

NEW CHANNELS IN TV

National TV advertising may be losing some of its luster, but disease-specific cable and local broadcasts beckon, offering advertisers a cheaper and more targeted means of reaching patient communities. Leading the way are “dLife,” a weekly half-hour diabetes lifestyle show on CNBC, “Medical Breakthroughs,” a quarterly program on 70 local network affiliates, and “HealthXplorer,” an educational series by CME firm Scinexa airing on ABC Family. **Matthew Arnold** explores the potential — and potential pitfalls — of educational programming.

A small TV studio in Chelsea, New York City. Beneath a thicket of industrial lighting, the hosts mingle with the audience between takes. The cameras pan and pirouette. Producers huddle. The call to clear the set is sounded, and the stars — a pastiche of stock daytime TV personas ranging from improbably perky to comically prickly — pile into plush chairs wedged around a coffee table in the center of the set.

Going to tape, we see the inspirational story of David Cross, a globe-trotting, mountain-climbing diabetic who speaks candidly of overcoming the challenges of his disease from his base camp on Mount Everest. It could be any talk show, a reverie of upbeat chatter and human interest stories — until the hosts whip out their glucometers. “Here at dLife, we know you’ve got to know your numbers,” says Mother Love, an L.A. radio host, comedian and actress. “Let’s test, not guess!” And together with the audience, they do.

A half-hour broadcast that airs Sundays at 7 p.m. on CNBC, dLife offers its diabetic viewers a light mix of banter, recipes and other “lifestyle” fare leavening some serious medical information. The show, sandwiched between CNBC’s weekend infomercial schedule and The Wall Street Journal Report with Maria Bartiromo, drew 142,000 viewers for its March 20 debut, along with a slew of big-name advertisers, including Sanofi-Aventis, Novo Nordisk, Roche and Abbott Diabetes Care. A follow-up incidental survey by Nielsen Media Research clocked average audiences for the show at 306,000, besting better-known programs in the slot, with 1.9 viewers per diabetes household, indicating that sufferers watch it with a family member or caretaker.

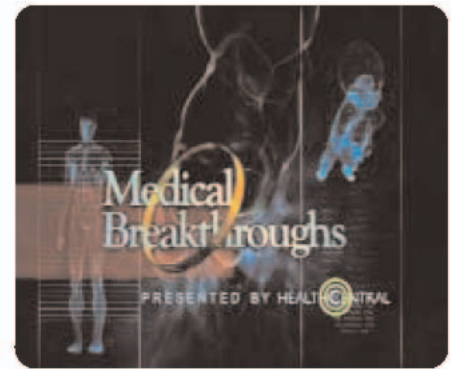
At a time when DTC advertisers are cautiously navigating a tougher regulatory environment demanding more explicit presentation of risk information, health education TV programs running from three minutes to 30 could prove increasingly attractive to manufacturers, particu-



A weekly half-hour program on CNBC, *dLife* provides lifestyle information for diabetics.



HealthXplorer, a 30-minute morning show on ABC Family, addresses various disease states.



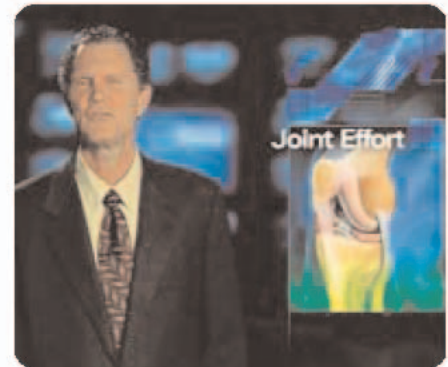
Medical Breakthroughs appears quarterly on network affiliates in major markets nationwide.



With a focus on patient education, *dLife* aims to generate awareness of the disease.



Future episodes of *HealthXplorer* will tackle ADHD, metabolic syndrome and hepatitis.






