

“Talk to Your Doctor:” A Rhetorical Analysis of Burkean Identification in Direct-to-Consumer Pharmaceutical Advertisements

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Abstract

In this article, we use rhetorical criticism as a research method to apply Burkean identification to four direct-to-consumer pharmaceutical television commercials, suggesting that the commercials create a state of consubstantiality with the audience. The identification strategies of common ground, the assumed “we” through the use of the word “you,” and dissociation are utilized in these commercials to inspire consumers to initiate a conversation with their doctor about their healthcare needs. Based on the success direct-to-consumer pharmaceutical advertisements have had with inspiring patients to engage in a dialogue with healthcare providers, Burkean identification could have significant implications when used in other areas of health communication studies, particularly in regards to issues related to the COVID-19 pandemic. Applications of Burkean identification to health campaigns could increase their effectiveness and cause patient-consumers to be more receptive to the messages being presented.

Direct-to-consumer pharmaceutical advertisements are used by pharmaceutical companies to appeal to potential customers and promote prescription medications to patient-consumers (Ventola, 2011, p. 669). Direct-to-consumer pharmaceutical advertisements are disseminated through the mass media outlets of television, radio, magazines, newspapers, YouTube channels, music applications, and social media (Wang & Kesselheim, 2013, p. 960). Pharmaceutical companies invest a significant amount of time, energy, and money every year marketing their products on mass media platforms with the intent of inspiring patient-consumers

to initiate conversations with their healthcare providers about these products (Fahim, Toscani, Barone, Wang, & Gandhi, 2018, p. 114). Within the past several decades, the disclosure requirements that were mandated in direct-to-consumer drug advertising have changed significantly. In 1962, the Food and Drug Administration (FDA) was given regulatory authority over direct-to-consumer drug advertisements; the FDA, in turn, created strict guidelines for these advertisements to follow (Fahim et. al, 2018, p. 114). However, these regulations were reconsidered in 1997, and were relaxed when the FDA issued a preliminary guidance document that eased the disclosure requirements (Fahim et. al, 2018, p. 114; Applequist & Ball, 2018, p. 211; Wang & Kesselheim, 2013, p. 960). The revision mandated that pharmaceutical companies include a “major statement” in their advertisements in which the most important risks were presented and which gave patient-consumers additional resources if they wanted to obtain more information about the medication (Fahim et al., 2018, pp. 114-115). While this decrease in regulatory guidelines creates concerns regarding the limited amount of information provided by these advertisements, banning direct-to-consumer pharmaceutical advertising entirely in the United States is highly unlikely because the right for pharmaceutical companies to advertise and market their products on mainstream media platforms is protected under the First Amendment of the Constitution (Wang & Kesselheim, 2013, p. 961).

Because direct-to-consumer pharmaceutical advertising prioritizes the promotion of prescription medications for financial gain above educating the public about healthcare issues (Applequist & Ball, 2018), patient-consumers should be wary of the rhetoric and persuasion tactics used by pharmaceutical companies to convince them that these products are the solution to their healthcare needs. Robert H. Shmerling (2019) of Harvard Health Publishing advises consumers to examine the language and linguistic strategies utilized in direct-to-consumer

pharmaceutical advertising and to take into consideration that the primary purpose of these advertisements is to sell a product, not to increase the public's comprehension of a particular healthcare issue (para. 8). Consumers should also be cognizant of the time constraints in video and audio advertisements that limit full disclosure of vital pieces of information about the medication, including the omission of adverse effects, cost, and potential drug interactions with other medications (Ventola, 2011, pp. 673-674).

In this article, we use rhetorical criticism as a research method to apply Kenneth Burke's theoretical construct of identification to four direct-to-consumer pharmaceutical television commercials, suggesting that the commercials create a state of consubstantiality with the audience. The identification strategies of common ground, the assumed "we" through the use of the word "you," and identification through antithesis are utilized in these commercials to create a state of consubstantiality with patient-consumers who may feel inspired to take the initiative to talk to their healthcare providers and become active participants in their journeys to better health. In this study, we examine four pharmaceutical television commercials: Rexulti's "Put on a Brave Face" (2017), Dupixent's "Du-More: Backyards & Rain" (2020), Prolia's "Make or Break Moments: Baseball & Flea Market" (2020), and Trelegy's "Make a Stand" (2020). After reviewing over 100 direct-to-consumer pharmaceutical television commercials that aired from January 2017 to December 2020, we selected these four advertisements because we believe they effectively exhibited identification strategies in unique ways. All four of the commercials examined in this study resulted in financial increases for their respective pharmaceutical companies, suggesting that each advertisement was successful. This selection also includes four prescription medications that have different routes of administration: tablets administered orally, pre-filled injection pens administered by the patient, prescription injections administered

subcutaneously by a healthcare professional, and inhalers administered through oral inhalation. We believe that the success of these advertisements was at least partially due to the strategic use of Burkean identification, and we contend that the use of identification could have major implications on health communication studies; for example, by applying Burkean identification to health campaigns, we may be able to increase their effectiveness and cause patient-consumers to be more receptive to the messages being presented.

