"I think the Pfizer ad is an excellent idea as long as it remains as good as it is, and I think it will. Other advertisers can't complain. As a matter of fact, I think the greatest opposition comes from the competitors of JAMA, not from other advertisers."

"The Pfizer ad is a decided relief from the rest of the magazine. It is the only bright spot in the book. The rest of JAMA should come up to it, both editorially and productionwise. It is probably the only thing in JAMA that the physician really enjoys."

"It looks as though Pfizer now owns JAMA, but considering the high reputation of JAMA, this isn't too serious a consideration. JAMA must sell space, and this is one way to do it. I have no objections to the Pfizer insert or to the binding-in of an insert of this kind. As a matter of fact, it somewhat dresses up the book. The trouble is, too many people will probably read 'Spectrum' and not JAMA."

Two different medical ad agency people made unfavorable comments about Spectrum:

"This sort of thing can lead to trouble since the AMA is apparently publishing the house organ of Pfizer. Occasional inserts are okay, even as extensive as Spectrum, but should not be done regularly. It is a coup for Pfizer's ad boys, but it is bad for the AMA."

"As for the Pfizer ad, many agencies and manufacturers think that it nullifies the effectiveness of their own ads. It is no answer that they can do the same thing. I'm in favor of anything that will make the doctors more interested in JAMA, but I don't think Spectrum does this. It is also generally felt that there is AMA sponsorship of Pfizer in the sense that clearance was made easier for them."

Three ethical drug manufacturers also made critical comments:

"JAMA has sold out to Pfizer. It has cheapened itself. You get the impression that it will sell the whole magazine if anyone will pay for it."

"The Spectrum ad is deplorable. The whole principle of accepting large inserts from big companies is bad. Suppose other advertisers wanted to do the same thing? I feel sorry for the AMA. They are prostituting themselves. It doesn't affect us, however."

"The idea of binding a house organ into JAMA is a poor idea because it detracts from the value of the book. However, if inserts of this type are accepted, they should be limited to number of times and pages. Otherwise, JAMA is bound to accept other advertisers' inserts like this, and will become a journal of inserts. In fairness to other advertisers, Spectrum should be dropped or others accepted. The latter would be preposterous."

Other comments were offered regarding other advertising policies. The most frequenly offered one concerned the interspersal of advertising with editorial matter. About a third of the advertisers interviewed definitely stated that they would like to see ads interspersed, since they felt that this would improve the readership of the ads. Roughly another third stated that as advertisers, they would like to see the ads interspersed, but they knew that the physicians would not like this change, so they were willing to go along with the present arrangement. Another third stated that they were satisfied with the present arrangements, and did not want the ads interspersed.

About a quarter of the advertisers felt strongly that there should be an Index of Advertisers. Though a large number of the people we interviewed did not explicitly state their stand on this subject, we received the impression that the addition of an advertiser index would be universally appreciated by the advertisers.

An example of the comments made regarding mixing advertising and editorial matter is the following comment by an ethical drug manufacturer:

"It's difficult to say what to do about the position of the ads. From the advertisers' point of view, of course, they should be interspersed. But from the doctors' point of view, they are better as they are. You would probably spoil the high standard and professional integrity of JAMA if you interspersed the ads."

This suggestion, made by a medical equipment manufacturer, was also made by several others:

"The Table of Contents is good on the cover. It could be made a little more artistic. If the book goes only to the GP, it is satisfactory as it is. But if it also goes to the specialist, the book should be divided into sections: compare it to Time magazine—that's sectionalized—national affairs, foreign affairs, etc.