

CONNECTING TO PHYSICIANS ONLINE

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Wendy White, Founder and President of Siren Interactive, was interviewed for an article about marketing to physicians online. The following article, reprinted from *Pharmaceutical Commerce* magazine, presents various industry leaders' insight into eDetailing and other online marketing channels.

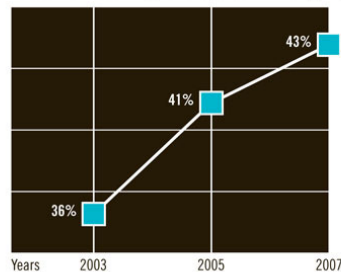
IT IS COMMONPLACE KNOWLEDGE THAT physicians, just like consumers, are spending more time online gathering information on pharmaceuticals and treatments. The pharma industry's first response to this has been to put suitable information online, either via websites that they manage, or through third-party portal sites like WebMD and others.

Pharma's second wave of Internet activity now is to use Internet access to build ongoing relationships with physicians. Direct-to-physician (DTP) websites provide continuing education, offer incentives, conduct surveys and more. The savviest pharma marketers are using the online channel as a complement and driver to their other marketing efforts, building, to use the popular catchphrase, a "360° view" of their audience.

Tracking the numbers

The market research companies that serve pharma are picking up the trend. At Manhattan Research (New York), Meredith Abreu, VP of research, says that more than 90% of physicians are online on a daily basis, and more than three-quarters of them say the Internet is "essential" to their practice. More specifically, the number of U.S. physicians participating in electronic detailing (e-detailing) nearly doubled in recent years — from 141,000 in 2002, to 246,000 in 2005. "The question is no longer 'Are they online?' Rather, the question we need to answer is how the Internet is changing the way physicians practice medicine," she says.

Fig. 1. Electronic Detailing Participation Among Physicians



Base: Among all U.S. practicing physicians
Source: Manhattan Research

both the reach and the life of the developed messages far beyond what is possible with a traditional sales force alone, says Steve Zatz, MD, an EVP at WebMD Professional Network (New York). "The doctor

controls the timing and the pace, which makes for a more positive educational experience."

“...electronic detailing nearly doubled in recent years from 141,000 to 246,000 in 2005.”

"A typical detail may result in 60 seconds of face time and then the sales rep is out the door," says Dominique Hurley, VP and GM of Dendrite Relationship

Marketing Operations (Woburn, MA). "By contrast, an e-detail can deliver deeper, richer content, and get the doctor meaningfully involved for a much longer amount of time, on his or her own terms."

A key benefit of the online experience for physicians is that they can choose when and for how long they want to participate. "We see in our research that physicians are most likely to conduct e-detailing programs during the hours of 8 pm to midnight — hours when the sales rep would not have access to that physician," she adds.

When done properly, Web-based outreach efforts give the marketing team an unprecedented opportunity to develop and deliver meaningful, detailed educational and promotional content related to drugs and disease states — using a flexible channel that extends

Web-based outreach to physicians offers demonstrable savings over conventional approaches. Even more important, relatively low-cost, Web-based initiatives aimed at physicians can help pharma companies to amortize their content-development efforts and investments across a much broader universe of interested participants than would be possible using just face-to-face sales rep communications, with content that has a much longer shelf life because it can be maintained online as long as it remains medically relevant.

“The good news for pharma marketers is that with online outreach, influence doesn’t end when the doctor closes his or her browser,” says Elizabeth Boehm, principal analyst for Forrester Research (Cambridge, MA). In a survey of 1,331 physicians published in May 2005, Forrester reported that 61% of physicians who had participated in one or more e-details (30% of the total survey pool) had asked for more information following an e-detail, and nearly half had requested a visit from a sales rep.

Equally encouraging is the fact that 65% of the e-detailed doctors said they prescribed more of a drug that was featured in an e-detail, up from 44% in 2003. (Interestingly, while 50% also said they have prescribed less of a given e-detailed product, Boehm notes that more than half of those reported that decreased prescribing was rarely in response to the e-detail).

It is against this backdrop that drug companies are increasingly turning to Web-based approaches to reach target prescribers. In fact, according to Verispan’s annual ePromotion Audit, which monitors online pharmaceutical promotion to physicians, drug companies spent more than \$329 million in 2006 on Web-based outreach to doctors, a 17.4% increase over the prior year.

