

TV ads for psoriasis and eczema medications portray few people of color

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Commercials from pharmaceutical companies advertising medication to treat psoriasis and eczema lack people from racial and ethnic minorities, according to research from the Perelman School of Medicine at the University of Pennsylvania. The under-representation of people of color in these ads is disproportional to the diverse population of patients living with these conditions. What's more, among all the people who could benefit from the most effective psoriasis or eczema medications, non-white patients are less likely to receive them. The research, which was published today in the journal Cutis, suggests that the low numbers of minorities in pharmaceutical ads may play a role in the treatment disparities that medications could work for them and are therefore are seen in real life.

After watching major TV networks from 5:00 to Penn spotted 40 commercials for psoriasis or eczema medication. In them, there were 81 characters portraved as having psoriasis and 80 characters portrayed as having eczema. Ninetythree percent of the characters in the psoriasis commercials appeared to be white, and 54 percent of the characters in the eczema commercial appeared to be white.

"While greater representation of white adults in psoriasis commercials reflects our current understanding that psoriasis is most common among white people, psoriasis is still a common skin condition among other races and ethnicities that are not currently well-represented in the ads," said senior author Junko Takeshita, MD, Ph.D., MSCE, an assistant professor of Dermatology and Epidemiology. "In the case of eczema, it is especially problematic that white children are mostly shown considering that the rates of eczema are higher among Black children."

The researchers decided to investigate representation in television ads for these dermatologic medications in order to assess whether direct-to-consumer advertising could be playing a part in more white patients receiving pharmaceutical treatments for both psoriasis and eczema.

"There is still a lot of speculation around why Black patients and those of other non-white racial and ethnic backgrounds are less likely to be treated for psoriasis or eczema with the most effective medications," said lead author Alexis Holmes, BA, a fourth-year medical student in the Perelman School of Medicine. "We don't know if clinicians are less likely to offer the medications to their non-white patients, if patients are not aware that the not asking their clinicians about the drugs, or if there are other issues like accessibility. There are likely multiple variables affecting the rates of 11:00 pm over 14 consecutive days, researchers at prescription among non-white patients. Considering the wide reach that direct-to-consumer ads have among the general public, we thought that they were an important source of information to study."

> While there's no treatment that can cure eczema or psoriasis, medication for the conditions can bring relief to patients, so there's value in increasing the number of patients who have access to the medications and understand how the medications can be helpful. When left untreated, psoriasis and eczema can cause severe itching, pain, and irritation. Both conditions are also linked with other major medical issues such as inflammation of the joints in the case of psoriasis and asthma in the case of eczema.

"It's critical that patients have information about their condition and the possible ways that their symptoms can be managed," Holmes said. "We hope our research encourages advertisers to not just sell their respective products but ensure that advertisers are representing the wide-spectrum of individuals who would benefit from use of said products."



The research should also urge clinicians to be more aware of the potential impact that the ads could have on their own practice and unconscious biases so as not to further disadvantage those patients who may not see themselves in an ad for the latest medication.

"Clinicians are tasked with the challenge of getting as much information as they can from their patients in order to guide how they counsel and educate their patients, in return, within a visit that is typically too short," Takeshita said. "If clinicians recognize that these ads may contribute to gaps in knowledge about available treatments among racial and ethnic minorities, they can play an important role in filling these gaps by spending a few extra minutes discussing treatments with these patients."

Other Penn co-authors are Cheyenne Williams, Shiyu Wang, and Frances Barg.

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