



Federal Trade Commission
Office of the Regional Director
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**COMMISSION
APPROVED**

December 18, 1985

The Honorable Peter M. Sullivan, Assemblyman
Assembly Republican Task Force
on Health Fraud and the Elderly
99 Washington Avenue, Room 1010
Albany, New York 12210
Attn: Maureen Harrison

Dear Assemblyman Sullivan:

Thank you for your recent invitation to present a statement to the Task Force on Health Fraud and the Elderly. We are pleased to have this opportunity to share with you some of our concerns about health fraud and to indicate what the FTC is doing in this important area.¹

INTRODUCTION

Consumers lose as much as \$25 billion annually to health fraud. A substantial share of this financial burden falls on the elderly, who spend some \$10 billion annually on fraudulent health remedies.² More importantly, individuals may rely on products that fraudulently claim to cure serious conditions and diseases, and they may jeopardize their health by foregoing treatments of demonstrated therapeutic value. Moreover, some quack remedies, in addition to not being helpful, may in fact be harmful.

We view these matters with extreme concern, and the Federal Trade Commission has made and is continuing to make the reduction of health fraud a very high priority. We conduct extensive monitoring of advertising in all media -- print and broadcast -- in both our regional and Headquarters offices. This

¹ This letter presents the views of the Bureaus of Consumer Protection, Competition, and Economics and the New York Regional Office of the Federal Trade Commission. The views expressed are not necessarily those of the Federal Trade Commission or of any individual commissioner, although the Commission has authorized their presentation.

² Hearing Before the Subcommittee on Health and Long-Term Care, Quackery: A \$10 Billion Scandal, Select Committee on Aging, House of Representatives, 98th Cong., 2d Sess., Comm. Pub. No. 98-463 at 88 (statement of Dr. Victor Herbert).

broad monitoring program enables us to discover deceptive advertising throughout the country, including ads that may not appear nationally, but which have a substantial impact nonetheless. Indeed, our monitoring efforts are quite fruitful. Although we are not free to divulge the details of any ongoing investigations, several of which are outgrowths of the New York Regional Office's Health Fraud Project, we will describe briefly some recent cases that illustrate how the Commission has used its authority and resources to combat health fraud.

Before discussing some of our recent enforcement actions, we will describe the Commission's legal authority to monitor and take enforcement action against deceptive advertising. We will then illustrate the use of this authority with a discussion of some of our recent enforcement actions. Finally, we will discuss the need for inter-agency cooperation and consumer and business education, an important corollary to traditional law enforcement.

LEGAL AUTHORITY

The Federal Trade Commission Act provides the Commission with broad jurisdiction and authority. Section 5 of the FTC Act³ makes unfair or deceptive acts or practices in or affecting commerce unlawful. Section 12 of the Act⁴ specifically prohibits the use of false advertisements regarding foods, drugs, devices, or cosmetics. The Commission has a variety of legal tools at its disposal to enforce its statutory mandate. In addition to the authority to proceed administratively under Sections 5 and 12, the Commission can, upon a proper showing, obtain preliminary and permanent injunctive relief in federal court under Section 13 of the Act.⁵ Under Section 13, the Commission can invoke the equitable power of the courts to obtain other relief that may be necessary to stop illegal activity and preserve funds for consumer redress. Violations of these court-ordered injunctions are punishable by civil or criminal contempt citations, while violations of administrative orders are punishable by penalties of up to \$10,000 per violation per day.

³ 15 U.S.C. § 45 (1982).

⁴ 15 U.S.C. § 52 (1982).

⁵ 15 U.S.C. § 53 (1982).

ENFORCEMENT ACTIONS

The Commission has been very successful in obtaining orders against companies that make unsupportable claims for their health care products. These orders typically prohibit specified advertising claims altogether or permit the dissemination of a set of related claims only if they can be supported by substantiating evidence. For example, Commission charges that P. Leiner Nutritional Products deceptively claimed its wheat germ oil pill, Octacol 4, would improve vigor, stamina, and endurance, were settled in a consent order that prohibits the company from making these claims in the future without adequate scientific substantiation.⁶ Another order, against a company that marketed a \$300 "ear mold" weight loss device that purportedly suppressed a person's appetite, requires the company to possess competent and reliable scientific evidence before making any weight loss claims.⁷

The Commission also obtained a consent order against two Miami chiropactors who advertised a laser facelift as a revolutionary new method of removing wrinkles.⁸ The order bars representations that the laser treatments result in a non-surgical facelift, unless there is reliable support for the claim. In another case, Braswell, Inc. was permanently enjoined from representing that any product or service will cure or prevent hereditary baldness, absent approval from the Food and Drug Administration.⁹ In addition, the order prohibits Braswell from making efficacy or performance claims without scientific support for its cellulite, anti-aging, or sexual performance products. The Commission also obtained a judgment of \$610,000 in civil penalties for Braswell's violation of the Commission's mail order rule.

⁶ P. Leiner Nutritional Products Corp., FTC Dkt. No. 9173, 50 Fed. Reg. 21,801 (May 29, 1985).

⁷ Thomas A. Dardas, FTC Dkt. No. C-3144, 49 Fed. Reg. 42,699 (July 17, 1984).

⁸ Spinal Health Services Inc., 102 F.T.C. 1319 (1983).