Direct-to-Consumer Pharmaceutical Advertisements

Direct-to-consumer pharmaceutical advertisements have been studied in a wide range of contexts across the discipline of health communication. Wood and Cronley (2014) studied changes in consumer reports of communication with healthcare providers regarding medications advertised in direct-to-consumer commercials over a 10-year time frame. They found that consumers in 2012 reported talking less about the name of the drug, how it compared with their current medication, and general information about the drug than they did in 2003. Wood and Cronley also found that fewer participants received the medication in 2012 than in 2003, and that attitudes towards the advertisements were more negative in 2012 than in 2003.

In their 2018 study, Applequist and Ball conducted a content analysis on direct-to-consumer pharmaceutical advertisements to examine how these advertisements utilize the time constraints of television commercials (p. 211). Applequist and Ball (2018) examined several aspects of television commercials, including the factual information presented, the portrayal of the medication, the emotional appeals used, and the lifestyle characteristics depicted in the advertisement. They concluded that pharmaceutical companies prioritize the promotion of drug benefits over educating the public about health issues, potentially conveying distorted information about these issues to the public (pp. 211-215).

Byrne, Niederdeppe, Avery, and Cantor (2013) also used content analysis as a research method in order to study print and television direct-to-consumer pharmaceutical advertisements for cholesterol lowering medication. They examined how these advertisements conveyed messages regarding both the importance of medication and behavior changes. Byrne et al. (2013) looked at print advertisements from 1994 to 2005 and television commercials from 1999 to 2007 and found that these advertisements provided mixed messages regarding the efficacy of diet and exercise on reducing cholesterol. They note that while most advertisements mentioned the efficacy of behavior changes on reducing cholesterol, these claims were often accompanied by competing messages in order to promote the medication.

Defibaugh (2019) examined the rhetorical and linguistic strategies utilized in direct-to-consumer pharmaceutical advertisements to appeal to patient-consumers (p. 1). In her study, Defibaugh (2019) argued that the rhetoric used in these advertisements reinforces what she calls the neoliberal ideology of medicine in the United States by positioning viewers as patient-consumers who are ultimately responsible for managing their own healthcare and taking advantage of the services that are available to them (pp. 1-2). Choi and Lee (2007) analyzed the perception of credibility that consumers have of direct-to-consumer pharmaceutical advertisements on the internet and how this perception influences patient-physician interactions (p. 137). Choi and Lee (2007) argued that the findings of their study “provide insights into how consumers evaluate and use the Web as a source of prescription drug information and how this usage translates into their dialogues with physicians” (p. 147). In his 2011 study, Mackert conducted interviews with advertising professionals who were involved in the creation of direct-to-consumer pharmaceutical advertisements, observing how these professionals’ understanding of health literacy varied but noting that they were realistic about the balance between the dual

roles of these advertisements in educating consumers about healthcare issues and promoting sales of the product. Klara, Kim, and Ross (2018) conducted a descriptive analysis of direct-to-consumer pharmaceutical advertisements that aired on television in the United States between January 2015 and July 2016 in order to “examine the presence of off-label promotion in broadcast DTC ads and to assess their adherence to FDA guidelines mandating fair balance in presentation of risks and benefits and prohibiting misleading advertising claims” (pp. 651-652). Upon completing their study, Klara et al. (2018) found that the quality of the information presented in direct-to-consumer pharmaceutical advertisements was poor. Furthermore, Klara et al. (2018) stated that these commercials were not compliant with FDA guidelines, and the suggestions of off-label promotions were common in medications prescribed for diabetes (p. 651).

Direct-to-consumer pharmaceutical advertisements have been closely analyzed in the health communication discipline to better understand their effectiveness. Techniques used in direct-to-consumer pharmaceutical advertisements may also be applied to health communication campaigns in order to make these campaigns more effective. It is our hope that this rhetorical analysis will contribute to this body of research by providing insights into how direct-to-consumer pharmaceutical advertisements appeal to audiences using the theoretical construct of Burkean identification as a means of persuading patient-consumers to initiate conversations with healthcare providers about pharmaceutical products.

Burkean Identification

Kenneth Burke’s theoretical construct of identification remains a highly useful concept in contemporary rhetorical theory and criticism. In *A Rhetoric of Motives*, Burke (1969) explains identification in the following terms:

A is not identical with his colleague, B. But insofar as their interests are joined, A is *identified* with B. Or he may *identify himself* with B even when their interests are not joined, if he assumes that they are, or is persuaded to believe so (p. 20, emphasis Burke's).

