels, Moynihan, 2005).

Drug advertising is not aimed mainly at an already brand *captive* consumer, but at a consumer forced to purchase a product in a situation of illness. The choice is not between being or not a consumer, but between being ill or healthy, and in such a situation the freedom of choice is inherently lower. The decision to buy is mostly an instrumental one, it's a decision concerned with and determined by a pragmatic finality, almost not at all symbolic. To the extent to which an important role of advertising is the assignment of social belonging and, therefore, also the signaling, confirmation and validation of the segregation (the product is a marker which confirms and legitimizes a social inclusion or exclusion, sets a boundary or fades it to disappearance; consumption and advertising are two important instances of the fluidity and relativity of social boundaries). Medicaments advertising cannot back out from such a stake because, apart from the pragmatic finality, purely instrumental and obvious only at the individual consumer level, the assignment of the ill or healthy status is central to the mediation of social groups inclusion or exclusion. This multiple grounding, individual and social, utilitarian and symbolical, places medicament advertising at the junction of some conceptual categories frequently used in the analysis of advertising. So, apparently unproblematic distinctions, such as the ones between high and low-involvement products or utilitarian and hedonic, important to the way in which the products are promoted (Armstrong, 2010: 21-22), become ambiguous and less useful in the case of drugs advertising.

The analysis of drugs advertising and the identification of the narrative strategies used are important in relation to the aforementioned stakes and, moreover, justified by two major suspicions regarding the social value of this type of publicity. The first is the morality dimension - to what extent it's ethical to promote a product and to develop a demand for it - when customers lack the competence and tools necessary to understand the benefits and potential risks associated to its consumption? The advertisement aimed at the general public is focused, usually, on the benefits and less on the risks and potential side effects (Herzenstein, Misra & Posavac, 2004: 202-203). The second issue means that drug advertising is focused on and interested in the commercial value of the promoted product to the detriment of the educational and informational value which drugs commercials should promote, considering the social goals implied by the consumption.

The experts' opinions regarding the utility and implications of medicaments advertising remain divided, ranging on from the assertion of positive effects - the information concerning the medicaments allow the identification of new solutions to the health problems of individuals, lowering the number of those who are not treated because they don't know they are ill or do not know that there exists a treatment for their condition - to negative effects - patients pressuring their doctors, the medic-patient relationship is affected, the incidence of self-medication grows and causes unsafe practices among consumers - or unawareness of benefits and risks of DTC advertising (Bell, Wilkes, Kravitz, 2000; Kravitz, 2000: 222; Morris et al., 1986: 83; Joseph, Spake, Finney, 2008). Another critique is related to the fact that extensive advertising of new drugs leads to widespread use before adequate safety information is available (Lexchin, 2009). Self-medication requires a special remark. Although encouraging it is not allowed (art. 44 of the Guide for the evaluation of human use medicaments advertising), a secondary effect of drugs advertising is that the pharmaceutical products promoted to the general public are perceived as consumer products, which can lead to a growth in consumption. The relationship between publicity promotion and the amount of sales in promoted drugs has already been proven: the growth in the drugs' notoriety, a direct effect of advertising, is followed by a growth in the market share of the respective medicine (Sen, 2011: 258).

Concerning the communication strategies used in medicaments advertising, in the last 20 years several studies that allow the emphasis of common patterns have been conducted. In a report published in 2000 GRAS (*Groupe de recherche et d'action pour la santé* – Belgian organization) presented the results of its analysis on fifty advertising messages addressed either to specialists or the general public, among the main conclusions presenting several advertising skids: minimizing the side effects, the inadequate extension of therapeutic indications, indirect media advertising for medicines that require a medical prescription and whose publicity to the general public is not allowed, the manipulation of prices, the wrongful interpretation of clinical trials and even unethical experiments (GRAS, 2000: 47). A content analysis of the TV commercials broadcasted between 2001 and 2005 for Over-the Counter analgesics in the US aimed to identify and evaluate their informational dimension. Among the conclusions of the study relevant to the current undertaking are the following: the market share of the pharmaceutical brand is negatively associated with the quantity of the informational content; the

same thing applies to the generics sector – the higher the market share of generic medicaments is, the less is the informational content; to what concerns the informational- content, the most used attributes were: fast (from the point of view of the expected effect), strong, long lasting effect, safe and trustworthy (Anderson, Ciliberto & Liaukonyte, 2010). Another study, undertaken by Dartmouth Medical - the analysis of 70 medicaments advertisements promoted in ten magazines known in the US – ascertained that frequently (almost half of the ads) the advertisement encourages consumers to consider medical causes for their common experiences, most of the times urging them to consult a specialist. These ads presented usual aspects (like hiccups, hair loss, excessive weight) - mostly dealt with without medical advice – and described them as indicators of a medical condition (Cassels & Moynihan, 2005: 103). Another frequent strategy of advertisement for the general public is the option to underestimate the risks of medicines and overestimate their efficacy (Kaphingst et al., 2004; Antonuccio et al., 2003). A content analysis of 320 publicity prints regarding drugs, published in several magazines between 1989-1998, highlighted as main appeals in the advertising discourse: the claim of efficacy, the control of symptoms, innovation and comfort of use (Wilkes, Bell & Kravitz, 2000: 115).

