In an article by business author Jaron Lanier in the Jan/Feb 2018 edition of *WIRED UK* magazine, he reminds us that Facebook and Google now account for 75 per cent of online advertising spend, globally. In the same article, there is also a fascinating quote about the current problems with the Internet.

Lanier writes: “Something has gone very wrong: it’s the business model. Specifically, it’s what is called advertising. We call it advertising, but that name in itself is misleading. It is really statistical behaviour-modification of the population in a stealthy way. Unlike (traditional advertising), which works via persuasion, this business model depends on manipulating people’s attention and their perceptions of choice. Every single penny Facebook makes is from doing that and 90 per cent of what Google makes is from doing that.”

A prediction for 2018 is that Amazon is determined to get in on the act and carve out a major position for itself in the market. So, if like me, you were busy deleting a flurry of e-mails, between Christmas and New Year, inviting you to partake in all sorts of indulgence and expenditure, please know that those e-mails and other social media messages were not reaching you by chance, but by design.

We are all the targets of algorithms, created to watch over us as we surf the web, noting our habits, bookmarking what we watch or read, remembering where we linger and what catches our attention for more than a few seconds—even anticipating our next move with creepy accuracy. The phrase “statistical behaviour-modification” has me thinking that we are all being assimilated into a “consumer Borg” (Star Trek fans will know what I mean).
We may think that in healthcare, generally, and dentistry, specifically, we will be protected from this advertising manipulation, whether at the delivery end or as patients, but I suspect not. It exists today, even in a simple context, with the race for Google page one visibility in SEO, whether it is a battle with competitors in a given area code (the more densely populated, the more expensive) or the search for domination of a particular treatment modality.

Many dentists invest heavily in SEO and PPC even though the latest research by WIRED magazine indicates that 20 per cent of people searching on Google click on the number one result and 12 per cent on the second, while the rest are not significant enough to track. Even so, the attraction of the digital advertising drug is difficult to resist, especially because it means that you can hand over your money and get back to work, without having to think too much about the numbers game you are playing.

My best friend is the founder of a leading UK digital advertising agency and, having spent over £1 million per annum of his clients’ money on Facebook advertising, has a lot to say about the effectiveness of his methods. He sees the future belonging to those who can tell emotional stories targeted at those “personas” that his tribe now talk about all the time. Indeed, you and I are no longer unique individuals. The agencies and their algorithms want to categorise us by age, gender, education, location and a host of other factors.

A couple of years ago, I said in jest that Facebook was getting me wrong by assuming that, at age 62, I was interested in Saga motor insurance (even though I did not own a car) and Mahabi slippers (even though I already owned a pair). The competition for my attention, and yours, has since evolved greatly over a short period of time. The algorithms are now following the heat map I create as I browse the web and now “they” know that, as I approach 65, I run marathons, read good fiction, take adventure holidays, enjoy red wine and watch excellent TV dramas. My social media channels and my online shopping experiences are littered with a constant stream of interruptions that are based on my browsing history and buying habits. “People like you are buying things like this” has become the advertiser’s new mantra.

I admit that the same mantra will become more important in dental practice advertising and marketing over the next year, with perhaps only a small change in emphasis that it could be something like: “Patients like you are investing in treatments like this.” Will the statistical behaviour-modification of large cohorts of patients perhaps also appear in dentistry?

Frankly, it is already here, with the use of the effective recall system, the daily use of social media channels to publish photographs and videos, the publication of practice blogs as well as the e-mailing of patient newsletters and end-of-treatment interviews. All of these are designed to identify the characteristics of our favourite patients and include them in the process of spreading our brand message.

So far in dentistry, advertising is a manual exercise undertaken by committed internal marketers and treatment coordinators. Perhaps the algorithms created by the larger corporates and retailers to protect and grow market share will soon also arrive in dentistry. This will make for an interesting angle, including the manipulation of patients’ attention and their perception of choice. It sounds ominous, doesn’t it? We’d better get ready to compete.

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