

# Buying unlicensed slimming drugs from the Web: a virtual ethnography

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## ABSTRACT

The aim of this study was to describe and understand the purchase of unlicensed slimming drugs via the Web. This paper draws on social theory, specifically theories used within criminology to inform the analysis of Web purchasing of slimming medicines. Virtual ethnographic techniques, including non-participant observation of three Web forums were used, along with interviews with key stakeholders involved in medicines regulation in the UK. This paper presents the findings from a thematic analysis of text obtained from the forums. These indicate that particular aspects of The Web allow a new route to purchasing unlicensed medicine and appear to circumvent some of the threats and sanctions associated with illegal drug purchases. Accessibility is provided to those who previously would not have engaged in such activities. It is suggested that this may constitute a new method of conducting deviant behavior.

## Author Keywords

Web Science; Criminology; Virtual Ethnography;

## ACM Classification Keywords

J.3 LIFE AND MEDICAL SCIENCES: HEALTH  
J.4 SOCIAL AND BEHAVIORAL SCIENCES

## General Terms

Human Factors; Theory

## 1. INTRODUCTION

Medicines and drugs are subject to national and state/federal regulation. The definition and classification of drugs and medicines – including their legal status – varies as does the control of their purchase and supply in different locations and jurisdictions. The misuse, illegal consumption and purchase of drugs and medicines is not a new phenomena, but it is one which the Web may enable or magnify, opening up as it does access to online information and purchasing. This paper explores the issue of purchasing medicines via the Web by focusing on the purchase of an unlicensed medicine – Sibutramine. This is an anorexiant medicine which has been used in the past to treat obesity. It has been associated with clinical risks (notably cardiac arrest and

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stroke) and has been withdrawn from the market in the European Union, USA, Australia and parts of Southeast Asia. This paper describes the purchase of this unlicensed slimming drug via the Web in the context of UK legislation and regulation.

The risks associated with purchasing medicines via the Web include potential damage to health, legal liability and links with criminal organizations. This behavioral practice may arguably be perceived as deviant. Web Science is envisaged as necessarily multi-disciplinary, [1] and it has been suggested that the social sciences may have a particular role to play in this emerging field [2]. Criminological theories that have been used to explain deviancy were utilised to understand the driving factors behind the purchasing.

## 2. BACKGROUND

The control of the purchase and supply of medicines is regulated in the UK by national law. Medicines are defined within statute and are subject to licensing and regulation regarding their manufacture, provision and supply. The Medicines Act 1968 [3] defines medicines in three ways: as

- prescription-only medicines which can be obtained from qualified prescribers (e.g. doctors, dentists, nurse or pharmacist).
- pharmacy-only medicines (known colloquially as ‘over the counter’ medicines)
- and general sales list medicines which can be obtained without a prescription from a pharmacy or a supermarket.

Medicines are also licensed and this license can be withdrawn should clinical tests identify risks to health. A subset of medicines are subject to classification within the Misuse of Drugs Act 1971 [4] which defines three classes of controlled substances (A B and C) and sets penalties for illegal or unlicensed possession or supply. The Web has opened up new routes for obtaining medicine which may bypass or challenge legislation.

### 2.1. Risks associated with purchasing via the Web

The risks associated with purchasing unlicensed medicines via the Web include damage to health, being linked to potential criminal activity and being susceptible to fraud. Medicines may not be correctly formulated or be unsafe to use without medical supervision. Medicines may fail to meet safety standards or be counterfeit. Websites may be unregulated and expose the consumer to illegal medicines or potential credit card fraud or identity theft. Circumnavigating authorised channels and using the Web to buy medicines may result in illegitimate but not illegal behaviour, as legislation applies only to the sale and supply. Though there is no risk of criminal sanction the consumer is still

able to breach domestic regulation, suggesting that the law has yet to catch up with the Web

### 3. JUSTIFICATION FOR THE STUDY

The study focused on a single medicine – Sibutramine used in the treatment of obesity [5]. It was sold under a variety of brand names which included Reductil, Meridian and Sibutrex. This drug appeared to be well known among the slimming community. The European Medicines Agency determined that there was an increased risk of heart attacks and strokes associated with its use and the UK Medicines and Healthcare products Regulatory Agency (MHRA) suspended its license in January 2010 [6]. However, the drug can still be bought from Websites. This study investigated how people obtain these drugs, the processes they undertake to locate the drugs, as well as the legal, social and ethical implications of buying restricted drugs and medicines from the Web.

