through research and working with us, that we'd do better to spend *all* our money with the AMA by taking out two-page spreads or 12-page inserts. It would require a lot more cultivating of us than is now done, and it would require their giving us facts. If they could show us it was to our advantage, we would do it. I don't know whether they would be able to do this or not."

"If I were the AMA advertising manager, I would give the pharmaceutical industry the best evidence I could dig up that JAMA is the No. 1 spokesman for science and practice in this country, that it is editorially, and as an advertising medium, the most reliable for advertising.

"I would also sell the mantle of the AMA. I would sell it as the only journal with only *medical* advertising. I would also try to disabuse the advertisers of the belief that the AMA is serving any special interests.

"In promoting and selling JAMA, I would use direct selling and direct mail. JAMA can be sold only by keeping the respect and esteem of the physician and the advertiser."

An executive of one of the large ethical drug firms, known in the industry as a leader, had this to say:

"If I were promoting the AMA publications, I would try to find out what JAMA can offer and can do that other publications can't. I would then undertake an aggressive mail-promotion campaign.

"I would do this, not because JAMA is in need of advertisers, but to build up the special journals and to protect JAMA if things in the medical field retrench.

"I would also do a step-by-step redesigning of the publication. I don't think JAMA needs any more personal representation than they now have. It doesn't need the personal effort and pressure that the others do, because of its unique position in the field."

A consultant on medical marketing and advertising had some specific suggestions to make:

"I think that space sales in JAMA could be increased by a direct-mail campaign to firms whose products are acceptable. Other medical journals do this and get good results.

"Such a campaign might then be followed up by visits from space salesmen. The campaign should emphasize the *values* of advertising in JAMA. For example, the special importance of JAMA to GP's, who are the predominant type of physician and the importance of the Seal of Acceptance to physicians who are impressed by the fact that the ads are strictly limited and controlled. Use *snob appeal.* Convince the advertisers that you are really a high-class publication.

"I also think that JAMA should be more adequately represented at trade association affairs. Its representatives should get around more and *meet* people.

"It is not *competitive* enough at present. It has enormous prestige, but perhaps it is almost too dignified in its refusal to compete vigorously with its rivals.

"Space selling is a tough business for JAMA since it must compete not only with other journals but also with the other media, such as detailing and direct mail. The advertiser must be convinced that space purchases in JAMA are the best investment."

One of the previously quoted medical ad agency heads dwelt on the necessity for continuous promotion:

"The AMA needs a promotion manager to develop direct mail to medical ad agencies and manufacturers. Tell the true facts on AMA publications over and over again. Then advertisers will be more conscious of their value and budget increases will be more apt to go to AMA than the throw-aways.

"But don't go in for the high-pressure personal selling of the throw-aways. It isn't necessary and will cheapen the AMA's position."

A large ethical drug manufacturer suggested more service-type promotion pieces:

"*Medical Economics* and *Modern Medicine* both send us promotional stuff that is of real value to us. "Medical Marketing", "Economic Facts" and information on the preparation of advertising is of definite value to us.

"I think the AMA, as a long-term proposition, should provide to advertisers and prospective advertisers helpful information with the idea that by giving helpful service, it can build a warm spot for itself with the advertisers."

Another large ethical drug manufacturer put the same thing this way:

"We like to have facts to base our decisions on. At the present time, much of what we do is based merely on precedence. We would like to know, have the