THINKSTOCK

GOLDEN OLDIES

The rise of digital promotion and the need to wring every last drop of ROI from successful products have created a new niche: one with shoestring budgets, little to no sales-force support and competitors ready to pounce. **Frank Celia** explores late-lifecycle marketing and the companies and brands that manage to flourish there

Four years ago Pfizer's aggressive response to Lipitor's patent expiry created a game-changing playbook for pharmaceutical promotion. Instead of following industry standards and passively allowing the world's best-selling drug to be priced out of the market by generics, Pfizer took to the warpath.

It offered $4 co-pay discount cards to insured patients, undercutting makers of generics at their own game. It entered marketing agreements with pharmacies to publicize the discount and to sing Lipitor's praises. It crafted historic exclusivity deals with insurers, PBMs and mail-order services. Promoted heavily through ads and direct marketing, "Lipitor for You" garnered 750,000 patient sign-ups.

Healthcare had never seen a late-life-cycle drug sold so forcefully. Generic manufacturers and cost watchdog organizations cried foul, accusing Pfizer of gaming the system.

In the end, the campaign fell short of Pfizer's hopes. Despite patient interest, Lipitor sales in the US still experienced a steeper-than-expected fall. (An unforeseeable 2012 FDA safety warning that led to lawsuits and negative publicity didn't help matters. Too, it should be noted the drug remains a blockbuster, generating $2 billion globally last year.)

Whatever its ultimate success or failure, Pfizer's strategy had lasting influence. It stands as a touchstone for late-life-cycle management and offers two crucial takeaways. First, that all things being equal, patients really want to stick with their branded drugs; and second, the time periods preceding and immediately following loss of exclusivity do not need to be a slow death spiral for sales growth.

"Today's marketplace is very different from what we saw 20 years ago, when blockbusters seemed to be launching every month," says Nancy Finigan, president of GA Communications Group. "Replacing revenue from off-patent brands is just not as easy as it used to be. What this means is that ceasing promotion when patents expire is no longer a foregone conclusion. Companies are taking a second, third and fourth look at what they have in order to sustain and extend product life cycles."

The task is neither easy nor particularly lucrative. While Lipitor represents the gold standard, few products enjoy its enormous financial wherewithal. In other words, this is not the kind of business the big network agencies will likely chase. For rank-and-file brands, budgets are often very tight. Sales-force support, if it exists at all, will be negligible. Pharmaceutical companies devote scant in-house human resources to late-life brands; personnel who draw those assignments tend not to be organizational power players.

"It is not unusual to have a single person working on a brand," notes Natalie McDonald, president and founder of Create NYC, which specializes in LOE marketing. "And sometimes that one employee may be responsible for a few other late-stage products as well."

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>
> **—Nancy Finigan, GA Communications Group**

COVERING YOUR ASSETS

On the other hand, LOE promotion offers advantages making it a perfect fit for small- to mid-size shops. For starters, the brand already has momentum. R&D costs have been recouped. It has loyal customers, name recognition, product awareness—assets to build upon rather than to be created from scratch. Existing promotional materials can be reworked and repackaged with minimal effort. And where a promotional budget that shrinks from $4 million to $750,000 a year might cause a big network agency to lose interest, three quarters of a million dollars is bread-and-butter revenue for smaller players.

Perhaps most significantly, it does not take armies of salespeople to promote an established brand, while supporting existing demand is something digital marketing does extremely well. "The research data and in-depth analysis available with a digitally driven program offer a strong advantage with late-life-cycle brands," Physicians Interactive reported in a recent white paper. "Digital programs can easily direct tailored brand messages to targeted physician segments, plus reach low-decile targets at a considerably lower per-effort cost than is possible with personal promotion."

In terms of message, simply reminding HCPs of what they may have taken for granted over the years might prove effective. This approach was successful in GA Communication Group's late-stage marketing effort for INO Therapeutics' INOMAX (nitric oxide), a potentially lifesaving neonatal drug.

"The company had surrounded the brand with a strong service program that, because it had been in place so long, was expected and no longer highly valued," Finigan recalls. For example, emergency services, such as flying a product across the country to save a life, were commonplace. "We repackaged the brand's existing service offering to remind hospitals of the breadth of services provided to them that would be almost impossible to duplicate through a generic supplier or on their own," she says.

A lot of creative muscle goes into taking a fresh look at existing data, which was a factor in the INOMAX campaign as well. "We worked with the client to conduct an analysis of pooled data from pivotal studies in order to demonstrate effectiveness across disease severity," Finigan continues. "This gave an old brand an entirely new opportunity to expand utilization."

HCP SOS

Getting a "mature" product back on HCPs' radar screens is paramount. In the years since a brand ceased being a hot topic, important prescribing developments may have occurred; these need to be ferreted out. "Companies should work with brand-loyal KOLs in developing and documenting new medical positions so they can take advantage of the years of real-life successes with the brand," says Geoff Melick, GA's chief innovation officer.

One quick and cost-effective way to accomplish this is often a well-designed survey. Surveys almost always uncover some little-known wrinkle that can then serve promotional ends. A case study presented by Physicians Interactive describes a survey of 30,000 dermatologists that, when combined with eSampling and eNewsletters, led to a 15% increase in new prescriptions.

While such approaches often find success, leveraging brand equity is easier among patients than among HCPs, according to Tim Frank, founder and managing partner of Triple Threat Communications. That is why Lipitor's $4 discount card was such a stroke of genius, he says: Physicians yearn for the next innovation, but patients prefer to stick with what they know.

Frank created Triple Threat after years of watching twilight brands receive short shrift at the big network agency where he worked. "The big pharma client would cut resources on the late-stage brand. As soon as that happened, the agency would reduce focus and put a lot of junior people on the team," he recalls. As a result, Frank felt that an underserved market was there for the taking.

The challenges may be psychological. "Everybody wants to work on a launch brand. Nobody wants to work on a late-stage brand," he says. "So you've got to create a level of energy similar to a launch environment to keep the brand team engaged." The work atmosphere should be buoyant and optimistic, not elegiac and dismissive, he adds.

"That's where you can get really creative," agrees Triple Threat EVP of strategy Bob Hogan. "You don't necessarily need to put armies of people on it. But you do need to put some thinking—some new thinking—behind it." ■