The Real Value of Medical Affairs

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A FirstWord ExpertViews Dossier Report
The Real Value of Medical Affairs

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Contents

Executive summary ............................................................................................................................................. 1

Research methodology and objectives .................................................................................................................. 3

Contributors ............................................................................................................................................................ 4

Developing a KOL strategy .................................................................................................................................... 5

Factors to consider at the planning stage .................................................................................................................. 5

The changing healthcare landscape shapes the engagement plan ........................................................................... 6

Trends in the US ....................................................................................................................................................... 6

Trends in Europe ....................................................................................................................................................... 8

KOL Identification and segmentation ....................................................................................................................... 9

Planning for engagement ........................................................................................................................................ 12

Research to understand needs ................................................................................................................................ 13

Capability building ................................................................................................................................................... 14

Challenges to KOL engagement ............................................................................................................................... 15

Access continues to be a problem ............................................................................................................................. 15

Fostering good reputations ..................................................................................................................................... 17

Important factors for building relationships ............................................................................................................ 18

Perceptions of the value of medical affairs services ............................................................................................. 21

Accurate, unbiased and relevant information ........................................................................................................... 24

Physician views ....................................................................................................................................................... 24

Industry views ........................................................................................................................................................ 28

Medical inquiries and off-label use ........................................................................................................................... 29

Physician views ....................................................................................................................................................... 29
Industry views ................................................................................................................................. 31

Information and support to improve patient care and outcomes ...................................................... 32

Physician views ............................................................................................................................... 32

Staying up to date with the latest clinical trial and scientific information ........................................ 36

Physician views ............................................................................................................................... 36

Industry views ................................................................................................................................. 37

Research projects and medical education ......................................................................................... 37

Physician views ............................................................................................................................... 37

Industry views ................................................................................................................................. 37

Advisory boards and company-sponsored scientific programmes ................................................. 43

Physician views ............................................................................................................................... 43

Industry views ................................................................................................................................. 44

Physician views on other medical affairs services ........................................................................... 46

Support for speaker programmes and conferences .......................................................................... 46

Facilitating the coordination and integration of different types of knowledge ................................ 47

Interaction media ............................................................................................................................. 48

Physician views ............................................................................................................................... 48

Industry views ................................................................................................................................. 50

Frequency of engagement ................................................................................................................. 51

Balancing quality of interactions with frequency ........................................................................... 52

Physicians’ views on frequency of interaction ................................................................................ 54

Staff turnover and maintaining continuity ......................................................................................... 56

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Measuring performance .................................................................................................................. 59
  Key performance indicators ......................................................................................................... 59
  Incorporating KOL perception into KPIs ....................................................................................... 61
Potential areas for improvement .................................................................................................... 63
  Providing real value to KOLs ......................................................................................................... 63
  Providing physicians with tools to meet patient needs ................................................................. 65
  Challenging pharma company structure ....................................................................................... 66
Key takeaways .................................................................................................................................. 69
  KOL identification, segmentation and engagement ................................................................. 69
  Building valued relationships ....................................................................................................... 69
  Face-to-face interactions are preferred ......................................................................................... 70
  Measuring performance .............................................................................................................. 70
  Organisational change .................................................................................................................. 71
Research methodology and objectives

Through industry insights, this FirstWord Dossier ExpertViews report assesses where medical affairs teams are fulfilling the expectations of physicians and other healthcare providers (HCPs) and where they are falling short.

The focus of the report is the value that medical affairs provides to external stakeholders. For this reason, our main concern is with the customer facing roles, particularly field based medical science liaisons (MSLs) and the back office teams that support them.

The information for this report was gathered from multiple sources, including primary research from in-depth telephone interviews with medical affairs professionals and consultants, supported by secondary research, mainly from publically available sources of information.

In addition, the report provides analysis of a number of surveys conducted by FirstViews1 with physician groups in the US and EU5 (France, Germany, Italy, Spain and the United Kingdom) to examine current usage of medical affairs services, the value that physicians place on these services, and their preferred media and frequency of interaction with medical affairs teams.

Key questions explored in this report include:

- What challenges are companies facing in creating and maintaining long term strategic partnerships with KOLs?
- What medical affairs services do physicians most use?
- What attributes of medical affairs services do physicians most value?
- When and where do physicians prefer to interact with medical affairs teams?
- How often do physicians want to interact with medical affairs?
- How are companies measuring KOL perception and is this related to key performance indicators?
- What gaps are there in medical affairs services currently?