Regarding general audience television advertising for the medicines that require a medical prescription (in the US), the use of expressions specific to the medical field is frequently preferred (increasing therefore their credibility), and the story used in the ad is often based on testimonials and dramatizations (Kaphingst *et al.*, 2004). They always appeal to positive emotions in the end, if people who have used to product are presented, and when the medicaments are described, the following framings have been noted: *loss of control, regaining control, social approval* (the protagonists are favorably regarded once they have used the product), *stress, innovation* (the characteristics of the product are presented as being innovative for the medical field), *stamina* (physical and mental, as a result of using the product) and *protection*. A relevant observation is that few commercials mention the fact that a healthy behavior can be useful along with the use of the product, but none state that the aforementioned behavior may be a reasonable alternative (Frosch et al., 2007).

Objectives

The main objectives of the case study were: a) the identification and analysis of communication strategies used in the TV ads promotion of OTC drugs in Romania; b) the analysis of the medicaments presentation in the TV advertisements broadcasted in Romania, by highlighting the factual information and identifying the characteristics assigned to the medicaments; c) the identification and analysis of creative strategies used in TV drug advertisement: the advertising

appeals used, the creative techniques on which the publicity discourse is based, the description of the context/scenario in which the product is promoted.

Research methodology

A content of 45 TV commercials for 42 distinct products (2 products had more commercial versions broadcasted in parallel) has been analyzed. The choice of *cases* and *analysis units* was made in several steps. In the first stage, all the names of medicines brands mentioned in the SNA Focus³ study were centralized. These drugs are used for the following conditions: allergies, pain (analgesics), indigestion and stomach-related conditions, cold and flu, throat pain, nose drops, and cough syrup. These categories were chosen because they generally address a wide non-segmented public (both women and men, young and old), unlike, for example, the drugs against prostate disorders, that only address men. For each product, televised spots have been identified and recorded. When more commercials were being aired for the same product, the most recently broadcasted one was selected for the analysis. The drugs that were not promoted on the TV were eliminated from the sample.

If a brand was present in more categories – either because it aimed several conditions (for example, Paracetamol was mentioned both in the Cold and flu category and in the *Analgesics* one), either it existed in multiple forms (for example, pills and cough syrup) – it was only analyzed once and placed in the most representative category for the condition/illness it was dedicated to. The assignment of the category was determined depending on the information the TV commercial conveyed and the manner in which the product was presented (e.g. for pain or for cold). In the case of different spots, broadcasted in parallel on TV, promoting different qualities of the product, all were selected for the analysis. Such an example is Nolin, promoted through different commercials in order to highlight, on the one hand, its pain relief quality and, on the other hand, its fever relief properties. In the end, 45 TV commercials for medicaments against pain (analgesics), allergies, cold and flu, respectively stomach and digestive conditions, were selected. Table 1 summarizes the distribution of analyzed cases, depending on the medicaments' category, the number of products (brands) and the number of commercials corresponding to each category.

³ The survey SNA Focus was carried out between May 2011 and January 2012 on a national sample of 12726 persons, reprezentative for the urban population of 14-74 years. The questionnaire included items regarding opinions, preferences , consume and buying behaviours of OTC drugs.

| Medicaments category | Distinct products | Analysis units (TV commercials) |
|------------------------------|-------------------|---------------------------------|
| Analgesics (pain medication) | 14 | 15 |
| Anti-allergy | 2 | 2 |
| Cold and flu | 17 | 19 |
| Stomach and digestion | 9 | 9 |
| Total | 42 | 45 |

Table 1. The analyzed cases depending on the medicaments category

The identification units/variables for each advertising spot were the following: the Trade name of the promoted drug, International Nonproprietary Name (INN), the producing company, the category of conditions the medicament addresses and the length of the spot. The limitation to these four categories was due to two main reasons: a) the general character of the target audience; the selected medicaments are not addressed to a particular segment of the public that is identifiable through particular socio-demographic criteria (age, gender, social behavior, etc.); b) the aggregation of a minimum number of relevant cases for each category.

The advertisement slogans were analyzed taking into consideration two registration units: words and themes - the latter being assigned to the promoted medicament (attributes, qualities) and, separately, to the consumption (the consequent benefits). The distinction between the promoted product and the consumption behavior, between the attributes assigned to the medicine and the benefits assigned to the consumption allows highlighting the situations in which the slogan appeals to both dimensions.

