

The Great DTC Shake-Up

Patient perspectives on direct-to-consumer advertising



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“Patients want convenient access to drug information without always having to engage their physician.”

Cheryl Lubbert, Health Perspectives Group

Executive summary

Although it has been several decades since the first direct-to-consumer (DTC) advertisement hit TV screens, the use of such promotional tools has recently come under a spotlight, with the American Medical Association (AMA) calling for an outright ban in 2015¹ and motions to curb DTC proposed in both houses of Congress in 2016.²

Yet, investment in DTC promotion shows no signs of slowing; pharma has been steadily increasing expenditure since 2012, and data for the period October 2015 to September 2016 show a rise of 18% on the previous year. With the total for this period reaching \$6bn, 2016 looks likely to have been a record year.³

In our ever-more patient-centric world, a key question arises – what do patients think about DTC? Health Perspectives Group, experts in patient engagement since 2002, partnered with eyeforpharma to answer this question in today’s changing environment. They contacted the Food and Drug Administration (FDA) and secured permission to reuse and update the patient portion of an FDA study conducted in 1999 and 2002, looking at patient and physician attitudes toward DTC. Health Stories Project – Insights (HSPi), a division of the Health Perspectives Group, then undertook a survey of patient attitudes, results from which are published for the first time in this white paper.

The **DTC Attitudes, Behaviors and Preferences** survey takes its protocol from the earlier study and uses the FDA survey as a baseline, tracking how patient perspectives have evolved across nearly two decades. Eyeforpharma then spoke to senior thought leaders in the pharmaceutical industry to gain feedback on these patient insights and to ask how companies are adapting to the evolution of engaged patients.

The survey’s findings show that investment in DTC may be increasing but its effectiveness is decreasing. Pharma’s approach to DTC is also decoupled from patient needs, causing patients to disengage from traditional tactics and, in some cases, become actively hostile to the medium. As a result, pharma is not just failing to maximize the value from this increasingly expensive investment, the current approach to DTC is undermining industry efforts to re-position itself as patient-centric.

“Patients have become increasingly engaged in their healthcare, capable of researching and asking sophisticated questions about treatment options,” says Cheryl Lubbert, President and CEO of Health Perspectives Group and a 25-year veteran of the pharmaceutical industry. “Patients want convenient access to drug information without always having to engage their physician. They often prefer information that is delivered in a digital environment, and they’ve made it clear they appreciate information that comes through other patients.”

Regulator constraints are cited by many as the reason why industry cannot meet these changing patient needs. However, the latest data on DTC spending confirms that the industry isn’t adapting,⁴ with DTC TV receiving the lion’s share of investment, despite a majority of patients expressing dislike for the medium.

According to some advertising agencies, the failure to evolve lies with pharma’s reluctance to move away from product-centric marketing tactics. However, this could be about to change as a new cohort of companies are making strong commitments to a more patient-centric advertising and marketing approach, and are experimenting with a range of variations on this theme.

1 <https://www.ama-assn.org/content/ama-calls-ban-direct-consumer-advertising-prescription-drugs-and-medical-devices>

2 <https://www.statnews.com/pharmalot/2016/03/04/drug-ads-taxes-al-franken/>

3 <http://www.fiercepharma.com/dtc-advertising/pharma-s-dtc-ad-spending-soars-past-5b-2015>

4 Kantar Media

By listening to patient needs and involving patients in the design of advertising campaigns, this new model of engagement is winning champions within the patient community and delivering results.

The state of DTC

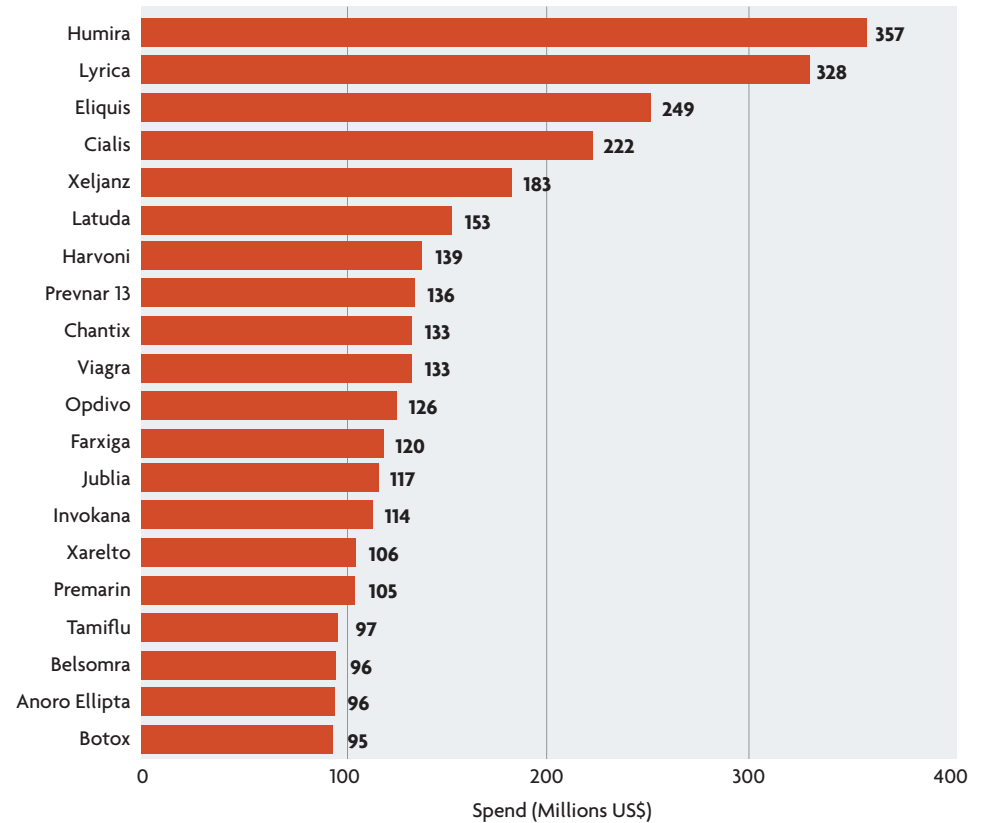
Since DTC advertising first burst onto our TV screen in 1983 – with Boots Pharmaceutical’s pain reliever Rufen⁵ – it has divided opinion. While some saw the innovation as a logical extension of a burgeoning consumer and patient rights movement,⁶ with the philosophy that information could only lead to empowerment, others worried that DTC would undermine the patient-physician relationship and lead to worse decision-making.

While the FDA initially reacted negatively to the Rufen commercial, there were some within the Administration who were open to the new format. Peter Rheinstein, Director of Drug Advertising and Labeling at the FDA at the time, and contributor to this white paper, described an atmosphere of willingness to explore DTC if it could, in fact, be beneficial for the patient.