Dynamic feedback

“At its simplest level, e-detailing is merely another sales and marketing tactic — another channel that can be used to broadcast an approved sales message to a target audience to increase awareness and pitch preference,” says David Ormesher, CEO of closerlook (Chicago), a creative, technology and relationship marketing agency. “The real strategic power of e-detailing, however, is as a key element in a broader relationship marketing program.”

Just as they’ve found with Web-based direct-to-consumer (DTC) outreach, pharma marketers are becoming increasingly savvy about exploiting the two-way interactivity the Internet offers, allowing them to gather useful

demographic information about participants (via registration information), and to solicit a bevy of strategic feedback and insight from them.

“If done right, these efforts can enable drug companies to

continuously refine and improve the effectiveness of their online programs, and develop long-term online relationships with target physicians — to move beyond just the piecemeal delivery of a single e-detail,” says Zatz of WebMd. They can also use the insight to help field sales

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ELIZABETH BOEHM,
FORRESTER

reps to customize their follow-up outreach efforts.

“In an ideal world, there should be truly closed-loop communication between the various promotional channels — and the rep would be able to glean information from an e-detail to better target the next visit with the physician,” says Abreu of Manhattan Research. “Of course, it’s important to avoid the ‘creepy factor’ of specifically telling the doctor that you know the concerns they reported during the e-detail, but reps can certainly leverage data gathered during an e-detail to inform the direction of future conversations with the physician.”

“Early on, the types of questions pharma marketers used to ask were typically aimed at checking to see if the doctor was learning along the way,” says Boehm of Forrester Research. Today, the questions embedded in a typical e-detail are much more sophisticated. For instance, content designers are able to embed useful polling questions so that the participants can automatically be sent down a path that is most appropriate for their existing expertise and informational needs during the progressive branching of the online

program, says Ormesher of closerlook. “With just one or two questions, you can discover specialization, particular clinical interests or needs, and size of practice in a therapeutic area, and then send that physician down the most relevant path in your online content.”

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MEREDITH ABREU,
MANHATTAN RESEARCH

The Web-enabled collection and analysis of information about self-reported behaviors can also help pharma marketers to develop meaningful incentives and rewards to entice invited physicians to

complete the e-detail, says Hurley of Dendrite. For instance, marketers can ask the physician to express his or her interest in (and even rank) such offerings as receiving product samples, patient-adherence program materials, ongoing news, event invitations, or published clinical results. "Then, once the physician completes the e-detail, the reward or incentive they receive can be based on those self-reported preferences," she adds.

While the usefulness of Web-based outreach is unmatched in terms of soliciting information from participants, drug marketers should be judicious and not bog down the user experience by asking for too much. "If you're not going to use it, lose it — that's what we always tell our clients," says Hurley of Dendrite.

Great user experiences, by design

E-detailing brings the marketing outreach efforts into an online format, but being electronic is not enough to fulfill its 'e' designation.

Rather, the format and content of the materials presented online must meet four other e-characteristics: They must also be educational, entertaining, engaging, and easy to navigate, as well.

"If the value of the medically relevant information will make them better doctors or positively impact their practice, they will come, but many of today's highest-prescribing doctors are already heavily recruited, and their time is tight, so you've got to make your offerings stand out," says James Miller, director of sales and marketing at MedConference LLC (formerly The Maxwell Group, Norristown, NJ), which was acquired by inVentiv Health last November.

"For many years, the quick and dirty way to build an e-detail was to simply repurpose the existing sales materials," says Ormesher of closerlook. "For startup e-detailing companies, this avoided the need to hire medical writers and for product managers, and it sidestepped the challenge of submitting new content through the regulatory review process. But it didn't take long for physicians to push back. When they responded to an e-detail invitation only to find a gussied-up version of what their sales rep is already using, they would often abandon the session and sometimes even opt out of future programs."

There is also an antecedent to e-detailing to consider—online education, says Wendy White, president of Siren Interactive (Oak Park, IL) "Our point of view is that eDetailing is much like other forms of distance learning in the way it leverages technology. Best practices that have been established over a decade of distance learning should

be used for eDetailing as well. What makes it more challenging to design is that the eDetail must respect physicians' time constraints, delivering maximum learning in the shortest possible time, without skimping on quality of information."

