Resolution 26-405

Calling for Reform of Direct-to-Consumer Pharmaceutical Advertising in the United States

Emerald Coast Medical Association

Whereas, The United States and New Zealand are the only two nations in the developed world that permit direct-to-consumer advertising (DTCA) of prescription pharmaceutical products — a regulatory posture that has no equivalent among peer nations with comparable drug approval standards, healthcare systems, or levels of pharmaceutical innovation; and

Whereas, Direct-to-consumer pharmaceutical advertising has grown into a multi-billion-dollar industry in the United States since the FDA relaxed broadcast advertising restrictions in 1997, with pharmaceutical companies spending more on advertising than on research and development for significant portions of their product portfolios; and

Whereas, A 2024 scoping review found that 62% of direct-to-consumer pharmaceutical video advertisements were of poor scientific quality, 48% were characterized as misleading, and 34% were characterized as potentially harmful, while 94% employed positive emotional appeals and fewer than 25% presented factual information about the mechanism or prevalence of the condition being treated; and

Whereas, Peer-reviewed research has established that patients who requested a specific prescription medication they had seen advertised were approximately 17 times more likely to receive that prescription than patients who did not make such a request — demonstrating that DTCA substantially distorts prescribing behavior independent of clinical appropriateness; and

Whereas, Direct-to-consumer advertising has been estimated to account for approximately 31% of the increase in U.S. drug spending since 1997, contributing materially to the cost burden borne by patients, employers, insurers, and federal healthcare programs; and

Whereas, Physicians consistently report feeling pressure to prescribe advertised medications in circumstances where the requested medication is not clinically indicated, undermining the integrity of the physician-patient relationship and shifting clinical decision-making from evidence-based medical judgment toward consumer demand driven by commercially motivated messaging; and

Whereas, The FDA launched a formal crackdown on deceptive prescription drug advertising in 2025, and HHS has issued new requirements for full safety disclosure in pharmaceutical advertising — actions that implicitly acknowledge the inadequacy of the existing regulatory framework; and

Whereas, The medical profession has a direct and material interest in preserving the integrity of the prescribing relationship and ensuring that patients enter clinical encounters with accurate, balanced health information rather than commercially crafted messaging designed to generate demand for specific branded products; therefore, be it

RESOLVED, That the Florida Medical Association declare that the current regime of direct-to-consumer prescription pharmaceutical advertising in the United States is inconsistent with sound

public health principles, evidence-based medicine, and the integrity of the physician-patient relationship; and be it further

RESOLVED, That the FMA call upon the United States Congress to enact legislation substantially restricting or prohibiting direct-to-consumer advertising of prescription pharmaceutical products, consistent with the regulatory standards of virtually all other developed nations; and be it further

RESOLVED, That pending legislative reform, the FMA calls upon the FDA to enforce rigorous accuracy, balance, and disclosure standards in all direct-to-consumer pharmaceutical advertising, including mandatory prominent disclosure of serious adverse effects, black box warnings, and comparative efficacy data where available; and be it further

RESOLVED, That the FMA supports transparency requirements that require pharmaceutical manufacturers to disclose the ratio of advertising expenditures to research and development expenditures on any product for which direct-to-consumer advertising is conducted; and be it further

RESOLVED, That the FMA communicate this resolution to the United States Congress, the FDA, the American Medical Association, and Florida's Congressional delegation.

Fiscal Note:

Description	Amount	Budget Narrative
50 Staff hours	$8,500	Can be accomplished with current staff
Total	$8,500	$0 added to the operating budget

Fiscal notes are an estimate of the cost to implement a given Resolution. All Resolutions that are adopted by the House of Delegates will be referred to the FMA Committee on Finance and Appropriations for fiscal consideration.

Reference Committee: IV – Medical Economics