The good olde days

Re-living the past is good fun and big business. As a nation, we love traditions, our old buildings, our old world pubs. Even the most modern amongst us fondly remember our mother’s cooking, our old school days, our first romance.

In response, multinational companies in a range of industries make themselves richer by supplying products that drag up our pasts. Looking backward is so popular because it allows us to forget the present, ignore the future and revel in the security of what we already know. However, re-living is not a retrograde step.

For instance, buying products used by our parents is safe because, if they didn’t harm them, they’re not going to kill us. Innovation, on the other hand, is risky, untamed, beyond our control.

The world’s largest pharmaceutical firms are obsessed with innovation and ignore what has gone before. Product launches are driven by changes in technology not consumer memories.

For the biggest companies, the most innovative drugs are the best. Old medicines are yesterday’s news. However, the message to these companies is clear: the past sells, so sell the past.

The majority of drugs used today have been developed within the last few years. Patients are rarely prescribed medicines launched twenty, thirty or forty years ago.

We don’t remember the good old days by consuming the medicines of yesteryear. In the future, however, this situation may change. In recent years, pharma companies have produced some excellent drugs that may never be beaten for safety, usability and effectiveness. As time progresses, these up-to-date medicines will become older but not necessarily redundant.

In the future, we may look back at this period in pharmaceutical development as the golden age in which the world’s most effective products were developed.

Marketing drugs

With limited resources at their disposal, pharmaceutical companies have to decide which products to market.

If a new drug is launched, promotional expenditure on existing lines has to be reduce; therefore, older products automatically get less attention as new ones arrive.

When promotional spend for elderly products is reduced, they become less profitable to supply, as consumer demand doesn’t generate the necessary economies of scale. Business fundamentals, therefore, conspire against the survival of the oldest and only the young thrive.

Second that emotion

Advertising agencies know that prescribers and patients want to feel safe when they choose and use pharmaceuticals. In response, advertisers try to create positive associations between the products and positive emotions.

Such attempts to promote emotional responses, however, are not always successful because the feelings that need to be stimulated were not originally invoked by the medicines being promoted but by some other, former event. For example, endeavours to make doctors feel elated every time they prescribe a particular drug may fail because, subconsciously, that feeling is reserved for events that remind them of the first time they beat their mates at Scaletrix.

Although new drugs produce no automatic response, older products have had time to generate emotional connections. Not only do prescribers and patients gain experience of their benefits through use, but often they link their feelings for medicines to the quality of their lives when they were first launched.

If you had a good time during the Sixties, you will probably look back at the drugs you used during that decade with greater fondness than they deserve. Perversely, some people may even wish to consume naif, ineffective products from that era, if they can be taken with a certain degree of irony.
**Patient feelings**

If patients directly experience the positive benefits produced by a drug, they are more likely to re-use the product. If your mother gave you a particular cough preparation as a child, you will probably buy this product for your own children.

Indeed, once experience and memories intertwine, marketers have an ideal opportunity to encourage consumers to purchase goods by linking them to our idealised recollections.

Given our need to find safety in the past, sales of older drugs could be improved by using specialised marketing messages that link them to the year of their birth.

For example, PR campaigns could ask: “Do you remember 1967? The Dartford Tunnel opened, Frankie Howerd was made Show Business Personality of the Year and Darrin Baines was born. That was the time we launched our ulcer-healing drug. Would you trust medicines from any other year to calm your stomach?” This may sound laughable to you, but for a retro freak this is escapist heaven.

**Over and out**

When drugs get older, they are more likely to be selected for OTC sale. Established products have had time to demonstrate their worth and to display the dangers associated with their use. Therefore, as medicines mature, governments tend to let consumers rather than doctors decide when they should be used.

As more products go OTC, consumers will have greater freedom in choosing the brands they want. In response, people may decide to buy familiar, established products directly from their pharmacists rather than take a risk with new, relatively untested medicines pushed by their doctor.

Once consumers are free, they can make decisions on any grounds they wish. If somebody wants a less effective drug because they used that product during the Sixties, who can say that this is wrong? Also, consumer movements may oppose.

**The future’s past**

In the way they are described here, retro drugs are no different to other aspects of retro culture from clothing to nights out. Anyone who goes to a 70s disco, buys a Chopper bike from Camden market or wants a 1950s tea-set originally sold in Woolworths is a retro freak. Therefore, any medicine that is bought simply because of its connections with a particular time in the past may be called a retro drug.

If consumer freedom leads to greater consumer sentimentality, companies will be able to turn their older products and their OTC ranges into retro drugs.

By using nostalgia, manufacturers could revitalise the sales of flagging medicines. If this trend develops, it may even be hip for companies to re-launch long extinct products, even if they are not as effective as other medicines they could provide.

**Old becomes new**

Pharmaceutical markets will constantly change until innovation stops. However, in the current climate, some companies may find it harder to generate the revenues they need to survive solely from the continual development of new drugs.

In response, they could re-launch a limited number of their old preparations and market them directly to patients who have an emotional attachment to the eras in which they were previously sold.

In doing so, firms could revitalise their sales because, amongst these topsy-turvy consumers, the past is so much more of a blast than the boring times we live in today.

---

**The author**

Darrin Baines is a senior lecturer in Health Economics at the University of Birmingham.