

DTRA Launches TO DEMOCRATIZE AND ACCELERATE CLINICAL TRIALS

Pharmaceutical Positioning



Mike Rea, CEO of IDEA Pharma, who has worked on some of the most successful new drug and medical product launches of the last 20 years, has written a new book — *Pharmaceutical Positioning* — the world's first book on positioning pharmaceuticals.

As a discipline, positioning emerged in the 20th century as a powerful concept in product and brand marketing. This book, for the first time ever, applies proven and new positioning methods to pharmaceuticals. This book captures many of the lessons on positioning that underpin successful development and launch. Whether your product is first to create a new market, or fifth into an old market, positioning is a fundamental part of whether or not your product will be successful, and how successful it will be.

"The 1980 Ries and Trout book on positioning has served us well, but it has never really fit pharma," Mr. Rea says. "Given the importance of what we do, the opportunity to rethink positioning for a pharmaceutical audience is critical to increase the relevance of great positioning for what we develop, as well as how we communicate it. They said 'positioning is not what you do to a product.' I counter that it is absolutely what you do to a product — in fact, it is everything that you do to help a molecule become a product."

Mr. Rea is a PharmaVOICE 100 Red Jacket honoree.



Craig Lipset



Dr. Amir Kalali

A new global industry coalition — Decentralized Trials & Research Alliance (DTRA) — aims to dramatically increase access for all patient populations in clinical trials and research. DTRA's goal is to unite stakeholders, including healthcare companies, regulators, patient groups, and research organizations, to make clinical trial participation widely accessible by advancing policies, research practices, and new technologies in decentralized clinical research.

"The benefits of decentralized research methodologies have been apparent for some time, but adoption has been slow due to many factors including culture and the lack of a forum for stakeholders to collaborate," says Amir Kalali, M.D., life science executive, founder of several collaborative life-sciences communities, and co-convenor of DTRA. (Dr. Kalali is a PharmaVOICE 100 Red Jacket honoree.) "The COVID-19 pandemic has forced organizations to adopt decentralized methodologies which have the potential to broadly accelerate drug development."

Experts estimate that COVID-19 may set back non-pandemic clinical trials by several years due

to prospective patients' inability or reluctance to schedule visits at physical research locations. Decentralized clinical trial approaches to conducting research facilitate participation by a more diverse patient population and could ease COVID-19-imposed difficulties for both patients and clinical investigators. Additionally, COVID-19 further exposed the operational challenges of the inclusion of representative patient populations in clinical trials by race, age, and geographic location and amplified the disparities and inclusion biases that have become hurdles for potential trial participants.

"Now is the time to share ideas and insights that will chart the future course of clinical trials, accelerating drug development and saving lives," says Craig Lipset, DTRA co-convenor, clinical innovation advisor, and a pioneer in decentralized trials. (Mr. Lipset is also a PharmaVOICE 100 Red Jacket honoree.) "We have a responsibility to advance the health of people with unmet medical needs, and by convening stakeholders we can remove remaining barriers to adopting new policies and practices that can impact patients today."

Nearly 50 companies have already signed up as DTRA member organizations to provide expertise to identify and address gaps and needs and advance best practices through effective education and communication. Organizations interested in taking part can visit DTRA.org or follow DTRA on Twitter and LinkedIn.

Americans Exhibit VACCINE HESITANCY

According to a mid-December 2020 report from McKinsey & Company, more than half the respondents in the United States report they are likely to

delay or decline vaccination despite regulatory approval, with safety concerns being the main driver of vaccine hesitancy.

Under which timeframe of COVID-19 vaccine availability would you be most likely to get vaccinated?^{2, 3} (n = 2,466)

Demographic categories

All Responses

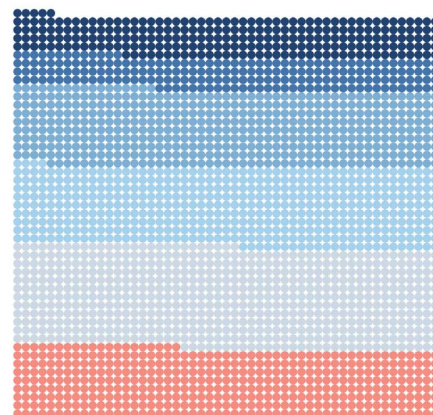
- I'd volunteer for clinical trials
- I'll get the first vaccine granted under EUA
- I'll get the vaccine after clinical trials
- I'd wait 3 to 12 months after its been on the market
- I'd get it once I'm confident it's safe
- I'm unlikely to get vaccinated

Interested

Cautious

Unlikely

Response percentages by type



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MMRF LAUNCHES CURECLOUD

The Multiple Myeloma Research Foundation (MMRF) has launched the first at-home genomic test for cancer at no cost. At a time when hospitals are overcrowded with COVID-19 patients, the CureCloud allows patients to get testing in the convenience of their home.