Siren Interactive pushes the educational aspect one step further, citing the value of patterning online communication after real-life educational customs of physicians. "One technique we've had great success with is a case-based approach," says White. "As long as you're imparting new information, this is a very effective way to reach physicians because it simulates traditional methods of acquiring new medical knowledge. It's an online version of grand rounds."

Thanks to today's broadband capabilities, a variety of dynamic content-delivery mechanisms are available, complete with graphics and animation. The use of Web conferences, webcasts, on-demand pre-recorded Web events, and podcasts, provide cost-effective ways to maximize audience participation and attention, and give

the educational and promotional materials greater longevity.

In addition to presenting educational e-details online, a growing legion of pharma marketers are also working to create dynamic, self-service portals, which allow physicians to browse through a variety of types

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WENDY WHITE,
SIREN INTERACTIVE

of medically relevant information (including clinical studies, relevant industry news and disease information), view flash-animated e-details, access webinars, pre-recorded and live presentations from a key opinion leader, download patient education materials, or sign in for access to product samples. Abreu cites RocheExchange.com, PfizerPro.com and MerckServices.com as good examples of such full-service portals, and notes that many other drug companies are working on similar initiatives.

Rules of engagement

The main challenge for drug companies is that there is still considerable resistance and skepticism to online promotions, which are often viewed as being too promotional, says Abreu. "And, because it's a user-controlled medium, doctors can come and go, pay attention or not pay attention, as they please," says Boehm. "By comparison, good reps have charisma, and the ability to be in your face — assuming they can get in the door. The Web has to compete with that." She adds: "To overcome this major hurdle, pharma companies have got to make their online content engaging, meaningful, and entertaining," she adds.

"Too often, instead of saying 'What does the physician want or need

to know?' drug companies are still saying 'What do we want to tell them?'" says Boehm of Forrester Research. "Because the user is in charge, pharma companies have got to realize that they don't get to get what they want — a target audience — unless that audience gets what they want, which is to learn something useful. Drug companies have got to take a user-centered approach when designing their outreach efforts and support materials."

"Marketing executives willing to invest in creating long-term online relationships with healthcare professionals will find that there is more value in listening than shouting," adds Ormesher of closerlook.

Lifecycle factor

As a relatively low-cost and effective option, marketers agree that e-detailing and other online marketing programs aimed at physicians are equally useful during both the introductory phases of a new drug, and in the later stages of the product lifecycle. Clearly, e-details developed for new drugs are useful to help educate numerous prescribers concurrently, to establish awareness, and influence prescribing practices in order to promote rapid adoption and gain market share. "Such efforts are essential to prepare the medical community for face-to-face visits with patients who may be asking for the drug by name, thanks to parallel DTC outreach efforts," says Hurley of Dendrite.

Meanwhile, the use of e-details and other Web-based outreach efforts is also relevant for mature drugs, since these efforts provide a relatively inexpensive and easy way to continue promoting products and protect market share during a drug's twilight years — long after sales-rep support has been transferred to other products that have potentially greater revenue potential. "In addition, mature drugs often wrestle with the perception that physicians already now everything there is to know about the product," says Ormesher of closerlook.

E-detailing provides a cost-effective way not only to keep a mature drug in the prescribers' consciousness, but to highlight new indications that may have emerged for such products, and to share relevant new insights into the disease state. However, he says: "Especially when it comes to mature drugs, if the goal is to sustain loyalty, the value proposition of an e-detail must be much broader than simply a rehash of old approved sales messages."

Training the speaker bureau

Web-based tools are also proving useful when it comes to training and accrediting speakers from the medical community to participate in pharma marketing efforts. To certify them, drug companies must

put candidate physicians through a rigorous, time-consuming and costly training program. Using the traditional approach involving face-to-face tutorials conducted at centralized locations, doctors must leave their practice, give up time with their patients or their research, and travel for the training.