However, some of the harshest criticism came from within the industry itself. Edgar G. Davis, Vice President of Corporate Affairs at Eli Lilly & Co at the time, made a statement to Congress that, “the potential pressures of public advertising of prescription drugs on the scientific decisions of a physician are both unwise and inappropriate.”⁷

Fast forward to 2016 and Lilly has changed its position; in fact, it was one of the biggest DTC spenders in 2015, splashing out \$222 million to promote Cialis.⁸

Figure 1: Top 20 products by DTC spend in 2015



5 <https://www.statnews.com/2015/12/11/untold-story-tvs-first-prescription-drug-ad/>

6 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2690298/>

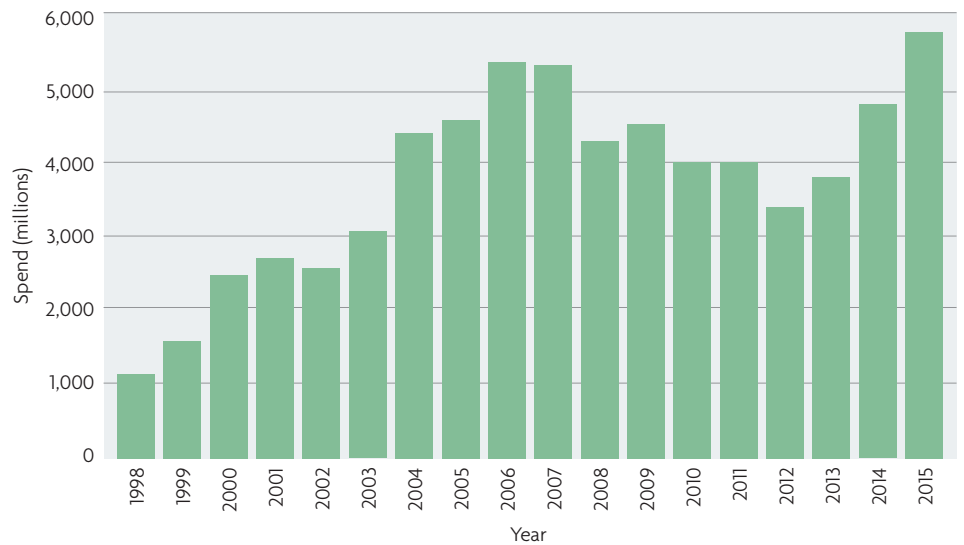
7 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2690298/figure/fig01/>

8 <https://www.statnews.com/2016/03/09/drug-industry-advertising/>

Looking more broadly at industry investment, the state of DTC appears extremely rosy. Pharma has steadily increased expenditure since 2012. Data for the period October 2015 to September 2016 shows an increase in spending of 18% over the previous year, at \$6.2bn. 2016 looks likely to have been a record year.

In spite of this growing investment, or perhaps because of it, criticism of the medium is growing among many healthcare stakeholders, most notably the medical community and policy makers.

Figure 2: DTC ad annual spend



Source: Kantar Media

Physicians see DTC as a threat

In November 2015, the American Medical Association (AMA) called for a blanket ban on DTC advertising.⁹

It may seem surprising that such extreme criticism has arisen several decades after the first ad aired, but the decision wasn't unanimous, says John Kamp, Executive Director Coalition for Healthcare Communication, an industry lobby group for DTC.

"Although the AMA took this position, it was not an uncontroversial position," says Kamp. "There were a lot of doctors against it. Doctors are worried that their position is being undermined in a lot of ways, but most importantly by insurance companies limiting what they will reimburse. Doctors feel less powerful and they see DTC as a further encroachment."

The FDA's Rheinstein, who was present at the AMA meeting when the vote took place, adds: "Physicians are concerned with losing time through having to justify to the patient why their preferred product may not be relevant, and they are worried that patients are being coerced by pharma to request treatments that won't result in the best treatment outcome."

In short, physicians want to be left alone to do their job and feel that pharma is getting in their way.¹⁰



9 <https://www.ama-assn.org/content/ama-calls-ban-direct-consumer-advertising-prescription-drugs-and-medical-devices>
 10 <http://pharmamktg.blogspot.is/2016/03/annual-spending-on-direct-to-consumer.html>, Kantar Media

“Any legislation that restricts DTC is extremely questionable under the First Amendment.”

John Kamp, Coalition for Healthcare Communication

Legislative action is unlikely

In 2016, motions calling for restrictions on DTC were proposed in both houses of Congress,^{11, 12} however, in spite of this and the strong grievances of the AMA few believe legislators will take action. “Any legislation that restricts DTC is extremely questionable under the First Amendment,” says Kamp.

With commercial speech protected by the Supreme Court and a complete ban, therefore, extremely unlikely, any fundamental changes to restrict DTC ads would likely be very limited. Wayne Pines, President of Regulatory Affairs and Healthcare at APCO Worldwide, says: “I don’t think [change] is on anyone’s agenda. The FDA in December 2016 issued two enforcement letters objecting to distractions while risk information was being presented, and this may affect how DTC ads are designed, but no fundamental changes are being discussed in how DTC is presented. DTC is here to stay.”

While legislative action may be unlikely, pharma would do well to reflect and understand the AMA’s concerns. The body is considered to be an extremely effective lobbying group and is well resourced (in 2015, it was the third biggest spender on lobbying).¹³

Nicole Mowad-Nassar, Vice-President of External Partnerships at Takeda, believes the conversation is timely. “DTC is clearly an effective way to generate awareness. However, pharma marketers have challenges with consistently developing creative communications that resonate with patients,” she says.

The great DTC shake-up

While many concerns have been raised by healthcare stakeholders about the current role of DTC advertising, an important voice has, so far, been left out of the discussion – the patient. Do patients believe their relationships with their physicians are undermined by DTC? What’s more, are current DTC strategies even meeting their needs? Could DTC be more patient-centric?

In the first part of this paper, we answer these questions using data from bespoke research undertaken by Health Stories Project – Insights (HSPi), a division of the Health Perspectives Group. Using the earlier FDA survey on patient attitudes towards DTC advertising as a reference point, this survey highlights a range of important trends and offers some insights into how companies can refine their current DTC model.

In the second part of the paper, we ask industry leaders to predict the future of DTC based on the findings of the HSPi research, and offer a roadmap for companies wishing to evolve their DTC offering to match the demands of patients and other healthcare stakeholders.

11 <https://www.statnews.com/pharmalot/2016/03/04/drug-ads-taxes-al-franken/>

12 <http://www.adweek.com/news/advertising-branding/threat-ad-ban-looming-pharma-fighting-repair-its-reputation-170409>

13 http://www.huffingtonpost.com/2015/04/23/lobbying-groups-gop_n_7130040.html

SECTION ONE: What do patients think about DTC?

This next section explores the results from the **DTC Attitudes, Behaviors and Preferences** study conducted by Health Stories Project – Insights, in November 2016.

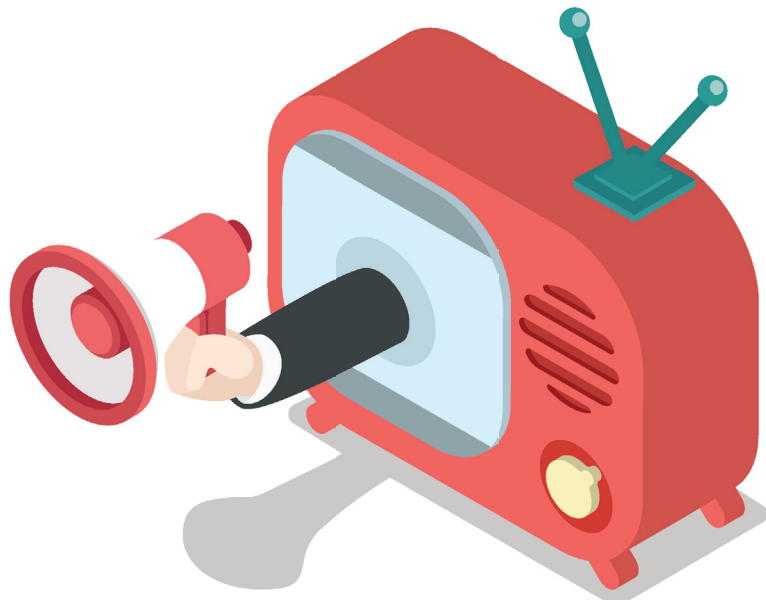
The study takes its research protocol from *Patient and Physician Attitudes and Behaviors Associated With DTC Promotion of Prescription Drugs*, a series of two surveys carried out by the FDA in 1999 and 2002 to better understand patient and physician attitudes, with results published in 2004.¹⁴ By mirroring these studies, we are able to use them as a baseline and track how patient perspectives have evolved.

