



Case Report

1	Case Number	0434/17
2	Advertiser	Seqirus
3	Product	Community Awareness
4	Type of Advertisement / media	TV - Free to air
5	Date of Determination	11/10/2017
6	DETERMINATION	Dismissed

ISSUES RAISED

- 2.3 - Violence Causes alarm and distress
- 2.3 - Violence Graphic Depictions

DESCRIPTION OF THE ADVERTISEMENT

The advertisement shows a lady sitting in her lounge room asking some questions to the camera about shingles. Her first question is “What are the chances of me getting shingles?” There is a male voiceover that answers her questions with disease facts. As she proceeds with further questions about shingles an early stage rash begins to appear on her face which proceeds to develop into ophthalmic shingles which seems to be painful. The end of the advertisement advises consumers to speak to their health professional about shingles, including prevention and treatment options.

THE COMPLAINT

A sample of comments which the complainant/s made regarding this advertisement included the following:

Too graphic - I kept visualising the image, after the ad had finished. I'm still visualising it a few days later.....

It is too graphic and disgusting. It shows a large and graphic rash spreading across a woman's face. It is hard to eat dinner while watching as it is so vile.

As I stated in the last question, myself and my family are not happy about having to view such a graphic facial infection without any prior warning to the following content.

This ad has played consecutively during 2 ad breaks during the kids show Ben 10. My 5 year old daughter was watching this program and was quite distressed to see a woman her nanna' s age look so graphically injured so fast. Children watch this show, not retirees it was aired at the wrong time during the wrong tv show.

THE ADVERTISER'S RESPONSE

Comments which the advertiser made in response to the complainant/s regarding this advertisement include the following:

Thank you for your correspondence, regarding complaints received by the Advertising Standards Bureau, in relation to a Seqirus consumer disease awareness advertisement that appeared on free to air television. Seqirus takes very seriously its responsibility under applicable Codes of Practice, including the Australian Association of National Advertisers (AANA) Code of Ethics, when developing communications. Please find below the response by Seqirus to issues raised under Section 2 of the AANA Code of Ethics regarding this advertisement.

The issues raised by the complainants concerned Section 2.3 Violence, specifically violence causing alarm and distress, and violence due to graphic depictions. The complainants have identified the image of the lady with shingles as being too graphic. Seqirus does not consider that this advertisement breaches any aspect of Section 2.3 regarding violence for the reasons set out in this letter.

In addition, Seqirus does not consider that the advertisement breaches any of the following parts of Section 2 of the AANA Code of Ethics:

- Section 2.1 Discrimination or vilification*
- Section 2.2 Exploitative and degrading material*
- Section 2.4 Sex, sexuality and nudity*
- Section 2.5 Strong or obscene language*
- Section 2.6 Health and safety*
- Section 2.7 Clearly distinguishable advertising*

Public Health Considerations

The AANA Code of Ethics practice note states that "Advertising or Marketing Communications shall not present or portray violence unless it is justifiable in the context of the product or service advertised". Seqirus believes that the realistic portrayal of disease was valid given the important public health message that was being communicated to a vulnerable sector of our population. The advertisement was intended for an adult audience and developed after audience testing of various concepts regarding the disease. The objective of the television advertisement is to raise awareness of the serious and debilitating nature of shingles, and is intended to prompt action in those most at risk to speak to their healthcare professional about this condition and potential prevention and treatment options.

Shingles is a common condition that can have serious complications, especially in people over 70 years of age.[1,2] One in three people may develop shingles in their lifetime, with 97% of adults have the virus that causes shingles within them.[1,3] In Australia, approximately

120,000 cases of shingles are reported annually and the substantial burden of shingles is continuing to increase over time, most prominently in the older population.[4] There is no way to predict who will develop shingles, or when, or how severe it will be.[2]

Shingles is characterised by a localised, painful, blistering skin rash caused by reactivation of the chickenpox virus.[5] Shingles can affect any part of the body, usually appearing as a belt or band of lesions across one side of the torso or neck area, and can also occur on the face around one of the eyes.[5] Up to 90% of shingles sufferers experience pain and hypersensitivity, which is a result of the reactivated virus causing damage and inflammation to the nerves before the rash appears.[3,5] Shingles nerve pain can last for months, even years[6] and the pain can be triggered in some individuals by mild, non-noxious stimulation including clothing touching the skin, and hair or wind brushing against the skin.[5].

