

## **Advertising to the Consumer and Promotion of Products of Potential Misuse**

Pharmacy staff have a professional responsibility when selling **codeine-containing and pseudoephedrine-containing preparations, and other medicines of potential misuse**. It is important that they continue to maintain a supply of such preparations for the legitimate user but they must exercise a high degree of professional supervision to ensure supplies do not find their way to misusers. This requirement must be taken into consideration when advertising and marketing these medicines. As a reminder, it is important to note that tolerance may develop on repeated use of codeine, while unintentional excess use may lead to morphine-type dependence.

Obligation 3.15 of the Pharmacy Council of New Zealand Code of Ethics requires pharmacists to exercise professional judgement to prevent the supply of any medicine, complementary therapy, herbal remedy or other healthcare product likely to constitute a hazard to health or the supply of unnecessary or excessive quantities of these, particularly those which the pharmacist knows or should reasonably be expected to realise are likely to cause or have a potential for misuse, abuse or dependency. Clearly the Code expects and requires a high standard of social responsibility for the promotion and sale of these medicines.

Obligation 8.2 places the responsibility on the Charge Pharmacist for the form and content of advertisements relating to that pharmacy whether personally placed or by another staff member or organisation on behalf of the pharmacy. The Charge Pharmacist is the pharmacist who is present in the pharmacy at any particular time and is responsible for the overall control of the provision of pharmaceutical services from that place.

Obligation 3.16 of the Code requires that medicines which the Charge Pharmacist knows or should reasonably be expected to realise are likely to cause or have a potential for misuse, abuse or dependency are not accessible to the public for self-selection, and in Obligation 3.18 the requirement is for these medicines to be stored and displayed in such a way that the pharmacist can exert supervision over their sale.

Examples of over the counter medicines that have an established misuse potential include:

- all codeine-containing preparations
- all pseudoephedrine-containing preparations
- opioids
- sedating antihistamines, sleeping aids, and travel sickness medication
- laxatives which may be misused by people with anorexia.

The Charge Pharmacist must use only those methods that are of a standard consistent with the professional image of pharmacy when advertising a medicine or other healthcare product (Obligation 8.3). The Code adds commentary to this provision:

**"In developing advertising and promotions the pharmacist must ensure that the emphasis or focus of the advertisement or promotion is benefits of the service, medicine,**

**therapy or product other than its price.** It is to be noted that the responsibilities contained in this obligation extend to advertising materials supplied by manufacturers or other organisations such as banner and marketing groups."

Regardless of any promotional scheme the pharmacist must only sell, provide or promote the use of appropriate medicines in quantities appropriate to the clinical needs of the patient (Obligation 8.6).

The Charge Pharmacist must also ensure that advertisements or promotions do not promote misuse, injudicious or unsafe use or unnecessary or excessive use of any medicines (Obligation 8.7).

Finally, a pharmacist must only participate in promotional methods that do not encourage the public to equate medicines with ordinary articles of commerce (Obligation 8.4). This high standard reflects the special responsibilities and professionalism of health service delivery by pharmacists.

The full Code of Ethics can be downloaded from:

[www.pharmacycouncil.org.nz/cms\\_show\\_download.php?id=39](http://www.pharmacycouncil.org.nz/cms_show_download.php?id=39)

### **Advertising Standards Authority**

Advertisers should also be aware of the Therapeutic Products and Therapeutic Services Advertising Codes of the Advertising Code of the Advertising Standards Authority. These can be downloaded from [www.asa.co.nz/code\\_therapeutic\\_products.php](http://www.asa.co.nz/code_therapeutic_products.php) and [www.asa.co.nz/code\\_therapeutic\\_services.php](http://www.asa.co.nz/code_therapeutic_services.php)

Note that ASA Codes impose a high standard of social responsibility and in interpreting them emphasis is placed on the principles and the spirit of the Codes.

### **Recommendations**

As a result of these professional limitations, when advertising medicines of **potential misuse**, the following are recommended:

- Avoid self-selection or fish bowls; the products should not be displayed in any situation where the customer can self-select them, without supervision by staff. They should be displayed behind the counter on shelving close to the dispensary, and out of reach of the customer, where pharmacists can monitor the sale.
- Avoid dominant price stars. The price type should be no bigger than the type used for the product benefit or approved purpose.
- No incentives may be offered to purchase additional quantities.
- Special price coupons are not acceptable.
- Only smaller pack sizes should be advertised.
- Avoid competitions and associated special offers or gifts with purchase, even if there is no purchase necessary.
- Avoid company sponsored window display competitions for staff.
- Avoid price comparisons.

**It is permissible:**

- To use dummy boxes on the shelf for these products provided they are not bigger than the active product pack, so are not attracting attention.
- To have company posters or advertisements which do not mention price, on display in pharmacy, but not as a window display. Once price is mentioned this increases the promotional desirability for the product and is not appropriate that this be done in any way that is eye catching or likely to instigate a request for sale. The pharmacist has a professional duty to apply a very high standard for the sale of these products and must determine if the medicine is right for the consumer to purchase.

**Some pharmacists use the following statement for medicines with potential for abuse:**

The sale of this product will require discussion with a staff member to ensure safe and appropriate use and may require referral to a pharmacist. The sale may be recorded.

**The Self-Medication Industry Assn Code of Practice has further provisions:****from SMI Code Principle 3**

All medicine advertising and promotional activities must be prepared and executed with a high degree of social responsibility and shall conform to acceptable standards of competition. Advertisements and promotional activities shall not directly or indirectly encourage the indiscriminate, unnecessary or excessive use of any medicine.

**from SMI Code Principle 2**

Members shall not promote, or be in any way associated with, any scheme intended to encourage the sale of a non-prescription medicine if they are likely to introduce any hazard to the general public, or lower the tone of, or bring disrepute to the industry.

**from SMI Code Guideline 6.2**

An important part of the code is devoted to advertising and promotional activities with the prime focus on the need for a high degree of social responsibility in the preparation and execution of those activities.

**from SMI Code Guideline 6.3 Code of Conduct**

This Code of Conduct is to be read in conjunction with and as part of the industry code of Practice. It is to establish a common procedure for New Zealand manufacturers, marketers and distributors of non-prescription medicines to protect against the diversion of legitimate medicines, available primarily from pharmacy retail outlets, for the production of illicit drugs. It is considered inappropriate to offer specific sales incentives to pharmacy staff involving the sale of any products containing pseudoephedrine.

The full Code can be downloaded from [www.nzsmi.org.nz/CodeofPracticeJune06.doc](http://www.nzsmi.org.nz/CodeofPracticeJune06.doc)

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