### 4. THEORETICAL PERSPECTIVE

Subculture is a generic term that encompasses all sub-culturally supported behaviour, violating conventionally sanctioned social expectations or expected rules of conduct [7]. Subcultural theories attempt to explain the formation of these groups and behaviours that may be considered deviant. They postulate that specific groups within society share attitudes and values that are precursors to criminal and/or deviant behaviour. Subcultural theories draw on other theories such as Marxism and labelling [8] and ideas and concepts from these theories have been used to examine drug misuse, pop cultures and youth gangs. Subcultural theories and the effect that group collective has on individual decision may be significantly Web related. The sheer scale of mass participation is unprecedented with groups involving changing figures comprising of shared attitudes and compliance. The extent to which the Web makes a difference to the structure and formation of the issue or whether it is purely replicating offline behaviour is unclear. Perhaps those who would not usually think about purchasing medicine and deviating away from obtaining it via authorised means are being subjected to the idea. These concepts helped to structure the analytical process of the study.

### 5. RESEARCH DESIGN

The research involved an ethnographic study using non-participant observation in virtual Web communities as well as interviews with key stakeholders in UK regulatory agencies. Virtual ethnography is an emerging approach that has adapted face-to-face ethnographic methods to study the Web [9].

#### 5.1. Data Capture and Analysis

The following search terms were used to explore potential Websites to include in the study: forum + slimming OR diet + pills OR drugs OR medications. The sites returned were ‘cased’ [10] in order to assess their value and suitability for this project: this involved checking that forums could be publicly viewed.

Three Websites were purposively selected. Documentary information about the sites was catalogued and slimming related threads were collected using Wget and manual copying and pasting. After selecting only data which referred to Sibutramine (including its other trade names), the final data set was comprised of 163 posts. These posts were examined, coded and analysed

thematically. Themes were examined with reference to criminological theories derived from the social science literature.

#### 5.2. Coding

The coding frame was designed and implemented by the main researcher. There was a clear focus as to the definitions and conceptual codes which were aligned with subcultural theories, to be used from the outset. For example Coward and Ohlin’s ‘Illegitimate opportunity structure’ – whereby obstructed prospects lead to illicit behaviour in attempting to attain specific means and goals [7], was used as a foundation for the code relating to consumers seeking to obtain the drug via improper means – ‘repudiating the law’. Throughout the coding process the definitions were updated to ensure that each conceptual code became more complete. Themes that had not previously been considered but arose during the coding and analysis were then included and looked at in the light of theoretical ideas – for example the theme of ‘frustration’ at not being able to procure the drug from the UK which can be obtained elsewhere emerged and this can be linked to Runciman’s concept of ‘relative deprivation’ which refers to being deprived of something that one might feel entitled to and which others may have [11]. The researcher drew on thematic analysis and constant comparative methods [12] to develop the coding and comparison of these. Data were summarised and entered into a framework or chart to facilitate these comparisons.

### 6. FINDINGS

It is clear that aspects of the Web have created a new route for the supply and purchase of medicines. The Web offers particular affordances (that is, functional and relational aspects which frame but may not determine the possibilities for action). This concept is allied to the concept of ‘action possibilities’ [13] found in the language of human-machine interaction.

Chen (2011) noted that buying and selling illegal drugs is “*as easy as buying used electronics — and seemingly as safe. It's Amazon — if Amazon sold mind-altering chemicals.*” [14]

Our data indicate that the Web enables the purchase of unlicensed slimming medicine:

*“I bought reductil online on www.generico.viagranow.eu event (sp) it is not available in pharmacy you can still order it online without any prescription.”*

*“Good news is you can actually buy them over the Internet with no prescription, bad news is cheapest place i found is £105 delivered for a months course, one a day!”*

The Web increases the awareness of medicine and its availability. In these quotes people share information about sites, the medicine, how to buy it, and the cost. Group dynamics are evident in these ‘conversations’ between multiple actors who view themselves as a distinct sub-group – namely the slimming community. They appear to value the thoughts and opinions of those who occupy this sub-culture.