1 FirstViews reports: http://www.fwreports.com/firstview/?sort=newest#V7Q3v51waYM
Contributors

- **Charles Baum, MD, MS, FACG**, Vice President, US Medical Affairs, Takeda Pharmaceuticals.
- **Usman Iqbal, MD, MPH, MBA**, Senior Medical Affairs Leader, Neuroscience, Global Medical Affairs, AstraZeneca.
- **Robert Kaper**, Senior Vice President Medical & Scientific Affairs, AMAG Pharmaceuticals.
- **Peg Crowley-Nowick**, PhD, President, Zipher Medical Affairs.
- **Michel A. Halim, MD**, Medical Affairs Manager & Head of Drug Safety, EVA Pharma for Pharmaceutical & Medical Appliances, Egypt.
- **Medical Affairs Lead**, Top 10 Pharma Company, UK.
- **Associate Director Global Medical Affairs**, Medical Education, Top 15 Pharma Company, US.
- **Linda Traylor, PhD**, Senior Director, Scientific & Medical Affairs, Biodesix.
- **Executive Director and Head of Medical Science Liaisons**, Specialist Pharma Company, US.
- **Medical Affairs Advisor**, Top 10 Pharma Company, EU.
Planning for engagement

For teams working towards a new product, engagement with external stakeholders broadly covers the pre-launch period, through launch and during the first year post-launch.

During the pre-launch period, engagement is focused on the disease area and the unmet needs of patients. This can be undertaken proactively either in larger meetings or one-to-one, being mindful of the need to remain compliant with the relevant regulations and codes of practice. In the UK, for example, it is possible for an MSL to reach out proactively to an HCP to ask if they have an interest in hearing more about a specific disease. The HCP would then have to affirm an interest prior to a discussion.

“Traditionally in Phase III, we begin to put together our communication strategy and team. We may not have the full team in place, but we have a smaller team that begins to talk to stakeholders about unmet needs, research gaps – it’s an environmental assessment. What does the treatment paradigm look like? What are the things that we should be anticipating? So doing all of that on a one-on-one basis and collecting as much information as we can. I think the other thing is beginning to get impressions and input on what we think is the mechanism of action, the potential for a drug in the therapeutic space, and so on.”

Charles Baum, VP US Medical Affairs

“Pre-launch, let’s say a year and a half before launch, this is where medical affairs engagement would start with disease education and awareness. So the added value to clinicians would be communicating around a specific disease area and around the patients’ and physicians’ needs. You’re often talking about a patient pathway and the MSL will therefore need to interact with different partners, from nurses to GPs to specialists. The will be a very valuable source of information for reflecting on patient pathways and discussing this with clinicians."

Medical Affairs Lead, UK

“In a pre-launch phase, KOL strategy is typically around building awareness of the market and using their influence to build some credibility to the product.”

Linda Traylor, Senior Director, Scientific & Medical Affairs
Industry views
Medical affairs experts suggest that keeping physicians up to date with clinical trial results and other new scientific or medical information is important because they don’t have time to keep abreast of all the new developments themselves. For a new product, informing KOLs of trial data also forms an important part of launch planning.

“In the medical affairs department, we are very alert of all new publications that come out in the field and that may be of relevance. Physicians are very busy and sometimes really appreciate if an MSL can make them aware of some new research that was just presented at a conference or just published in a medical journal.”

Robert Kaper, Senior Vice President Medical & Scientific Affairs

“With regard to their own clinical trial results, they [medical affairs teams] are contacting their thought leaders at the time of data release to make sure that they hear it from the MSL rather than hear it on the street. That is a very important part of launch planning.”

Peg Crowley-Nowick, President, Zipher Medical Affairs

Research projects and medical education

Physician views
Among the physicians surveyed, providing support on various aspects of company sponsored clinical trials, such as site identification, patient enrolment, supervision, safety and patient compliance was considered to be extremely important by 16 percent of US oncologists, 13 percent of EU oncologists and 10 percent of physicians working in autoimmune disorders in the US.

The provision of general information on investigator initiated trials was rated highest among oncologists, with 15 percent of those based in the US and 14 percent of those in the EU rating this as extremely important.

With regard to the provision of information on grants for research projects or medical education initiatives, survey results indicate that this service is less sought after among respiratory physicians and US-based physicians working with autoimmune disorders. It is, however, more popular among autoimmune specialists in the EU and oncologists on both sides of the Atlantic, more than half of whom indicated a reliance on the medical affairs team for this type of information.
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