In common with the FDA study, HSPi's survey asked patients whether DTC was an effective source of drug information and whether it helped them to make healthcare decisions. However, it also went further than the FDA protocol in order to investigate whether patients value DTC and how pharma could make DTC more patient-centric.

This survey clearly illustrates that, while patients still see DTC as useful, pharma is failing to maximize its investment in DTC. Patient preferences have changed dramatically since the FDA study, yet industry strategies have not adapted.

In addition, the survey also reveals the new meaning that the patient-physician relationship has taken on in the eyes of the patient, and underlines that pharma has a unique role to play in the delivery of drug information.

¹⁴ <http://www.fda.gov/downloads/AboutFDA/CentersOffices/CDER/ucm109877.pdf>



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“With increasing numbers of people consuming media through ad-free services, certain demographics are likely seeing less ads.”

Gina Battiste, formerly of Astellas

Study results

The first part of the survey asked respondents about their recollections of and feelings about direct-to-consumer communication through various channels and the types of messages delivered, along with the impact these things have on their behavior.

Fewer patients recall seeing a DTC ad on TV

Although 2016 is set to be the biggest year for DTC TV expenditure, the results show that fewer patients recalled seeing a DTC ad on television within the previous three months. While 72% and 81% of respondents remembered seeing an TV ad in 1999 and 2002 respectively, this proportion dropped to 69% in 2016.

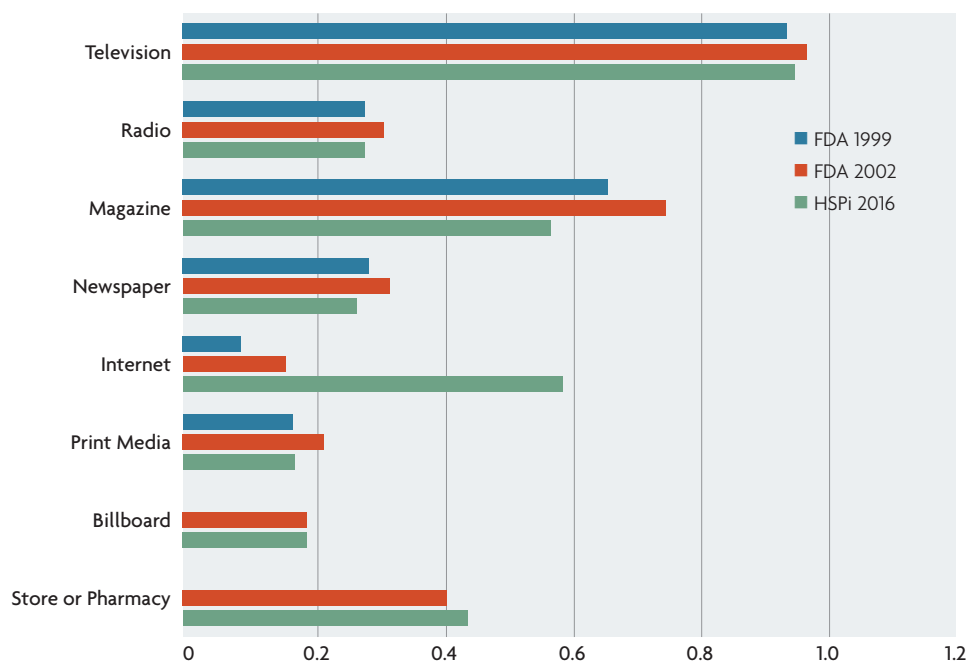
With increasingly large sums invested, this may come as a surprise. However, one factor could be that the novelty has simply worn off. Investment in 1999 was already on the rise, increasing by a third on the previous year to \$1.6bn,¹⁵ but DTC TV was still relatively new for many consumers and the FDA only relaxed its rules two years earlier.¹⁶

The demographic shift in how people are consuming media has also had an impact, says Gina Battiste, former Director of Urology Marketing at Astellas. “People were more focused on the TV in 2002. Now people are more used to seeing DTC ads, they tune them out mentally or change the channel.” Also with increasing numbers of people consuming media through ad-free services, certain demographics are likely seeing fewer ads.

More patients are engaged through digital channels

While recollection overall has dropped, the survey showed huge growth in the significance of digital as a channel, with respondents who recalled seeing a digital ad rising from 9% in 1999 to 59% in 2016. This mirrors the demographic shift in consumption – for those who recalled seeing an ad in each survey, similar numbers recalled being engaged through TV. This suggests that the dip in DTC’s reach has less to do with TV effectiveness and more to do with how people are consuming media.

Figure 3: Awareness and exposure to DTC advertising



15 <http://pharmamktg.blogspot.se/2016/03/annual-spending-on-direct-to-consumer.html>

16 <https://www.statnews.com/2015/12/11/untold-story-tvs-first-prescription-drug-ad>

“On average, [HCPs] are spending 7-10 minutes with a patient; this is simply not enough time to diagnose and educate a patient effectively.”

Tonya Winders, Allergy & Asthma Network

Patients continue to seek further information

A stronger metric for the effectiveness of DTC is the number of people motivated to seek further information by a DTC advertisement. Here, the results show this percentage remained unchanged between 2002 and 2016 at 43%.

For Battiste, this is evidence that digital tactics have become more sophisticated. “Even though there is a big shift [in media consumption], DTC is so much more targeted. While my son and I are watching the same show on HULU, we are still seeing different ads. A lot of this has been driven by technology; we are much smarter and this allows us to be much more targeted.”

She argues that the impact of DTC could be even higher than the survey suggests, pointing to an unwritten law of advertising. “Awareness takes place even if the patient isn’t aware of it. At Astellas, we did better than 43%.”

Table 1: Respondents who were motivated to seek further information by a DTC ad

FDA 1999	FDA 2002	HSPi 2016
53%	43%	43%

When patients want information, they turn to digital

While patient use of print media collapsed, digital consumption grew tremendously, a trend that has been observed for some time (the use increased from 18% in 1999 to 38% in 2002). The HSPi study broke this question into two categories to capture whether the patient sought information through a product ad or a browser/search, but it is still possible to compare the results. We see huge growth even when we take those searching online in isolation, with 61% of patients reporting they did so.

Patients have changed their relationships with physicians

The standout result from this section is the drop in patients motivated to seek additional information from a healthcare professional – a decline from 83% in 1999 to 47% in 2016.

