As an example of this, I cite a piece of literature that I used to get twice every week which mentioned the name of an antibiotic, and told me that this antibiotic was acceptable to children because of its good taste, and this of course for the teacher and for the practitioner is valueless.

Advertising literature is not intended as a basis on which the practicing physician can form an assessment of a product. This is so of all advertising, but in my opinion there has to be an essential difference between the advertising of drugs and the advertising of products like chewing gum, tobacco, and automobiles, because at least with these one has a choice.

Most clinicians are not in a position to evaluate the efficacy of new preparations and their patients have no choice but buy what is prescribed and submit to treatment which may be more costly and less efficacious than existing medications.

An example of this sort of thing is provided by the spate of expensive antibiotics touted a few years ago, all of which were said to deal with penicillin-resistant organisms and most of which have now disappeared.

I ran into this because for many years, up until 1964, I taught the pharmacology of antibiotics. As new ones were advertised I sought literature and information from the companies marketing them, since many were too new to have made an appearance in the usual scientific literature and one had to decide whether they were important or not.

One or two of these I examined rather thoroughly, and was alarmed to find out that as the undesirability of these became more and more obvious, the advertising became more strident and reached a crescendo before the drugs finally disappeared. One can only suspect that the companies concerned anticipated failure and wished to recoup as much of their loss as possible before it occurred, irrespective of the needs of the patient.

The classical example in my opinion of suppression of the critical faculties of the practitioner is in the distribution of multivitamin preparations. The advertising of these needs no description but drug companies employ good scientists who must know that extra vitamins are not needed by the bulk of the population—there is a very small segment, and we should be ashamed it exists which does show deficiencies I am told, but it is usually too poor to buy supplements.

Physicians apparently do not realize that the bulk of the population are in no need at all of vitamin supplements, or if they do, have had their opinions suppressed by advertising since virtually every pediatrician prescribes them. Probably more people in the United States take daily vitamins than have TV sets or cars. I prefer to think the physician is ignorant rather than dishonest. It is impossible to be so lenient with the drug companies. Treatment of imagined and suggested vitamin deficiency can only be seen by them as a lucrative source of income.

I can give you an example of the persuasiveness of this advertising. Many of my colleagues who know that vitamin deficiencies are unknown or virtually unknown nevertheless have wives who give daily vitamin capsules to their children. They are despite their professional knowledge unable to convince their own wives of the futility of this.