⁹ United States v. Braswell, Inc., No. C81-558A (N.D. Ga. Sept. 14, 1983).

wherever possible, the Commission attempts to recover the fraudulent operator's ill-gotten gains, and to return them to the individuals from whom they were taken. In some circumstances individual refunds may not prove feasible, so we have looked to other ways to benefit the affected individuals, such as requiring the grant of research funds to legitimate organizations in areas related to the product category.¹⁰

The Commission also has increasingly used its authority to obtain federal court injunctions, under Section 13 of the FTC Act, to halt fraudulent activity quickly and to ensure that no further consumer injury will occur because of the continuing dissemination of false claims. In FTC v. PharmTech Research, Inc., we succeeded, via a preliminary injunction proceeding, in stopping a deceptive food supplement campaign at the outset. The Commission obtained a preliminary injunction in federal court halting advertising that represented that "Daily Greens," a dehydrated vegetable capsule, would help reduce the incidence of cancer.¹¹ The company's advertisement claimed support from a recent report of the National Academy of Sciences. The report, however, did not provide such support, and in fact stated that the findings did not apply to dietary supplements like Daily Greens. The Commission was then able to negotiate a final consent order permanently halting the advertisement.¹² We are currently in litigation over a similar product, "Healthy Greens," following a Commission complaint charging General Nutrition, Inc. with false advertising for that product.

¹⁰ See, e.g., Weider Health and Fitness, Inc., FTC Dkt. No. 9182, 49 ANTI-TRUST & TRADE REG. REP. (BNA) No. 1229 at 363 (entered August 19, 1985); Estee Corp., 104 F.T.C. 1804 (1983).

¹¹ FTC v. PharmTech Research, Inc., No. 83-2247 (D.D.C. November 30, 1983).

¹² PharmTech Research, Inc., FTC Dkt. No. 9018, 49 Fed. Reg. 19,812 (February 9, 1984).

Another example of our use of federal court injunction proceedings to combat health fraud is our case against A&A Laboratories and the individual corporate officials who were involved in the mail order marketing of hair analysis.¹³ In ads to consumers, the defendants represented that spectroscopic analysis of a consumer's hair sample would indicate deficiencies or excesses in 13 essential and 5 toxic elements, respectively. The report sent to the consumer recommended a dosage of specific dietary supplements to correct the deficiencies found in the hair analysis. The court found this advertising was deceptive and prohibited the defendants from advertising that they were able to recommend dietary supplements to correct element imbalances in the body on the sole basis of a hair analysis.

INTER-AGENCY COOPERATION

As all of those involved in the effort to combat health fraud have emphasized, cooperation among various federal and state agencies and private groups -- particularly professional groups -- is essential. That cooperation can take many forms.

For example, the Food and Drug Administration and the FTC have a well-established liaison that allows both agencies to maximize their performance. Each agency concentrates its efforts on particular problems: the FTC is primarily responsible for the advertising of foods and over-the-counter drugs, and the FDA is primarily responsible for the accurate labeling of foods and drugs. Additionally, both agencies exercise jurisdiction over the false advertisement of medical devices. We also readily share our knowledge and expertise with each other. For example, the FDA provides assistance in reviewing materials submitted to the FTC by companies in support of their advertisement claims. In some instances, such as in the Commission's hair analysis case, FDA scientists testify on behalf of the Commission. We, in turn, share our knowledge and expertise regarding consumer research and advertising with the FDA staff. We also coordinate on law enforcement initiatives. For example, the FTC took action against the advertising of PharmTech's Daily Greens, while the FDA took action against the product's labeling.

¹³ FTC v. Furman, No. 84-803-A, slip op. (E.D. Va. January 30, 1985), aff'd in pertinent part, No. 84-803-A, slip op. (E.D. Va. February 25, 1985)

We have an equally beneficial liaison with the United States Postal Service. We routinely share information and coordinate enforcement efforts and strategies to maximize and complement each agency's ability to prevent fraud.

The Commission, of course, also works with state and local officials. For example, we exchange information about pending investigations with state officials through the Investigation Information Exchange Project operated by the National Association of Attorneys General. The project serves as a clearinghouse for information about interstate consumer frauds, particularly those likely to involve interstate movement by the perpetrators.

After completion of cases, we transmit to other enforcement officials copies of orders obtained and supporting documentation, both to advise them of the Commission's actions and to aid them in the prosecution of similar frauds in their jurisdiction. For example, we forwarded our laser facelift order to State Attorneys General to alert them to this kind of activity and to the Commission's order prohibiting efficacy claims for laser facelifts.

Information sharing may represent an effective maximization of law enforcement resources. By informing state and local law enforcement authorities of our orders and actions and by offering assistance on legal and technical issues, we can broaden the impact of our actions, avoid unnecessary duplication of governmental resources, maximize the application of our acquired knowledge and expertise, and more effectively combat those who seek to use health fraud to make a profit on unwary consumers.

CONSUMER AND BUSINESS EDUCATION

Our cooperative efforts also result in joint efforts to educate members of the public so that they are not such easy prey for health care quacks and hustlers.

In recent years, we have produced messages on health related topics in a variety of areas -- including eyeglasses, generic drugs, and food and nutrition. Similarly, in a joint effort with the American Association of Retired Persons, we

published a brochure called "Healthy Questions."¹⁴ This is a guide designed to help older Americans, in particular, to choose a health professional that meets their needs, and to avoid falling prey to unscrupulous health quacks.

In connection with the successful National Health Fraud Conference held in Washington, D.C., on September 11, 1985, the Federal Trade Commission, the U.S. Food and Drug Administration, and the U.S. Postal Service -- the Conference sponsors -- together with the Pharmaceutical Advertising Council jointly published a brochure entitled "Quackery . . . Major Medical Breakthrough."¹⁵ State and local governments can greatly benefit the public by passing along the sound advice contained in that publication. Consumers should be urged to apply the "it-sounds-too-good-to-be-true" test to ads for health products.