This does not necessarily mean that DTC is undermining the patient-physician relationship and is perhaps more likely to be a symptom of wider shifts taking place in how healthcare is delivered.

“Our system historically relied on HCPs to conduct education at the time of diagnosis, but as healthcare has evolved, visit times have shortened significantly,” says Tonya Winders, President and CEO of the Allergy & Asthma Network. “On average, [HCPs] are spending 7-10 minutes with a patient; this is simply not enough time to diagnose and educate a patient effectively.”

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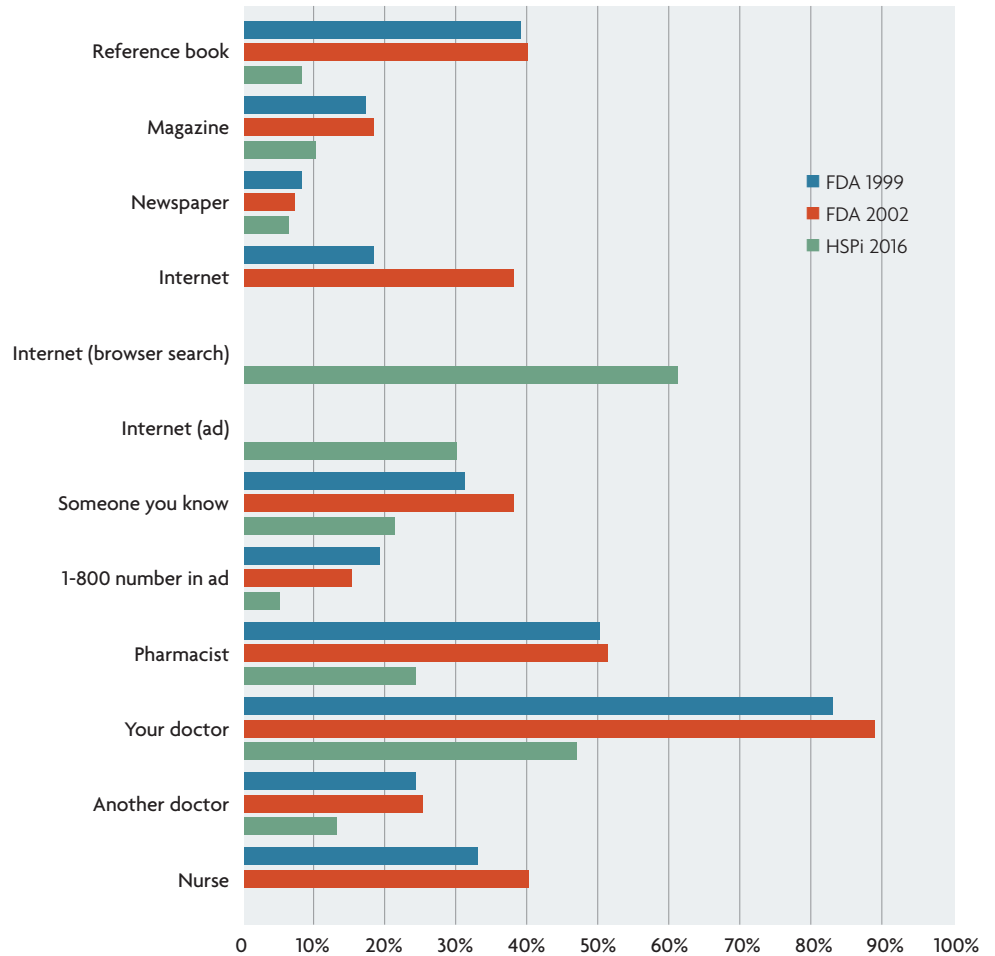
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Figure 4: Where do patients look for information?



"Patients are no longer isolated by geography and solely dependent on physicians as our main source of information," says a patient advocate who wishes to remain anonymous. "The internet connects us all; support groups are only a Google search away. People living with any chronic health condition are drawn to connect with others going through the same thing."

As the physician relationship changes, the exponential growth of interest in digital resources has been driven by more than just the convenience of online search. Patients are using digital media to access a new form of drug information held by other patients; the lived experience of using a treatment.

Given these arguments, the interpretation that DTC advertising is undermining physician-patient relationships – as forwarded by the AMA – is likely to underestimate the complexity of that evolving relationship.

Engaged patients seek sophisticated information

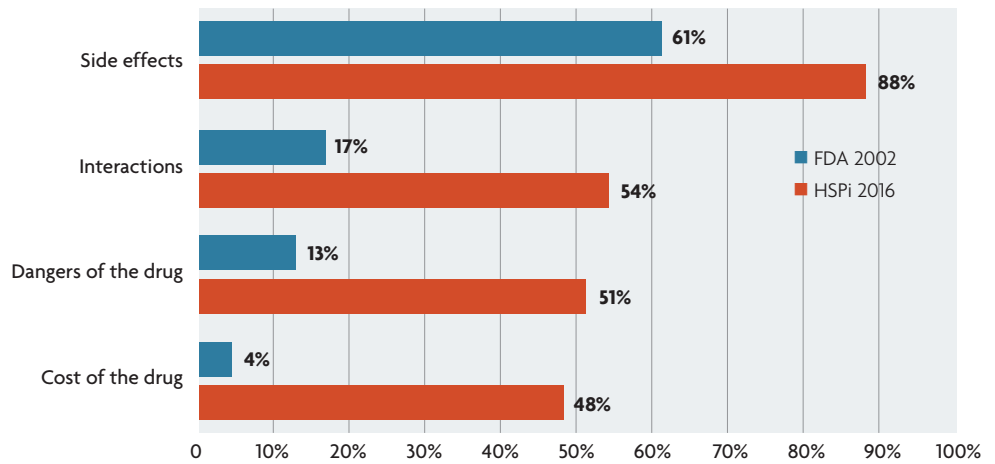
This line of argument is supported by data suggesting that patients are seeking more complex drug information. Compared to 61% in 1999, 88% of respondents in 2016 sought information on side effects, with an even more marked increase in patients looking for information on interactions with other drugs, risk profiles and costs.

"We have the obligation to present our information with fair balance. As a result, patients note that some pharmaceutical product ads come across as formulaic," says Takeda's Mowad-Nassar.

“While scare tactics might be good for awareness, I’ve always thought DTC shouldn’t blame people.”

John Mack, Pharma Marketing Blog

Figure 5: What type of information do you look for?



Because DTC TV is regulated by constraints such as the ‘fair balance’ rule requiring pharma to balance positive and negative product messages,¹⁷ it can be very difficult to communicate all the information patients need.

Most patients dislike DTC

Although DTC remains effective, this has come at a price. The number of respondents who reported enjoying DTC ads has plummeted from 52% in 1999 to 22% in 2016.

There are a number of possible factors contributing to this reduced level of interest. Drastically changing media consumption habits have made it easier for consumers to skip ads altogether, making them seem like more of a nuisance than an integral element.

Another possible reason is a negative reaction to the use of what could be perceived as ‘scare tactics’ or shock value to garner attention in a crowded media environment.

Pharma has a responsibility to be more tactful, says John Mack, the industry thought-leader behind the Pharma Marketing Blog. “While scare tactics might be good for awareness, I’ve always thought DTC shouldn’t blame people,” he says.¹⁸

“I’m not a fan of TV ads for pharma products; they don’t depict patients accurately,” says the anonymous patient advocate, who also criticizes TV ads for communicating product information in a manner that can intimidate rather than empower the patient. “Even my 93-year-old mother has commented that the side effects sound worse than the health problem the medicine is supposed to help.”

