



Merely Lights and Wires?

Television newscasts squander precious airtime presenting sensational, one-sided stories and covering unsubstantiated cures.

by Gary Schwitzer



During my first year of living in the Minneapolis-St. Paul television market, I saw news reports describing fantastic medical accomplishments. If only any were true.

- KMSP Fox 9 News used nine minutes of news time over two nights to air a two-part series from a Boston Fox station about unsubstantiated claims for something they labeled a “Cancer Cure.”
- At the beginning of a newscast, WCCO 4 News teased a story with the line, “No more sniffles ... a new cure for the common cold.” I waited 17 minutes to see the 16-second story that explained that a new drug “doesn’t make your cold go away right away, but it does make you feel better faster.” Viewers were also told that the FDA had not yet approved the drug. Two different graphics in the span of 16 seconds spelled out the words “Cold Cure” on screen.
- KSTP TV Eyewitness News ran a story about former football star Joe Namath’s new “arthritis huddle” team. They didn’t disclose that some of the video, Namath’s appearance, and the Web site to which they referred viewers were all paid for by a drug company.
- KARE 11 News devoted nine-and-a-half minutes to a “fountain of youth” regimen promoted by a local cosmetic surgeon who the station said was “nearing guru status on the cutting edge of the latest anti-aging revolution.” They posted the same

story on the station Web site and offered a hyperlink to the surgeon’s commercial Web site, with no warning that the user was leaving a news site and going to a commercial site.

- KSTP TV Eyewitness News (and KSTP’s sibling station, KSTC) aired interviews with one dermatologist on three consecutive nights’ newscasts. Was this the only dermatologist source they could find? On two nights in a row, KSTP showed interviews with the physician about cosmetic Botox injections. On the second night he gave several women Botox injections live on the air, and KSTP showed scenes from the dermatology clinic several times within the newscast. KSTP also referred viewers to its Web site for more Botox information, but the Botox hyperlink took users directly to the dermatologist’s commercial Web site. The KSTC report was on melanoma but the interviewee was the same dermatologist.

These were stories that I just happened to see. I don’t watch every newscast. But it’s noteworthy that even casual viewing can capture this splattering of cheerleading sensationalism on each station in the Twin Cities television market—widely regarded as one of the best television news markets in the country. These stories provide evidence of how precious television airtime is squandered. Meantime, I’ve seen little coverage of health policy questions, the status of the state Medicaid program, Medicare reform proposals, access to care

for the uninsured, quality-of-care issues, or double-digit increases in health insurance premiums and prescription drug costs, and the effects of all of this on Minnesotans. Television journalists, who are quick to point out that they have limited time to tell such complicated stories, have little defense when they are found devoting almost 10 minutes of time to a “fountain of youth” story during a ratings period.

In my judgment, these stories also violate the industry’s own code of ethics, published by the Radio-Television News Directors Association. Relevant sections of the code follow, along with a description of the ways in which the stories violate the code.

Professional electronic journalists should clearly disclose the origin of information and label all material provided by outsiders. [They] should defend the independence of all journalists from those seeking influence or control over news content.

KSTP failed to identify that a drug company was the source of the video, the satellite feed, and the spokesman for the “arthritis team” story with Joe Namath. In effect, the station let an unfiltered advertising message pass as a news story.

Professional electronic journalists should guard against extended coverage of events or individuals that fails to significantly advance a story, place the event in context, or add to the public knowledge. [They] should provide a full range of information to enable the public to make enlightened decisions.

KSTP ran two consecutive nights of repetitive Botox stories, interviewing the same dermatologist each night, then provided a link to the dermatologist’s commercial Web site on the KSTP News Web site. The report failed to cover some of the rare but serious side effects that have occurred from the injections and failed to discuss the many social questions that have been raised about the push for wrinkle-free perfection.

KARE allocated an almost unprecedented nine-and-a-half minutes to the “fountain of youth” story. The story did not include any data to support the anecdotal claims made. Providing a link to the promoter’s Web site put the story in an even more imbalanced light.

Professional electronic journalists should pursue truth aggressively and present the news accurately, in context, and as completely as possible.

WCCO and KMSP labeled investigational drugs as “cures.”