Consumers must be urged, "[I]nvest your time before you invest your money." Before buying a questionable product or treatment find out more about it. Check with one or more of the following:

- your doctor, pharmacist, or other health professional,
- the Better Business Bureau,
- your local consumer affairs office,
- your state's Attorney General,
- the Federal Trade Commission,
- the Food and Drug Administration, or
- your Postmaster or the Postal Inspection Service.

¹⁴ A copy is attached as Exhibit 1.

¹⁵ A copy is attached as Exhibit 2.

The Honorable Peter M. Sullivan

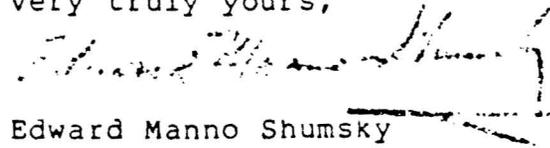
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The FTC is committed to promoting public education as one means of avoiding public victimization. We view the submission of this statement as part of that educational effort. These legislative hearings command the attention of the public. Therefore, they are a most valued means of informing and cautioning the public as to the nature, extent, and harms posed by health quackery.

We also are pleased to tell you that we will be co-sponsoring a Regional Health Fraud Conference to be held in New York City in mid-February 1986. Our co-sponsors are the U.S. Food and Drug Administration, the U.S. Postal Service, the New York State Attorney General's Office, and the Better Business Bureau of Metropolitan New York. Through this collaborative effort of federal, state, and private enterprises, we will offer substantive information regarding health fraud and suggestions as to ways in which the Conference participants -- representatives of the media, of industry, of the medical and pharmaceutical professions, and of organizations looking out for the interests of older consumers, among others -- can work effectively to combat health fraud.

we hope that these remarks are helpful to you. Please do not hesitate to contact us if you have any questions or would like further information.

Very truly yours,



Edward Manno Shumsky
Regional Director

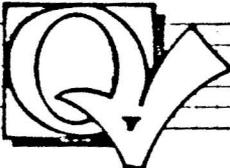
Attachments

EXHIBIT 1

EXHIBIT 2

Healthy Questions

HOW TO TALK TO AND SELECT

 PHYSICIANS

 PHARMACISTS

 DENTISTS

 VISION CARE
SPECIALISTS



The decisions you make about which health services and products to purchase are some of the most important and expensive decisions you make as a consumer. Yet, like many people, you may spend less time choosing a health professional than you would choosing a new TV set. And you may feel reluctant to actively question your doctor about a diagnosis or treatment. If so, you are not alone. Many people share such reservations.

This guide was prepared by the American Association of Retired Persons in cooperation with the Federal Trade Commission to encourage you to take an active part in your health decisions and to make the most of the money you spend on health services. It includes sections on how to select and use the services of health professionals: physicians, dentists, vision care specialists, and pharmacists. It also discusses health maintenance organizations (HMOs). We hope that in using this guide you will become a better informed and satisfied buyer of health services.

Using This Guide

You can use this guide:

- To help you decide what to look for and what to ask when choosing health professionals.
- To evaluate the services you receive from the health professionals you currently use.
- To keep a list of questions you want to ask health professionals before you visit or call them and to record their answers.
- To hold your medical bills, prescriptions, appointment cards, and other important records.
- For advice about registering complaints, if you should have them.

Keeping Records

It is a good idea to keep health records at home, in a place where they can be located easily by others. In an emergency, these records could help save your life. Your files might contain:

- The names, addresses, and telephone numbers of health professionals you see regularly.
- As complete a description of your medical history as you can compile.
- A list of the prescription and over-the-counter medicines you are taking.
- Any treatment, therapy, or special diet instructions.
- All bills and receipts.
- Your health insurance policies, Medicare, and Medicaid documents.

Selecting a Health Professional

Finding the health professional who best suits your needs may take time and effort. A good place to start is with friends and relatives who may recommend the health professional they use. Other possible sources of referrals are teaching hospitals, medical schools, dental schools, other health professionals, professional societies, or local consumer groups that may have done research to provide such information. For information about a specific health professional's education and specialties, you could call his or her office and ask or check your library for

professional membership directories such as the *American Medical Association Directory* and the *Directory of Medical Specialists*. The Yellow Pages also lists health professionals by specialties.

When you have collected a list of candidates, call their offices to get information about what is particularly important to you. For example, you might ask:

- "How much will services cost and when are payments due?"
- "Is it possible to arrange a special payment schedule to fit my budget?"
- "Does the professional accept the type of insurance that I carry? Does he or she accept Medicare or Medicaid assignments? If so, for what services?"
- "Does the professional employ or recommend the use of other health professionals, such as physician's assistants or nurse practitioners?"
- "Is the office located near public transportation?"
- "What are the office hours?"
- "How does the office respond to emergencies after office hours?"
- "Is another professional on call when the doctor is unavailable?"

Answers to these questions should help you narrow your choices. You can also learn the answers to the following questions from a personal visit.

- "Is the service prompt and efficient?"
- "Does the professional give a thorough examination, based on your experience?"
- "Does he or she make you feel at ease and respond thoughtfully to your questions?"
- "Are diagnoses, test results, treatments, and prescribed medications explained clearly and simply?"
- "Are fees and payment schedules clearly disclosed before treatment is given?"
- "Does the professional suggest ways to keep costs down?"
- "Is the office clean and well-equipped?"

Do not be reluctant to go elsewhere if the professional does not meet your needs or expectations. You have a right to be as satisfied with health care services as you expect to be with other services

Q **OPTIONS**

Where to Get Help If You Have Problems Or Complaints

If you are dissatisfied with the services provided by a health professional, here are some steps you can take to settle the dispute.

- First, discuss your complaint with the professional involved. Many misunderstandings can be resolved at this level. If you are still not satisfied, contact the professional's supervisor, if there is one.