But others in the industry disagree, noting that health information itself can sometimes be scary. “You don’t have to enjoy an ad for it to be effective,” says Battiste. “I personally don’t enjoy ads when I’m not in the mood for them.”

Where pharma is helping to highlight the severity of a health problem that some might be reluctant to acknowledge, ‘shock tactics’ may be appropriate. Indeed, if an ad effectively connects patients to a care service, why worry if it is uncomfortable to watch?

However, such tactics may have more than a superficial impact. Between 2002 and 2016, the number of people who reported feeling more worried about their health due to DTC has



17 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3278148/>

18 <http://pharmamktg.blogspot.is/2016/09/do-drug-ads-need-to-scare-consumers-to.html>

“Accurate information about disease and treatment options makes patients and healthcare providers better partners.”

Holly Campbell, PhRMA

increased, from 17% to 24%. Clearly, the industry must make sure they are creating empowered patients, not anxious ones.

Fewer patients think DTC helps them make better decisions

Patients in the earlier FDA study reported that DTC encouraged and supported them to engage their physician in order to learn about new treatment options. This is a commonly cited benefit by supporters of DTC, such as Holly Campbell, Senior Director of Communications at trade body PhRMA. She says: “Accurate information about disease and treatment options makes patients and healthcare providers better partners.”

Table 2: Patient opinions of DTC advertising

	FDA 1999 (% who agree)	FDA 2002 (% who agree)	HSPi 2016 (% who agree)
I like seeing advertisements for prescription drugs	52%	32%	22%
Advertisements for prescription drugs help make me aware of new drugs	86%	77%	67%
Advertisements for prescription drugs give enough information for me to decide whether I should discuss the drug with my doctor	70%	58%	
Advertisements for prescription drugs motivate me to discuss the drug with a doctor			38%
Advertisements for prescription drugs help me have better discussions with my doctor	62%	43%	39%
Advertisements for prescription drugs help me make better decisions about my health	47%	32%	30%
Advertisements for prescription drugs do not give enough information about the possible risks and negative effects of using the drug	61%	60%	52%
Advertisements for prescription drugs do not give enough information about the possible benefits and positive effects of using the drug	50%	44%	46%
Advertisements for prescription drugs make the drugs seem better than they really are	59%	58%	59%
Advertisements for prescription drugs make it seem like a doctor is not needed to decide whether a drug is right for me	25%	23%	31%
Only the safest prescription drugs are allowed to be advertised to the public	31%	22%	20%
I would not talk with my doctor about an advertisement for a prescription drug because it would seem like I did not trust my doctor	7%	10%	16%
Advertisements for prescription drugs encourage me to look for information about potentially serious medical conditions I might be at risk of developing		39%	
Advertisements for prescription drugs motivate me to look for information about my health			41%
Advertisements for prescription drugs make it seem like the drug will work for everyone		42%	50%
Advertisements for prescription drugs make me worry about my health		17%	24%
Advertisements for prescription drugs help remind me to take my medicines		18%	24%

In 2016, patients have changed their minds. Fewer respondents in 2016 believed that ads helped them have a better discussion with their doctor (62% in 1999, 39% in 2016). Likewise, the number of respondents who believed DTC helped them make better decisions dropped from 47% in 1999 to 30% in 2016.

According to Dave Finlay, Commercial Business Director at AstraZeneca, this points to saturation. “Patients are potentially less aware, less motivated to bring it up and less likely to ask about new products, but with saturation it could imply something different.”

With the growth in investment in DTC, patients may see an increase in ads that aren’t relevant, he says. This could have two implications; patients may feel bombarded with safety information that makes for uncomfortable viewing, or they may feel that DTC ads do not give them relevant benefit.

People who dislike DTC also dislike advertising in general

The HSPi study included an additional set of questions to test whether any negativity around DTC advertising could be explained by a general dislike of advertising. Here, 42% of patients reported they do not like advertising in general, while 44% reported that they valued advertising as an information source. Comparing how patients responded to the earlier questions in the survey alongside this result, it was clear that negative perceptions of advertising in general are strongly correlated with negative perceptions of DTC.

Table 3: Attitudes towards advertising

	HSPi 2016 (% who agree)
I dislike advertising in general	42%
I don't pay a lot of attention to advertising in general	52%
I like advertising in general because it informs me	44%

The majority of patients find DTC helpful

An overwhelming majority of respondents (76%) reported feeling positive or neutral on the question of whether DTC was helpful to them. Only 24% reported that they believed DTC to be harmful.

Considering this alongside data on the dislike of advertising in general, pharma is performing quite well, a fact potentially explained by the phenomenon of the engaged patient. “It is because patients are so involved in their own health that they find DTC useful,” says Battiste. “This used to be in the hands of the doctor, but it is so much easier to get information and learn about your health. As technology gets smarter the patient gets smarter.”

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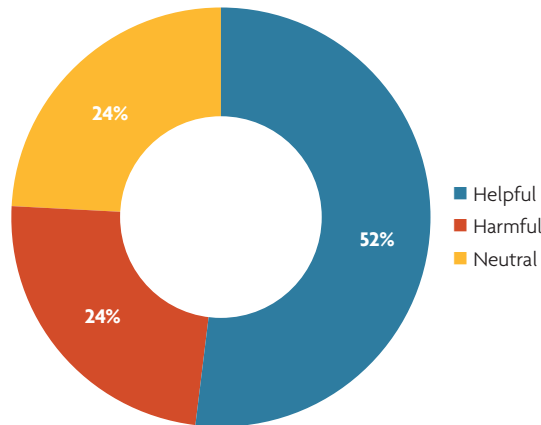
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Figure 6: What do patients think of DTC?



The second part of the survey asked respondents about the possible channels that pharmaceutical companies can use to communicate with patients, as well as their preferences and perceived value of these channels.

Patients value both TV and digital

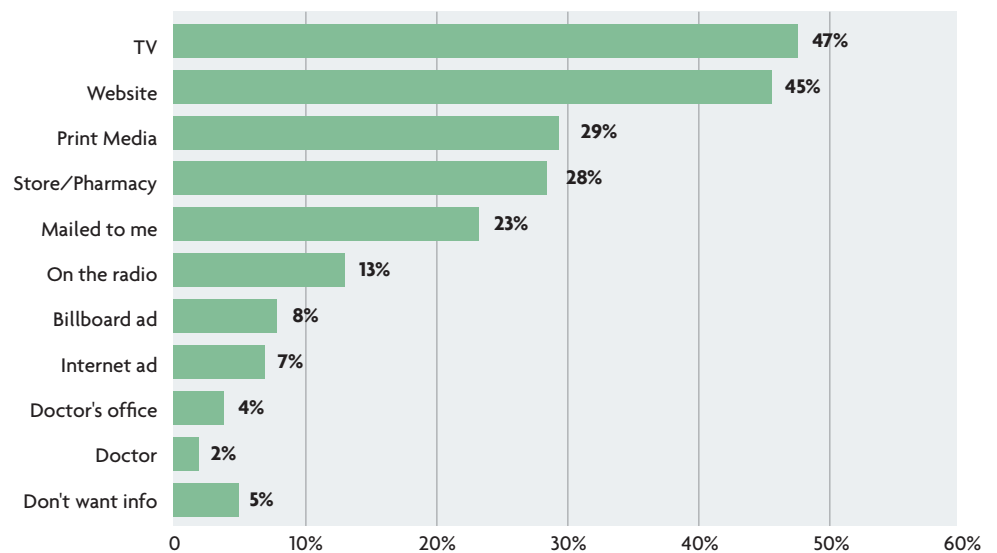
HSPi asked patients where they wanted to be engaged; here, TV topped the list with 47% of respondents claiming it as their preferred channel. This might seem a curious result in the context of the growth in preference for digital information, although digital did place a very close second with 45% of respondents.

