The Attitudes and Beliefs of Oncology Nurse Practitioners Regarding Direct-to-Consumer Advertising of Prescription Medications

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Purpose/Objectives: To obtain information about the knowledge and attitudes of oncology nurse practitioners (ONPs) concerning the effect of direct-to-consumer (DTC) advertising of prescription medications on prescribing patterns.

Design: Exploratory survey.

Setting: Oncology Nursing Society Nurse Practitioner Special Interest Group members in the United States.

Sample: 221 of 376 ONPs completed the survey (58%).

Methods: Researcher-developed 12-question postal survey.

Main Research Variables: Knowledge and attitudes of ONPs on DTC advertising effects on prescribing patterns.

Findings: The findings were similar to those of previous studies of physicians regarding the number of visits when patients requested DTC-advertised medications. Major differences were the positive attitudes of ONPs toward potentially longer patient visits to explain and educate patients regarding medication requests based on DTC advertising and smaller percentages of ONPs who felt "pressured" to prescribe requested medications.

Conclusions: ONPs have mixed opinions regarding the practice of DTC advertising but do not believe that they are influenced heavily by advertising with regard to prescriptive practices. ONPs consider patient encounters for education purposes as appropriate and include information about requested DTC-advertised medications in their approach to patient care.

Implications for Nursing: This is an exploratory survey of a specialty group of ONPs. More research is needed to further explore the practice of DTC advertising and potential influences on the prescribing patterns of ONPs. DTC advertising of prescription medications is increasing; ONPs need to increase their knowledge base about the potential for influences of prescriptive practices.

Direct-to-consumer (DTC) advertising of prescription medications is a growing phenomenon. Spending on prescription drugs has become the fastest-growing part of the healthcare budget, although many of those dollars are concentrated on a small group of products (Rosenthal, Berndt, Donohue, Frank, & Epstein, 2002). DTC advertising of prescription medications for patients with cancer also has increased; advertisements have appeared for hormonal products used in the treatment of breast cancer, supportive care medications such as growth factors, and even oral chemotherapy agents for colon cancer (Viale, 2002).

A televised advertisement for pegfilgrastim (Neulasta®, Amgen Inc., Thousand Oaks, CA) created problems for an oncologist who described his reaction in the Journal of Clinical Oncology (Hannigan, 2003). The oncologist believed that the advertisement was misleading and implied that the physician in the commercial had administered chemotherapy without informing the patient of the risk of myelosuppression, essentially undermining the patient’s confidence in the treating physician. Advertisements depicting treatments for deep vein thrombosis, a potential complication for patients with cancer, also have entered the fray. DTC advertisements may play a role in influencing the prescribing habits of physicians and nurse practitioners (NPs), as well. Although the focus of this article is DTC advertisements regarding medications, DTC advertisements are branching out to include genetic testing, which also can affect patients with cancer and their families.

The effect of DTC advertising on prescribing patterns of NPs has not been well described or studied (Viale, 2003). Although the impact of DTC advertising on the prescribing habits of general physicians has been published, its effect on prescribing patterns of oncology NPs (ONPs) has not been reported in the literature. Physicians in various studies previously have reported different opinions about DTC advertising and its impact on prescribing patterns.