It is estimated up to 26% of all shingles sufferers may go on to develop complications including, but not limited to, neuropathic pain, scarring, bacterial infection, motor neuron palsies, loss of vision, pneumonia, neurological complications, and increased risk of stroke within the first six months following shingles onset.[3,5-7] The incidence and severity of shingles increases with age[1], and 50% of complications occur in those aged 50 years or older.[5]

The most common complication of shingles is persistent chronic neuropathic pain, known as post-herpetic neuralgia (PHN)[5], which can occur in up to 20% of shingles cases.[3,6] Individuals with PHN may experience excruciating pain[3,5] and reported experiencing pain the area of the rash for an average of 3.5 years[8]. Despite the available treatments, PHN is difficult to manage and may not always respond to treatment.[6,9,10] The pain can disrupt sleep, mood, work, and activities of daily living, adversely impacting the quality of life and leading to social withdrawal and depression.[3]

The shingles rash imagery used in this advertisement is an attempt to bring increased awareness of, and attention to, the severe nature of the shingles and its complications. The imagery on the face has been described by complainants as “vile”, “nasty”, “graphic and disgusting”, “swollen”, “large and graphic rash”. While being unsightly, the shingles rash is real and may be encountered by the public in their everyday lives, whether it is a friend or relative or in the doctor’s surgery. We are of the view that this advertisement accurately portrays the progressive and invasive nature of the shingles condition, without depicting the more severe of superficial symptoms that can occur, as outlined above.

Seqirus considers that the imagery of the shingles rash depicted is appropriate, given the serious nature of shingles and the negative impact shingles complications have on quality of life. The image is intended to encourage at risk individuals to better recognise shingles and seek advice from healthcare professionals.

The advertisement was part of a multi-faceted disease awareness initiative by Seqirus that aimed to inform the target audience, namely those aged over 70 years, of their risk of shingles. The objective of the advertisement was to encourage this cohort of over 70 year olds to speak to their healthcare professional about the disease as there are treatment and preventive measures available that may limit or help prevent the disease from developing. The advertisement was not intended to portray any form of violence but instead to educate this vulnerable population about their risk of disease. The imagery was intended to be informative and to convey a realistic portrayal of the various stages of the disease.

Following the commencement of the campaign, the traffic flow to the shingles disease awareness website, identified on the advertisement, has increased significantly with click through rate increasing from 15.49% to 19.55%, indicating that consumers are seeking further information about shingles.

Seqirus also developed materials specifically for healthcare professionals that included information about the disease, including treatment and prevention options. Due to the significant impact of shingles in Australia, the Australian Government has introduced the Shingles Vaccination Program whereby the Government funds shingles vaccine for those aged 70 to 79 years [11].

Advertisement based on Market Research

The advertisement, in both content and design, is based on detailed market research with the target audience of over 70 years of age. In addition, research was undertaken with healthcare professionals to understand how they (as key treating clinicians) felt the message should be communicated.

In June 2016, qualitative research was conducted amongst target consumers in Sydney and Melbourne. The research was conducted in seven focus groups with the intent to have consumers inform the strategic and creative direction of the campaign. A number of advertising concepts had been developed and the "Shingles is serious" campaign was the preferred option for the target cohort. This campaign seemed to address the lack of awareness around shingles using facts about this disease state. In development of the advertisement, care was taken to ensure that the presentation of the rash was clinically balanced and accurate (please refer to attached images of actual cases of shingles rash).

Research suggests that Australian consumers aged over 70 years are not aware of their risk and the serious nature of shingles. They also remain unaware of the potential complications of shingles.[3,5-7].

Focus group research to evaluate consumer's understanding of shingles and its complications reinforced the need to present information accurately. Research indicated that this group wanted to clearly understand the symptoms and complications of shingles in a quick manner.

In addition, the research identified that the following key facts were not widely known by the target group:

- A. For those over 70 years of age, their risk of developing shingles is increasing*
- B. That shingles is not "just a rash", that it can be excruciating and lead to long term nerve pain*
- C. That the audience can do something about shingles via talking to their health professional in relation to prevention and treatment options.*

In view of the market research, the advertisement was developed with the intention of raising awareness of these important facts to help prompt action in those most at risk to seek more information from their healthcare professional.

Upon seeing the concepts, consumers felt that it "Leaves no doubt that shingles is a serious condition. It's not to be ignored, it's not a disease you would want to have.", "Effectively puts shingles on the radar and gives it a sense of urgency. (What can I do to avoid it. Now!)"

Seqirus worked with an experienced media agency (Carat Media) to achieve the most appropriate media placement for this advertisement in order to reach the target audience of those aged over 70 years who are at increased risk for shingles. This audience's viewing habits over index and increase between the hours of 9am – 5.30pm, lending the buying parameters to a skew to off peak scheduling (during the day) and fringe.