- In some situations, contact your insurance agent. Your insurance carrier may be in a position to help resolve a dispute with a health care provider.

- Send a letter to the association (e.g. medical society) to which the professional belongs. Include copies of any documents that will support your complaint. Retain the original copies for your records. If your dispute is over fees, professional associations may be the only institution that will mediate your complaint.

- Send a letter to the state board that licenses the professional in question. The internal review process can be lengthy, so follow up with routine inquiries if you do not hear back from the licensing board in a reasonable time. If possible, attend a licensing board meeting to meet the members if you get no satisfaction by letter or by phone.

- Send copies of your complaint to your state, county, or city office of consumer protection.

- "Action Line" reporters for your local paper, TV, or radio station can help resolve complaints. Also, consider writing a letter to the editor of your local newspaper.

- If none of these actions help you resolve your dispute, you may want to consider seeking legal advice.

Health Maintenance Organizations (HMOs)

In addition to private practice, fee-for-service medical care, there are Health Maintenance Organizations (HMOs). These organizations provide coordinated, comprehensive medical services for a fixed monthly fee. In effect, they combine the functions of providing and paying for health care services into a single program.

For a pre-paid fee, HMO members receive a wide range of medical services performed by physicians and other health care personnel. Some large HMOs have their own hospitals. Some HMOs also run their own pharmacies. HMOs vary in size, cost, available services, number of facilities, and the degree to which members participate in policy-making.

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As a member of an HMO, you receive all necessary physician, hospital, and preventive care through your HMO. Some HMOs require additional small fees or "co-payments" for office visits, prescription drugs, eyeglasses and so forth. These co-payment plans permit members to choose lower basic coverage premiums.

Here are some questions to ask about an HMO.

"Am I eligible to join your HMO?" Many HMOs provide care only to members of an employer-sponsored group. If your employer does not offer HMO membership as an option, check to see if individual memberships are available.

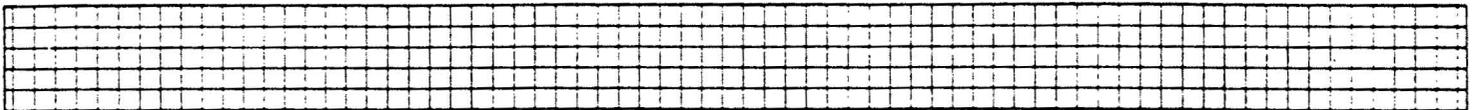
"What services are provided for the basic membership fee and what services are omitted?" You can obtain this information for each membership category or coverage level. Since not all services are covered under all plans and you can never be certain what services you may need, it is important to know what is covered and what is not. Pick out the

areas you could expect to need health care in and check if they are part of the benefits package.

"Does the HMO charge co-payments?" Ask for a schedule of co-payment fees, particularly for services you anticipate you will need.

"Will I see a physician every time I need medical attention?" In an HMO you choose your personal physician from a pool of physicians with the HMO. The HMO may suggest, in certain cases, that you see the HMO's nurse practitioner or physician's assistant if the problem is routine and can be handled by them.

Though HMOs now provide health care to over 13 million people and are growing in number, they are not accessible to all health care consumers. To find out if there is an HMO in your area, look in your Yellow Pages; write to Group Health Association of America, 624 Ninth Street, N.W., Washington, D.C., 20001; or contact the local medical society in your area.





VISION CARE SPECIALISTS

There are three types of vision or eye care specialists. **Ophthalmologists** are physicians who specialize in diagnosing and treating eye diseases. They prescribe drugs, perform examinations and eye surgery, and also may provide eyeglasses and contact lenses.

Optometrists, while not physicians, have doctor of optometry degrees in eye care. They examine eyes, diagnose vision problems, and provide eyeglasses and contact lenses. They also may detect eye diseases but will normally refer you to an ophthalmologist for definitive diagnosis and treatment. **Opticians** take measurements and design, verify, and deliver contact lenses, eyeglass lenses, frames, and low-vision aids upon prescriptions written by ophthalmologists and optometrists. They may not examine eyes or prescribe lenses.

It is important to keep in mind that good vision care involves more than simply being fitted for contact lenses or eyeglasses. Good vision and eye care should include the detection, diagnosis, and treatment of problems, as well as preventive care. It is good preventive health care, especially for older consumers, to have an eye examination at least every 2 years. Numerous eye diseases, including glaucoma and cataracts, occur more frequently with age. If you have an eye disease or have experienced acute symptoms such as double vision, loss of side vision, or pain, you should consider seeing an ophthalmologist.

The law requires ophthalmologists and optometrists to make available to you your eyeglass prescription, at no extra cost, after an eye exam. Ask for your prescription if it is not provided. With a

prescription in hand, you can shop for eyeglasses just as you would for any other product, looking for the best quality at the best price. Although this law does not apply to contact lens specifications, you may want to ask for a copy before you leave the office of the professional who fitted you. Having a copy of your contact lens specification is important in case you decide to shop around for another provider or if you need replacement lenses.

Selecting a Vision Care Specialist

Listed below are some questions you might ask before choosing a vision care specialist.

“How much does your basic eye examination cost and what does it include?” Call more than one specialist and compare prices. A lower fee could mean a less complete examination, so ask what the examination includes. A thorough examination includes both an eye health exam and tests of your ability to see and focus your eye. Eye health exams include taking or updating the health history and performing an interior and exterior eye health exam and glaucoma tests. Tests for common vision conditions may reveal near-sightedness, far-sightedness, astigmatism, and presbyopia (a gradual lessening of the eye's ability to focus on close objects). The specialist may also check for eye muscle coordination and ability to change focus quickly. Depending on the individual case, additional tests may be needed. Ask about the cost of tests that go beyond the basic examination and whether or not those are covered under Medicare.