Medical Breakthroughs is anchored by Dr. Dean Edell, a syndicated radio show host.

larly for specialty products with well-defined audiences. While this sort of televised health education offers advertisers and sponsors a more targeted audience and a better balance of risk-benefit information, it is not without its ethical and legal pitfalls. How much control over content should sponsors or advertisers have? How should producers ensure that their clients do not exert undue influence over programming choices? Just where is the line between education and promotion, and can a firewall be built high enough to deflect ethical concerns?

Long-form, televised product promotions are nothing new, of course, though the term “infomercial” makes *dLife* producers bristle. The program, they note, is neither product-centered nor partial to any particular medication. Rather, it is disease-focused educational programming aimed at generating disease awareness (along with advertising revenue), all wrapped in the easy bonhomie of the daytime talk show and delivered by C-list celebrities who screen well and know their way around a television studio. It’s a formula tailor-made for the TiVo age, when consumers are slipping between the cracks of national ad campaigns.

Media fragmentation is a double-edged sword. Even as the diversification of cable programming has made possible more targeted communications, it has also made successful health education programming far more labor-intensive. “We did a lot more of this kind of thing 10 years ago,” says Ron Pantello, chief executive of Euro RSCG Life. “It’s a great medium for communicating risk-benefit information. The problem is you have to do a lot more work to generate audiences.” A decade

SHOW	PRODUCER	SCHEDULE	AUDIENCE
	LifeMed	Weekly on CNBC	Averages 306,000 viewers per episode, with 1.9 viewers per diabetes household, according to Nielsen Media Research.
	Choice Media	Quarterly on local network affiliates	Airs on 70 stations that potentially reach 58 million households, according to Nielsen DMA.
	Scinexa	Periodically on ABC Family	ABC Family boasts a national subscription base of 87 million. Scinexa estimates its potential weekday audience at 2.5 million viewers.



“People with diabetes need this info. They want to see how other people like them are living, and we are proving that.”

Howard Steinberg,
LifeMed

ago, says Pantello, when an agency wanted to target a female hygiene product to college students, it could just buy airtime in a dozen college communities. Now, with the proliferation of channels and narrower audiences, “You have to use a multi-disciplinary approach across a bunch of different media to make it work well,” he adds.

LifeMed, *dLife*'s parent, isn't limited to television. The Westport, Conn.-based company also airs a one-minute radio show hosted by Dr. Bob Arnott, which repeats six or seven times a week on 400 stations in some 170 markets. And then, of course, there's the Web site and direct mail operation, which reaches 2.5 million households. In order to generate interest in *dLife*, LifeMed detailed physicians and diabetes educators on the show, disseminated waiting-room materials and advertised in diabetes journals and consumer health magazines like *Prevention*.

The line between news and promotion

“People need to have multiple interactions to really form a conscious or unconscious opinion, and you're not going to get there relying on an acquisition ad alone,” says Dan Tassone, senior mar-

keting manager for consumer communications and e-marketing at Wyeth. “You need to educate people on the issues behind the product.” Take GERD, for example. Tassone says sufferers typically fail to understand that PPIs slow acid production but don't block it altogether. So those starting on a PPI frequently stop taking the medication once they feel better and spend months in an on-again, off-again cycle before they learn, through trial and error, that they must continue on the drug. “If people can see something visual in long form, they can appreciate that from the start, and then you have a much more receptive target audience.”

Wyeth is an advertiser on *Medical Breakthroughs*, a half-hour, disease-focused television show that airs on network affiliates in major markets, such as Chicago's WLS and Los Angeles' WABC. Anchored by Dr. Dean Edell, who also hosts a syndicated radio show, the broadcast is produced by Choice Media — a Somerville, N.J.-based Internet marketing firm with a sideline in broadcast — and contracted to stations over a multi-year period, producing a minimum of four quarterly shows. Choice Media sells national advertising against the show, targeting pharmaceutical firms, medical device manufacturers and packaged-goods makers, while the stations sell local advertising, typically to hospitals, splitting 13 40-second slots evenly between the station and the producer.