Burke (1969) explains that “to identify A with B is to make A ‘consubstantial’ with B” (p. 21). The goal of identification is to achieve a state of consubstantiality, “an area of overlap between individuals or between an individual and a group [as] a basis for common motives and...as a *product* or *state* of identification that leads an individual to see things from the ‘perspective’ of a target” (Cheney, 1983, p. 146, emphasis Cheney's). John W. Kirk (1961) argues that identification “functions not only as a *process* whereby separate entities are brought together, but also as a *structure*” (p. 114, emphasis Kirk's).

Burke (1969) writes that “to begin with ‘identification’ is...to confront the implications of *division*,” stating that “identification is affirmed with earnestness precisely because there is division. Identification is compensatory to division. If men were not apart from one another, there would be no need for the rhetorician to proclaim their unity” (p. 22, emphasis Burke's). For Burke (1969), identification is used in rhetoric as a means of achieving persuasion (p. 46). He explains:

A speaker persuades an audience by the use of stylistic identification; his act of persuasion may be for the purpose of causing the audience to identify itself with the speaker's interests; and the speaker draws on identification of interests to establish rapport between himself and his audience (p. 46).

Burke (1969) argues that the components of “persuasion, identification (‘consubstantiality’) and communication (the nature of rhetoric as ‘address’)” are intertwined (p. 46). Dennis G. Day

(1960) states that the “concept of identification as a means of achieving persuasion is based on [Burke’s] philosophical conception of ‘substance’ as an ‘act’ and the resulting possibilities for ‘consubstantiality’” (p. 273). It is the connection between the “substance” and “act” that makes identification an effective strategy when persuasive messages are the goal of the interaction.

In his work on the use of identification in organizational communication contexts, Cheney (1983) discusses three strategies that serve to create identification: common ground, the assumed “we,” and dissociation, or what Cheney (1983) refers to as “identification through antithesis” (p. 148). Cheney (1983) defines common ground as an identification strategy in which “the rhetor equates or links [himself/herself/themself] with others in an overt manner” by sharing his/her/their values and goals and offering his/her/their “identity” (Cheney, 1983, p. 148). Cheney (1983) describes the assumed “we” as a subtle yet powerful identification strategy used to draw similarities between parties that may have little in common (p. 154). Identification through antithesis is “the act of uniting against a common ‘enemy’” (Cheney, 1983, p. 148), which may be encouraged by the rhetor because “an explicit dissociation from one target implies association with another” (p. 153). In this rhetorical analysis, we suggest that pharmaceutical companies utilize the identification strategies of common ground, the assumed “we” through the use of the word “you,” and dissociation in direct-to-consumer pharmaceutical television commercials to appeal to patient-consumers.

Method

This study utilizes rhetorical criticism as a research method in order to understand and interpret how direct-to-consumer pharmaceutical advertisements may persuade consumers to discuss the advertised medications and the health issues for which these medications may be prescribed with their healthcare provider. Browne (2007) describes rhetorical criticism as “one

means through which we expose our structure or reasoning, acknowledge the agency of our interlocutors, and sustain our commitment to the ongoing practice of argument itself” (p. 109). Rhetorical criticism draws meaning from text and involves interpretation and judgment, rather than measurement (Zarefsky, 2006, p. 384). Andrews (1983) argues that a rhetorical critic “seeks to understand what is going on in order to interpret more fully the rhetorical dynamics involved in the production and reception of the message” (p. 6). As McKerrow (1989) notes, “the focus [of rhetorical criticism] is upon the critic’s activity as a statement; the critic as inventor [of rhetorical texts] becomes arguer or advocate for the interpretation of collected fragments [of discourse]” (p. 108). Rhetorical critics create logical arguments about a specific text, using evidence within the text to support their arguments. Using rhetorical criticism as a research method, we examine four direct-to-consumer advertisements using Burkean identification as a theoretical lens. Through the application of this theoretical construct, we argue that the identification strategies of common ground, identification through antithesis, and the assumed “we” using the word “you” are utilized in these commercials to create a state of consubstantiality with patient-consumers who may be persuaded to begin conversations with healthcare providers in order to become active participants in their journeys to better health.

Analysis

In this rhetorical analysis, we examine the following direct-to-consumer pharmaceutical television commercials: Rexulti’s “Put on a Brave Face” (2017), Dupixent’s “Du-More: Backyards & Rain” (2020), Prolia’s “Make or Break Moments: Baseball & Flea Market” (2020), and Trelegy’s “Make a Stand” (2020).

