

## Celebrity illnesses raise awareness but can give wrong message

Janice Hopkins Tanne *New York*

When a celebrity develops a disease, public awareness of the disorder usually increases dramatically, a US seminar heard last week. But the campaigns that spring up in the wake of the publicity sometimes mislead the public about what can or should be done to prevent it.

The first celebrity to speak out was Betty Ford, wife of president Gerald Ford, who did a great deal to raise awareness of breast cancer in 1974. Dr Barron Lerner of Columbia University told the meeting. Detection rates rose immedi-

ately in a phenomenon that became known as the "Betty Ford blip."

But her daughter now advocates that every woman should have mammography from the age of 35 onwards, a strategy not supported by most cancer experts.

The seminar, sponsored by the Columbia University Graduate School of Journalism in New York, was moderated by Dr George Lundberg, editor in chief of *Medscape.com* and former editor of *JAMA*. He said that when celebrities were open

about their illnesses, it often educated the public.

American celebrities have gone public about breast cancer, prostate cancer, colon cancer, diabetes, AIDS, and Parkinson's disease. When Nancy Reagan, wife of President Reagan, had a mastectomy, lumpectomy rates fell for six months, probably because women felt that the president's wife got the best medical advice.

Prostate cancer hit the headlines when New York's mayor Rudolph Giuliani dropped out of a Senate race against Hillary Clinton when he was diagnosed. Former presidential candidate Bob Dole and sports, military, and entertainment figures have also discussed their prostate cancers. They tell men to get tested.

The message is even on a postage stamp.

The American Cancer Society, however, does not recommend screening for every man. It suggests that men be given information so that they can decide for themselves about screening for prostate cancer, said Dr Robert Smith of the American Cancer Society.

Brief celebrity messages cannot explain the downside of screening, such as false positive results, more tests, costs, and anxiety, said Dr David Atkins of the US Agency for Health Care Research and Quality. "There is no free lunch," he added.

Whereas Americans are individualistic and want screening for themselves, European governments providing universal health care must seek the best approach for the entire population, and within budget.

Increasing public awareness of common diseases is good, but few celebrities publicise the most obvious messages on disease prevention. The late actor Yul Brynner has been one of the few celebrities in the United States, for example, to speak about smoking and lung cancer, and no celebrity is yet talking about his or her high cholesterol and heart disease, drunken driving, or injury from not wearing seat belts. □

The seminar can be accessed at [www.jm.columbia.edu/healthpolicy/](http://www.jm.columbia.edu/healthpolicy/)



Rudolph Giuliani



Betty Ford



Nancy Reagan

## FDA panel advises against omeprazole as over the counter drug

Scott Gottlieb *New York*

A panel of expert advisers to the US Food and Drug Administration (FDA) concluded that omeprazole, the world's best selling treatment for chronic heartburn (sold under the brand name Losec in the United Kingdom and Prilosec in the United States), should not be allowed to be sold over the counter. Sales of omeprazole in 1999 reached about \$5.9bn (£4.2bn).

In its 9 to 3 vote, the advisory committee said that it was unsure whether patients would take the drug as directed without a doctor's supervision.

The FDA's advisory panel

was convinced, however, that omeprazole could effectively prevent chronic heartburn, leaving open the possibility that it might eventually approve it as an over the counter drug. The FDA usually follows the advice of its panels.

Although the over the counter formulation used in the study did seem to prevent heartburn, it did not seem to relieve the symptoms of heartburn, said Dr Larry Goldkind, another member of the FDA's review team. Although prevention is a proposed indication for the drug, most consumers seem to associate the drug with the relief

of symptoms rather than prevention, said Dr Karen Lechter, a panel member who reviewed the proposed label.

"[This is] troubling since efficacy for this indication is uncertain," said Dr Lechter. The committee decided that omeprazole was shown to prevent chronic heartburn but to be ineffective at relieving episodes of heartburn. Omeprazole, a proton pump inhibitor, is believed to offer 24 hours of prevention of heartburn.

To establish the drug's effectiveness as an over the counter treatment, the manufacturer of the drug presented two types of

studies. These studies were designed to show that omeprazole is an effective treatment and that consumers can use the drug appropriately in an over the counter setting. However, the FDA panel did not fully believe that these trials supported those claims.

Another concern was the possibility of adverse reactions to the drug. The chance of someone experiencing a severe problem, such as liver toxicity, would increase once the drug was used by millions of people in the over the counter setting, said Dr Mark Avigan, an FDA reviewer.

In addition, he said, the number of adolescents in the clinical trials was small, and the drug historically has been considered a danger to pregnant women owing to the embryo related toxicity seen in animal models. □