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REVIEW ARTICLE

Medical advertising

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Abstract

Social media should be handled with caution and ethical awareness . No we run the risk of disqualifying the practice of medicine and dismantle the honesty bond built between the doctor and the population.

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We live in an increasingly consumerist society, in which values and principles are easily diluted. In this scenario, medicine invariably acts as a custodian of values, protecting its practice from sensationalism, self-promotion, and commercialization.

Chapter XIII of the Brazilian Code of Medical Ethics dedicates 13 articles to medical advertising, with the aim of protecting society from potential professional misconduct.

The Brazilian Federal Council of Medicine (CFM), through Resolution 1974/11, published the Handbook of Medical Advertising, a guide that physicians should follow to ensure that the advertisement of their abilities or even the introduction of new procedures are always conducted within the limits of ethics.

In essence, article 3 of this resolution summarizes the principles guiding medical publicity:

"*The physician shall not:*

a) Advertise, when he/she is not a specialist, that he/she treats specific organic systems, organs or illnesses, as this can lead to confusion with publicizing a speciality;

b) Advertise medical devices attributing them superior capabilities;

c) Participate in the advertising of companies or products related to medicine, including medical trade unions or associations;

d) Allow his/her name to be included in misleading advertising of any nature;

e) Allow his/her name to be in any media, including the Internet, associated with articles or stories not based on scientific rigor;

f) Advertise methods or techniques not accepted by the scientific community;

g) Expose the image of his/her patient as a way of divulging a technique, a method or the result of a treatment, even with the patient's express authorization, except for the provisions of art. 10 of this resolution;

h) Advertise the use of exclusive techniques;

i) Offer his/her services by means of group instalment plans or similar modalities;

j) Offer consulting services to patients and relatives as a replacement for face-to-face medical consultation;

k) Guarantee, promise, or imply good results of a treatment;

l) It is expressly forbidden to advertise a graduate course aimed at pedagogical qualification in medical specialties and their fields of practice, even if completed in official institutions or institutions accredited by the latter, except when related to a speciality and field of *practice registered in the Council of Medicine.*

We are entirely dedicated to providing care to the population. Therefore, our foundations should be built on solid and consolidated knowledge that is accepted by the scientific community. So, misleading advertising and unfounded materials are rightly condemned, as are the diffusion of techniques and methods that have not been accepted by the medical profession and the offer of supposedly exclusive therapies.

We deal with lives and vulnerable individuals. Ethical misconduct cannot and should not be allowed. We should never expose patients for our self-promotion or to diffuse techniques, methods, or results of treatments, even with their authorization.

Particularly as an expression of respect for others, we cannot promise that the therapies we indicate will yield good results, as not even we have that guarantee. Organisms all react differently and we need to consider this individuality of response, even when prescribing the adequate treatment.

Exaggeration and aggressively over-the-top methods, even with regard to established procedures, that neglect technical concepts with the aim of promoting their practice are a superimposition of personal interests on collective interests and on the moral of the profession.

The concept of citizenship requires the truth and only the truth. Physicians make this commitment from the first day of class in the schools of medicine and cannot violate this principle.

Moreover, social media should be dealt with using caution and ethical conscience. CFM Resolution 2.133/2015 is there to remind us of this point. The presence of medical information in the social media was being abusive, mainly with regard to results of medical procedures, the classic "before" and "after," and photographs of patients and surgical procedures. This exposure is vulgar and can delegitimize the entire profession. Moreover, virtual medical consultations performed via the media are concerning; many are not aware that this practice is in disagreement with the principles of the Brazilian Code of Medical Ethics.

Protecting the patient and ensuring his/her well-being and comfort should always be paramount. We cannot risk to depreciate the practice of medicine and break the relationship of honesty between physicians and the population.

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