The biggest surprise here is how few people wanted to get drug information from a doctor; just 2%, with 4% wanting it from a doctor’s office. How should we interpret this? For industry blogger Mack, it could simply be due to the fact that we do not enjoy going to the doctor, although, for Battiste, it is the superior convenience of other sources of information that lie at the heart of this preference.

Considering these data, it is clear that the patient sees the patient-physician relation differently from the picture painted by the AMA. While 95% of patients want some form of drug information, they do not want to consult their healthcare provider to acquire it. Instead, patients prefer to receive drug information across a whole range of channels that they can choose from at their convenience.



Figure 7: Where do patients want to access drug information?



“When it comes to their health, people want to hear from people like them, who have a shared experience.”

Jo Anne Jensen, Health Stories Project – Insight

Patients want information from other patients

Patients see their peers as the most consistently useful source of drug information. Only print media performs as strongly as patient-to-patient mentor programs when respondents are asked directly to rate and compare the usefulness of communication strategies, with ‘brochures or booklets that give disease or drug information’ receiving the joint-highest score at 54%. ‘Ads that include real patients instead of actors’ ranked a close second at 53%, and ‘brochures or booklets with disease or drug information that include real patient stories’ ranked third at 52%.

Physicians are not perceived to add any additional value beyond what can be gained directly from connecting to another patient. Interestingly, patients rank speaker programs featuring only patients as highly as speaker programs containing both a physician and patient.

“When it comes to their health, people want to hear from people like them, who have a shared experience,” says Jo Anne Jensen, SVP, Technology & Insights at Health Stories Project – Insight. “These findings confirm that the perceived value of a program or initiative is increased when real patient stories are included.”

What’s more, DTC performs poorly when ranked against non-promotional approaches. 28% of respondents believed ‘Ads for a particular drug’ to be useful, but 44% found ‘Ads that raise awareness for a disease but do not mention a specific drug’ useful.

The high rank of ‘Ads that include real patients instead of actors’ makes it clear that patients are sensitive to content when it is clearly promotional. They detected this within the digital realm too, as shown by the joint lowest-ranking position of ‘Social media stories about specific prescription drugs’ despite the enthusiasm for digital throughout the survey. This option tied for last place with ‘Ads for a particular drug.’

Table 4: How do patients rate drug communication strategies?

	HSPi 2016 % useful
Patient-to-patient mentor programs where you can be connected to others like you living with your disease state	54%
Brochures or booklets that give disease or drug information	54%
Ads that include real patients instead of actors	53%
Brochures or booklets with disease or drug information that include real patient stories	52%
Materials that facilitate conversations with your healthcare provider	52%
Online patient communities where you can connect with others like you	50%
Videos about a disease or treatment options	48%
Videos about a disease or treatment options with real patient stories included	47%
Physician and patient speaker programs to learn more about products or the disease from both a physician and another patient	47%
Patient speaker programs where you can listen to other patients talking about their disease or treatment	47%
Ads that raise awareness for a disease but do not mention a specific drug	44%
Social media stories about patients living with your disease state	35%
Ads for a particular drug	28%
Social media stories about specific prescription drugs	28%

“When it comes to their health, people want to hear from people like them, who have a shared experience.”

Jo Anne Jensen, Health Stories Project – Insight

It's interesting to note that 'Social media stories about patients living with your disease state' performed poorly in the ranking despite the popularity of digital channels and the fact that patients stated they want to connect with people like them living with their disease. This tells us that there is much room for improvement in the quality of content being developed for social media channels.

Survey conclusions

While fewer patients recall seeing a DTC ad, the effectiveness of DTC as a motivator to prompt information-seeking behavior has remained constant. Moreover, in spite of the recent hostility from some stakeholder groups, a majority of patients still see DTC as a valued source drug information.

Patients' expectations for transparency, product information and customer service have changed, affecting the way they regard doctors and other healthcare organizations. As their expectations rise in other parts of their lives, they expect the same from healthcare. Patients are more engaged than ever before and expect increasingly sophisticated information to help them manage their health, and they want this to be delivered with greater convenience.

However, although there are structural shifts at play that support pharma's role in the delivery of drug information, patient needs have shifted, and pharma hasn't adapted. Patients value the connection to other patients above all else and they want to hear from others like them who communicate in the same language. While pharma pours money into cookie-cutter TV campaigns that are heavily promotional, the patient has clear preferences for non-branded content and likes engaging over digital platforms.

With DTC tactics remaining somewhat effective despite sometimes poorly matching patient preferences, does the industry have impetus to change? At best, pharma is missing an opportunity to engage the patient and build empathetic connections to their brand. At worst, the industry is actively damaging its reputation at a time when it is working to reinvent itself as patient-centric.

With continued growth in DTC investment, the negative effects of DTC will likely compound. As patients disengage from content that is overtly promotional and delivered through channels they do not consider relevant, they could become less likely to start important conversations with their physicians and to explore new treatment options.

Alternatively, by changing direction towards targeted digital content and by helping patients connect to their peers, pharma could deliver on important unmet patient need while maximizing the value from an increasingly expensive DTC bill.

The next section of this white paper presents a roadmap for companies wishing to change direction in this way.

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Study demographics



The FDA study was completed through randomized telephone interviews, while the HSPi research used an online panel controlled by quotas to ensure respondents were representative of the population.

One notable difference is the higher number of respondents from the 25-34 age bracket in our study. Jo Anne Jensen, SVP, Technology & Insights at Health Stories Project – Insight, who oversaw the study, observes that this is a typical feature of telephone surveys. Jensen notes that, in general, women are more likely to participate in surveys, an effect that tends to be more pronounced with telephone studies. Another rule-of-thumb is that African American and Latino ethnic groups tend to be under-represented in surveys, and we see this to a similar degree within both the FDA and HSPi study.

An interesting bias that Jensen highlights is that participants tend to respond more positively when interviewed by a person, either by phone (as in the previous FDA surveys) or in person, rather than online. Therefore, negative results may be under-reported and positive results exaggerated in the telephone-based FDA study, while the HSPi results conducted online may be closer to real patient perspectives.

A core difference is that the FDA studies screened for respondents who had visited a physician in the previous three months, while the HSPi study expanded this to the previous 12 months. Since wait times to see a physician have lengthened significantly since the original surveys were conducted, we expanded the window of eligibility to reflect this change. Jensen does not believe this had a noticeable impact on the survey results.