Rexulti— “Put on a Brave Face” (2017)

Rexulti is a prescription atypical antipsychotic administered orally (“Highlights of Prescribing Information [Rexulti],” 2020, p. 1). If an antidepressant is not effective in treating a patient’s depressive symptoms, the patient’s medication regimen can be augmented with an atypical antipsychotic to reduce symptoms (Shelton & Papakostas, 2008, pp. 253-254). Commonly prescribed to supplement the pharmacological treatment for Major Depressive Disorder (MDD), Rexulti augments a patient’s medication regimen and helps him/her/they build on the progress the patient has made with his/her/their antidepressant (“Highlights of Prescribing Information [Rexulti],” 2020, p. 1). Through the use of Burkean identification, the 2017 Rexulti commercial depicts the struggles that people with depression may experience as they attempt to mask their depression and “put on a brave face.” Bulik (2017) of *Fierce Pharma* reports that Rexulti’s sales increased 600% when the “Put on a Brave Face” television advertisement campaign was initially released in 2016. While sales increases could be due to a number of factors, Bulik (2017) suggests that the “Put on a Brave Face” advertisement campaign was a major contributor to Rexulti’s sales increase. In fact, the success of this advertisement prompted a revival of this campaign in 2017 (Bulik, 2017).

The 2017 Rexulti commercial begins with a woman at a bridal shower. She is looking away from the camera as a somber piano melody is playing in the background. As someone tries to talk to her, she puts a smiley face cutout over her face. The lights dim as she turns her head away (See Image 1). A voice-over says, “Even when you’re taking an antidepressant, you may still be struggling with depression.” The scene changes to another woman standing alone in a break room at work when two colleagues approach her. She forces a slight smile and holds a smiley face cutout over her face. The lights dim as she turns her head away, looking off into the distance. The voice-over says, “you try to ‘put on a brave face,’ but inside, symptoms linger.”

The scene changes a third time to a man sitting at a dinner table with his family. As a family member tries to talk with him, he holds the smiley face cutout over his face. The lights dim as he turns his head away.

The voice-over states, “Rexulti, when added to your antidepressant, has been shown to reduce symptoms of depression. It may help you feel better without giving up the progress you may have made with your antidepressant.” The scene transitions to a doctor’s office where the second woman is seen speaking with her healthcare provider. She is holding the smiley face cutout in her hand as her doctor writes out a prescription for Rexulti (See Image 2). The voice-over informs patient-consumers of the risks and adverse effects associated with taking Rexulti, addressing the audience using the singular second-person pronouns “you” and “your,” as the woman is seen back at her workplace smiling and talking with her coworkers. She puts the smiley face cutout in the pocket of her blazer. The man is seen grilling at a family get-together. He tucks his smiley face cutout into his apron. The first woman is seen at a bridal store looking at wedding dresses with her friends. She puts her smiley face cutout in her purse (See Image 3). The commercial ends with a voice-over saying, “Talk to your doctor about adding Rexulti, and feel better about facing the world.”

This commercial depicts three individuals struggling to “put on a brave face” in everyday social situations. Essentially, these individuals are engaging in what Erving Goffman describes as facework. Goffman (1967) defines face as “the positive social value a person effectively claims for himself [herself/themself]...in terms of approved social attributes—albeit an image that others may share, as when a person makes a good showing” for himself/herself/themself (p. 5). The individuals in the commercial hold smiley face cutouts over their faces in an attempt to mask their depression symptoms from the people around them. The lights dim, and their faces

turn away as they internalize their depressive thoughts and dissociate from the current moment. Some patient-consumers who watch this commercial may have similar feelings of depression and loneliness and may feel socially obligated to “put on a brave face” to hide their depression symptoms from friends, colleagues, and loved ones. Burke (1969) writes that “two persons may be identified in terms of some principle they share in common, an ‘identification’ that does not deny their distinctions” (p. 21). Patient-consumers who experience the feeling of obligation to mask their depression symptoms may find that they identify with the individuals in the advertisement. As a result of this identification, patient-consumers may develop a state of consubstantiality with the individuals in the commercial as they see the world through the eyes of someone, who, like them, is trying to manage their depression. This consubstantiality may lead to persuasion, as patient-consumers may follow the lead of the individuals in the advertisement and consult their healthcare providers about adding Rexulti to their healthcare treatment plans.

Patient-consumers who experience depression may also identify with the frustration of their antidepressants being ineffective. This commercial uses the common ground technique to illustrate the sense of hopelessness patient-consumers may experience when their depression is seemingly treatment-resistant; this experience may cause them to identify with the individuals depicted in the advertisement who are portrayed as experiencing this same sense of hopelessness. Inspired by the individuals in the commercial who put away their smiley face cutouts and engage in activities with reduced symptoms, patient-consumers may initiate a conversation with their healthcare providers about Rexulti with the hope that they, like the individuals in the advertisement, won’t have to “put on a brave face” anymore.

