
Building

Patients would like to get a lot more help from pharma, and pharma would like to help patients get a lot more. For any other industry with a loyal customer base, this would be a dream scenario.

James Chase explores the disconnect

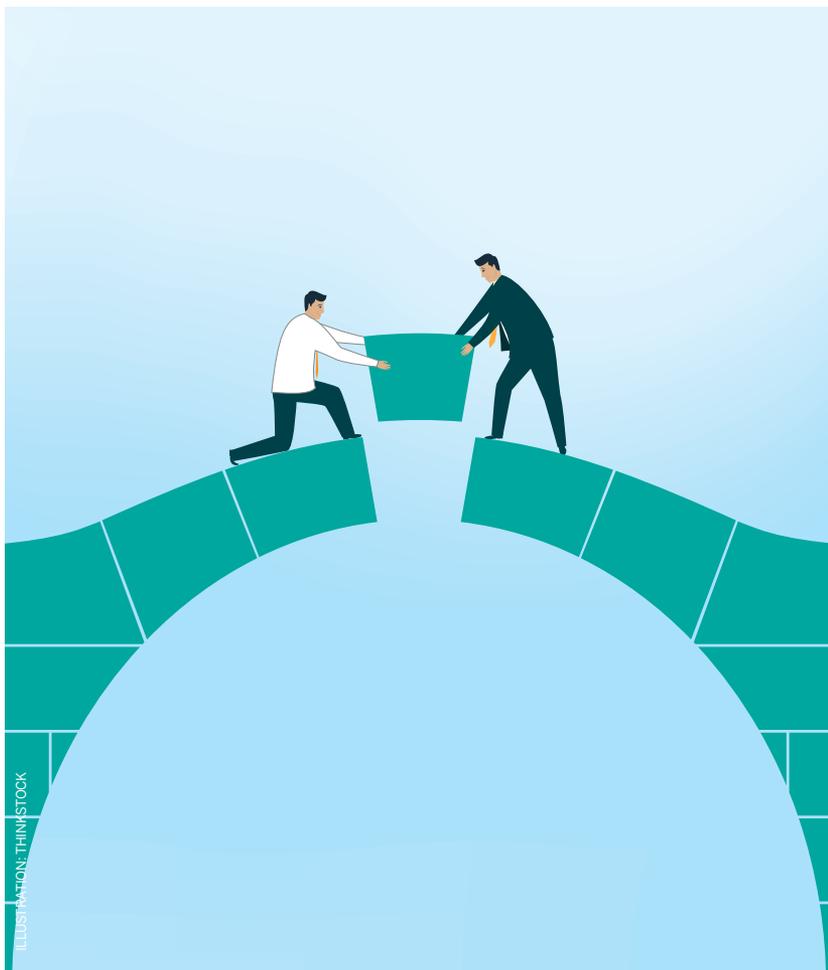
Over the past few years, putting patients first has become one of the essential traits of any organization that is looking to progress (or just plain manage to survive) in the life sciences field. You hear the phrase “patient centricity” every day. However, the degree of authenticity with which that concept is being executed varies greatly across the industry.

Despite having been at the center of the health-care system for decades, engaging with patients has not come easy to a pharmaceutical industry that was originally built on driving sales to healthcare professionals. But the present era demands a whole new level of customer interaction that extends far beyond hawking bottles of pills, and pharma is still grappling with how to transition from a transactional operation to a service industry.

“It has to be patients first,” said John Hosier, executive director, commercial operations, Eisai, at an *MM&M* event last year. “Everybody has got the motto—somewhere. But ‘patients first’ is really what we are talking about when we get back to value and talk about how to make things better, and how to get people to buy into the research that we’re delivering, and not make it look like it’s biased. That only happens if we find a way to prove that we’re in it for the patient.”

While a lot of progress has been made of late, most pharma companies are still a long way from delivering the level of engagement and types of brand experiences to which consumers have become accustomed in other sectors—and now expect from the pharma industry.

Brenda Snow, founder and CEO, Snow Companies, told *MM&M* last fall that she has met with companies in the past to whom patient-centricity meant little more than, “‘Let’s have a meeting and get two or three patients here, shake their hands, give them a hug, and then we’ve ticked that box—we



Bridges

did patient-centricity this year.' You don't just get somebody to come to a meeting, share their story and then their whole world is solved. The conversation needs to keep going and you have to be invested in it. If you're in it, you need to be in it."

Consumer behavior

The digital phenomenon has, of course, reshaped the way that people behave and communicate, not to mention their expectations for brand experiences. Importantly, these behaviors are industry-agnostic and so, from the patient perspective, what you see in, say, consumer electronics applies equally to healthcare; in other words, pharma no longer gets a free pass.

So where are today's healthcare consumers and what are they doing? According to Manhattan Research's (mR) Cybercitizen Health US 2013 study, the number of Americans using mobile phones for health information or tools in 2013 rose significantly once more—up 27% to 95 million. What's more, 38% of online smartphone users agree that their devices are "essential" for finding health and medical information. The same study also found that 45% of online US adults with a chronic disease said the internet was essential to managing their conditions.

Similarly, mR's ePharma Consumer 2013 study showed that among US consumers who own a smartphone and access prescription drug information, 35% used their devices for this purpose in 2013—up 52% over a period of just two years. And the number of corresponding tablet owners from this group that had used their tablets to look up prescription drug information had tripled from just 8% two years ago. Conversely, prescription drug research via desktops and/or laptops had dipped from 91% to 84% over the same two-year period.