The channel selection and networks have been based on highest share to the demographic of over 70 years. Looking specifically at the key networks for spot placements, audience share was attributed to all main channels – Seven, Nine and Ten, but also included a selection of digital channels including, 7two, 7mate, 9life, GEM, Eleven and One. As viewership for 70 years skews to off peak viewing, the most effective off peak/peak is 70/30. Based on current data, off peak viewing (06.00-17.30) over indexes and has the highest average viewing for the right audience.

Given the CAD rating and the intended target audience, the placements were not intended to be aired or viewed on children's TV channels. We have since sought clarity from Channel 9 as to why the advertisement was aired during children's TV programming. Channel 9 has acknowledged that "We had a number of spots that were missed by our traffic team across that week. (...) The traffic team have acknowledged that there was a PG rating and we have now rectified the situation to stop all bonus running in kids programming."

For the reasons stated above, Seqirus does not consider that the consumer advertisement breaches Section 2 of the AANA Code of Ethics. We trust this response clarifies the rationale and careful thought behind the development of this advertisement. Given the serious consequences of shingles in this important sector of our population, Seqirus considers that the imagery of the shingles rash depicted in this consumer advertisement is warranted and appropriate given the serious complications of this disease. Graphic or realistic images are often used as part of public health campaigns in order to relay important messages; while some sectors of the community may be disturbed by some of the imagery in these advertisements, the benefits of such public health campaigns are great and justify the message or image being depicted.

References:

- 1. Stein AN et al. Vaccine 2009; 24:520–29.*
- 2. National Centre for Immunisation Research and Surveillance (NCIRS). Herpes Zoster fact sheet, August 2017. [online] http://www.ncirs.edu.au/assets/provider_resources/fact-sheets/zoster-vaccine-fact-sheet.pdf. Accessed 27/09/17*
- 3. Harpaz R et al. MMRW Recomm Rep 2008; 57(RR-5):1–30*
- 4. MacIntyre R, et al. PLoS ONE 2015; 10(4):e0125025.*
- 5. Oxman MN. Clinical manifestations of herpes zoster. In: Arvin AM, Gershon AA (eds). Varicella-Zoster Virus. Cambridge: Cambridge University Press, 2000; 246–75. 7.*
- 6. Australian Technical Advisory Group on Immunisation (ATAGI). The Australian immunisation handbook 10th ed (2017 update). Canberra: Australian Government Department of Health, 2017.*
- 7. Langan SM et al. Clin Infect Dis 2014; 58:1497-1503*
- 8. Serpell M et al. Health Qual Life Outcomes 2014;12:92*
- 9. Dworkin RH, Schmader KE. Clinical Infectious Diseases 2003;36:877-82.*
- 10. eTG complete (online). Therapeutic Guidelines. July 2017 edition.*
- 11. Department of Health. Immunise Australia Program. National Immunisation program*

Schedule. [online]

<http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/national-immunisation-program-schedule>. Accessed 27/09/17

THE DETERMINATION

The Advertising Standards Board (“Board”) considered whether this advertisement breaches Section 2 of the Advertiser Code of Ethics (the “Code”).

The Board noted the complainants’ concerns that the advertisement depicts graphic images that are inappropriate for viewing on television and alarming for children

The Board viewed the advertisement and noted the advertiser’s response.

The Board considered whether the advertisement was in breach of Section 2.3 of the Code. Section 2.3 states: "Advertising or Marketing Communications shall not present or portray violence unless it is justifiable in the context of the product or service advertised".

The Board noted this television advertisement features a woman talking to the camera and asking questions about shingles. The voiceover responds to her questions and statistics appear on screen. As the advertisement progresses the woman develops redness and inflammation around her eye.

The Board noted the advertisements had been classified P by CAD which is similar to a PG rating.

The Board noted the advertiser’s response that the image is a realistic portrayal of the disease and that considering the important public message and the vulnerable sector of the community affected by the disease it was important that message was clear and likely to generate a response.

The Board noted that the wound around the woman’s eye does progressively get worse and the final image is graphic but is not overly gruesome. The Board noted that the woman does not appear affected by the wound but does show concern about the statistics being provided as she realises that she falls within a higher risk category.

The Board considered that the advertisement is factual and intended to draw the attention of the viewer to the details of the condition and that this is apparent.

The Board noted that it has consistently stated that a higher level of graphic images and 'violence' is acceptable in public education campaigns because of the important public health and safety messages that are intended to be conveyed and as a result of compelling submissions from advertisers that such detail and 'shock' is necessary to be effective.

In the Board’s view the portrayal of the woman with an increasing change in the detail of her wound did not present or portray violence that was unjustifiable in the context of the product advertised and did not breach Section 2.3 of the Code.

Finding that the advertisement did not breach the Code on other grounds, the Board dismissed the complaints.