



Aboriginal and Torres Strait  
Islander Health Practice  
Chinese Medicine  
Chiropractic  
Dental  
Medical  
Medical Radiation Practice  
Nursing and Midwifery  
Occupational Therapy  
Optometry  
Osteopathy  
Pharmacy  
Physiotherapy  
Podiatry  
Psychology

## Australian Health Practitioner Regulation Agency

Response template: Public consultation - revised *Guidelines for advertising regulated health services*

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National Boards and the Australian Health Practitioner Regulation Agency (AHPRA) are seeking feedback about the revised *Guidelines for advertising regulated health services*.

This response template is an alternative to providing your response through the online platform available on the consultation [website](#).

### IMPORTANT INFORMATION

#### Privacy

Your response will be anonymous unless you choose to provide your name and/or the name of your organisation.

The information collected will be used by AHPRA to evaluate the revised guidelines. The information will be handled in accordance with AHPRA's privacy policy available [here](#).

#### Publication of responses

Published responses will include the name (if provided) of the individual and/or the organisation that made the response.

You must let us know if you do **not** want us to publish your response.

Please see the [public consultation papers](#) for more information about publication of responses.

#### Submitting your response

Please send your response to: [AHPRA.consultation@ahpra.gov.au](mailto:AHPRA.consultation@ahpra.gov.au)

Please use the subject line: Feedback on guidelines for advertising regulated health services

Responses are due by: **26 November 2019**

### General information about your response

Are you responding on behalf of an organisation?	
<b>Yes</b>	What is the name of your organisation? <b>Australian Medical Association</b>
No	Are you a registered health practitioner? Yes/No If yes, which profession(s)?  Are you a student? Yes/No If yes, which profession?
We may need to contact you about your response. Please write your name and contact details below. <b>(Skip if you wish to remain anonymous)</b>	
Name (optional)	
Contact details (optional)	

### Public consultation questions

Please ensure you have read the [public consultation papers](#) before providing feedback as the questions are specific to the revised Guidelines for advertising regulated health services.

Use the corresponding text boxes to provide your responses. You do not need to answer every question if you have no comment.

<b>1. How clear are the revised guidelines?</b>
<b>2. How relevant is the content of the revised guidelines?</b>
<b>3. Please describe any content that needs to be changed or deleted in the revised guidelines.</b>

**4. Should some of the content be moved out of the revised guidelines to be published in the advertising resources section of the AHPRA website instead?**

**If yes, please describe what should be moved and your reasons why.**

**5. How helpful is the structure of the revised guidelines?**

**6. Are the flow charts and diagrams helpful?**

**Please explain your answer.**

**7. Is there anything that needs to be added to the revised guidelines?**

While specifically referring to doctors (medical practitioners), these comments are equally relevant to other health practitioners.

There are two issues that should be addressed within the revised guidelines:

**4.1 False, misleading or deceptive advertising**

The 4<sup>th</sup> dot point under 4.1 says that advertising may be false, misleading or deceptive when it:

*makes unqualified claims about the effectiveness of treatments by listing health conditions that a treatment or service can 'assist with' or 'treat'.*

The AMA strongly recommends AHPRA add an additional sentence to this dot point to highlight the increasingly problematic issue of 'medicalisation' of normal human states of health. This is where a normal biological process such as baldness or wrinkles, or even normal variation in physical appearance, is pathologised and marketed as a 'medical condition' which can be 'diagnosed and

treated' by particular practitioners. Medicalisation can contribute to both overuse and misuse of health services by encouraging consumers to use a regulated health service that they do not need and is not clinically indicated, placing particularly vulnerable patients at risk of harm. We strongly recommend AHPRA amend the dot point to read:

*makes unqualified claims about the effectiveness of treatments by listing health conditions that a treatment or service can 'assist with' or 'treat'. This includes promoting normal states of health as 'health conditions' that a service can 'assist with' or 'treat.'*

### 4.3 Testimonials

Many doctors advertise their services on social media platforms such as Facebook and Instagram which allow direct interaction between the doctor (or the doctor's surgery) and patients as well as between patients (or potential patients) and each other.

Doctors can post photos, videos, articles or other sources of information on their platforms for patients to not only view but make comment on. While the information posted by the doctor may be in accordance with the advertising guidelines, the comments from patients and others can easily blur the line of what may be considered a testimonial, particularly where patients interact with each other, making positive comments about their own treatments and perhaps encouraging others to undertake the treatments as well. While a patient may not post such comments with the intention of making a formal testimonial, the comments may effectively serve as such.

As doctors are increasingly using social media platforms to advertise their services, AHPRA should consider whether or not these more informal patient comments and interactions should be viewed as testimonials for the purposes of the guidelines. If so, this should be highlighted in the guidelines and included in the table on page 13.

## **8. It is proposed that the guidelines will be reviewed every five years, or earlier if required.**

**Is this reasonable?**

**Please explain your answer.**

Doctors and other health practitioners increasingly use social media to advertise their services and market their 'brands' in order to attract 'customers' (patients). The ever-expanding variety of social media platforms and ways of advertising to, and interacting with, patients (and prospective patients) allows doctors and other health practitioners to continually market their services in new and innovative ways; for example, by using 'influencers' or creating private patient groups or 'fan clubs'.

It is important that the guidelines are reviewed frequently enough to be relevant and responsive to new and innovative ways doctors and other health practitioners will use social media to advertise and promote their services.

## **9. Please describe anything else the National Boards should consider in the review of the guidelines.**

Using social media to advertise medical and other health care services can potentially benefit patients (eg, providing patient education); however, using social media to advertise services can also lead to potential harms for patients if not undertaken responsibly (eg, advertising that influences particularly vulnerable patients to make poor health care decisions such as undertaking treatments that are not clinically indicated).

As the core role of AHPRA and the National Boards is to protect the public, it is essential that AHPRA consider both the overall effect of the guidelines and their application in order to ensure the net result is not simply a failure to fulfil the aims of patient care and safety. If the guidelines can be easily undermined by doctors or other health practitioners, or the guidelines are simply not relevant to changing advertising practices, then they are failing to protect the public. In addition to the need

for the guidelines themselves to be responsive and relevant to changing advertising practices, it is essential that AHPRA and the National Boards dedicate sufficient time and resources to appropriately monitor and enforce compliance with the advertising provisions, particularly in relation to the use of social media for advertising and marketing of health services.

**10. Please add any other comments or suggestions for the revised guidelines.**

**Thank you!**

**Thank you for participating in the consultation.**

Your answers will be used by the National Boards and AHPRA to improve the Guidelines for advertising regulated health services.