Considering the explicit message, either audio, or as a text displayed on the screen, we look first at the manner in which the information was delivered. Later on, all the messages were transcribed and coded, deductively and inductively, and then connected with the other elements of the advertising discourse. Among the deductive codes, used exclusively in the case of messages being delivered directly, there are the ones that aim to emphasize the factual information regarding the medicament (the condition's symptoms, its causes, the risk factors, the prevalence of the disease, and the risk population), respectively the information regarding the promoted characteristics of the product. In the case of factual information, the codes suggested by the classification of Frosch et al. (2007) were used, and for the product's characteristics the analysis frame stemmed from the classification suggested by Anderson, Cilibertoz & Liaukonyte (2008), which identifies seven useful attributes for the efficiency of the medicaments portrayed in the advertising spots: a. rapidity, b. strong effect, c. safe/trustworthy, d. lasting effect, e. recommended by a specialist, f. popular/well-known, g. new. Subsequently, in the course of the analysis, the following characteristics were also introduced: h. the composition (the substances contained by the medicament), i. the precision (the quality of acting straight at the source of pain), but also j. *efficiency*. Although all the attributes identified in the first stage were correlated with the general characteristic of efficiency, this code was introduced distinctly due to the fact that in many of the spots this specific term was used in order to characterize the medicament.

An important part of the analysis grid regards the creative dimension of medicaments advertising. To this respect, not only the contexts in which the medicaments are presented were taken into consideration, but also the ways in which they are rolled out. The categories used were: a. recommended by a specialist; b. recommended by another character; c. recommended by the narrator (voice-over); d. consumed directly by the person with the problems. What concerns the interest in the techniques used or in the ways the advertising discourse is "packaged", it was considered whether it appeals to: a. *reason* (factual information about the product or condition); b. positive emotion (positive feelings, such as happiness, joy, presented as results of using the promoted medicament); c. negative emotions (negative feelings or emotions depicted - fear, regret, indisposition, etc.); d. humor (irony, satire, etc.); e. fantasy (through the use of unrealistic/super realistic scenes - inexistent or impossible in the real world); f. sex (intimate, provocative scenes, etc.); g. nostalgia (images from previous times, the past is compared to the present) (apud Frosch et al., 2007: 7). Alongside these, the following were also regarded: the appeal to an authority (a specialist, medic, pharmacist), the appeal to the brand's tradition/reputation, and the appeal to the product innovation.

The content analysis was also concerned with instrumental-technical aspects related to the proper making of the spot, the manner in which it was edited and its casting. Therefore, the manner of spot making was regarded, differentiating between a) a real *filming*, with real persons and actors and b) a computer-generated *animation*. A distinct interest point was the identification of the use of computer editing with the purpose of exemplifying and explaining as a means of conveying to the public a better understanding of the way the medicament works. Other elements taken into consideration were: the set of the action (where it pertains), the use of a musical background and the characters (number, gender, age – babies, children, teenagers, adults, and elderly).

Finally, considering all the mentioned elements, the identification of the creative strategies was pursued, having as a reference frame part of the strategies suggested by Pricken (2008): 1. *without words* (only visuals are used, with the exception of the disclaimer at the end of the spot: "this is a medicament…"); 2. *comparison and contrast* (e.g. before and after the use); 3. *exaggeration* (situations in which the symptoms or benefits are presented in exaggerated manner); 4. *accumulation* (the benefits of the medicament is emphasized by an accumulation of problem situations); 5. *the use of sayings and idioms* (facilitates the recognition and positively influences the recall ratings of the product); 6. *metaphors and analogies* (that suggest the idea of illness or cure); 7. *the shock technique* (the product is associated to something "that nobody would dare talk about" – a taboo, something that can horrify, etc.); 8. *the proper meaning of the words* (there is a literal relationship between the product's qualities, the visual images and the conveyed message).

Results

Starting with the advertising slogans for the analyzed medicaments, there is a preference for wordings that refer to product qualities, the ratio of those that refer to the benefits of consumption being lower (Table 2). Very likely, the preference for the emphasis of the qualities of the product to the detriment of the benefits of its consumption is not related only to a precautious communication option due to the legal constraints and regulations concerning the content of drug advertising. On the one hand, for medicaments consumption, the most important expected benefit is obvious - the improvement of the condition - and does not need further definitions. On the other hand, the highlighting of the medicament's qualities in the slogan represent a practical way of differentiating the promoted medicine from similar ones, which respond to the same needs and bring the same benefits. Another defining characteristic of advertising slogans used in the TV medicines promotion is the use of words in their literal sense (40 out of 45 cases) and the avoidance of metaphors or multiple meanings words. This option is an indicator of a preference for a persuasive strategy that is predominantly rational, consistent with the drugs' belonging to the category of utilitarian products, characterized by consumer high involvement in the purchase decision.