In recent years, however, drug companies have begun using Web-based training modules to create a consistent, efficient online environment in which doctors can complete the required training modules from the comfort of their homes or offices, without necessarily sacrificing revenue-generating time with patients. Hurley notes that for one of Dendrite's client, the use of online training modules helped to shorten the overall training cycle for one speaker bureau from 12 weeks to 6 weeks, increase the number of targeted doctors who were able to complete the training, and save the company \$6 million overall, in terms of reduced travel and hotel bills and other costs.

Similarly, Miller of MedConference reports that one of its clients was able to educate the speaker bureau being developed for a competitive erectile dysfunction product in just two weeks, instead of

four months, using online modules that involved a mix of live and on-demand (pre-recorded) presentations. "This can provide huge savings and strategic advantage when you're in a very competitive market."

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DAVID ORMESHER,
CLOSERLOOK

Recruiting prescribers for e-details

"When it comes to e-detailing, recruitment is definitely the 'heavy lifting' part of the job," says Ormesher of closerlook. "Physicians are like professionals everywhere. They have limited time, attention and trust for new offers. The first invitation must come from a trusted source, and then, based on the subsequent experience, that trust will either be enhanced or diminished."

While "sales reps should provide the first line of defense for recruitment," Zatz of WebMD notes that today a growing number of companies, including WebMD, maintain large opt-in databases of physicians, and these can help brand teams to target potential participants, based on demographic information, specialties and sub-specialties, and prescribing practices, and other factors.

Zatz cautions that during recruitment efforts, drug companies must integrate parallel outreach activities, in order to minimize multiple, redundant solicitations. "We have all experienced the frustration of having multiple interactions with a company in which it appears the left hand doesn't know what the right hand is doing. It's the same way with physicians and their relationship with drug companies," he says.

Similarly, Boehm of Forrester suggests that an oft-overlooked practice is to include nurse practitioners, physician assistants and lower-prescribing physicians among their e-detail invitees, as these prescribers are often able to influence the prescribing behaviors within a group practice, and may not be as time-pressed or as reticent to participate as high-prescribing doctors who are often sought-after participants by many competing drug companies.

Honoraria

While one would think that the value of timely, medically relevant information related to drugs and diseases would be its own reward, studies show that the majority of physicians — 89% of physician Internet users, according to Manhattan Research — also expect adequate compensation for their time, and place honoraria above convenience as a driving factor in their willingness to participate in e-details and other online promotions.

“The practice of offering honoraria – typically medically relevant gifts – in return for doctors’ participation in online promotional campaigns has drawn criticism from regulatory and public interest groups — including an April 2003 crackdown by the Office of the Inspector General (OIG) on exorbitant honoraria for online promotions — contending that life sciences firms are trying to buy their way into physicians’ good graces, so companies must be careful when designing their e-detailing programs,” says Boehm of Forrester Research.

According to Verispan’s 2006 ePromotion Audit, 38% of ePromotion activities in 2006 did not offer any honoraria, an increase of 14% from the previous year.

“Honoraria must be limited in value and are governed differently based on state law where the physician practices,” says Ormesher of closerlook. “Companies that don’t want to manage this complexity will typically avoid honoraria, but this decision certainly affects participation on behalf of the physicians.”

Justifying the expenditures

As always, the pressure is on for pharma marketers to continually prove — and improve — ROI, and it’s no different when it comes to online initiatives. The costs, reach and effectiveness of online programs must be analyzed, and compared to traditional rep detailing, in order to assess its true effectiveness and cost-saving potential. “One way to measure ROI is to compare the cost of a rep visit with the activity generated by an eDetailing program. This is an approach to ROI calculation that brand managers can do on their own, without hiring an outside consultant or creating mind-numbing spreadsheet calculations,” advises Siren Interactive’s White. “What is the comparable cost of an effective rep detail in which the rep is able to spend enough time with the healthcare professional to deliver the product message?”

The best way to confidently demonstrate the efficacy of a given e-detail or other online marketing program is to set up a control and test environment, to isolate the particular program’s effect, says Ormesher of closerlook. One proven approach is to take a statistically significant sample from the database of completed

e-details, match those physicians with non-participating physicians with similar practice, geography, and marketing penetration profiles, and compare their scrip-writing history. Ideally, he says, such an undertaking should capture a 30-day period three months before the launch of the program, and then a 30-day period three months after the launch.

“At the end of the day, brand teams need to know whether their efforts helped to move the needle,” says Miller of MedConference.