Forum members also show awareness of the potential risks. These can be grouped together into criminality, health and fraud risks. Unlike buying ‘street drugs’ these transactions can be carried out

from the privacy and comfort of the consumer's own home and the Web offers anonymity:

*"Better news is I know where you can get them for cheaper but I can't advertise it on here so pm/email me if interested."*

Clearly the author is aware of the criminal connotations and the possibility that they may be indulging in behavior outside of regulation as they are requesting to continue the conversation offline. Perhaps using the anonymity the Web allows to create reverse labelling techniques that overcome their detrimental actions. Becker (1963) evidenced how the ethos of the culture of drug-users allowed individual drug users to avoid seeing their acts as deviant and to distance themselves from the negative tags associated with drug use. [8]

Some members recognize the health risks and express their anxiety in not having professional medical attention as a result of purchasing the medicine from the Web.

*"I have bought a months supply (10mg). However I am concerned about taking it without doctor supervision."*

The risk of fraud is also acknowledged and of concern to some members:

*"The problem is that I have sent email 2 days ago to www.generic-meds-store.com and I am still waiting for answer. Can I trust them???"*

Health related information is one of the main reasons that individuals use the Web [15]. Participation in Web forums about slimming, and searching terms associated with dieting or medicines exposes the user/consumer to advertising and to group influence. The forum members were readily seeking information:

*"After reading what you have to say i'm interested in buying some, how much are they and where is available place?"*

Some forum members in seeking information also implied that they were also looking to subvert regulation by acknowledging that the medicine was no longer available in the UK.

*"I used to take reductil but they've stopped selling it in the UK. Does anybody know of any online places that I might be able to get some?"*

Whilst the former quote used a more neutral 'consumer' language 'they've stopped selling' much as one might talk about a shop that had stopped stocking a particular item, the quote below highlights

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3. Medicines Act 1968  
<http://www.legislation.gov.uk/ukpga/1968/67/contents>

a forum user who knows that the medicine is not legitimately available.

*"Do you mind me asking where you order them from? Because they've just banned them in the EU and I can't get hold of any anywhere! I really need some."*

This again surfaces the idea of relative deprivation; this actor has been deprived of something which they 'need' and so cannot overlook feelings of entitlement. They will seek to purchase it elsewhere, regardless of the fact that it is not legitimately available anymore.

These data suggest that this sub-culture – or at least some members of it - are engaging in deviancy (action which lies outside the expected rules of conduct (slimmers are not 'meant' to obtain medicines without prescription) and regulation (this behaviour transcends a national regulatory and licensing framework).

## 7. CONCLUSIONS

Purchasing unlicensed slimming medicines was discussed on these three Web forums. It was beyond the remit of this study to examine whether actual purchasing took place, but statistics from the MHRA suggest that Sibutramine has been widely offered for sale in the UK since its suspension [16]. Subcultural theories have been used in studies of drug taking, pop culture and juvenile delinquency. In this study these theories have helped to inform the analysis and explore themes within the data. From this analysis it appears that the online purchase of unlicensed medicines is an example of a new mode of deviant behaviour – one which may be distinct from offline 'illegal' drug purchasing and use. The Web appears to remove or bypass some of the threats and sanctions associated with illegal drug purchases. We hypothesise that the Web provides access to unlicensed medicines to members of the slimming sub-culture who previously would not have participated in deviant behavior. Many of those engaged in exchanging information about Sibutramine are aware of its status as withdrawn or unlicensed but the Web provides a 'safe' way to engage in deviant behaviour. Further work will be required to establish whether participants in forums exhibit the characteristics of subcultures and the role that such groups have in removing the 'friction' and constraints of ethical and legal barriers to transgression.

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