Majority general practitioners prescribe "Impure Placebo" drugs

NEW(S)

Ineffective drugs are prescribed by 97% of general practitioner (GPs) as "impure placebos," according to a study by researchers at two UK universities.[1]

(RE)VIEWS

At least for a few of us, the term "impure placebo" by itself may be new (s).

"Pure placebos are interventions like sugar pills, which are available commercially or saline injections without direct pharmacologically active ingredients for the condition being treated.

Impure placebos are substances, interventions or "therapeutic" methods, which have known pharmacological, clinical or physical value for some ailments, but lack specific therapeutic effects or value for the condition for which they have been prescribed. These may include[2] (apart from positive suggestions, non-essential examinations, and investigations).

- Nutritional supplements for conditions unlikely to benefit from this therapy (vitamin C for cancer)
- Probiotics for diarrhea
- Peppermint pills for pharyngitis
- Antibiotics for suspected viral infections
- Sub-clinical doses of otherwise effective therapies
- Off-label uses of potentially effective therapies
- Complementary and Alternative medicine and conventional medicine whose effectiveness is not evidence-based."

In the publication referenced above, the study found that 97% of respondents (GPs of UK) reported using impure placebo at least once in their career. Nearly, 50% prescribed impure placebo without informing the patients that they were prescribed placebo. The authors opine that there may be unresolved ethical issues regarding informed consent and placebo prescriptions.

Yet another similar study concluded, "Placebo interventions are a widely accepted part of medical treatment in German general practices and are used primarily for their psychological effects. Impure placebos are used much more frequently than pure placebos."[3]

It is anybody's guess, but the picture may not be too different (in fact at a much higher level of practice) in developing countries.

However, it has been reported that the majority of academic physicians thought placebos could help determine whether a patient's symptoms were "real" or if the patient was "faking."[4]

It is also pertinent to note, Randomized Controlled Trials (RCTs) mostly employ pure placebos, which produce milder effects compared to impure placebos.[5]

REFERENCES

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