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“When is payment expected?” If you're on a limited budget, ask about installment payments or other methods of reducing your payments.

“Do you sell glasses and contact lenses?” All three types of vision care specialists may dispense eyewear, although some ophthalmologists and optometrists do not. Shop around and compare to get the best value.

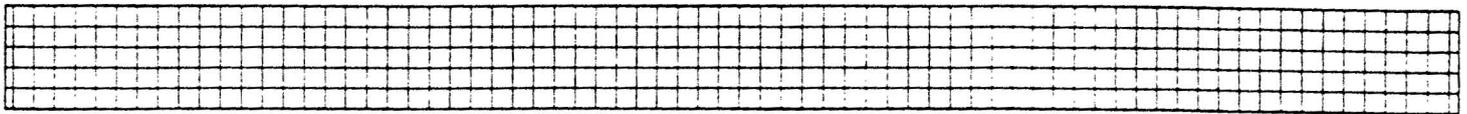
“How much will glasses or contact lenses cost?” Ask the price range of different types of eyewear sold by the professional who writes your prescription and compare these prices with those of other dispensers. Prices may vary widely. Make sure all the prices quoted to you are based on the same type of service and identical merchandise (frame, lens material, lens tint, etc.). If you are considering buying a spare pair of glasses, you may want to ask if any discounts are available for another pair.

“Do you charge for follow-up visits to adjust frames or contact lenses?” A reasonably-priced package of services that includes unlimited visits over a specified period of time may be a better deal than bargain-priced goods that do not include free follow-up visits.

“What is your refund policy for contact lenses?” Not everyone who wants to wear contact lenses is able to adjust to them. If you are trying contact lenses, you may want to shop for a good refund policy so you won't lose your entire investment if you cannot wear them.

“How much do you charge for replacement lenses?” Find out how much you will be charged and how long you will have to wait for replacements if your contact lenses are lost or damaged.

“Will you give me a complete copy of my contact lens specification and fitting results?” Ask this question before the examination. If you think you may wish to buy replacement lenses from a different provider, you will need this information.





DENTISTS

Selecting A Dentist

There are many factors to consider when looking for a dentist. (See cover section for "How to Select a Health Professional.") The kinds of questions given below should help you find out from the dentist's office, in advance, about services of particular importance to you.

"What are the fees for a routine checkup and cleaning?"

"Does the dentist accept Medicare assignment for oral surgery procedures?" Only a few oral surgery procedures are covered by Medicare.

"Does the dentist employ a dental hygienist?"

Dental hygienists clean teeth and perform other services, allowing the dentist to devote greater time to more complex procedures.

What To Ask Your Dentist About Diagnosis And Treatment

There is a common misconception that dental disease and losing one's teeth are a normal part of aging. You may help prevent dental and other oral diseases with daily attention to oral hygiene, proper nutrition, and regular visits to the dentist.

Your first visit to a new dentist should include a discussion of your medical and dental history, an oral exam (usually including X-rays), and a cleaning and scaling of teeth and gums. Make sure you bring with you the name and address of your previous dentist, who may have X-rays, test results, or advice that will assist your new dentist and may save on costs. The dentist or hygienist should discuss any preventive care measures you can take. The dentist also may recommend corrective treatment.

Dental needs and dental care change as people age and as research generates new techniques for care

and treatment. You may need to learn about conditions and treatments that did not concern you in earlier years, such as root canals, crowns, dentures, oral surgery, and gum problems.

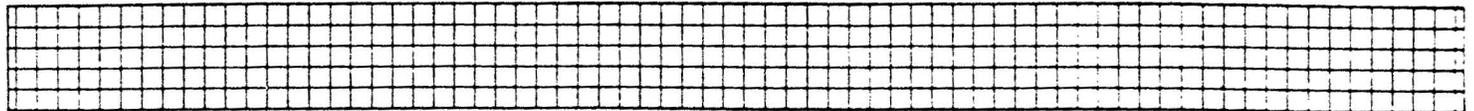
Whatever treatment your dentist recommends, it is always advisable to ask what alternatives you have and to compare the costs, benefits, and risks of accepting or rejecting treatment. It is especially important to get as much information as possible for non-routine procedures, such as tooth extractions or temporary or fixed bridges.

Listed below are some questions you may wish to ask your dentist regarding tests and treatment.

"Is an X-ray absolutely necessary? Will you provide a lead apron or bib?" X-rays are an indispensable diagnostic tool for dentists. While patients may want to double check on how often X-rays are needed, dentists must determine the need for X-rays based on the patient's individual case. Even though modern X-ray machines are designed to emit a low level of radiation, the dentist may ask you to wear a lead apron.

"How can I prevent dental problems?" The most common dental problems—tooth decay and gum disease—can be effectively prevented with proper oral hygiene. Ask your dentist about proper flossing brushing techniques, fluoride treatments, fluoride toothpastes, fluoride mouthwashes, and nutrition, all of which can safeguard your dental health.

"If I need dentures, can you recommend the most economical way to obtain them?" Some dentists are able to discount their dentures for low-income or elderly patients. You also may want to inquire about low-cost denture programs sponsored by dental societies, university dental schools, or your state or city government.





PHARMACISTS

Pharmacists are an excellent but often underutilized source of information about drugs. All pharmacists may not have time to answer the question suggested below. However, you may wish to look for a pharmacist who is responsive to your questions and concerns. Also, prices vary from one pharmacy to another, so you may wish to comparison shop for value.