| The slogan refers to: | Frequency | Percent | Cumulative Percent |
|--|-----------|---------|-----------------------|
| The product qualities | 24 | 57.1 | 57.1 |
| The benefits of consumption | 16 | 38.0 | 95.1 |
| Both the product's qualities and the benefits of its consumption | 2 | 4.4 | 100.0 |
| Total | 42 | 100.0 | |

Table 2. The informational content of medicaments advertising slogans

The *call to action* is rarely used in advertising spots (6 cases, 14%), and regarding the way in which the slogan is conveyed to the public, it has been noticed that in most of the cases (35 cases, 78%), it is mentioned both orally and displayed on screen at the end of the commercial *(Table 3)*. The preference for the oral mode might be related to the fact that consumers respond more favorably toward an advertised drug when the copy is communicated orally versus in print (Davis, Meader, 2009).

| Medicaments Category | Exclusively spoken | Exclusively written on screen | Both oral and written | Total |
|-----------------------|--------------------|-------------------------------------|--------------------------|-----------|
| Analgesics | 0 | 1 (7%) | 14 (93%) | 15(100%) |
| Anti-allergy | 0 | 0 | 2 (100%) | 2 (100%) |
| Stomach and digestion | 1 (11%) | 1(11%) | 7(78%) | 9 |
| Cold and flu | 4 (21%) | 3 (16%) | 12 (63%) | 19 (100) |
| Total | 5 (11%) | 5 (11%) | 35 (78%) | 45 (100%) |

Considering the written records of the 42 slogans for medicaments, the average of words used is 5.11, and related to this indicator medicaments advertising is not different from any other commercial product advertising. Regarding the words used, most of them are usual and common. The word clouds resulting from both all slogans and each medicaments category are illustrative in this respect and emphasize the words that occur most frequently (*Fig. 1, Fig. 2*).



Fig. 1. Word cloud resulted from the advertising slogans of the analyzed medicaments spots

The word cloud resulted from analgesics slogans highlights the existence of a communication pattern valid for the entire category (*Fig. 2*). The slogan's main functions are to emphasize the illness/condition the medicament is aimed at, and to ensure the differentiation from the other competitors on the market.



Fig. 2. Word cloud resulted from the analgesics slogans.

As concerns the ways in which the advertising message is transmitted, most information (both quantitatively and qualitatively) is communicated verbally the visual being used complementarily as support, together with, sometimes, the text displayed on screen. Most often, the messages displayed as texts resume mentioned information, in only 12 commercials has been identified additional information presented exclusively as image. The preferred method of transmitting the verbal message is narration - either voice-over, either by characters that are cast in the spots. The dialogues between characters as a modality to deliver information were identified in only 6 of the analyzed commercials. The contents are very homogeneous from the point of view of the theme structure, three topics having been identified as present in almost all cases: the causes and symptoms of the illness (43), the qualities of the product (40) and the benefits of consumption (40). The narrative scheme used in the commercials is relatively homogeneous as well, the pattern consisting in the presentation of the symptoms and causes of the illness at the beginning of the spot, the qualities of the promoted product in the middle, and in the end the benefits of consumption (Fig. 3).



Fig. 3. The distribution of the advertising discourse elements in the ads

It is important and relevant to note that none of the advertising commercials mentions the idea or the alternative of a healthy lifestyle as a option for the prevention of the condition or illness. In only one of the analyzed cases, the dimension of prevention is presented, but it is still connected to the promoted drug and inherently conditioned by its consumption (a message such as "consume in order to prevent…"). This finding confirms once again the fact that drugs advertising is subjected to an exclusively pro-profit finality, which is opposed to and even excludes pro-social goals, such as the promotion of a healthy lifestyle or the education of the public concerning illness prevention.

The second main objective of the case study concerned the analysis of presentation modalities used for the drugs promoted through television advertising. Related to the factual-informational dimension of the drugs' presentation, a first important aspect is the almost complete absence of information regarding the risk factors (2), illness occurrence (1) or the risk subpopulation (0). There are more variables that might explain and reasonably justify this absence: the specialized character of the information, difficult to understand for the general public; the short length of commercials significantly limits the amount of information available to be transmitted (the average time of the analyzed commercials is of 24.36 seconds, the shortest are 10 seconds long and the longest spot in the selected sample was 40 seconds long); the selected drugs are aimed at a wide, general public; the legislative regulations regarding televised advertising and medicaments publicity are very strict concerning the use of statistical data within the commercials. Independently from that reasons, the absence of that kind of information represents a distortion factor. It encourages the use of medicines within categories of consumers for whom the products are futile or contraindicated. This is a likely occurrence, taking into consideration the fact that in the presentation of the condition/illness and of promoted drugs, medical terms are not used, except for denomination of a few active ingredients (e.g. ibuprofen). Moreover, most of the commercials do not contain information regarding the administration method or the recommended dose, in only 10 out of 45 analyzed cases such mentions being present. To what regards the attributes assigned tot the promoted medicaments, the analysis identified 8 characteristics, mentioned in at least two advertising spots for distinct products (Table 4). The most frequently used are: efficiency (13) and the reference to *active substances* in the medicaments' composition (10).

