

FACT SHEET 2: “FSD” RHETORIC

Stripping the deception from how women become persuaded that low sexual desire is a disease and that drugs are the cure

Rhetoric is the art of persuasion. Some rhetorical strategies date from ancient oratory; others are utterly contemporary. They can be used for inspiration, leadership, deception or manipulation. Here are the current pharmaceutical industry rhetorical tactics.

EXAMPLE 1: BRANDING THE CONDITION

- One or more companies define a new condition and its causes which makes it easy to provide the treatment they are ready to sell.ⁱ
 - They create the questionnaires that are used in the research.
 - They conduct the clinical trials needed for drug approval.
 - They sponsor continuing education programs, conferences, and publications to inform professionals about the new condition and treatments.
- They use disease-mongering tactics to build the market for their drug by:ⁱⁱ
 - Claiming that a normal function or experience is abnormal and needs treatment.
 - Exaggerating distress and prevalence.
 - Encouraging unnecessary testing and diagnosis.
- Pharma-funded experts (“thought leaders”) penetrate the profession and research literature with marketing-compatible messages for years before any drug launch.
 - The major organization providing experts for the field of female sexual dysfunction, the International Society for the Study of Women’s Sexual Health (ISSWSH), has been funded since its inception (the year after Viagra was approved) by pharmaceutical companies engaged in developing FSD drugs.ⁱⁱⁱ

EXAMPLE 2: PRIMING THE MARKET

- Market-shaping rhetoric insists that sexual dysfunction is largely a medical (organic/biological/hormonal/brain-based) problem, despite all evidence to the contrary.^{iv}
- In 2010, before its central nervous system drug (flibanserin) had even been evaluated by the FDA, Boehringer-Ingelheim hired Lisa Rinna, a sexy soap opera actress, to promote the unsubstantiated argument that “abnormal brain chemistry” causes low sexual desire. She appeared on many TV shows that wouldn’t ever have invited a serious researcher. Celebrities attract media, influence the public, and are immune from illegal charges of making false claims.^v
- *Womendeserve.org*, the latest pharma PR campaign, insists, without a shred of evidence, that “a biological lack of desire to have sex negatively impacts 1-in-10 American women.”^{vi}

EXAMPLE 3: PERSUASION THROUGH REPETITION

- Something repeated often enough acquires the ring of truth. Psychologists call this “the Big Lie.”
- One such false^{vii} claim is that “43%” of women suffer from some form of sexual dysfunction.
 - ISSWSH: 43% of women suffer from sexual dysfunction.^{viii}
 - “Sex Brain Body: Make the Connection,” (Boehringer-Ingelheim), also featured 43%.^{ix}

- The *Even The Score* PR Campaign (Sprout Pharma., 2014), same experts, same 43%.^x
- Endless repetition of the “Pink Viagra” label encourages the public to think that any drug for women is like Viagra for men: take as needed, tolerable side effects. But the drugs proposed to the FDA for women require chronic use and have more worrisome side effects.
- The brain data provided as evidence for an FSD brain cause is not causal and not persuasive.^{xi}

EXAMPLE 4: CLASSIC MANIPULATIVE APPEALS BASED ON FALLACIES

- **APPEALS FROM EMOTION:** Make it seem as if people who disagree with you are unfair.
 - At *Even the Score*, the FDA’s rejection of flibanserin is said to be based on gender discrimination, not on poor safety and efficacy. The **FALLACY IS SHIFTING THE GROUND:** Attention is shifted from evidence to emotional claims about gender equity.
- **OVERSIMPLIFICATION FALLACY:** Shortly after Viagra was approved, the media began asking, “Where is the Viagra for Women?” with the implication that what’s sauce for the gander is sauce for the goose. However, women’s sexual desires involve more than blood flow to the genitalia.^{xii}
- **CHERRY-PICKING FALLACY.** Find selected examples and generalize. Use individual cases to increase identification between speaker and audience.
 - Uncritical journalists (and ads) often profile a single case—the “sufferer” who’s just like us. A recent *Nightline*^{xiii} program on *Eventhescore* focuses on one woman saying she suffered from HSDD until she was cured in a clinical trial of flibanserin. She is forthcoming and sympathetic. But solid science is needed to evaluate drugs, aided but not replaced by individual stories, appealing though they might be.

Prepared for FDA meeting on Female Sexual Dysfunction
White Oak, MD, October 27-28, 2014 by the New View Campaign
(newviewcampaign.org)

ⁱ <http://www.darkpharma.nl/uploads/7/3/2/8/7328594/theartofbrandingacondition.pdf> Vince Parry, Medical Marketing and Media, 2003

ⁱⁱ Payer, L. (1992) *Disease-Mongers*. New York: Wiley & Sons; see also Tiefer (2006) <http://www.plosmedicine.org/article/info%3Adoi%2F10.1371%2Fjournal.pmed.0030178>

ⁱⁱⁱ including Bayer, Pfizer, Procter & Gamble, Solvay, Vivus, BioSante, Auxilium, Wyeth-Ayerst, NexMed, Lilly ICOS, Boehringer Ingelheim, Johnson & Johnson, Novo Nordisk, Palatin, Novogyne, Sprout. (from ISSWSH annual conference materials)

^{iv} Tiefer, L. (2004) *Sex is not a natural act, and other essays*, 2nd ed. Boulder: Westview.

^v <http://health.usnews.com/health-news/family-health/brain-and-behavior/articles/2010/05/19/not-in-the-mood-you-could-have-hypoactive-sexual-desire-disorder/>

^{vi} <http://womendeserve.org/>

^{vii} Moynihan, R & Mintzes, B. (2010) *Sex, Lies & Pharmaceuticals*. Vancouver: Greystone. Ch 2: 43%

^{viii} <https://www.yourvoicewish.com/>

^{ix} http://www.womeningovernment.org/files/Sex_Brain_Body.pdf

^x <http://eventhescore.org/what-others-are-saying/>

^{xi} <http://www.newyorker.com/tech/elements/the-psychiatric-drug-crisis>

^{xii} Meana, M. (2012) *Sexual Dysfunction in Women*. Cambridge, MA: Hogrefe.

^{xiii} <http://eventhescore.org/news/fight-over-little-pink-pill-raises-sexism-questions/>