Dupixent— “Du-More: Backyards & Rain” (2020)

Dupixent is a prescription single-dose pre-filled injection pen administered by the patient subcutaneously (“Highlights of Prescribing Information [Dupixent],” 2021, p. 1). Dupixent is prescribed to treat moderate-to-severe atopic dermatitis (eczema), asthma, and chronic rhinosinusitis with nasal polyposis in adults and adolescences 12 years old or older (“Highlights of Prescribing Information [Dupixent],” 2021, p. 1). The 2020 Dupixent commercial portrays three individuals engaging in fun activities, which may cause patient-consumers to admire their carefree nature and want to seek excitement, too. The full year financial report for Regeneron Pharmaceuticals illustrated a global net sales increase of 75% in 2020 from 2019 with Dupixent pulling in \$4 billion in sales (Blankenship, 2021; “Regeneron reports fourth quarter and full year 2020 financial and operating results,” 2021). These figures suggest that this commercial was successful in persuading patient-consumers to talk with their medical provider about Dupixent. We believe that the commercial’s success is at least partially due to its use of Burkean identification.

The commercial begins at an outdoor party where a man is being spun around in circles before he hits a piñata with a stick. As the piñata breaks open and candy and confetti fill the air, a voice-over states, “here’s to the doers—to all the people who realize they can ‘du more’ with less asthma. Thanks to Dupixent” (See Image 4). As a voice-over lists which medical diagnoses Dupixent is commonly prescribed for, the scene transitions to another man in his backyard watching his kids slide down a backyard waterslide. He smiles, tosses the hose aside, and decides to join in on the fun by sliding down with them (See Image 5). The scene changes to a woman standing under a pavilion waiting for the rain to stop, as a voice-over states the risks and adverse effects of taking Dupixent, addressing patient-consumers through the use of the second person

pronouns “you” and “your.” The woman smiles and decides to make a break for it as she braces herself and runs out to her car carrying her purse over her head in the rain (See Image 6). The commercial concludes with a voice-over stating, “Talk to your asthma specialist about Dupixent.”

This 2020 commercial portrays three individuals who, with the help of the advertised medication, can now live their everyday lives with reduced limitations from their asthma. At the climax of the excitement—breaking open the piñata, sliding down the hill, and jumping off of the sidewalk—the camera angle moves 180 degrees in slow motion around the individuals in order to depict their feelings of liberation from the condition that once restricted their engagement in everyday activities. Patient-consumers watching this commercial on their television screens at home may identify with the carefree nature of the individuals in the advertisement who engage in light-hearted activities that they may have enjoyed as a child. Common ground may be established because the patient-consumer, like the individuals in the commercial, may seek excitement and want to engage in fun activities. People may also identify with the individuals in the commercial who, with the help Dupixent, are able to liberate themselves from the limitations that asthma has on their lives. A state of consubstantiality may be created as patient-consumers envision their lives without the limitations of asthma. This consubstantiality may persuade patient-consumers to reach out to their doctors about Dupixent so that they can engage in the fun activities they used to enjoy and “du more with less asthma.”

Prolia— “Make or Break Moments: Baseball & Flea Market” (2020)

Prolia is a prescription injection administered subcutaneously by a healthcare professional every six months (“Highlights of Prescribing Information [Prolia],” 2020, p. 1). Prolia is prescribed to treat a wide array of medical conditions including postmenopausal

osteoporosis in women with high risk for fracture and glucocorticoid-induced osteoporosis (“Highlights of Prescribing Information [Prolia],” 2020, p. 1). Prolia is also used to increase bone mass in men with osteoporosis and as a treatment for bone loss in men receiving androgen deprivation therapy for prostate cancer as well as in women receiving adjuvant aromatase inhibitor therapy for breast cancer (“Highlights of Prescribing Information [Prolia],” 2020, p. 1). Amgen’s full year 2020 financial report revealed a 3% increase in sales for Prolia (“Amgen Reports Fourth Quarter and Full Year 2020 Financial Results,” 2021). Amgen speculated that sales were lower than expected in 2020 due to the COVID-19 pandemic and the six-month dosing regimen of Prolia, which lowers the number of repeated patient-consumers in a given year (“Amgen Reports Fourth Quarter and Full Year 2020 Financial Results,” 2021). Despite these limitations, a 3% increase suggests that the commercial was at least somewhat successful, though perhaps not as successful as the other three advertisements studied in this article. Through the use of identification, this commercial appeals to patient-consumers who may identify with the women in the advertisement, particularly if these patient-consumers can recall a similar situation in their own lives when a little mishap could have led to a close call with their health.