Drug category

Table 4. The characteristics of the medicaments promoted in the advertising spots

| The | Drug category | | | | |
|--------------------------------|----------------------------|------------------|-----------------------------|--------------------|-------|
| characteristics of the drug | Analgesics/pain medication | Anti- allergy | Stomach and digestion | Cold and flu | Total |
| Efficiency | 11 | 0 | 4 | 7 | 22 |
| Rapidity | 5 | 1 | 1 | 6 | 13 |
| Composition | 6 | 0 | 0 | 4 | 10 |
| Lasting effect | 0 | 1 | 2 | 0 | 3 |
| Safe/trustworthy | 2 | 0 | 0 | 1 | 3 |
| Precision | 2 | 0 | 0 | 1 | 3 |
| Strong effect | 1 | 0 | 1 | 1 | 3 |
| New | 0 | 0 | 1 | 1 | 2 |
| Something else | 5 | 0 | 0 | 5 | 10 |

The data seems to confirm the fact that the homogeneity of themes and narrative schemes used in the commercials is also present at the level of defining attributes for the promoted products and brands. The use of the same attributes in order to describe the competing products means that TV advertising for medicaments does not set as a major objective the promotion of a brand identity that would differentiate the product from its competition through a unique positioning in the consumer's mind. The analysis identified only 10 characteristics, unique or phrased in ways that would allow a differentiation of the product from the others in the same category: *accessible pricing* (Algozone), *popular due to the brand tradition* (Algocalmin), *original formula* (Aspirin Cardio)/*innovative medicine* (Nasodren), *the non-irritant quality* (Bixtonim), *the quality of not drying the mucosa* (Vibrocil), *antibacterial effect* (Faringosept), *pleasant taste* (Mucosin), *the first medicament with the maximum quantity of ibuprofen* (Ibalgin Forte), *twice as fast* (Nurofen Express).

With regards to the creative strategies used, a first finding refers to the fact that the scenarios of the spots place the action in different settings, making it difficult to identify categories more nuanced than the ones defined by the opposition between closed spaces and open spaces (*Table 5*). The most often used is the domestic environment that is related either to the idea of family (home), either to the idea that an ill person stays at home, a consequence that defines a constraint that is associated to isolation and limitation. The diversity of contexts includes, among others: workplace, holidays, street, social events (birthday, party), etc.

| | Drug categories | | | | |
|---|----------------------------|------------------|-----------------------------|-----------------|------------|
| The setting in which the action takes place | Analgesics/ pain relief | Anti- allergy | Stomach and digestion | Cold and flu | Total (%) |
| Closed space | 7 | 0 | 5 | 8 | 20 (44,4%) |
| Open space | 4 | 2 | 0 | 5 | 11 (24,4%) |
| There is a change between them | 2 | 0 | 1 | 4 | 7 (15,6%) |
| Not the case | 2 | 0 | 3 | 2 | 7 (15,6%) |
| Total | 15 | 2 | 9 | 19 | 45 (100%) |

Table 5. The setting in which the subject of the advertising commercials is placed

From the point of view of the filming style, the use of actors (of real characters) - the filming and editing of the scenes represents a preferred option to the one of making the commercial entirely through animation (*Table 6*). In 11 out of the 45 cases analyzed, the two techniques were combined – the animation being used in order to emphasize the characteristics of the promoted product or in order to bring to life the product – an option more often used than the pure animation. It is also relevant that computer-generated editing is used quite often (16 cases) to illustrate the way in which the medicament acts in the body.

| The technique used for spot making | The existence of 3 to portray the | Total (%) | |
|------------------------------------|--------------------------------------|------------|-------------|
| IIIdKIIIg | Yes (%) | No (%) | |
| Filming/editing | 11 (40.7%) | 16 (59.3%) | 27 (100.0%) |
| Animation | 2 (28.6%) | 5 (71.4%) | 7 (100.0%) |
| A mix of the two techniques | 3 (27.3%) | 8(72.7%) | 11 (100.0%) |
| Total | 16 (35.6% | 29 (64.4%) | 45(100.0%) |

Table 6. The techniques used in the making of the advertising spots

The gender of characters becomes communication vectors in order to portray the medicines consumer and a possible indicator of the preferential orientation of the campaign towards a public that is differentiated in terms of gender. A balanced gender distribution is observed, related to all the analyzed spots. The number of cases in which the consumer – beneficiary, patient – is a male character (13) is practically equal to the one of commercials in which the portrayed character is a woman (14) or characters of both genders are used (14). A simple and plausible explanation is related to the sampling strategy that was intentionally oriented towards categories of drugs aimed at the general public, the conditions treated by the analyzed medicaments not being specific to particular gender or age groups. The gender balance regarding the portrait of the consumer is associated to a clear preference for masculine voices as a means of conveying information about the medicament, no matter if the scenario used in the commercial implies the presence of a character on set or a narrator (*voice-over*).

