

Many US Cancer Centers Accused of Misleading Advertising

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Among US cancer centers, the vast majority of the top spenders in advertising in 2017 used deceptive marketing that conveyed a false sense of hope, according to the consumer watchdog group, Truth in Advertising (TINA.org).

The cancer centers include such prestigious institutions as MD Anderson in Houston, Memorial Sloan Kettering in New York City, Dana-Farber in Boston, and Moffitt in Tampa, Florida.

[Truth in Advertising's 1-year investigation](#) into the direct-to-consumer television and digital marketing materials showed that 90% (43/48) featured positive patient testimonials about treatment outcomes in cancers with a 5-year survival of less than 50%.

None of the testimonials mentioned that the responses were not typical for that particular cancer type, [as legally required by the Federal Trade Commission \(FTC\)](#).

Almost half of the exceptional response testimonials involved patients with stage 4 cancer, and 17% attributed treatment success to participation in a clinical trial, without disclosing the inherent limitations or risks, the investigation revealed.

The investigative report, entitled "[US Cancer Centers: Deceptive Marketing of Hope](#)," was published online October 22.

"Exploiting False Hope"

Cancer patients and their families face "devastating odds of survival and have a right to know the truth," said Bonnie Patten, executive director of TINA.org, in a statement. "To sway this uniquely susceptible population's decisions as to where they should seek treatment by exploiting false hope is simply not acceptable."

While overall cancer mortality rates have declined, US cancer centers are spending record amounts on direct-to-consumer marketing. Annual spending on advertising has shot up by 320% over a 9-year period, from \$54 million in 2005 to \$173 million in 2014, according to the report. Today, the National Cancer Institute estimates that more than 1200 cancer centers compete for [the \\$150 billion consumers spend](#) on healthcare annually.

As a result of its findings, TINA.org has filed a [misleading advertising complaint with the FTC](#) against Cancer Treatment Centers of America (CTCA), based in Boca Raton, Florida. According to the watchdog group, CTCA [ranked highest on its list of cancer centers](#) that spent money on advertising in 2017, doling out \$69 million of the \$140 million spent that year by US cancer centers to produce [more than 130 exceptional patient testimonials that were circulated in 2018](#).

In addition, TINA.org has put the [42 other cancer centers on notice with letters](#) seeking removal of "deceptive testimonials from its marketing materials."

"TINA.org hopes that these cancer centers will do the right thing and either correct the deceptive ads or do away with them completely," Patten told Medscape Medical News. In 2019, the organization will audit its findings to see how many cancer centers have voluntarily complied with truth in advertising laws by either remediating or removing testimonials.

"At that time, a determination will be made as to whether we will file a complaint against any of the cancer centers with the appropriate governmental authorities," Patten explained.

She expects that the FTC will take action against CTCA since the for-profit center is "a repeat offender with the agency." Although prior legal action brought by the FTC against CTCA was settled in 1996, the agreement to stop using deceptive testimonials in marketing materials ended in 2016.

This is the first time that TINA.org has investigated marketing practices for US cancer centers, Patten noted, adding that "it won't be our last..."

Cancer Centers Respond

Kim Polacek, spokesperson for strategic communications at Moffitt Cancer Center, told Medscape Medical News that their patient testimonials "provide an outlet for our patients and their loved ones to share their cancer journey in a transparent and authentic way, regardless of the outcome."

Importantly, Polacek added that Moffitt treatment teams discuss personalized treatment options and a range of potential outcomes with all patients prior to the start of any plan.

At Memorial Sloan Kettering, Caitlin Hool, senior manager in the department of communications, said they "stand by the integrity of our communications and the importance of enabling our patients to share their experience."

Hool pointed out that nearly half of the items flagged by TINA.org as "deceptive" were actually newsletter articles written by survivors who wanted to share "... stories of inspiration, hope and challenge." The balance of the marketing materials called into question were made up of unscripted patient videos and educational articles, [Hool said](#).

"Memorial Sloan Kettering holds itself to a high standard in communicating accurate and timely information about cancer and cancer treatment to the general public, patients and their families, and cancer survivors," said Hool.

Laura Sussman, [program director for communications in public relations](#) at MD Anderson, said they are "committed to truthful advertising." She added that "MD Anderson takes great care to ensure our messages are accurate, appropriate and responsible."

Sussman noted that the TINA report suggests that editorial content, including information on MD Anderson's website blog, is an example of advertising.

"This blog content focuses on the patients' cancer journey," she said. "It is often written by the patients themselves and includes information on side effects and loss of loved ones, in addition to stories about survivorship. Our blog also includes information from our doctors, nurses, and researchers and others involved in the patient experience."

Ellen Berlin, director of media relations at Dana-Farber Cancer Institute, said they are committed to providing accurate and trustworthy advertising.

"Many patients appreciate the opportunity to share their individual journey and hear about the experiences of others. As with any medical treatment, every patient is unique and specific treatment options are developed and provided by clinicians working directly with patients and their families."

[In an NBC News story](#), big spender CTCA stated that "to ensure clinical accuracy and tell our story in an informative and responsible manner, all of our advertising undergoes meticulous review prior to publication."

The organization noted that all of the patients volunteered to share their stories to help others who receive a similar diagnosis, and that they received no compensation.

2005 Study Shows the Problem Is Not New

The use of patient testimonials to help health care consumers decide where to get a second opinion or go for treatment is not new.

Results from a 2005 survey of the advertising used by 17 top US medical centers showed that consumers were more likely to trust first-person testimonials that came from a medical institution than another source. The survey also revealed that while the medical centers had a rigorous review process for the advertising they used to attract research subjects, none of them had anything comparable for reviewing the marketing materials aimed at patients.

"Many of the ads seemed to place the interests of the medical center before the interests of the patients," write Robin J. Larson, MD, MPH, of the Department of Veterans Affairs Medical Center in White River Junction, Vermont, and colleagues [in a report](#) published in 2005 in the Archives of Internal Medicine.

The most commonly used marketing strategies appealed to the emotions (61.5%), promoted the prestige of the institution (60.7%), focused on a symptom or disease (53.3%), and advertised events and offers that would increase consumer contact (47.5%). Of the 21 ads for single interventions, 38% were unproved and 29% were cosmetic. None quantified positive claims and only one touched on potential harms.

More attention needs to be paid to the conflict of interest between public health and the need to generate revenue, the study authors wrote. They also suggested that a formal institutional preview of ads could be adapted from the US Food and Drug Administration's guidelines for advertising to attract research participants, adding: "Why should patients get less protection than research subjects?"

[In an accompanying editorial](#), Philip Greenland, MD, professor of cardiology at the Feinberg School of Medicine at Northwestern University, Chicago, Illinois, and a senior editor of JAMA, pointed out that each profession "is granted a monopoly over the use of a body of knowledge." This power comes with the expectation that members will act with integrity to provide an altruistic service, he said.

"For physicians this means consistently placing the interests of individual patients and society above their own," writes Greenland, then editor of the Archives of Internal Medicine.

"We must remember that we accepted the duty of caring for patients when we entered medicine, and we must continue to practice with professional attitudes and behaviors no matter what pressures we face. If we do not, the consequences will undoubtedly be a further erosion of confidence and additional loss of control over our own professional work."

The persons referenced in this article have disclosed no relevant financial relationships.

The full report is available on the [TINA.org website](#)

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