At the beginning of the 2020 commercial for Prolia, a woman is seen at a kids’ baseball game walking from a concession stand with a drink in one hand and a hotdog in the other. She is approaching her seat when she is nearly knocked over by a boy as he attempts to catch a pop-up. Before there is a collision, the screen freezes, and the woman is seen wincing as she braces herself for impending impact. A voice-over poses the following question: “If you have postmenopausal osteoporosis and a high risk for fracture, now might not be the best time to ask yourself, ‘are my bones strong?’” The scene changes to a flea market where two women are

posing for a picture. As they take a step back for the picture, one woman almost falls over a box of vinyl records, but the other woman catches her before she trips backwards. A voice-over states, “Life’s full of make or break moments. That’s why it’s so important to help reduce your risk of fracture with Prolia.” The voice-over informs patient-consumers of the risks associated with taking Prolia, addressing the audience using “you” and “your” pronouns. The women continue enjoying their afternoon, barely avoiding other little mishaps along the way. The commercial ends by posing a question to the audience: “Are *you* ready? Ask your doctor about Prolia” (See Image 7).

This commercial depicts the unpredictability of everyday life and how small accidents can lead to serious consequences for those at high risk for fracture. Patient-consumers who are clumsy, accident-prone, or consider themselves unlucky may identify with the two women in this advertisement because small mishaps could lead to medical issues if proper precautions are not taken. Patient-consumers who have postmenopausal osteoporosis may connect with the women in this advertisement because they may see themselves potentially being in a situation where a little accident could lead to a fracture. This consubstantiality may lead to persuasion, causing some patient-consumers to ask their healthcare provider about Prolia.

This commercial also depicts the identification strategy of dissociation, or what Cheney (1983) refers to as “identification through antithesis” (p. 148). Cheney (1983) describes “identification through antithesis” as “the act of uniting against a common ‘enemy’” (p. 148). Patient-consumers watching this television commercial may label a bone fracture or an accident that may lead to a fracture as a “common enemy” and unite against this antagonist by asking their doctor about Prolia. This consubstantiality formed by the creation of a common enemy may persuade patient-consumers to initiate a conversation with their providers about this medication,

who may, in turn, prescribe Prolia as a preventative treatment for osteoporosis, thus helping the patient-consumers fight against the common enemy—bone fractures. As a result of the achieved consubstantiality and identification through antithesis, patient-consumers with postmenopausal osteoporosis and a high risk for fracture may seek medical treatment to prevent serious injuries that can occur from life's little mishaps.

Trelegy— “Make a Stand” (2020)

Trelegy is a prescription inhaler administered through oral inhalation (“Highlights of Prescribing Information [Trelegy],” 2020, p. 1). Trelegy is a maintenance treatment for patients with chronic obstructive pulmonary disease (COPD), and it is also used to treat asthma in patients 18 years or older (“Highlights of Prescribing Information [Trelegy],” 2020, p. 1). Bratulic (2021) reports that the Trelegy Ellipta generated \$344 million in sales in 2020, a 28% increase from 2019. This suggests that this commercial was indeed successful, resulting in a sales increase of its product for its company. We contend that Burkean identification played a role in the success of this Trelegy commercial. This 2020 Trelegy commercial targets patient-consumers with COPD who may identify with the woman in the commercial as she treats the health condition that she decides will no longer limit her ability to participate in the activities she enjoys.

This 2020 commercial depicts a woman sitting in her living room watching a television commercial for Trelegy. The song “Feeling Good” is played overhead as she turns off her television and takes a deep breath and listens to the song's lyrics: “Birds flying high/ You know how I feel/ Breeze driftin' on by/ You know how I feel/ It's a new dawn/ It's a new day/ And I'm feeling good.” She cuts a hospital bracelet off of her wrist with a pair of scissors, and as it falls, a pamphlet that reads “COPD and Your Lungs” is seen on her coffee table (See Image 8). She

stands up from the couch, tosses a pack of cigarettes on the coffee table, and walks away as a voice-over says, “if you’ve been taking COPD sitting down, it’s time to make a stand. Start a new day with Trelegy.” She walks around her house and collects a few items, including an ashtray, as the voice-over states that Trelegy works to improve lung function, helps prevent future COPD flare ups, and makes breathing easier. As she packs up her car and takes items to a flea market to sell, the voice-over informs the audience of the risks and adverse effects of taking Trelegy, addressing the patient-consumers using “you” and “your.” The commercial concludes with the voice-over stating, “Ask your doctor about once-daily Trelegy and save at trelegy.com.”