In regard with both the information content and the making itself of the advertising spots, the identification of the advertising appeals used in the analyzed commercials highlight persuasive patterns that seem defining the communication strategies used by pharmaceutical industry.

Almost all analyzed commercial (91,1%) use the *rational appeal* as a dimension of their persuasive strategy. The option is not at all surprising; it is the simplest and most adequate communicational way to fulfill the requirement and clearly transmit the symptoms of the illness and the main characteristics of the product. A second main finding is that most of the commercials use a mix of *emotional appeals*, both negative and positive, complementary to the rational approach (*Table 7*). The aggregated effect is illustrative and intense, the negative conditions created by the illness being removed and replaced by positive emotions, as a result of a very simple undertaking, practical, instrumental and rational, consisting of the administration of the medicine.

From the point of view of languages and codes used in commercials, the appeal to reason is performed mainly verbally. The appeal to emotion (positive and negative) takes place both through verbal language and, more often, through the visual content and non-verbal communication. Fantasy and humor also represent fairly frequent appeals (14 cases). The other categories considered are

used in isolated cases and are relevant related to the brand identity and the means of consolidating this identity through television broadcasted commercials.

| The advertising | | Drug category | | | | | |
|----------------------------------|----------------------------|------------------|-----------------------|--------------|---------|--|--|
| appeal | Analgesics /pain relief | Anti- allergy | Stomach and digestion | Cold and flu | Total | | |
| Appeal to reason | 14(93%) | 2(100%) | 8(89%) | 17(90%) | 41(91%) | | |
| Appeal to negative emotions | 15(100%) | 1(50%) | 7(78%) | 16(84%) | 39(87%) | | |
| Appeal to positive emotions | 13(87%) | 2(100%) | 6(67%) | 17(90%) | 38(84%) | | |
| Appeal to humor | 3(20%) | 0 | 2(22%) | 9(47%) | 14(31%) | | |
| Appeal to fantasy | 3(20%) | 0 | 3(33%) | 8(42%) | 14(31%) | | |
| Appeal to the product innovation | 1(7%) | 0 | 0 | 1(5%) | 2(4%) | | |
| Appeal to authority | 1(7%) | 0 | 1(11%) | 0 | 2(4%) | | |
| Appeal to sex | 1(7%) | 0 | 0 | 0 | 1(2%) | | |
| Appeal to nostalgia | 1(7%) | 0 | 0 | 0 | 1(2%) | | |
| Appeal to the brand's tradition | 1(7%) | 0 | 0 | 0 | 1(2%) | | |

Table 7. The advertising appeals used in TV drugs commercials

Addressing the creative strategies used by medicaments advertising, it is noticed that the most used strategy is the one of *comparison and contrast*, present in 35 commercials *(Table 8)*. This is portrayed firstly through the technique of comparing two opposite situations: one before the consumption of the product, and the other one afterwards, being based on the appeal to negative and positive emotions associated to both. Another frequent strategy is the *accumulation* that aims at emphasizing the need for the product by the presentation of several problem situations (in the case of drugs, the presentation of multiple symptoms). Another frequently used strategy is the *concordance* between orally transmitted messages, their explicit and latent meaning, and the visual contents on screen. As a creative option, the use of *metaphors and analogies* was noticed in 19 cases (43%), without difference between the drugs categories. They are frequently associated to the illness or its symptoms, the promoted medicine or its qualities, and seldom to the benefits of consumption.

| | Drug category | | | | |
|----------------------------------|----------------------------|------------------|-----------------------|--------------|---------|
| Creative strategy | Analgesics/ pain relief | Anti- allergy | Stomach and digestion | Cold and flu | Total |
| Comparison and contrast | 9 (60%) | 1(50.0%) | 8(89%) | 17(94.%) | 35(80%) |
| Accumulation | 9(60.0%) | 2(100%) | 5(56%) | 9(50%) | 25(57%) |
| Words-images concordance | 8(53%) | 2(100%) | 3(33%) | 9(50%) | 22(50%) |
| Metaphors and analogies | 5(33%) | 1(50%) | 4(44%) | 9(50%) | 19(43%) |
| Exaggeration | 3(20%) | 0 | 1(11%) | 4(22%) | 8(18%) |
| Well-known sayings and idioms | 3(20%) | 0 | 1(11%) | 3(17%) | 7(16%) |
| No use of words | 1(7%) | 0 | 0 | 3(17%) | 4(9%) |
| Shock technique | 1(7%) | 0 | 0 | 0 | 1(2%) |

| Table 8. | Creative s | strategies use | d in drugs | TV comn | iercials |
|----------|------------|----------------|------------|---------|----------|
| | | | | | |

