

Healthcare Advertising and the Demise of Modern Medicine?

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At first, I really couldn't believe what I was reading:

“The decline of medicine as a profession began,” according to the blog post, ***“when it became legal for doctors and hospitals to advertise.”***



Really? Now that's an effective, attention-getting lead sentence, especially for a seasoned healthcare **marketing** professional like myself. Evidently, the demise of modern medicine was at hand, and I had missed the fireworks.

The author's point was that doctors and hospitals shouldn't advertise, and if it all “disappeared tomorrow, we would all be better off.” This turned out to be an intriguing article. In the kindest of terms, it was way off base for many reasons. But interesting and intriguing nonetheless. Let me tell you about it and you can decide if reality and reason answers rant.

The scathing indictment of healthcare **advertising** turns out to be a couple years old. A doctor—evidently a senior-level surgeon who does not provide his name—wrote it. Between “decline of medicine” and “better off without **advertising**,” his key points included:

- He (and everyone) is bombarded by doctors **advertising** their wares like car dealers;

- Ads spout outrageous superiority claims of “best,” “newest,” “most advanced,” etc.;
- Every hospital claims to be “number one” in something;
- Expensive **advertising** for US hospitals has not been shown to be effective;
- Hospital ads only feed doctor egos or staff morale;
- His Yellow Pages ads (of 30 year ago) only produced non-paying or non-compliant patients;
- Creating unrealistic patient expectations is harmful; and
- Healthcare can’t or doesn’t deliver the “miracles” promised in **advertising**.

At first read, I pictured a cranky doctor-author with a residual bitterness from ineffective Yellow Page ads a few decades ago. (*Maybe? Maybe not? Just guessing.*) What’s more, the points in his issue list likely resonate with some doctors, particularly those providers who have limited experience with **marketing** and **advertising**.

To be clear, I don’t agree with the “Dr. Anonymous” premise that doctor/hospital **advertising** launched the decline of the medical profession, or the conclusion (in my words) that it should disappear for the greater good of mankind.

But, upon closer consideration, his passionate article does make some valid observations about (bad) doctor and hospital **advertising** when it comes across as: “[needy, cheesy, sleazy or greedy](#).” Thus, I have to agree that bad **advertising** is bad.

- **Bombarded?** The frequency count might be subjective. But effective doctor **advertising**—be it radio, television, print or Internet **advertising**—doesn’t endlessly hustle medical wares like car dealers. The core ingredient of good, creative, successful **advertising** is how the patient benefits. That’s informative and useful.
- **Outrageous?** I’d be offended, too. Deceptive, extreme or unfounded claims in medical **advertising** (or for any business) are unethical, unprofessional, inappropriate, and very likely, illegal. Ultimately, they are also ineffective.
- **Ego Ads?** Unfortunately, this happens. And when it occurs, it squanders resources. More accurately, it only looks like **advertising**. It’s actually internal politics.
- **Institutional ads?** Hospitals are new at **advertising**, but many have learned expensive lessons about the effectiveness of broad-based, “image only” campaigns. Carefully planned and target-audience specific **marketing** programs—such as direct mail, online/search **advertising**—are measurable and results-driven.
- **Unrealistic expectations?** Agree; refer to “deceptive and unethical” above. Done properly, however, professional service **advertising** does not shape unrealistic or misleading expectations. And in some ways, providing honest and accurate information is a desirable extension of patient awareness and informed consent.

You can find the anonymous surgeon-blogger online; we understand he’s a prolific author and frequent Twitter-writer. His thoughtful-but-off base post inspired me to revisit the sometimes-

bumpy intersection of doctors vs. **advertising**.

- Yes, there was a time—several decades ago—when doctors did not, even could not, advertise. After all this time, some physicians from that by-gone era still resent that the business of healthcare delivery is increasingly similar to other competitive businesses. And, for the last decade or so, **marketing** and **advertising** is a business essential.
- **Advertising** didn't cause competition (or the change), but it's a real-world business reality that benefits the provider or institution and the patient-customer. Until relatively recently, the patient or prospective patient was largely uninformed about costs, medical procedures, and even about the doctor's experience and reputation. Doctor and hospital **advertising**, **marketing** and communications programs have been a positive resource.

The wide availability, and the coming of age of the Internet, along with dynamic societal and regulatory shifts (namely the Affordable Care Act), has caused the nation's healthcare delivery system to reinvent itself.

Among many changes is the emergence of an empowered and informed patient-consumer. **Advertising**, **marketing**, medical practice websites and blogs, **social** media (such as Facebook, YouTube, Twitter) and other communications pathways promote prevention, healthy living and lifestyles, facilitate patient education, extend public awareness of available services, and many other benefits for consumers, families and caregivers.

In addition, hospitals, providers and insurance companies are increasingly transparent regarding costs and financial information. Patient surveys and satisfaction data for hospitals and doctors are widely available online, free of charge.

For doctors, hospitals and healthcare providers, ethical and high-quality **marketing** a business essential that communicates a **branded** message, extends professional reputation, and assists patients with important healthcare decisions.

Contemporary healthcare **marketing** and **advertising**:

- Aids in an informed selection of doctor, medical practice or hospital;
- Educates patients, family members and caregivers;
- Facilitates **social** connections, interaction and relationships;

So, in conclusion, I have to answer the good doctor's article: NO, WE WOULD NOT be better off if **advertising** by doctors and hospitals disappeared tomorrow. In fact, we—meaning everyone—would be unaware, uninformed and badly disadvantaged as patients and consumers.

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