Advertisers on *Medical Breakthroughs* can also sponsor segments, though sponsors are not guaranteed any editorial content. Mindful of recent foibles over promotions presented as reporting, Choice Media entrusts production of its broadcasts to an outside contractor. “There are occasions where brands are mentioned on the show, but neither the client nor Choice Media controls that,” notes Dennis Upah, who heads Choice Media's broadcast division. “If the editorial content is not objective, the model becomes unsustainable. That leads to the program becoming an infomercial, with all the costs associated with that.”

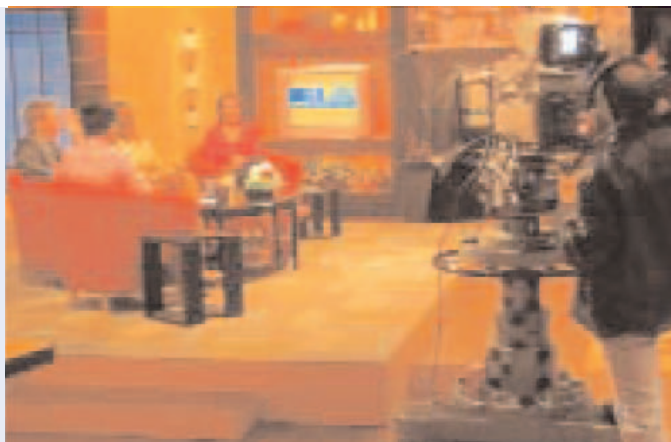
A day in 'dLife': an exercise in affirmation

“I've never seen so many people with diabetes,” bellows Mother Love, arms akimbo and feigning bewilderment at the size of the studio audience. In truth, this is the second time today she's seen that many diabetics, and she's only halfway through the second of three one-and-a-half-hour tapings scheduled for the day. Drawn from patient associations and support groups, the hundred-odd men and women packed into the risers for *dLife* are young and old, stout and skinny, a rainbow of different hues and ethnicities. A producer calls it “the melting pot of diabetes.”

While the hosts do a dry run of the next segment, Tom Karlya warms up the audience, polling them on their baseball loyalties. A bearish actor whose mustachioed visage has appeared on *NYPD Blue*, *Law & Order* and, for more than a decade, in the Broadway production of *Tony & Tina's Wedding*, Karlya became active in diabetes foundations after his daughter, then 2, was diagnosed with type 1 diabetes. At the hospital, says Karlya, “She had an IV in one arm, and an IV in the other, and she looked up at me and said, ‘Daddy, fix.’ And I swore I would.”

An estimated 18.2 million Americans have diabetes, nearly a third of them undiagnosed. It is a common disease, affecting six in every hundred of us, and most diabetics lead outwardly normal lives, yet with the knowledge that any dietary or medicinal slip-up could be fatal. The *dLife* program seems a sort of coming-out for its viewers, an affirmation of both their ordinary lives and the extraordinary steps they must take to maintain them. And though the show is a business, it seems like everyone involved has their own reasons for being there.

“Don't underestimate the power of this community,” says *dLife* founder Howard Steinberg, who was diagnosed with type 1 diabetes at age 10. “People with diabetes need this info. They want to see how other people like them are living, and we are proving that.”



Infomercials — essentially, long-form product ads — suffer from a credibility gap. But “advertorial” content presented as news can be a publicity nightmare, as evidenced by the flap over VNR “news breaks” produced by Boca Raton, Fla. firm WJMK. The segments, funded by healthcare companies and hosted by such august news names as Walter Cronkite, CBS’s Morley Safer and CNN’s Aaron Brown, became news themselves in 2003. Companies paid \$15,000 for each two- to five-minute segment, which ran on public and commercial TV stations, and had editorial control over them. WJMK, its anchors and clients were



“If the editorial content is not objective, the model becomes unsustainable. That leads to the program becoming an infomercial.”

Dennis Upah,
Choice Media

engulfed in a firestorm of ugly press after the segments were highlighted in a New York Times report.