Research limitations

A first limit stems from the exploratory and descriptive character of the analysis. The relatively small number of cases that constituted the analyzed population and the large number of considered variables, the approach of a direction that has not been seized upon so far in Romania did not allow the valid testing of possible causal relationships and limit the generalizing inferences resulted from the analysis and the interpretation of data. Although the choice of analysis units aimed to exhaustively cover all the cases for the chosen medicaments categories, in the absence of a certified database that would include all the promoted medicines brands on TV, there is a possibility that some potentially relevant cases may have been omitted from the current analysis. Another important limitation, which also defined a further research direction, stems from the methodological option for the exclusive use of the content analysis method. Such an undertaking does not cover at all or only covers to a small degree a very important dimension of advertising in general and drugs advertising in particular, the impact that advertising has on consumers, and can only partially and in a fragmented way to answer questions regarding the place and role of televised advertising in the general context of the marketing strategies of pharmaceutical companies.

Conclusions

The results of the study confirm, once more, some of the problematical aspects of medicaments advertising. Even though the objectives assumed through the legal framework of the regulation of this type of advertising aim at the clear differentiation of medicaments from other types of consumer goods and the prevention of self-medication or the irrational use of pharmaceutical products, the communication strategies employed in the drug promotion do not ensure enough guarantees regarding the positioning of medicaments in a substantially different category from that of other consumer goods.

The data confirm the existence of a real risk that the medicines promoted to the general public can be perceived as consumer good, with negative effects derived from such representations. The persuasive strategy is a predominantly rational one, the contents conveyed in commercials being very homogeneous from the point of view of the topic structure (causes and symptoms of the illness, the product qualities, the benefits of consumption), and of the narrative schemes used. It is a strategy frequently used for any type of utilitarian product promoted by advertising, the causes/symptoms of the illness being a substitute for the need to which a product, any kind of product, answers to. The factual-informational dimension of the presentation of drugs is complemented in the advertising discourse by a mix of emotional appeals, negative and positive, which present medicines as a simple means, practical and rational, helping to move from an intensely negative state to a positive one. The unbalance of the presentation and the persuasive effect of the advertising message are reinforced by the absence of information regarding the risk factors, the occurrence of the illness or the risk subpopulation. The absence of this data, as well as of the information regarding the administration method or the recommended dose, represent communication options that increase the risk of self-medication and the irrational use of medicaments. It is also important and relevant that none of the advertising spots mentions the idea of a healthy lifestyle as an alternative to prevent the condition or disease. The prevention dimension, when presented, is related to the promoted medicament and conditioned by its use, the message being "consume in order to prevent...". Overall, the data proves the fact that drugs advertising is circumscribed to an exclusively commercial purpose that is opposed to and even excludes pro-social goals such as the promotion of a healthy lifestyle and the public education regarding illness prevention.

References

- Anderson, S., Ciliberto, F., & Liaukonyte, J. (2010). Getting into Your Head (Ache): The Information Content of Advertising in the Over-the-Counter Analgesics Industry. MPRA Paper Nr. 24916, accessible online: http://mpra.ub.uni-muenchen.de/ 24916/ (07.06.2012).
- Anderson, S., Ciliberto, F., & Liaukonyte, J. (2008). Getting into Your Head (Ache): Advertising Content for OTC Analgesics, *Marketing Science Institute Working Paper*, accessible online: www.virginia.edu/economics/Workshops/papers/anderson/finalmsi.pdf, (07.06.2012).

