‘You may need to read this leaflet again’: epistemic and deontic modality in US vs. Italian antidepressant Patient Package Inserts

Stefania Consonni

(University of Bergamo, Italy)

Abstract

This contribution focuses on medicine Patient Package Inserts. Aimed at the popularization of specific procedural knowledge outside the framework of clinical medicine, these texts are cognitively designed to mediate key therapeutic protocols throughout non-specialized audiences. Enabling users to perform their own therapeutic routine (albeit under the guidance of a doctor), leaflets offer a proactive representation of patients as fully-fledged subjects within the empirical protocol of cure. In the last decades, in concert with the evolution of medical communication towards more socially mediated and interdiscursive practices, the interactional involvement of patients in the representation of pharmacological treatment has been deeply intensified. Such process is evidenced by the language of PPIs, and in particular by their construction of deonticity and epistemicity, whereby what patients may, should or should not do with a medicine, and the effects that the medicine can, might or is expected to have on the patient (which the patient is to be aware of) are an essential part of the referential and performative meanings conveyed by the leaflet. Different linguistic systems and healthcare environments, however, codify such meanings in different ways, and although active principles are marketed worldwide, the modal strategies deployed in leaflets can vary across languages and contexts. This paper analyses and compares the English and Italian texts accompanying antidepressant drugs based on fluoxetine, one instance of which is Prozac. By analysing and comparing the grammatical and lexical construction of deontic and epistemic modality in the leaflets of all fluoxetine-based products currently licensed by the US Food and Drug Administration and the Italian Agenzia del Farmaco, this paper aims at investigating the linguistic strategies codifying both the pharmacological management of depression and the interactional representation of patients suffering from said disorder.