Selecting A Pharmacist

“When appropriate, do you substitute generic equivalents for brand-name drugs?” You can ask your pharmacist whether a generic drug product will be as effective as a brand-name drug. Generic drugs are generally less expensive than brand-name drugs. If you want generic drugs, ask your pharmacist for them. In some states, laws limit the ability of a pharmacist to substitute generics without the physician’s approval.

“Will you compound special prescriptions for me?” Certain medicines still require mixing at the pharmacy, and some pharmacists do not provide this service.

“Where can I get medicines in an emergency?” You may wish to select a pharmacy that is open late or that has an emergency phone number after office hours.

“Will your pharmacy deliver medicines when I can’t pick them up? Is there a delivery fee?”

“Do you offer senior citizen discounts? How much?”

“Do you accept all forms of prescription drug insurance?” In addition to private insurance, Medicaid has a Maximum Allowable Cost (MAC) program that places a ceiling on reimbursement for certain drugs. If the drug is covered under the MAC program, and you qualify under Medicaid, the government may pay the entire cost, or you may pay only the difference between the MAC limit and what the pharmacy charges.

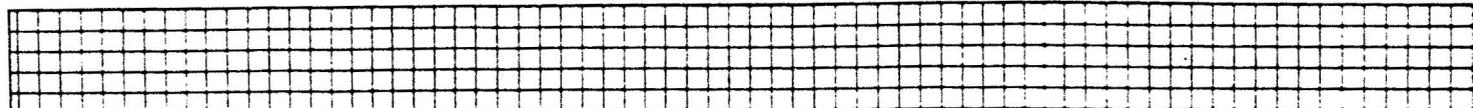
“Do you keep patient profiles listing all the medicines each customer has purchased?” A patient profile should include a summary of your medical history so that the pharmacist can check for possible

problems. This record also may be useful for tax purposes. Keep in mind that this service will only be useful if you buy all your medicine from the same pharmacy.

What To Ask Your Pharmacist About Drug Use

You may want to ask your pharmacist the following questions about drugs that have been prescribed for you.

- “What are the generic and trade names of this drug and what is it for?”
- “Do you have any written information about this medicine?”
- “What does this medicine cost?”
- “How long will it take this medicine to work?”
- “What will happen if I do not take this medicine?”
- “Should I keep taking the medicine until the prescription is used up, or just until I feel better?”
- “What should I do if I miss a dose?”
- “Do I take this drug with food?”
- “Should I avoid any types of food or beverage or other medicines while I am taking this drug?”
- “Can I take this drug and drink alcohol?”
- “Will smoking affect the way this drug works?”
- “While taking this drug, should I avoid any particular activities, such as driving a car, exercise, or exposure to the sun?”
- “What side effects can I expect from this medication? Which ones should I report to the doctor?”
- “How should I store this medicine?”
- “Can I get this prescription refilled?”
- “Can I get a larger quantity of the medication so it will last longer and cost less?”
- “Will you put this medicine in an easy-to-open container for me?”
- “Does this medicine come in a more convenient form?”
- “What over-the-counter medicines do you suggest for my cold (or cough, or burn, etc.)?”



Q PHYSICIANS

Selecting A Physician

When selecting a doctor, many considerations are involved, such as location, cost, specialization, and personality. Many of these matters have already been discussed in the cover section, "How to Select a Health Care Professional." Additional information specific to physicians is included in this section.

Questions listed below about the physician's services and costs are ones you may wish to ask the office receptionist or nurse.

"At what hospitals does the doctor have admitting privileges?" This will be important if you have a preference for a particular hospital that is familiar to you or is close to your home.

"Does the doctor have access to facilities where simple procedures can be done on an out-patient basis?" Access to such a facility will be less costly than a hospital if you require minor surgery.

"What arrangements are there for coverage and informal consultation when the doctor is not available?" Some doctors participate in group practices and can arrange for informal consultation and back-up coverage with their associates. Other doctors are in solo practice and also may consult with their colleagues and make arrangements for back-up coverage when needed.

"Does the doctor employ a physician's assistant or nurse practitioner?" In many states, these health professionals are trained to take patient histories, perform routine examinations, and handle other routine procedures. The doctor, then, has more time to spend on complex problems and procedures. You may benefit by being able to schedule appointments more conveniently.

"Will the doctor accept a Medicare assignment and bill Medicare and my insurance carrier directly?" Whether a physician accepts a Medicare assignment or bills you directly is a matter for discussion between you and your physician. Remember, however, that whether the physician accepts assignment (and is paid directly by the Medicare carrier) or bills you (and you are reimbursed by Medicare), you are responsible for the annual Medicare deductible and 20% of the government's "reasonable charge." Whatever arrangement you have with your physician, Medicare pays 80% of the "reasonable charge", and you pay the additional 20%. If your

physician charges more than the "reasonable charge", you are also responsible for that additional amount.

"Will the doctor prescribe generic drugs?" Generic drugs may save you money, as they generally cost less than brand-name drugs. Find out if the doctor prescribes generic drugs when appropriate.

Your First Visit: What To Expect

You've selected a doctor and scheduled your first appointment. You should be able to judge, on this first visit, if you want to continue to see the doctor as a regular patient. Two of the most important elements of your first visit are a discussion of your medical history and establishing a comfortable relationship with the doctor.

The Medical History

The doctor will spend time reviewing your medical history. You should expect to discuss your physical and mental well-being, as well as your family's. It is your responsibility to bring up any pertinent information and provide records, if possible. For example, you should tell the doctor what over-the-counter or prescription medications you take regularly, and if you have any allergies or sensitivities to foods, drugs, or chemicals. A physical exam may also be given.