Table 5: Demographics

Age	FDA 1999	FDA 2002	HSPi 2016
18-24	7%	7%	7%
25-34	16%	15%	26%
35-44	23%	18%	14%
45-54	20%	22%	17%
55-64	14%	17%	19%
65+	20%	21%	18%
Gender	FDA 1999	FDA 2002	HSPi 2016
Female	65%	65%	53%
Male	35%	35%	47%
Ethnicity	FDA 1999	FDA 2002	HSPi 2016
American Indian/Alaska Native	4%	4%	1%
Asian/Pacific Islander	3%	2%	4%
Black/African American	12%	10%	8%
Hispanic/Latino	4%	4%	3%
White	77%	79%	81%
Total Respondents	960	944	518



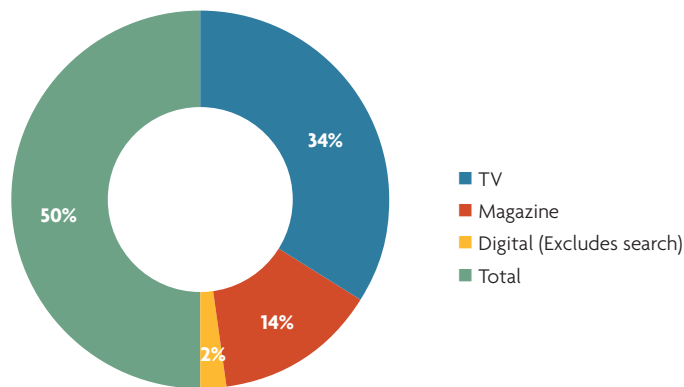
“It is very challenging to tell a relevant story in a 90-second ad.”

Nicole Mowad-Nassar, Takeda

SECTION TWO: THE FUTURE OF DTC

While patients are calling out for more digital content, the latest data for DTC expenditure shows that the industry isn't responding to these priorities. The HSPi survey showed that 61% of patients sought digital information, yet according to Kantar Media, investment in digital DTC (promotional digital assets, excluding search) remains a sliver of overall investment at just under 9% of total spend for 2015-2016. Even taking into account the higher relative cost for TV advertising, the lower emphasis on digital could be impacting the lower quality of online content and perceptions of it noted above.

Figure 8: Pharmaceutical DTC spending (October 2015 to September 2016)



Source: Kantar Media

This demand for more digital content is recognized by each of our pharma contributors, however, many see expensive TV campaigns as a necessary investment.

“In our case, TV is still very cost-effective,” says Battiste. “In fact, TV also benefits digital. If we were not to do DTC, digital would not be as effective as it is now. It is all about having an overarching campaign.” Investment is strongly synergistic across channels and should not be considered in isolation, she says. While the patient doesn't value DTC TV as highly, it has unique qualities that make it a necessary part of a journey to push patients towards more attractive channels.

Digital drives traffic and offers patient-centricity

TV is not the only way to drive traffic, says Reid Connolly, CEO of Evoke Health, a leading DTC ad agency, who points to recent work showing that digital can perform extremely strongly. “We've just done large-budget campaigns using online media as a traffic driver and seen massive lift in awareness over baseline across 2, 4 and 8-week timeframes. We were also able to do it at a much greater level of targeting than is possible with DTC TV,” he says.

Our survey data describes a patient that is increasingly hostile towards DTC TV advertising, possibly due to ads being seen as unsettling or irrelevant. In contrast, digital is a healthy alternative, with a superior ability to tell relevant stories at a fraction of the cost of DTC TV, says Takeda's Mowad-Nassar. “It is very challenging to tell a relevant story in a 90-second ad,” she says. “In a digital environment, you can present the information in a more engaging, compelling way. It also has some cost advantages that are attractive to pharmaceutical marketers.”



“Pharma should not have brand pages on social media, they have branded websites for that.”

Reid Connolly, Evoke Health

Yet, digital spending is down in 2016 compared to the previous year, while DTC TV spend grows, both in terms of overall expenditure and as a share of overall spending. Digital expenditure (excluding search) in 2016 dropped by 5.19%, and, when we look at the figures for 2014-2015 (the latest time period with data that includes search) there is a bigger drop, with a decline of 12.13%.¹⁹

Table 6: Pharmaceutical advertising spending (in \$ millions)

Channel	Oct '14-Sept '15	Oct '15-Sept '16	% growth
TV	\$3,488.3	\$4,220.6	20.99%
Magazine	\$1,482.7	\$1,708.6	15.24%
Digital (excluding search)	\$217.8	\$206.5	-5.19%
Radio	\$13.0	\$38.4	195.38%
Newspaper	\$61.9	\$27.6	-55.41%
Out of Home	\$5.4	\$9.8	81.48%
Total	\$5,269.1	\$6,211.5	17.89%

Source: Kantar Media

If you wait for guidance, you may miss a digital opportunity

A barrier preventing many in the industry from running down the digital path, is a lack of clear guidance from the FDA. Marketers know the importance of digital in DTC, says Battiste, but, “with social, we are very much handcuffed in what we are allowed to do.” Uncertainty fuels a culture in which there is already a low appetite for risk, leading to resources being invested in channels traditionally known to be effective, such as a DTC TV.

Yet, does the will exist to bring about change? “A lot of people in the communications segment of the drug industry want to see more guidance in the use of social media, but I don’t think that the FDA perceives the need as a major industry priority,” says APCO Worldwide’s Pines. “Additional guidance will come but will not change the underlying framework for how companies use social media.”

“There is a big confusion with social media that unnecessarily hinders progress,” says Evoke Health’s Connolly. “Pharma should not have brand pages on social media, they have branded websites for that. Consumers know this, they don’t expect to see branded messaging there and this is the type of activity that could be most problematic.”

Patients in our survey made it clear that they didn’t find branded social helpful; only 28% of patients considered it to be useful. Perhaps this can be explained by the fact that many pharma companies are using traditional DTC advertising models for branded social media efforts, instead of tapping into real patient stories and experiences as preferred by patients in the survey.

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“Although regulation can certainly pose challenges while brainstorming for new programs, it can also inspire creativity.”

Roseanne Durril, Takeda

Be truly patient-centric

The excuse of regulation is employed too often and too quickly, says Mike Rutstein, Founder and CEO at Strikeforce Communications, another prominent DTC agency. “A lot of agencies hide behind regulation in order not to innovate. We see that as a weak excuse. Breakthrough work has been achieved in other highly regulated industries. Just look at Geico in insurance. People who do great things are inspired by hard challenges.”

To get over this mental hurdle, internal structure and culture must be changed, yet marketers who cut their teeth in physician marketing may not understand how to implement patient-centric DTC, he says. “In the physician world, you want to make it complex. In the consumer world, you have to make it simple. That is really the unmet need in the industry, and that is why you see such weak work.”

While pharma has been good at adopting the ‘nothing about me without me’ mindset for other areas, such as clinical trials, patient support and package design, it does not apply the same thinking to DTC ad design, missing the opportunity to build empathetic connections with patients.

“This is why forward-thinking pharmaceutical companies are working to adapt their established structure to make it feasible to be patient-centric across their organization compliantly,” says Health Perspective Group’s Lubbert. “While traditional DTC is still a prominent way to reach consumers, more and more pharmaceutical companies are creating strong two-way communication programs to build enduring relationships with patients in the manner they prefer.”

Thinking outside the box pays dividends

Companies like Takeda are showing that creative experimentation is possible in the field of DTC promotion. Roseanne Durril, Associate Director, Corporate Communications, points to initiatives like IBD Unmasked, which raises awareness of inflammatory bowel disease (IBD) in partnership with Marvel Custom and the Crohn’s and Colitis Foundation of America (CCFA).