- Antonuccio, D.O., Danton, W.G., & McClanahan, T.M. (2003). Psychology in the Prescription Era. Building a Firewall Between Marketing and Science. *American Psychologist*, 58(12), 1028–1043.
- Armstrong, J.S. (2010). Persuasive Advertising, Palgrave MacMillan.
- Bartle, J. (1999). The advertising contribution. In Butterfield, Leslie (Ed.), *Excellence in Advertising*. The IPA guide to the best practice, Oxford: Elsevier Butterworth-Heinemann.
- Bell, R.A., Wilkes, M.S., & Kravitz, R.L. (2000). The educational value of prescription drug print advertising. *Journal of Family Practice*, 49(12), 1092-1098.
- Brekke, K.R., & Straume, O.R. (2009). Pharmaceutical Patents: Incentives for Research and Development or Marketing?. *Southern Economic Journal*, 76(2), 351–374.
- Cassels, A., & Moynihan, R. (2005). *Selling Sickness. How Drug Companies Are Turning* Us All Into Patients, Crows Nest: Allen & Unwin.
- Donohue, J.M., Cevasco, M., & Meredith, B.R. (2007). A Decade of Direct-to-Consumer Advertising of Prescription Drugs. *The New England Journal of Medicine*, 101(1), 82-99.
- Frosch, D.L., Krueger, P.M., Hornik, R.C., Cronholm, P.F., & Barg, F.K. (2007). Creating Demand for Prescription Drugs: A Content Analysis of Television Direct-to-Consumer Advertising. *Annals of Family Medicine*, 5(1), 6-13.
- Herzenstein, M., Misra, S., & Posavac, S.S. (2004). How Consumers' Attitudes Toward Direct-to-Consumer Advertising of Prescription Drugs Influence Ad Effectiveness, and Consumer and Physician Behavior. *Marketing Letters*, 15(4), 201–212.
- Davis, J.J., & Meader, A. (2009). Beyond Content Analysis: Assessing Fair Balance in DTC Pharmaceutical Advertising. *Journal of Medical Marketing: Device, Diagnostic and Pharmaceutical Marketing*, 9(1), 57-66.
- Kaiser, U. (2005). A Microeconometric note on product innovation and product innovation advertising. *Economics of Innovation and New Technology*, 14(7), 573–582.
- Kaphingst, K.A., DeJong, W., Rudd R.E., & Daltroy, L.H. (2004). A Content Analysis of Direct-to-Consumer Television Prescription Drug Advertisements. *Journal of Health Communication*, 9, 515–528.
- Kravitz, R.L. (2000). Direct-to-consumer advertising of prescription drugs. Western Journal of Medicine, 173(4), 221-222.
- Lexchin, J. (2009). CJEM and pharmaceutical advertisements: it's time for an end. *Canadian Journal of Emergency Medicine*, 11(4), 375-379.
- Joseph, M., Spake, Deborah, S., & Finney, Z. (2008). Consumer attitudes toward pharmaceutical direct-to-consumer advertising: An empirical study and the role of income. *International Journal of Pharmaceutical and Healthcare Marketing*, 2(2), 117-133.
- Michael, S., Bell, R.A., & Kravitz, R.L. (2000). Direct-To-Consumer Prescription Drug Advertising: Trends, Impact, And Implications. *Health Affairs*, 19(2), 110-128.
- Morris, L.A., Brinberg, D., Klimberg, R., Rivera, C., & Millstein, L.G. (1986). The attitudes of consumers toward direct advertising of prescription drugs. *Public Health Reports*, 101(1), 82-89.
- Morse, M.H. (2003). Product Market Definition in the Pharmaceutical Industry. *Antitrust Law Journal*, 2, 633-676.

- Pricken, M. (2008). La publicité créative: idées et techniques tirées des plus grandes campagnes, Paris: Pyramyd.
- Sacriste, V. (2001). Sociologie de la communication publicitaire. *L'Année sociologique*, 51(2), 487-498.
- Schweitzer, S.O. (1997). *Pharmaceutical economics and policy*, New York: Oxford University Press.
- Sen, K.C. (2011). An empirical investigation of the variations in direct-to consumer prescription drug advertising. *International Journal of Pharmaceutical and Healthcare Marketing*, 5(4), 248-261.
- Shimp, T.A. (2007). Advertising, Promotion, and Other Aspects of Integrated Marketing Communications, Ediția a 7-a, SUA: Thomson South-Western.
- Wilkes; Kwong, W.J., & Norton, E. (2007). *The Effect of Advertising on Pharmaceutical Innovation*, Springer.
- *** (2000). Ce "cher" médicament. Economie et politique du médicament, Santé conjuguée, Nr. 14;
- *** (2006). *Codul ARPIM de etică în promovarea medicamentelor*, adoptat de ARPIM pe 31.03.2006.
- *** (2012). Studiul *Pharma & Hospital Report* Cegedim Romania comunicat de presă: *Piața farmaceutică creșterea riscului sistemic*, 17 mai 2012.
- *** (2011). *The Pharmaceutical Industry in Figures Report* 2011, European Federation of Pharmaceutical Industries and Associations.
- *** (2011). Pharma & Biotech Industry Global Report 2011, IMAP.

Web Resources:

- Agenția Națională a Medicamentului și a Dispozitivelor Medicale (ANMDM), http:// www.anm.ro/anmdm/despre_noi.html
- Asociația Română a Producătorilor Internaționali de Medicamente (ARPIM), http:// www.arpim.ro/

European Federation of Pharmaceutical Industries and Associations, http://www.efpia.org/ European Medicines Agency (EMEA) http://www.ema.europa.eu/

- U.S. Food and Drug Administration (FDA), http://www.fda.gov/Drugs/ResourcesForYou/ Consumers/PrescriptionDrugAdvertising/ucm07 2025.htm
- Groupe de Recherche et d'Action pour la Santé (G.R.A.S), http://www.grouperechercheactionsante.com/