Establishing a Comfortable Relationship

Being able to feel comfortable with your physician is an important factor to consider when deciding to become a regular patient. For many people, this is determined by the doctor's willingness and ability to speak openly and patiently with them. Don't forget, however, that it takes two to communicate, and you will need to ask questions.

What To Ask Your Doctor About Diagnosis And Treatment

Never hesitate to question the doctor about proposed diagnostic tests or treatments. If you still have doubts or questions when you leave the doctor's office, seek further information. You can do this by talking to friends or relatives or by reading about your medical problem on your own. If you still have questions, you may want to try talking to your own doctor again. You may also want to get a second opinion whenever you are undecided about a

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particular treatment, and especially when surgery is recommended. Medical experts may disagree on what is the best course of treatment, and you will have to make the ultimate decision about the best course of action.

Listed below are sample questions you may wish to ask your doctor regarding tests.

“What do you expect to learn from the diagnostic tests you recommend? Are there any risks involved?” Some tests may not be absolutely necessary but are done as a precaution. Before you agree to a test, find out why you need it and what would happen without the test. If your former doctor conducted similar tests, have the results forwarded to your new doctor. It may not be necessary to repeat them.

“Are X-rays absolutely necessary?” While X-rays can be an important diagnostic tool, they may sometimes be unnecessary. Ask your doctor to explain why you need the X-rays, so that you can decide whether to have them done.

“How much will these tests cost? Are they covered by my insurance?” Even if “insurance pays for everything,” each test takes time and may cause physical discomfort. Unnecessary tests are not free—they ultimately increase insurance premiums and costs for everyone.

“Please explain, in plain language, what the test results mean.” Don’t be embarrassed to ask the doctor to rephrase an explanation. Ask the doctor to state clearly and simply what the problem is, how long it is likely to last, and what treatments are recommended.

“What types of treatment have been successful, and what are the costs, risks, and benefits of each?” It is important to know all your treatment options. Ask what will happen if you don’t get any treatment, why the doctor recommends one type of treatment over another, and what are the comparative risks and success rates of each, especially where medications and surgery are involved.

Questioning Your Doctor About a Prescribed Drug*

Make sure your doctor knows what prescription and non-prescription medicines you are already taking *before* a new drug is prescribed. Tell your doctor about any adverse reactions you have had to drugs in the past; this may indicate an allergy to certain ingredients. Here are some questions that may be useful to ask.

- “What is the drug’s name, and what does it do?”
- “How and when do I take it—and for how long?”
- “What will happen if I do not take this medicine?”
- “Should I keep taking the medicine until the prescription is used up, or just until I feel better?”
- “What foods, drinks, medicines, or activities should I avoid while taking this drug?”
- “Are there any side effects, and what should I do if they occur?”
- “Can you provide any written information about this drug?”
- “Is a generic equivalent available and appropriate?”
- “Are there any effective alternatives to drug therapy?”

Questioning Your Doctor About Surgery

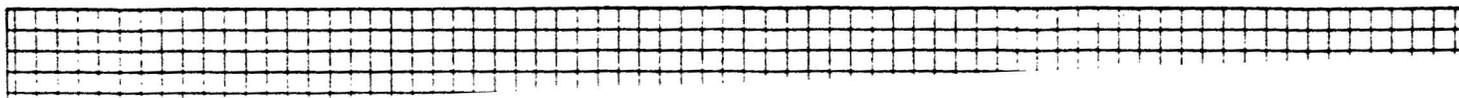
When you’re considering surgery, make sure you understand the risks and benefits before you agree to it. Getting a second opinion from another doctor is usually a good idea. Both Medicare and Medicaid pay most of the cost of a second opinion and of a third if the first two doctors disagree. Don’t forget to have your medical records and test results sent to the second doctor so he or she has all the information needed to make a recommendation.

If you decide to have the surgery, there may be ways to reduce the cost. One way to save is to have simple procedures, such as biopsies or treatment of simple fractures, done on an out-patient basis. First find out, however, whether your insurance will still cover the costs. If your doctor has admitting privileges at two hospitals of similar type and quality, find out which hospital has lower prices for rooms and for the services you require. Avoid repeating diagnostic tests that have already been done outside the hospital. Also, you may want to tell your doctor you would like to go home as soon as you are able.

Ask your doctor:

- “What will happen if I don’t have the operation?”
- “What are the risks of the surgery and what are the success rates?”
- “What is the cost of the operation and follow-up care? Is it covered by my insurance?”
- “Can you do the operation on an out-patient basis and can I arrange to receive appropriate care to recuperate at home instead of in the hospital? How much would that cost?”
- “Can you recommend someone to give me a second opinion?”

*See the section on pharmacists for more information.



QUACKERY ...The Billion Dollar MIRACLE Business

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This year, we Americans will spend billions of dollars on products that do nothing for us—or may even harm us. And we'll do it for the same reason people have done it since ancient times . . . we want to believe in miracles. We want to find simple solutions and shortcuts to better health.

It's hard to resist. All of us, at one time or another, have seen or heard about a product—a new and exotic pill, device, or potion—that can easily solve our most vexing problem. With this product, we're told, we can eat all we want and still lose weight. We can grow taller or build a bigger bustline. Or we can overcome baldness, age, arthritis, even cancer.

It sounds too good to be true—and it is. But we're tempted to try the product in spite of all we know about modern medical science—or perhaps because of it. After all, many treatments we take for granted today were once considered miracles. How can we tell the difference?

Separating Facts From Fantasy

Not all advertisements for health products are false, of course. In fact, the vast majority aren't. So just what is quackery? Simply put, quackery is the promotion of a medical remedy that doesn't work or hasn't been proven to work. In modern times, quackery is known as health fraud. But call it quackery or call it health fraud, the result is the same—unfulfilled wishes, wasted dollars, endangered health.