When the woman cuts the hospital bracelet off her wrist and tosses her cigarettes on the coffee table, she is “taking a stand” against her condition. Patient-consumers may identify with the woman in the commercial who is tired of the limitations her condition is putting on her life. They may see their frustrations portrayed in an individual who also suffers from COPD, and, as a result of the developed consubstantiality, they may reach out to their healthcare providers about Trelegy. This commercial uses identification to persuade patient-consumers to initiate a conversation with their healthcare provider about this medication with the hope that the provider will prescribe Trelegy, thus generating sales for GSK pharmaceuticals.

Like the Prolia advertisement, this commercial utilizes “identification through antithesis” as an identification strategy (Cheney, 1983, p. 148). Though it can be argued that all four of these advertisements identify the common enemy as the medical condition that is putting limitations on those living with the disease, this commercial in particular emphasizes “taking a stand” against COPD. The phrase “taking a stand” enables this advertisement to specifically label COPD as the enemy that is restricting the woman’s life; if one is “taking a stand,” he/she/they is doing so against an adversary. This differs from other phrases in other direct-to-

consumer pharmaceutical advertisements, which emphasize common ground more than identification through antithesis.

Mary Specker Stone (1997) writes that in the era of managed healthcare, “patients are increasingly being viewed as agents in the management of their own chronic diseases” (p. 201). This shift of agency in healthcare is creating tension between the growing trend of greater patient agency and “the constraints of biomedical text conventions concerning doctor and patient roles” by challenging the agency of the healthcare professional whose goal is to treat, cure, and manage the pathophysiology of the disease itself (Stone, 1997, pp. 201-203). By identifying COPD as the common enemy, this commercial implies that the chronic medical condition of COPD is something that can be managed with proper care and compliance. This commercial suggests that with the help of Trelegy, patient-consumers can become active agents of their own healthcare. The achieved state of consubstantiality that patient-consumers may feel with the woman in the commercial may inspire them to initiate a conversation with their healthcare provider about Trelegy as an ally in their fight against COPD.

Conclusion

This rhetorical analysis examined four direct-to-consumer pharmaceutical advertisements through the lens of Burkean identification. Through the application of this theoretical construct, we argue that the identification strategies of common ground, identification through antithesis, and the assumed “we” are utilized in these commercials to create a state of consubstantiality with patient-consumers who may feel inspired to talk with their healthcare providers and become active participants in their journeys to better health. Though we found that all four commercials utilize the common ground technique and “identification through antithesis” (Cheney, 1983, p. 148) strategies, we note that the Trelegy commercial in particular relies heavily on

“identification through antithesis” to persuade patient-consumers to talk to their healthcare providers about the medication in order to combat the “common enemy” of COPD.

In this study, we found that the strategy of the assumed “we” was also used in all four commercials, but in a unique way. While the words “we” and “our,” which are frequently used to create Burkean identification (Cheney, 1983), were not used in the advertisements, all four advertisements use the singular second-person pronouns “you” and “your” in voice-overs, encouraging patient-consumers to “talk to *your* doctor.” In order to comply with FDA disclosure requirements, each commercial examined in this rhetorical analysis includes a “major statement” in which the voice-over informs the audience of the potential risks and adverse effects of taking the medication advertised; these statements address patient-consumers directly using the second-person pronouns “you” and “your.” We believe that the use of these second-person pronouns is a variation of the assumed “we,” replacing the implicit “we” that would reference both the individual in the advertisement and the patient-consumer with the word “you” to imply the same connection. This functions in the same way that the word “we” might be used in a speech to achieve consubstantiality between a speaker and the audience. Cheney (1983) notes that the “assumed ‘we’ is both a subtle and powerful identification strategy” that can be utilized to create or acknowledge a commonality between people and unify them based on their similarities (p. 154). We suggest that the word “you,” functioning as the assumed “we,” may be used to create consubstantiality in health communication contexts, such as in the pharmaceutical advertisements examined here. The use of the singular second-person pronoun as the assumed “we” could potentially be used in other health communication contexts, such as health communication campaigns and public service announcements regarding health issues in order to

connect with patient-consumers and persuade them to communicate about their health and public health concerns.

The use of identification strategies in direct-to-consumer pharmaceutical advertisements may provide insight on how to address challenges in health communication moving forward, particularly in regards to communication about COVID-19. The COVID-19 pandemic has wreaked havoc across the globe with more than 695 million cases and 6.9 million deaths worldwide since its initial surge in March 2020 (“COVID-19 Coronavirus Pandemic,” 2023). Though scientists have established ways to prevent the spread of this global pandemic, such as wearing a mask, social distancing, and getting the COVID vaccine, many people have disregarded scientific expertise for a variety of personal reasons. Furthermore, getting the COVID vaccine has become a politicized issue in the United States rather than a remedy to stop the spread of COVID-19. Refusal to comply with the CDC recommendations to wear masks and get the COVID vaccine has exacerbated the effects of this pandemic, prolonged the length of the pandemic, and worsened the outcomes. We suggest that the use of identification strategies could increase the effectiveness of health communication campaigns and convince people to get their COVID vaccine and wear a mask when in crowded public indoor spaces. Greater emphasis on the assumed “we” may persuade people to follow CDC recommendations. Positioning COVID-19 as the common enemy through dissociation or creating ways in which people can identify and engage with the message being presented may be an effective means of convincing people to wear a mask and socially distance themselves in public.

