

Doctoring Up Their Images: Why Are So Many Physicians Implementing Public Relations in Their Practices?

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As recently as a decade ago, most physicians who had achieved a certain level of peer and patient recognition were loath to advertise their practices until HMOs began to dictate patient care and reimbursement. Soon after, sub-specialists such as gynecologists and internists were performing lucrative elective procedures that were once the sole domain of cosmetic surgeons and dermatologists.

As the stakes in elective medicine were raised, even the most conservative cosmetic surgeons and dermatologists knew they had to change with the times or risk an empty waiting room. Advertising was the first phase in the evolution of practice promotion. Soon, savvy practitioners realized that advertising might only serve to maintain the status quo of a practice without taking it to the next level. Those cosmetic surgeons and dermatologists who sought an upper income began feeling that advertising wasn't impacting target patients. The reality is that those with disposable income for cosmetic procedures typically find physicians through referrals or editorial coverage, not advertising. Enter public relations, (PR).

PR differs from advertising in that it uses editorial coverage in newspapers, magazines, radio, television, and health Internet sites to highlight a physician and his or her practice. A campaign can focus on new trends, techniques, controversies, safety issues in a respective sub-specialty, or any host of topics deemed press worthy by a publicist and media representative. Essentially, a PR campaign works by taking information the consumer needs and wants to know and presents it in the form of actual stories related to dermatology or cosmetic surgery. Ensuing media exposure in outlets such as *Elle* or *Vogue* magazines or programs like *The Today Show* has a huge impact on prospective patients' medical choices. It serves to reinforce that a physician is the expert in his or her sub-specialty. In addition, it lends a cache and seal of approval that cannot be achieved even by an aggressive advertising campaign. The bottom line

is that medical advertising translates as biased, while it never occurs to the average person that a doctor employed a public relations firm to secure a media spot. Not only can public relations and subsequent media exposure increase name recognition, it can also translate into actual patients (increased revenue) and assurance for current patients that they made the right choice.

When implemented ethically and effectively, PR can help a practice gain an edge in competitive markets.

In dermatology, cosmetic surgery, ophthalmology, and now even holistic medicine, there are physicians whose names have become synonymous with a particular sub-specialty. Have these doctors reinvented the wheel or discovered the fountain of youth to warrant such acclaim? No. Most have simply hired a skilled PR firm with solid media connections. Many doctors who would like to engage in using a PR firm feel this would prove fruitless unless they are in a major metropolitan area. This is quite the contrary. Those in the media want to have a cross-section of cities from which to draw experts. In the same vein, some suburban doctors feel that prospective patients are intent on consulting only with urban doctors. While media resulting from PR will probably not lure a city dweller to the suburbs, it can keep the suburban doctors' patient populations from straying. Media exposure can serve to assure patients of receiving the same standard of care (outside of a city) while making them feel as if a "medical star" is in their own hometown.

Many cosmetic surgeons and dermatologists wonder why they simply cannot write their own press releases or have their office managers function in a dual capacity as PR professional. When doctors attempt this scenario, it often ends negatively or simply takes time away from the doctor practicing medicine. Physicians must understand that the consumer media is not interested in the painstakingly technical depictions of techniques, as would be appropriate for a medical journal, nor are they interested

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in press releases that are entirely self-promotional. The medical jargon must be translated and presented in a way that is palatable for lay people, and writers and producers are indeed lay people. Developing connections with the media is a full-time job. Only public relations firms have the time to solidify connections with the press and be recognized as a key source for medical/health care stories.

Some physicians encounter a moral dilemma when faced with how to best promote their practice. They may question the ethics of hiring a public relations firm. Others still naively believe that "the surgery will speak for itself." Times have changed, and medicine has indeed become a business. It is a reality that prospective patients give more credence to a story in *Vogue* or *Allure* than a doctor's training or contributions to scholarly papers.

UPHOLDING ETHICS

If a dermatologist does decide to engage a PR firm, how can ethics be kept intact? Recently, *The New York Times* style section featured an article disparaging doctors who gave free surgery to beauty editors of magazines in exchange for editorial coverage. Not only is this practice ill advised, it is bartering, and therefore unethical. Doctors who do use PR must remember not to compromise their ethics in the quest for media coverage. Steer clear of media outlets with inappropriate content or editorial slant, conduct oneself appropriately with the media, and don't compromise philosophical beliefs to satisfy an editor or a particular story. Good conduct means not advocating a procedure or technique without qualifying comments until long-term efficacy has been established.

Once a surgeon decides to use PR, it can be difficult to find a good firm. The task is made even harder because most doctors are reluctant to admit they have engaged a publicist. Doctors can call the Public Relations Society of America for listings of registered firms, or use the Internet as an option.

Many doctors have been "burned" by public relations firms. This has happened when the physician engaged an individual or corporation with little or no expertise in the field. Medical/health care PR is an entirely different niche than fashion, entertainment, restaurant, or corporate public relations. Just as one would not visit a chiropractor for laser resurfacing, it is unwise to engage a firm that has not worked with doctors or aspects of the health care industry. It is of paramount importance that

publicists are able to speak a doctor's language. If a physician has to explain to a publicist what a blepharoplasty is, or the difference between ultrasonic liposuction and the tumescent technique, this will take valuable time away from the campaign.

GEOGRAPHIC CONSIDERATIONS

While one firm may do a stupendous job representing a restaurant, the same media contacts are not used to represent a physician. Doctors seeking PR on a national level will have better success with a firm based in a major city. Although this may come as a surprise, the firm need not be located in the same city as its clients. Most key media outlets originate in New York City. A PR firm located there can more easily facilitate personal contacts with these Manhattan editors and producers. Such alliances will undoubtedly be fruitful for clients.

When physicians are interviewing prospective firms, they should ask to see press releases written for other medical clients, examples of media placements, and numbers of colleagues to call as references. It is important for doctors to gauge a publicist's understanding of medical terminology and the climate of the physician's respective sub-specialty.

As with advertising, there are no guarantees that media exposure will translate into additional patients. A public relations firm should be able to give a prospective medical client some idea of what to expect in terms of media outlets to be pursued, continuity of exposure, number of weekly hours devoted to the client, and various strategies for a campaign. An inherent agreement that a physician can decline any media opportunity he or she is uncomfortable about pursuing should also exist.

Physicians must be mindful that public relations is a cumulative process. One television appearance or magazine article cannot judge its merits.

PR is not a magical process. Those who make this foray must be willing to be pro-active participants and respond to media queries in a timely manner, with before and after pictures, and/or statistical evidence. When implemented ethically and effectively, PR can help a practice gain an edge in competitive markets. It can make the difference between remaining a 'best-kept secret' or having a full surgery schedule. Is there a downside to PR? Yes. Physicians just might become addicted to their newfound fame. Doctors who take this route must keep their egos in check and adhere to the Hippocratic Oath. ■