



EDITORIAL

The day the world changed; or, How we “got into the game”

The world changed when Bob Dole shared his tale of erectile dysfunction over prime time television. Now, not only is ED known to millions, but whenever you mention “getting into the game,” everyone snickers. From little purple pills to ads suggesting that your shyness might be curable, direct-to-consumer advertising has become a huge part of pharmaceutical marketing. For the most part, in my mind, such efforts have had a positive effect—and not just on drug manufacturers’ bottom lines.

Discussing potentially stigmatizing issues such as impotence (oops, I meant ED) or depression have become much more socially acceptable. With politicians and celebrities openly discussing their most intimate problems, many more patients come to my office requesting help. And such dialogue has certainly raised awareness about important medical problems that have been relegated to embarrassed locker room conversations.

Of course, there are problems. We have all had patients self-diagnose incorrectly, demand unwarranted treatments, or request an expensive medication when an inexpensive, equally effective alternative exists. And for a condition to garner any attention, a patented product must be available to promote. For years I have lectured on sleep disorders, promoting the use of dopaminergic agents such as levodopa/carbidopa for restless legs syndrome. But only recently, with the approval of a new generation of expensive medications, have pharmaceutical firms begun educating the public.

In fact, I often wonder if conditions are made up to promote products. Take social anxiety disorder (SAD). Sure, there are people who can benefit from treatment, but I wonder if the vast majority of such patients are simply shy, reserved, or reticent. Now we have screening tools for SAD, patient education materials, and a raft of ads directed to promoting diagnosis and treatment. The downside of treatment and the potentially stigmatizing effect of labeling a trait as a problem are seldom considered. Likewise, fatigue is a treatable condition requiring expensive new medication; everyone with a bit of heartburn rushes for a pill. I really wish companies would refrain from touting a specific pill or treatment, and confine their message to, “If you think you have this problem, ask your doctor. Effective treatment is available.”

Nonetheless, I wouldn’t trade today’s situation with the “good ole days.” I am happy that patients actually can talk about sexual dysfunction or depression, and know they are in the company of the stars.


Jeff Susman, MD
 Editor, JFP

THE JOURNAL OF FAMILY PRACTICE

EDITOR

Jeffrey L. Susman, MD,
University of Cincinnati

ASSOCIATE EDITORS

• Clinical Inquiries

James Stevermer, MD, MSPH,
University of Missouri, Columbia

• Applied Evidence

Cheryl A. Flynn, MD, MS, State University
of New York, Syracuse

• Original Research

John Hickner, MD, MSc, University of
Chicago Pritzker School of Medicine

• Photo Rounds

Richard P. Usatine, MD, University of
Texas Health Sciences Center at San Antonio

CONSULTING EDITOR

• Clinical Inquiries

Bernard Ewigman, MD, MSPH,
University of Chicago Pritzker School of
Medicine

ASSISTANT EDITORS

• Clinical Inquiries

Burt Banks, MD, East Tennessee State
University, Bristol

Mark R. Ellis, MD, MSPH, Cox Family
Practice Residency, Springfield, Mo

Charissa Fotinos, MD, University of
Washington, Seattle

Rick Guthmann, MD, University of Illinois,
Chicago

Kevin Y. Kane, MD, MSPH, University
of Missouri, Columbia

Gary Kelsberg, MD, FAAFP, University
of Washington, Renton

Valerie J. King, MD, MPH, Oregon Health &
Science University, Portland

Todd D. McDiarmid, MD, Moses Cone
Family Medicine Residency, Greensboro, NC

Jon O. Neher, MD, University of Washington,
Renton

M. Norman Oliver, MD, MA, University
of Virginia, Charlottesville

Peter C. Smith, MD, University of Colorado
Health Sciences Center, Denver

Fred Tudiver, MD, East Tennessee State
University, Johnson City

• Reinventing Practice

Gary N. Fox, MD, St. Vincent Mercy
Medical Center, Toledo, Ohio

• Practice Alert

Doug Campos-Outcalt, MD, MPA,
University of Arizona, Phoenix

Eric Henley, MD, MPH, University of
Illinois, Rockford

• Guideline Update

Keith B. Holten, MD, University of
Cincinnati

• Language of Evidence

Goutham Rao, MD, MPA, University of
Pittsburgh

• Family Medicine Grand Rounds

Audrey Paulman, MD, MMM, and
Paul M. Paulman, MD, University of
Nebraska College of Medicine, Omaha

• Supplements

Rick Ricer, MD, University of Cincinnati

EDITORIAL BOARD

Frederick Chen, MD, MPH, University of
Washington, Seattle

Larry Culpepper, MD, MPH, Boston
University Medical Center, Boston, Mass

John W. Ely, MD, MSPH, University of
Iowa College of Medicine, Iowa City

Linda French, Michigan State University,
East Lansing

Theodore G. Ganiats, MD, University of
California-San Diego Health Outcomes
Assessment Program, La Jolla, Calif

Paul Gordon, MD, University of Arizona,
Tucson

Caryl J. Heaton, DO, University of Medicine
and Dentistry of New Jersey, Newark

Fred Miser, MD, MA, Ohio State
University, Columbus

Kevin Peterson, MD, MPH, University of
Minnesota, St Paul

Kendra Schwartz, MD, MSPH, Wayne
State University, Detroit, Mich

Douglas R. Smucker, MD, MPH, Moses Cone
Family Medicine Residency, Greensboro, NC

Jack Westfall, MD, University of Colorado

Direct editorial information and inquiries to:

EDITORIAL OFFICE

Health Professions Building, Department
of Family Medicine, PO Box 670582,
Cincinnati, OH 45267-0582.
Telephone: (513) 558-4021.

PUBLISHING OFFICES

Dowden Health Media, Inc.,
110 Summit Avenue, Montvale, NJ 07645.
Telephone: (201) 782-5735.
Fax: (201) 505-5890