The Project for Excellence in Journalism, in collaboration with the Columbia University Graduate School of Journalism, publishes annual reports on the state of local television news. The prologue to the 2002 report was titled, “On the Road to Irrelevance.” Local television news coverage of health care is already far down that road. At a Mayo Clinic national conference on

medicine and the media in September 2002, the Gallup Organization released new survey research showing that television is the leading source of health information for most people surveyed. But it also showed that television was the least trusted source among those surveyed.

Stations are told by consultants that health care news can lure viewers, but the investment made in the coverage is often window dressing. The Minneapolis-St. Paul television news market is the 13th largest in the

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country. Yet, at the time this is being written, not one of the four profitable local network-affiliated television stations (KARE-11 has been reported to have profit margins in the 70 percent range recently) has invested in assigning a reporter to cover this beat full time as his or her only responsibility.

Granted, it is worse in other markets. A San Antonio television station aired a story about a “miracle” wrinkle cream, never revealing that a woman selling the cream was a station employee and fiancée of the news department’s executive producer. Two Seattle stations’ Web sites offer links to medical “experts,” who are really advertisers promoting their practices. A New York station accepted more than \$300,000 to run an ad on its Web site for a live Webcast of a laser eye surgery procedure. The station also ran a news story about laser eye surgery that same day, interviewing the same doctor and patient. The news story referred viewers to the station Web site, completing the loop of promoting the advertiser’s Webcast. A Miami station hired a medical reporter whose credentials were that he was the neurologist who gained fame as a contestant on the *Survivor* program.

Journalists lose credibility when coverage of health topics more closely resembles advertising than news, showing little regard for evidence or for impact on viewers. WCCO was not alone in its hype of the common cold drug mentioned earlier. Over a five-year period, 760 television news stories were broadcast about trials of that drug, pleconaril. Sensational terms were used in about a third of the stories. It was called a cure, a miracle drug, a super drug, a wonder drug, a medical first. It was described as “good news for physicians and their patients,” “potentially huge,” and as a treatment that “may drastically help relieve your misery.” It was compared with the search for the Holy Grail and with man landing on the moon. Some television stations did not make clear that the best evidence from the clinical trials was that the drug might reduce the span of cold symptoms from seven days to six. Many stations re-

ported that the drug appeared to cause few, if any, side effects. No station reported the side effect that was eventually revealed to the FDA—that the drug could interfere with the effectiveness of oral contraceptives. In March 2002 an FDA advisory panel unanimously recommended rejecting the drug manufacturer’s application for approval. Trials ended a few months later. Television stories about the demise of the drug were outnumbered by the earlier hype about the drug by a ratio of 8-to-1.

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I teach television news writing and reporting and mass media ethics to undergraduate students at the University of Minnesota and will begin teaching in a graduate program on health journalism in the fall. I usually start my television news discussion with a history lesson on Edward R. Murrow, a broadcast journalism pioneer. At the Radio-Television News Directors Association convention in 1958, Murrow pleaded with news executives to use the power of television wisely. “This instrument can teach, it can illuminate; yes, and it can even inspire,” Murrow said. “But it can do so only to the extent that humans are determined to use it to those ends. Otherwise it is merely wires and lights in a box.”

As someone who made the choice 30 years ago to work in television news, I refuse to give up on the potential of this medium. But it is increasingly difficult to inspire and motivate students about a medium that most of the time is, as former Federal Communications Commissioner Newton Minow described it, a “vast wasteland.” Forty-five years ago, Edward R. Murrow warned that if historians looked back at recorded broadcasts, they would find “evidence of decadence, escapism, and insulation from the realities of the world in which we live.” The picture has only worsened in the ensuing 45 years.

Twin Cities television stations are devoting substantial amounts of time to discuss Botox, other “fountain of youth” claims, unfounded cancer cure claims, and drug company advertisements masquerading as news. Think of how that would look in a time capsule. Think of how that airtime could be used to explore health care policy issues of cost, quality, and access.

Concerned citizens must let station managers and news directors know when they see sensational, unethical, wasteful news coverage. It’s time to demand that local television news teach, illuminate, and inspire. **MM**

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