Reviewer's report

Title: Quality of claims, references and the presentation of risk results in medical journal advertising: a comparative study in Australia, Malaysia and the United States.

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Reviewer: Richard A Hansen

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General: This is an interesting article by Othman and colleagues that evaluates information presented in journal advertising in three different countries. They sampled journal advertisements by purposefully selecting one journal from each of the countries (and also included a reference manual from Malaysia) and then selected the first 85 unique advertisements from each journal. Advertisements were reviewed in terms of clarity of claims, referencing of claims, and presentation of risk results. Strengths of the article include:

- Structured assessment of promotion across multiple countries
- Relatively rigorous approach to assessing rater reliability
- Focus on presentation of risk results in promotional material

Discretionary Revisions:

1. To be fair to the point that promotion is meant to change behavior, I believe it needs to be acknowledged that journal advertising is a form of promotion and not evidence-based dissemination of prescribing information. I suspect that the authors would contend that journal advertising should include only evidence-based information, but, this might be raised as a counterpoint in the discussion.

2. In the abstract and elsewhere in the article, the authors use double-negatives that make it difficult to decipher meaning. For example, “...significantly less unambiguous claims...” could be re-worded as “more ambiguous claims”. I realize the intent was likely to use the words of their classification system, but I don’t believe the meaning is lost if phrased most directly.

3. In the abstract it is not clear that relative risk reduction is believed to be the most meaningful presentation, although it is inferred. Given recent push to present risk information in absolute terms (see Woloshin and Schwartz for example), this should probably be more explicit.

4. Is MEDLINE equally representative of the scope of information that clinician’s rely on in each of the countries studied? For example, might physicians in different countries place different weight on the studies included in MEDLINE and would this be meaningful referencing practices in promotion? Maybe reference
materials are relied on more heavily in some countries. Not sure how to assess this though – so just a thought.

5. Do physicians make prescribing decisions based on journal advertising, or does it just increase awareness? I think there is a healthy skepticism about promotional claims, which could also vary by country. Might want to discuss this literature when interpreting results.

Minor Essential Revisions:

6. While the authors do a nice job of assessing inter-rater reliability, their classification of types of claims seems rather subjective and their presentation of this information is somewhat limited. I’d like more information or examples on the types of advertisements they reviewed. For example, could a more descriptive table 1 be presented that provides more information? Perhaps the advertisements within each of these four categories could be further grouped and the count could be provided within these more finite units. Overall, I’d like a sense of the distribution of the claims within each category so I can assess how subjective (or objective) their approach was.

7. Can the types of drugs advertised be provided, at least by therapeutic group? There may be a country bias that would influence which drugs were reviewed by country, which could also influence how well claims are made and cited. For example, if one country advertised more herbal or natural products, there would be a tendency for less evidence-based information to be available, leading to more ambiguous claims and fewer citations.

8. The distinction between “claims” and prescribing information seems a little troubling in general. At least in the US, the prescribing information is regulated (or at least reviewed) and information presented in this form would seem to be reasonable support of claims. Since the authors seem to imply that this type of clinical information is of lower quality and does not substantiate claims, I’d like to see more explicit discussion on this point. I might be misinterpreting the intent, but either way this discussion would help.

Major Compulsory Revisions

9. It is not clear why the comparison of Australia, Malaysia, and the United States is meaningful. The authors extensively describe the regulatory and promotional environment in these countries in the introduction, yet I never really understood why these comparisons are relevant. Please state why these countries were selected as the primary sampling unit, and why they are meaningful to the reader. Is there something unique about each country that makes it generalizable to a certain type of environment, or other countries?

10. Selection of a single journal from each country (plus 1 reference manual) seems to be a relatively big limitation. Namely, I suspect that journal advertising practices vary across journals, and that certain products or companies are more prolifically advertised in different journals. Companies are likely strategic in their selection of where to spend promotional dollars, and the quality of the promotion
might be tied to this (and advertising budget). This has implications for the 
generalizability and conclusions of this study, since they are sampling just a 
single unit within each country, but then comparing across countries. Thus, the 
authors assume that their selection of a single journal from each country 
represents the promotional practices in that country. If this assumption is not 
true, then their conclusions that the quality of claims, references, and 
presentation of risk information varies across these countries is biased. It would 
be helpful if they could support that their journal selection is representative of 
other primary care literature in the respective countries (with data and/or 
citations). At best, implications of this decision need to be discussed further in the 
limitations. For example, how variable are the types of promotions across 
journals within a given country? What are the types of products advertised in 
these journals and how does the product and/or company mix differ from other 
countries studied?

**Level of interest:** An article of limited interest

**Quality of written English:** Acceptable

**Statistical review:** Yes, but I do not feel adequately qualified to assess the 
statistics.

**Declaration of competing interests:**

In the past 5 years I have received research support from the National Institutes 
of Health, the Agency for Healthcare Research and Quality, the Drug 
Effectiveness Review Project, Takeda Pharmaceuticals, and GlaxoSmithKline.