# Chapter 19 Role of Social Media Promotion of Prescription Drugs on Patient Belief-system and Behaviour

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## ABSTRACT

In the current scenario, extremely little information exists on the uses, benefits, and limitations of social media for health communication among the patients and health professionals. Further, how it is affecting the patient belief system and behavior is even less studied, but it is emerging on the research horizon due to its growing significance in this digital age. This is a review article using a systematic approach. We performed a systematic literature search for papers that address social media–related challenges and opportunities for pharmaceutical drugs. It identifies the needs that propel patients to take recourse to SMPs; the benefits they derive from these and their limitations. This review article confirms that health-care information provided by the social media sites has been found to be beneficial in many ways for the stakeholders and that it complements existing patient-physician interaction. However, it has limitations that need to be explored and understood to avoid ill consequences.

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## INTRODUCTION

## **Direct-to-consumer Promotion**

The profile of the patient has undergone a massive change in recent years. They are confident, committed, curious, and do not hesitate to ask questions about their health status. To empower the patients, Direct-to-consumer promotion (DTCP) has played a substantial role. DTCP refers to the promotion of pharmaceutical products directly to the patient (Gu et al., 2011). According to a study, 59% of patients prefer to search for information at Social Media or Web as their primary source (Page, 2018). Study shows that some of the social media platforms are used more often than others. According to the study the level of digital engagement assessed was not at all associated with the firm size. Most of the firms direct their communication towards the general public (Costa et al., 2018).

A number of patients who are looking for information, and reading others experience about their own or that of their loved one's health issues through social media is rapidly growing. Pfizer has the most active social media pages on Facebook, and Twitter (Liang and Mackey, 2011). Social media sites like blogs of GlaxoSmithKline's and Facebook page of AstraZeneca's indicates for they are "intended for US residents/customers only," but there are no restrictions to non-US users. Novartis has built a social media platform called CML Earth (Chronic Myelogenous Leukemia) for patients suffering from leukemia (around the world). This site allows a patient to connect with other patients, doctors, and online communities.

Now, Indian patients are also using social media for acquiring information on medicines including prescription drugs. The e-patient concept is forcing doctors and pharma industry to modify their strategy about how to build a relationship with patients. With the help of these, apart from seeking and sharing information, patients also verify the cost of the medication (Mukherjee & Jha, 2017).

## METHODOLOGY FOR THE STUDY

In order to offer an impression of the impacts of social media promotion of pharmaceutical drugs on patients and on their relationships with physicians, systematic literature review have been conducted. To conduct the systematic literature review, the below-mentioned guidelines were followed as prescribed by the Preferred Reporting Items for Systematic Literature Reviews (PRISMA) (Moher et al., 2009). The process, thus, followed was (a) to identify potentially relevant research articles, (b) Screening of these articles on the basis of key-words, (c) eliminating the non-relevant research papers (d) inclusion of 13 relevant papers on Direct-to-consumer (DTC) promotion and (e) arriving at 136 relevant research articles.

To identify the relevant articles a search was made on the basis of four key terms. These are:

a) "Social media" or blog or Facebook or Twitter b) "Prescription drugs" c) "Patient" d) "physician" or "doctor".

The process of article search was started from February 7, 2017, using the following 08 e-databases: Google Scholar, Communication Abstracts, PLOS one, NEJM catalyst, Pharma Phorum, Research Gate, Elsevier, and PubMed Central and this process lasted till 30<sup>th</sup> April 2019. 17 more pages are available in the full version of this document, which may be purchased using the "Add to Cart" button on the publisher's webpage:

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