Like all studies, this rhetorical analysis has limitations. This study is limited to the analysis of four direct-to-consumer pharmaceutical advertisements in the form of television commercials. Future research may analyze direct-to-consumer pharmaceutical advertisements

disseminated through other mass media outlets such as radio, magazines, and internet advertisements. Future research opportunities may also explore the use of the word “you” as an assumed “we” persuasive tactic in other health communication contexts. Furthermore, future research may include surveys, interviews, or focus groups in addition to rhetorical analysis in order to better understand how patient-consumers connect with and are persuaded by direct-to-consumer pharmaceutical advertisements.

This project used rhetorical analysis as a research method to examine direct-to-consumer pharmaceutical television commercials through the lens of Burkean identification. We argue that through the use of the common ground technique, identification through antithesis, and the assumed “we” through the word “you,” direct-to-consumer pharmaceutical advertisements create a state of consubstantiality with patient-consumers who, upon watching the television commercial, may feel inspired to reach out to their healthcare professionals and initiate dialogues that will put them on the right path in their journeys to better health. Inspiring patient-consumers to take the initiative and become active agents in their healthcare decisions provides implications for health communication studies in terms of combating challenges related to healthcare, especially as we continue to persevere through the COVID-19 pandemic.

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Appendix

Image 1



Image 2

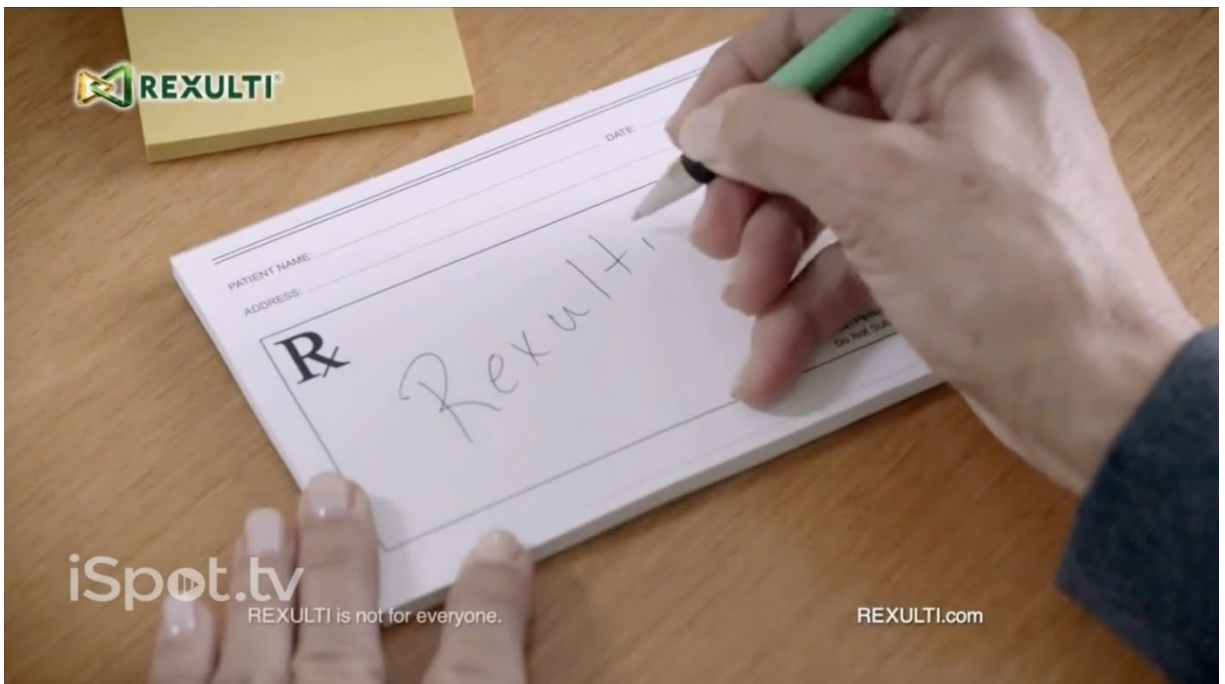


Image 3



Image 4



Image 5



Image 6



Image 7



Image 8

