sponsor as superior, especially after delay, when memory for the specific ad information had faded.

On the other hand, because of their familiarity with pain relievers, the subjects may not have as easily accepted advertising information. A single exposure to the stimuli was probably insufficient to alter their prior beliefs and preferences. In fact, their choices reflected marketplace share data, with Advil and the filler brand, Tylenol, being chosen more often than Aleve.

Whether the advertisements had any impact on subjects’ brand preferences and opinions can be inferred from some of the statistically significant results. First, even though subjects were instructed to answer based on their own opinions, the advertising information appears to have influenced the subjects’ responses. An ad copy by delay interaction for the opinion questions was statistically significant only for the combined comparative of interest (i.e., “The most advanced pain reliever/antacid. Advil/Pepcid isn't faster”). Few if any subjects reported the parity comparison in the ad-communication questions. However, their answers to the opinion question suggest that, at least immediately after exposure, they did not believe the sponsor was faster than the comparison brand. Over time, however, their opinion reflects the implied superiority on speed of relief. Information integration that takes place over time may have led subjects to forget the source of the information and to attribute the sponsor superiority claim to their beliefs (cf. Johnson and Raye 1981).

Second, the order in which subjects answered the ad-communication questions had a statistically significant effect on brand preferences. More subjects chose the sponsor when they answered the ad communication questions before they gave their