

EDITORIAL**Anti-Substitution Success / Medical Device Disaster**

by Llewellyn H. Rockwell, Jr.

Most of the people who understood drug substitution in Ada and Shawnee, Oklahoma, were for it. Last month in **PRIVATE PRACTICE** we reported on the unique media campaign waged by county medical societies, with the help of county pharmacists associations and the Congress of County Medical Societies, to change that. "We wanted to see if we could educate our patients in the dangers of drug substitution," said Orange Welborn, MD, an Ada general surgeon, "and motivate them to take action against the substitution bill that was then pending in our state legislature."

"It worked," adds Roy Kelley, a Shawnee surgeon. "It worked splendidly. It turned apathetic patients—and, I might add, doctors—into militant foes of substitution."

The story of the campaign, complete with reproductions of the ads used, was published in the March **PRIVATE PRACTICE**. The final results are now in.

In January 1976, before the campaign, people in Ada and Shawnee were asked, "Have you heard about the drug-substitution bill that is pending in the Oklahoma Senate?" If they answered yes, they were then asked to explain what it would mean, and whether they were for or against it. In Shawnee, 38% knew, 59% hadn't heard about it, and 3% weren't sure.

Of those who knew what it was, 52% were for substitution, 32% were against, and 6% were undecided. "Cheaper drugs will help older people"; "We will get the same drugs for less" were typical responses.

In Ada, 54% knew what substitution was; 45% didn't; one percent wasn't sure. Of that 54%, 43% were for substitution, 38% were against, and 18% were undecided. "The elderly will be helped by generic names"; and "Substitution will be cheaper" were two of the comments.

Combining the two cities, the county medical societies found that 48% had heard about substitution; 51% hadn't. And of that 48%, 46% were for it, 36% against, and 17% were undecided. "Our job," said surgeon Dr. J. B. Wallace of Ada, "was to change the percentages of people who had heard of substitution and of those who were against it."

The intensive five-week campaign combined newspaper ads, and TV and radio spots. The campaign ended with the county societies sponsoring a two-hour TV movie, with live breaks for telephoned questions to a panel of doctors and pharmacists.

After the media campaign, the percentage of people in Shawnee who had heard of substitution went from 38 to 57; in Ada, it went from

54 to 89. In Shawnee, the percentage of people who opposed substitution went from 32% to 77%; in Ada, from 38% to 84%.

"Even more important than this exciting change in public opinion," said Dr. Kelley, "was the action we were able to persuade our patients to take. Over 2,400 cards or letters of protest were sent to the state representatives and senators from Shawnee and Ada. After the first week, they were taking notice. After the campaign, they were completely on our side. I believe we have proved that this kind of campaign will work."

The Congress of County Medical Societies, Inc., agrees with Dr. Kelley, and the newspaper mats, video and audio tapes, and brochure text will be made available, free of charge, to any county society wishing to mount a similar campaign. And the CCMS is considering the implementation of similar campaigns against National Health Insurance and the 1962 "efficacy" amendments to the Food and Drug Act, which have caused the alarming fall-off in new drug development.

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What Congress did to the pharmaceutical industry, and indirectly to patients and doctors, with the 1962 amendments, it is