

To Stay Competitive, Some Physicians Seek Public Relations Firms

BY CAROL STEINBERG
Contributing Editor

Dr. Bruce Nadler was phasing out reconstructive and trauma surgery to concentrate on elective cosmetic procedures about five years ago. Plotting the transition, he figured he'd be most successful if he hired a publicist "to see about getting a little more noticeability," says Dr. Nadler, a plastic surgeon with offices in Manhattan and Smithtown, N.Y.

Splashing his name in magazine and newspaper articles and on TV shows was hit and miss at first. With time, the more he was quoted, the more exposure he got with less effort. He says his mention in a front-page story on anti-aging in The New York Times' Sunday Styles section in April 1998 was a real coup, leading to other press and at least 10 new patients. Hardly a week goes by where his name doesn't surface somewhere, discussing such topics as dimples, human growth hormones and ab etching.

Netting this media coverage justifies the \$3,500 monthly retainer he pays New York publicist Katherine M. Rothman, says Dr. Nadler. "If, as a result of the work she does, I can get two to three additional patients for that month, it more than pays for it."

➤ *Continued on page 18*

➤ *Continued from page 1*
self," he says. "In many months, it's been multiples of that."

Increasing numbers of physicians are likewise adopting a publicity-minded mentality to survive mounting competition and diminishing income in today's healthcare environment. "Anecdotally, professional service organizations like lawyers and doctors have gone a long way toward using public relations as opposed to advertising," says Ray Gaulke, president and COO of the Public Relations Society of America.

Dr. Harlan Pollack, a Dallas plastic surgeon who chairs the public education committee of the American Society of Plastic Surgeons (ASPS), agrees that the competitive managed-care environment has prompted more plastic surgeons to retain publicists than ever before. "People can build instant reputations based upon one TV appearance or one article," he says. "In some ways, that's very scary."

While some physicians say they market themselves as experts purely to educate the public, many doctors concede that they seek publicity in order to recruit new patients. Yet others do it "out of ego," says Ms. Rothman, president of New York-based KMR Communications, which represents 20 doctors. "They have more patients than they almost know what to do with but just want to make sure their name stays out there," she says.

"Secondly," she continues, "the medical field has become extremely competitive, and if you advertise the fact that you're being pro-active, the competition might decide to do the same thing."

Ms. Rothman also signs confidentiality agreements, and wouldn't dare ask some of her clients to speak with this reporter. One, Dr. Nadler, had no qualms about it, however.

In practice 23 years, he notes: "I'm not embarrassed by the fact that this happens to be the way things are done these days. If someone told me 10 years ago that I'd be doing advertising and publicity, I'd have thought they were crazy, but the whole nature of the way medicine is practiced has changed."

READY FOR THE LIMELIGHT?

Looking to land on the cover of Time or Newsweek? Experts say physicians need to be prepared to participate in the public relations process when using a publicist. Here are some points to consider:

■ **Your background.** Katherine M. Rothman, president of New York-based KMR Communications, Inc., says the media look for "a person who instills confidence and seems approachable, as opposed to scholarly."

When Suzi Prokell, a Richardson, Tex., publicist, meets with potential clients, she urges them to be candid with her. "We want them to tell us the worst information that might leak out so we know upfront what we're dealing with," she says.

■ **Commitment.** Ms. Rothman expects clients to participate in the public relations effort. "The clients who communicate with us and take a role in their campaign are usually those who yield the best results," she says.

Ms. Rothman suggests a reliable office manager who

can act as the firm's liaison, and a roster of patients who will share their stories and photos with the media. Doctors must return calls to the media on time, not 48 hours later, and be prepared to shuffle their schedules if a big opportunity arises.

■ **Coaching.** Many firms offer media training as a prerequisite to any interviews. Anthony Mora, of Los Angeles-based Anthony Mora Communications, insists on a minimum of two hours training. Ms. Prokell says she coaches physicians "from beginning to end, down to what to wear." The biggest mistake physicians make: having their own agenda. Adds Ms. Rothman: "They have to pay attention to the questions being asked and respond in kind."

■ **Negative press.** Once physicians expose themselves to the media, they should be prepared for stories that could backfire. Ms. Rothman's advice: "They need to be truthful in what they're disseminating to the media and stand behind whatever it is they're saying."