Often quack products are fairly easy to spot, like the magic pills you are supposed to take to stay forever young. But sometimes the products are vaguely based on some medical report that you may even have heard about in the news.

In general, when looking over ads for medicines and medical devices, watch out for those that seem to promise too much too easily. And investigate, before you participate.

The High Price of Health Fraud

Quack cures rob us of more than money. They can steal health away or even take lives. Quacks may lure the seriously and often desperately ill, such as people suffering from arthritis and cancer, into buying a bogus cure. When people try quack remedies instead of getting effective

medical help, their illnesses progress, sometimes beyond the treatable stage.

Today's Targets for Quack Attacks

Quacks have always been quick to exploit current thinking. The snake-oil salesmen a few generations back carried an array of "natural" remedies to sell to a public that was still close to the frontier. And today, quacks take advantage of the back-to-nature movement, capitalizing on the notion that there ought to be simple, natural solutions to almost any problem. Some current target areas for such promotions include:

Arthritis. Over 30 million Americans suffer from arthritis, and the nature of the disease makes it fertile ground for fraud. And because symptoms may come and go, or the disease may be in remission for several years, arthritis sufferers may actually believe, at least temporarily, that they've been cured by a quack remedy.

Before you add to the \$2 billion spent annually on quack arthritis cures, remember that, although medical science offers effective treatments, it has found no cure for arthritis. The list of fraudulent "miracle cures" for the disease ranges from snake venom to lemon juice, from the harmless milk of vaccinated cows to the dangerous use of steroids. More dangerous and costly arthritis treatments are offered by legitimate-looking clinics, often located outside the United States. While some clinics may offer effective treatment, many prescribe untested diets or drugs that either offer no arthritis cure or cause patients to have additional health problems. Beware of arthritis clinics that offer cures.

It is important to remember that pain relief and inflammation treatments are not the same. A product that advertises relief for the minor pains of arthritis does not necessarily treat inflammation. For this reason, the serious condition of arthritis should be treated by a doctor.

Fitness. Quacks know that people would like to have the benefits of exercise without actually exercising. So recent years have brought all sorts of "body toning" devices, such as electrical muscle stimulators. Such devices are, of course, worthless for "body toning" and can even be dangerous, but they're advertised and sold as substitutes for exercising.

Weight Loss. These schemes are probably the most popular form of quackery. Millions seek a painless way to win the battle of the bulge. Since

proper diet and exercise take constant discipline and work, quack claims are especially appealing and, to some, worth a try. But quack weight-loss products aren't worth a try when they affect your health and harm you—and they can harm you if only by not helping you. Being overweight can lead to number of health problems, including high blood pressure, heart attack, stroke, and kidney disease.

The fact is that you cannot lose weight if you do not cut down on the amount of food you eat or exercise more to burn up calories. Any product claim that promises to trim you down and tone you up effortlessly is false. Consult your doctor before beginning any diet program, and remember, there are no medicines or devices that will let you lose weight effortlessly.

Cancer. Here quack cures are probably the cruelest and the most expensive. Seriously ill people may spend thousands of dollars on phony treatments that do nothing to relieve their disease or suffering. Often, the quack cancer treatment clinics are set up just outside the United States, so that they're beyond the jurisdiction of U.S. authorities. Before you request admission to any cancer clinic, talk to your doctor about it.

As an aid in evaluating cancer-cure claims, keep in mind that there is no one device or remedy capable of diagnosing or treating all types of cancer. Cancer cannot be detected or treated solely through the use of machines. No one medical test conducted one time can definitively diagnose cancer, nor can a machine operated by a fraudulent practitioner cure it.

Quack Advertising—The Need for Healthy Skepticism

Many people believe that advertising is screened by a government agency and that, therefore, all claims about health products in advertising must be truthful. This is not the case with most health care products, except for those drugs and medical devices that require pre-market approval by FDA. There is no federal, state or local government agency that approves or verifies claims in advertisements before they are printed. Law enforcement authorities can take action only after the advertisements have appeared.

This holds for claims of a "money-back guarantee." Many quacks are fly-by-night operators who do not respond to refund demands. Often, by the time refund requests come in, they have changed their address to avoid law enforcement officials.

Beware of Testimonials That Sound Too Fantastic to Be True

Health fraud promoters are fond of using testimonials from "satisfied users" to promote their wares. One reason they do this is that they can't get ethical health professionals to sanction their products. Legitimate testimonials may be useful sources of information about how a product works. However, beware of testimonials reporting incredibly fantastic medical results, especially when no medical support for the claim is offered. This is particularly important since "satisfied users" may, in some cases, have experienced the sugar pill, or "placebo," effect. The placebo effect occurs when people, believing they have been given a real medicine, experience a benefit from it. It is the power of suggestion at work.

You Can Protect Yourself

Apply the "it sounds too good to be true" test to ads for health products by watching for these common characteristics of quackery:

- A quick and painless cure.
- A "special," "secret," "ancient," or "foreign" formula, available only through the mail and only from one supplier.
- Testimonials or case histories from satisfied users as the only proof that the product works.
- A single product effective for a wide variety of ailments.
- A scientific "breakthrough" or "miracle cure" that has been held back or overlooked by the medical community.

Invest Your Time Before You Invest Your Money

Before buying a suspect product or treatment, find out more about it. Check with one or more of the following:

- your doctor, pharmacist, or other health professional
- the Better Business Bureau
- your local consumer office
- your state's Attorney General
- the Federal Trade Commission, Washington, D.C. 20580
- your nearest office of the Food and Drug Administration
- your Postmaster or the Postal Inspection Service