


**VIEW FROM PRIMARY CARE**

**“Nine out of ten patients survived”**

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So it’s finally happened: the NHS is being allowed to enter the world of fluff, glamour and backstabbing, or advertising as it’s known by most. This licence to kill off the competition, literally, may well be shrouded in regulatory codes to give it authenticity but this of course is advertising in its best form – dressing up something evil and destructive to make it look real and above board.

If I sound suspicious of this idea then it’s because maybe I am. The pharmaceutical industry lavished GPs with expensive gifts, trips, food and drinks for years. But they stamped that out, didn’t they? Oh, how those educational meetings at five-star hotels in foreign cities, supping Bollinger with the reps are missed. I don’t know who felt it the most. Those who had come to rely on conferences providing family holidays or those heading for general practice who saw the freebie rug pulled out from under them before they’d had the chance to enjoy the benefits of the combination TV and video used to screen a company’s latest educational advert and conveniently forgotten by the drug rep afterwards.

But now once again the NHS is to re-invent the wheel, as it always does. Very soon it would appear that NHS providers would have to promote their services, and indeed compare themselves with other providers. What fun GPs are going to haveenvy is one of the new ‘Trust reps’ who will take the place of ‘drug reps’. In bygone days, to save time I know some GPs would schedule two competing pharmaceutical reps in to see them at the same time, and then watch them play ‘pharma tennis’ as one tried to convince the other that their product was better. It was easy really; if the reps wanted an audience with the GP they had to play ball. It should be fun watching the Trusts competing in this way: “... well, six of your sterilisations fell pregnant last year”. “At least all of ours left the hospital.”

Then, of course, there will be the inevitable return to the lavishly evening meetings at splendid hotels and restaurants. After all, the guidance does say that costs of hotels, food, and so on could not exceed the level recipients would normally choose when paying for themselves. A GP’s host may no longer be the pharmaceutical industry; it’s now the new GMS contract so “as a GP I can honestly say [cue resting fingers against cheek and caring smile to complete empathic look] that my standards remain as high as ever.”

So they’ll be trying to get our business, and the patients’ business too. Get ready for irritating and tranquillity-destroying cold calls and text messages informing us how we’ve made it into the last ten for a dream operation of our choice, that the thousandth caller will win a state-of-the-art open-heart surgery suite where coils, implants and ‘depos’ can be provided faster and quicker than ever before, or that if we order now we’ll receive a free plasma screen so patients can watch their procedure in high definition that ‘puts you where the action is’. Hells know what will happen if they are invited to ‘press the red button’. A link to some medical negligence claim company no doubt.

At the moment the focus is on hospital Trusts promoting their services but primary care is included in this little wheeze. I guess it won’t be long before we see a fleet of new Minis with smart paint jobs advertising their driver’s practice. Mine would probably be along the lines of: “At the Open Heart Surgery you’ll be welcomed by open minds and arms”. Cheesy I know, but what adverts aren’t?

TV adverts will soon follow. Bearing in mind the current litigation climate, other businesses may well place them after those aforementioned and irritating medical negligence claim adverts. This way the public can be told: “There’s never been a successful claim against our practice – so if you want great health care come and join us, but if you’re after a fast buck we’ll refer you for a colonoscopy”. I’ve already seen potential practice adverts for our local newspapers. Not that I’m interested of course, but it’s important to know what our competition may be doing. One such mock-up informed its readers that: “Our practice has more fit and healthy patients than any other practice around”. Then with a group photo of the practice team, who looked somewhat high, the advert announced: “How do we achieve this? Well, because we care, and take great care of our patients who are like family to us – and after all, you’re worth it”. I enjoyed the irony, as I don’t like to see my family too often either. Of course, the subliminal message of this advert would encourage the fit and well to join the practice’s list whilst ensuring that those with the slightest blemish of imperfection felt they couldn’t. I had to concede that the strategy was clever, and had a certain appeal.

But I can feel myself being sucked in. I’m still really suspicious of this idea or am I? All this gone before may simply be the bluff of great advertising!