“Although regulation can certainly pose challenges while brainstorming for new programs, it can also inspire creativity,” she says. “It’s often necessary to think outside of the box in order to develop innovative and exciting campaigns that achieve business goals and remain compliant, but that very challenge can lead to some of the best ideas.”

The team behind this campaign began by immersing itself in patient research with the IBD community to understand the experiences of patients living with ulcerative colitis and Crohn’s disease. This research revealed that, while prevalence of the condition is increasing, patients find it difficult to start conversations that acknowledge what they are going through.

This patient insight inspired the central theme of the campaign, says Durril. “With this in mind, we wanted to take a different approach to raising awareness. Our communications agency, Ketchum, partnered with us to develop IBD Unmasked, which encourages patients to embrace their inner superhero and express their personal experiences.”

The superhero took shape as Samarium, who works with a team of sidekicks to combat adversaries, while taking on IBD.²⁰ The campaign launched across print comics, digital ads and social media and included a showcase at Comic-Con. Importantly, this innovative approach – both with campaign message and event participation – allowed them to utilize paid media along with earned media, which is more prevalent with public relations campaigns.

²⁰ <https://ibdunmasked.com>

“Instead of TV advertising for a product, or as a supplement, marketers can focus on the key learnings from this survey and provide more of what patients want most – a real connection with others like them.”

Cheryl Lubbert, Health Perspective Group

Partnering with Marvel was a key part of the strategy to engage this wider audience, explains Durril. “We wanted to increase awareness and understanding of the disease more broadly and we knew that tapping into the world of comics and superheroes would help reach millions.”

Using patient input throughout the design of the campaign was a crucial driver, she says. “We believe that listening closely to what patients want and need, and finding a way to bring that to life, has a great deal to do with the success of this campaign.”

Trying something new does require more initial investment than a typical public relations campaign, but you see the benefits down the line. “The creative process, including story and character development as well as illustrations, and the review and approval process for all components, were new to many of our partners. In all, the final results and response from the patient community were well worth the time,” says Durril.

Takeda has also benefited in ways they wouldn’t have with a traditional campaign, especially through employees proudly promoting the campaign themselves, organically driving awareness through their own social channels.

However, one of the most powerful endorsement came from the patient community, with one patient tweeting: “My IBD used to make me feel like a mutant. Today I found out I’m a superhero.” It is evidence that pharma can play a valuable role empowering the patient, and that they can do so without scaring patients into action.

DTC design starts with the patient

The core lesson behind such campaigns is that a patient-centric approach to DTC starts with a deep understanding of the patient journey, then works backwards to design messaging.

“It is going to take a lot more research at the beginning of the campaign,” says AstraZeneca’s Finlay. “Pharma also has to find strategies to scale this information to create messaging that appeals to the larger patient population.”

While this will be certainly easier for companies that have highly specialized portfolios, where they can invest in deep expertise in a particular patient profile, there are worthwhile payoffs for companies with broader scope too. Understanding how patients interact and fit in across a range products will help pharma deliver targeted messaging and avoid redundancy.

Pharma can connect patients to their peers

The alternative to traditional DTC TV advertising is for pharma to infuse the patient voice and develop two-way communication between pharma and patients.

“Instead of TV advertising for a product, or as a supplement, marketers can focus on the key learnings from this survey and provide more of what patients want most – a real connection with others like them,” says Lubbert. “It is possible to create valuable content that is by patients and for patients to infuse the social media they use every day, the community sites they search and live events they attend with information that means the most to them. This is helping to rebuild the trust that is lacking in our industry.”

The anonymous patient advocate experienced the value of this first-hand as part of a campaign for a neurological drug, recalling it as a life-changing experience. The patient joined a company-sponsored peer education program after blogging about the experience as a clinical trial participant. “It’s only human nature to want to connect with others who share your diagnosis in order to gain insights around symptoms and treatment options.”

Executed with care, these campaigns have lasting impact, says the advocate, adding that success stems from being authentic. “Our stories were never manipulated to paint a more favorable picture of the drug. In fact, some of the passion I felt for [the drug] had to be reined in. I really respected that and felt [the company] was always presenting the patient speakers and their stories in the most ethical and authentic manner.”

Deeper collaborations within the patient advocacy community pays off, says Mowad-Nassar. “We seek to work with patient communities in different ways, and we consistently aim to integrate insights we’ve learned from our partnerships with patient communities within our product communication strategies.”

There is much broader opportunity for pharma to work more closely with patient groups, particularly within unbranded awareness and education initiatives, says Allergy & Asthma Network’s Winders. There are other potential benefits too; patient groups have tremendous potential to be a facilitating partner in helping pharma gain the patient insights that will be necessary to transition towards a more patient-centric approach to DTC advertising.

What’s next for DTC?

While the majority of the industry has been hesitant to embrace innovative approaches to DTC, some companies are showing that a new way of engagement is possible. The benefits of this model are clear, pharma has an opportunity to engage and empower, rather than alienate and intimidate the patient.

“Taking a close look at this research presents a possible new approach for biopharmaceutical companies who want to make this change,” says Lubbert. “From the findings, we see ads that raise awareness for a disease but do not mention a specific drug score almost two times higher than ads that do, and we also know that patients like to find information online and appreciate it most from other patients like them.”

Based on this analysis, Lubbert suggests this approach:

- Reduce ad spend and focus on disease awareness with real patients instead of actors
- Use the awareness to drive patients online, where companies provide richly curated and compliant patient-driven content
- Connect patients with other patients to improve understanding of the disease and product

Part of the resistance to change is driven by internal culture and ingrained practices of focusing on product-centric marketing. Pragmatically, this will take a long time to shift and there is no guarantee that all companies will recognize the need to change.

What is clear, however, is that with patients spending more and more time engaging with digital channels, companies need to develop resonant stories in order to be successful in this space. In addition, as big data continues to power increasingly targeted digital campaigns at a fraction of the cost of DTC TV, even the most reluctant to change will surely respond to cost-effective alternatives.

While patient-centric digital alternatives are likely to win out over traditional DTC channels like TV in the long term, how long it will take is an open question. While the future of DTC will be more patient-centric, for the time being at least, the familiar TV ads are likely to continue. From the patient’s perspective, however, the good news is that change is coming.

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Health Perspectives Group

Health Perspectives Group is a group of companies that builds compliant connections between patients and biopharmaceutical companies for clinical and marketing patient engagement and insights. By enabling people to share their personal insights, Health Perspectives Group believes health consumers can gain the skills, knowledge and confidence to navigate the complexities of their own health and impact the healthcare industry at the same time. For more info: [Health Perspectives Group](#), [Health Stories Project – Insights](#).

Cheryl Lubbert, President, CEO & Co-Owner, Health Perspectives Group

Cheryl Lubbert has more than 25 years of senior management, commercial development, DTC and patient engagement experience at Fortune 500 biopharmaceutical companies, including Bristol-Myers Squibb, Immunex Inc. and Amgen. Prior to the founding of Health Perspectives Group, Cheryl headed the Immunology Division at Abbott Labs, leading all commercial efforts for the division including the company's top multi-billion dollar, blockbuster product, Humira. She has directly and indirectly overseen more than 10 original or new indication product launches for blockbuster brands.

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