This increasing reliance on mobile is placing an even greater emphasis on the importance of offering

Patient Pointers

76% of patients think pharmaceutical companies should provide information and services that help patients manage their own health**

45% of online US adults with a chronic disease said the internet was essential to managing their conditions*

95M Americans used mobile phones for health information or tools in 2013, up 27% from 2012*

63% of patients would participate in a pharma rewards program, but only 10% have access to one**

42% of marketers (pharma, biotech, devices, diagnostics) reported an overall increase in consumer/patient budgets in 2014 †

Sources:

*Manhattan Research, Cybercitizen Health US 2013

**Accenture Life Sciences study: Great Expectations: Why Pharma Companies Can't Ignore Patient Services

†MM&M/Ogilvy CommonHealth Healthcare Marketers Survey 2014

patients a true mobile experience online. However, after reviewing 160 pharma-owned websites, mR found that a woefully low 28% had been mobile-optimized.

Is pharma servicing its patient audiences?

We know that consumers' needs and expectations are increasing, and we also know that pharma companies have pledged and re-pledged their commitment to patient populations. So how well are they servicing their end users?

According to an Accenture study of 2,000 patients in late 2013, not too well. The report concluded that certain services, while highly valued by patients, are "severely underserved, underutilized or nonexistent."

Accenture found that 76% of patients think pharmaceutical companies have a responsibility to provide information and services that help patients manage their own health, and that they are most receptive to pharma reaching out to them when they are about to start a medication.

The study also highlighted a number of "gaps" between the types of services patients want from pharma and those they actually receive, such as Rewards Programs (63% want, 10% receive) and Financial Assistance (51% vs. 10%). Product Information and Physician Referrals were the two highest services received, although both were under 50% (48% and 42% respectively).

Interestingly, the survey also found that patients are generally very satisfied with the services they receive—when they do get them, that is. And the ones they rank as most important are Product Information (73%), Financial Assistance (64%) and Rewards Programs (60%).

Furthermore, more than 60% of patients said that they would be willing to provide information on their health in order to get the services that they

Overview



“Patients first’ is really what we are talking about when we get back to value and talk about how to make things better”

—John Hosier,
executive director,
commercial
operations, Eisai

want. Clearly, there is a lot of room for improvement from the industry.

“I think we understand the decisions and we understand what works from an engagement perspective,” said Terri Young, executive director, sales and marketing, Bristol-Myers Squibb, at an *MM&M* roundtable late last year. “But at that decision point, where does the customer go for information? When and how? And are we there?”

Young also noted the importance of conveying the value of products to the patient community. “You have to understand what job your product is intended to do and that goes back to understanding the emotional underpinnings of how people are treating their disease and interacting with an illness. You need to ask yourself: ‘What role is that pill playing?’ A diabetic patient probably will not think, ‘That pill is going to lower my A1C.’”

Pharma consumer activity

So are pharma companies starting to match their patient-centric intentions with increases in patient resources?

According to the latest *MM&M/Ogilvy CommonHealth Healthcare Marketers Survey*, 42% of marketers (pharma, biotech, devices, diagnostics) reported an overall increase in consumer/patient budgets in 2014, with just 15% recording a decrease. In terms of channels, 71% reported increased consumer budgets for mobile/apps, 69% reported increased spending in social media, 64% in digital consumer ads and 56% in websites. At least the needle is moving in the right direction.

“Patients have become our larger focus,” said Lori Horvat, marketing director, Ariad Pharmaceuticals at an *MM&M* Leadership Exchange in spring. “Working with advocacy groups, [doing] social media, disease education, getting patients to be champions and to ask their physicians the right questions—that’s the biggest change in how I’ve invested my resources over the past six years.”

Of course, one of the greatest challenges to the industry remains explaining to consumer audiences why the price of some treatments is so high. “I got a letter the other day from a woman who said: ‘Why the heck does your product cost so much when it’s a bunch of salts?’ and she wants her money back,” said Patrice Pickering, Braintree Laboratories, at an *MM&M* roundtable last November. “They don’t understand what the process is from beginning to end. It’s an \$80 product. Is it worth it? It can save your life.” ■

Red for stopping power



Galderma Laboratories recently launched a national awareness effort, “Red is Wrong”, to increase the understanding of the facial redness caused by rosacea and of the treatments available. The campaign comprises print, digital and broadcast components, as well as an online program at www.RedIsWrong.com, which launched on March 3. During the first two days of launch, the site yielded 12,000 unique visits, in the first six weeks it generated 252,206 unique visits.

“Rosacea can be frustrating, embarrassing and can cause anxiety, but unfortunately it often goes undiagnosed because people do not recognize the symptoms, or know that they can be treated,” says Fraser Halscheid, VP, US prescription business unit, Galderma Laboratories. “The Red is Wrong campaign seeks to make people aware of the symptoms and encourage them to get effective treatment so that rosacea no longer has a negative impact on their life.”

The campaign, which uses bold imagery to create stopping power, initially takes an unbranded approach. “The first step to helping any patient is helping them recognize that they may have a medical condition,” says Halscheid. “Once that awareness is raised, we want to let them know that there is effective treatment available. But the unbranded condition awareness has to come first.”

