

Submission to the Therapeutic Goods Administration – New Advertising Rules

Penington Institute welcomes the opportunity to comment on the Therapeutic Goods Administration's *Advertising Code 2018 Guidance*. We support the information featured in the consultation draft, which will protect consumers and help them make informed choices about the therapeutic goods that they purchase.

Recently, we released *Australia's Annual Overdose Report 2018*, which found that an increasing number of Australians are dying from accidental drug overdoses.¹ In 2016, there were a total of 2,177 drug-related deaths in Australia, a significant increase from 15 years ago with 1,231 deaths recorded in 2002.² Of the 2,177 deaths, 1,704 were accidental, compared to 903 accidental deaths in 2002.³ So clearly much more must be done to confront drug overdose in Australia, particularly accidental deaths from drugs including prescription drugs such as opioids (e.g. codeine, morphine and oxycodone).

Penington Institute therefore strongly supports the guidance on rules “relating to particular therapeutic goods”. This is especially important in the context of the warning statement “INCORRECT USE COULD BE HARMFUL” for analgesic medicines, which includes opioid drugs. 20 years ago, the most common drug causing accidental death was the illicit opioid heroin; however, today it is pharmaceutical opioids responsible for the majority of overdose deaths.⁴

Ensuring that people are aware of the dangers of these drugs and the very real risk of overdose is of the highest priority for Penington Institute. Many consumers, for example, may not be aware that taking opioids in combination with alcohol or benzodiazepines (e.g. diazepam, brand name Valium) put them at serious risk of overdose. This is true for people with long-term chronic pain issues as well as those taking opioids for the first time for a temporary ailment.

Breaking the link between increases in the prescription of these drugs and increased mortality is a key focus; however, much more must also be done to educate and caution the public against risky use of these pharmaceutical drugs. Ensuring that these drugs cannot be advertised as having “relaxing, tension-relieving, sedative or stimulating effects” is, therefore, a sound decision.

¹ Penington Institute 2018. *Australia's Annual Overdose Report 2018*, August, Melbourne: Penington Institute.

² Ibid.

³ Ibid.

⁴ Ibid.

The opioid crisis afflicting the United States, which is responsible for the majority of the estimated 72,000 drug overdose deaths last year,⁵ highlights the importance of closely regulating the promotion of a therapeutic goods including endorsement and testimonials. In the mid-1990's various pharmaceutical companies including Purdue Pharma aggressively promoted and marketed oxycodone (brand name OxyContin), with sales growing from \$48 million in 1996 to \$1.1 billion in 2000.⁶ This demonstrates the significant impact of concerted promotional and marketing campaigns on the uptake and use of therapeutic goods by consumers. Sensibly restricting this ability through measures such as prohibiting endorsements by health practitioners and professionals and not allowing testimonials from those involved with the production and sale of a good, are important to protecting Australian consumers.

Penington Institute also welcomes new changes to the Code from previous versions, including that advertising must not undermine public health campaigns and a revised definition of “serious” in determining whether a representation about a disease, condition, ailment or defect is a restricted representation.

⁵ Centres for Disease Control and Prevention, “Provisional Drug Overdose Death Counts”, see <https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm>.

⁶ Art Van Zee, “The Promotion and Marketing of OxyContin: Commercial Triumph, Public Health Tragedy”, (2009), *American Journal of Public Health*, 99(2): 221 – 227.