Also criticized for blurring the lines between news and promotion was Healthology, which recruited journalists from local stations for Webcasts, funded by pharmas, that appeared on the sites of major newspapers. Healthology officials said they did not offer sponsors control over content, which the company handled in-house, but the brouhaha stung nonetheless.

For health education broadcasts, establishing partnerships with outside groups such as media outlets, patient organizations and medical associations helps establish credibility and extend reach. LifeMed’s dLife built relationships with the Juvenile Diabetes Research Foundation and AmerisourceBergen, which includes dLife materials in its Diabetes Shoppe sections of pharmacies.

Medical Breakthroughs frequently cross-promotes its broadcasts through the news programs of local stations, with medical reporters flagging the show on the evening news, and is not listed as an infomercial but as legitimate commercial programming in TV Guide. “That obviously makes it incumbent upon us to produce a high-quality, fair and balanced, editorially objective program,” says Upah. “We can produce contextually relevant, topical work, but we work with a third-party producer to ensure that there’s a firewall between the advertiser and the editorial content.”

By contrast to the Choice Media model, LifeMed buys airtime on CNBC and earns revenue solely from advertising. “They’re advertising just as they would on any other program, but this one happens to be targeted directly to the disease state they’re focused on reaching,” says LifeMed’s Steinberg.

Scinexa, a medical education company in Plainsboro, N.J., debuted its HealthXplorer series of shows on ABC Family in March. A half-hour morning show focusing on a different disease state each episode,

HealthXplorer will be funded through educational grants from pharmaceutical companies and medical associations, said Scinexa. (The inaugural episode, on Alzheimer’s disease, was self-funded.) Future shows will tackle bipolar disease, ADHD, metabolic syndrome and hepatitis. In terms of partnership, HealthXplorer has forged an alliance with MDNetGuide, which distributes its patient education materials to specialists.

Lisa Baez, director of medical education for Scinexa, said because the show is funded through grants and content is determined by medical experts recruited for the shows, conflicts of interest aren’t a concern. “The opinion leaders determine what’s appropriate to talk about, whether it’s drugs, classes of drugs or what’s in the pipeline that will provide some additional hope for the sufferer,” said Baez.

But anyone thinking that the longer format alone provides a sure-fire safe harbor from ornery regulators should think again. In January, when the FDA’s DDMAC slapped Pfizer with a warning letter for five promotions of its COX-2 drugs, among them was “a 27-minute-long format DTC television advertisement entitled ‘On the Road to Joint Pain Relief.’” The agency found that the broadcast overstated the effectiveness of its COX-2s, even though it did not mention Celebrex or Bextra by name, “while minimizing, by complete omission, the risks.” “The infomercial features patient testimonials and statements from healthcare providers that promise complete pain-free relief, freedom of movement, and dramatic effects on ‘quality of life,’” said the warning letter.

Michele Houck, director of marketing and media for Portland, Ore.-based direct response media planning and buying firm C Media, says that surrendering control over content can prove challenging for sponsors and advertisers. “One of the important things about this is that the producer maintains that integrity, they retain editorial control, and that can be a learning process for the client,” says Houck. “But people are learning that you can’t just blast emotional messages at consumers, and consumers are feeling more empowered because they see something on TV and they can go find it online.”

Agateway to the Internet

Technological convergence may one day soon collapse the boundary between small screens online and off, but for the time being, long-form TV offers a means of driving consumers to Web sites where they can get even greater depth than they can from a 30-minute televised special.

Medical Broadcast Company was, as the name might suggest, one of the pioneers of long-form TV drug ads starting in 1997, when fair-balance requirements were loosened to allow for two- to three-minute videos without full risk information. The firm, which produced the TV series Body Sense and By Prescription Only, now focuses chiefly on Internet communications, but is looking toward “rich media” Web video applications as the wave of the future.

“That TV format may be coming back, because the door seems to be coming down pretty hard on DTC,” says MBC president Linda Holliday. “We see a role for TV in reaching a mass audience, generating interest and then taking them to a venue where they can experience the full information, like the Internet.” ■