A phlebotomist is sent to the patient's home to collect a blood biopsy, avoiding a painful and invasive bone marrow biopsy. In just 4 to 6 weeks, myeloma patients will receive a visualized, CLIA grade report that includes their data, along with a map of

their genomic sequencing, and a personalized treatment option to discuss with their doctor on the best, most tailored treatment options for their specific subtype. It also includes a visualization tool for the patient to compare themselves to similar patients to learn what has worked best for them to grant them further insights into their treatment options. The MMRF makes the information available to the entire myeloma community of doctors, patients, scientists, and researchers. This will help patients and doctors make better decisions about their treatments faster.



NEWS

BRION BRANDES JOINS INCEDO



Brion Brandes

Brion Brandes joins Incedo as VP, commercial solutions, life sciences. Incedo provides end-to-end digital transformation consulting, data science & analytics, technology services and solutions. Mr. Brandes has more than 25 years of experience in life sciences and healthcare and has held leadership roles in business development, sales, product/regional marketing, patient support services, and strategic alliances. These various roles have allowed him to gain experience helping biopharma clients develop solutions that meet their short- and long-term needs. Mr. Brandes is a PharmaVOICE 100 — 2016 honoree.

ANDREA HESLIN SMILEY — BOARD DIRECTORSHIP



Andrea Heslin

Andrea Heslin Smiley has joined the board of directors of Rockwell Medical, a biopharmaceutical company dedicated to transforming the treatment of iron deficiency and iron deficiency anemia management and improving outcomes for patients around the world. Ms. Smiley brings close to three decades of commercialization and general management experience in the biopharmaceutical industry. She serves as president and CEO of VMS BioMarketing, a provider of patient and healthcare provider support. Ms. Smiley is a PharmaVOICE 100 — 2019 honoree.

Telehealth Is Convenient Alternative to IN-PERSON HCP VISITS

A new Health Union survey reveals that people with chronic conditions feel that telehealth, despite its convenience and increased use throughout the COVID-19 pandemic, is generally less preferable than in-person visits, but can still serve as an occasionally suitable alternative.

The survey is the fifth in Health Union's ongoing COVID-19 Consumer Attitudes and Health Behaviors Survey series that captures "snapshots in time" that track the perspectives and health behaviors of people with chronic conditions throughout the pandemic.

Telehealth use continues to increase during the pandemic for people living with chronic health conditions. Nearly three-fourths of respondents of this wave 5 survey said they have had at least one telehealth appointment, up from 63% from the wave 4 survey, which fielded in July.

Fortunately, two-thirds of respondents who have had telehealth appointments considered their experiences to be positive, with convenience being a primary reason. And 44% of all respondents said they were "extremely likely" to consider using telehealth after the pandemic is under control. This number was even higher for people living with autoimmune conditions, such as ankylosing spondylitis (61%), Crohn's disease (61%), and plaque psoriasis (56%).

However, the survey findings reveal that increased use doesn't necessarily translate into a clear preference for telehealth. Likewise, telehealth may not always make sense — either to the patient or the healthcare professional (HCP) — for certain types of visits. Instead, telehealth appears

to be viewed as an important and convenient tool that, depending on the situation and a number of factors, like preference and comfortability, can be used along with in-person visits to provide patients the care they need.

Unsurprisingly, after living through the pandemic for nearly eight months, nearly all respondents reported having at least one HCP visit. These visits appear to be a combination of both telehealth and in-person, with 63% reporting using both. Only 10% of respondents have just used telehealth during the pandemic, while nearly a quarter have only seen their HCP in person.

Respondents don't seem to have an outright preference for telehealth. Instead, they seemingly prefer in-person visits or an either-or scenario, but the reason for the visit appears to be a major factor. More than seven in 10 said they prefer only in-person visits for annual checkups, 65% prefer them for unplanned visits, and 46% prefer them for discussing new symptoms, which often requires a physical evaluation. On the other hand, a large portion of respondents said they were fine with either type of visit for discussions about changing or starting new treatments, as well as evaluating whether a new medication is working.

Unsurprisingly, more than six in 10 who have used telehealth rated convenience as at least somewhat better than in-person office visits. That being said, respondents found in-person and telehealth visits to be roughly the same for a number of measurements, including the quality of conversation, the ability to ask questions or voice concerns and the amount of time spent with the HCP.





WOMAN OF THE WEEK
PODCAST SERIES

NOVEMBER

Jill O'Donnell-Tormey, CEO, Cancer Research Institute (CRI)

Donna LaVoie, President and CEO, LaVoie Health Science

Tanya du Plessis, VP of Data Strategies and Solutions, Bioforum the Data Masters

Elaine O'Hara, Chief Commercial Officer, Head of North America Commercial Operations, Sanofi Pasteur, the vaccines division of Sanofi



Greater Gift Gifts \$50K SCHOLARSHIP

Greater Gift, a nonprofit founded in 2010 with a mission to increase awareness of clinical research, especially among underrepresented communities, announces a \$50,000 scholarship to support a minority graduate student enrolled in Wake Forest University's newly launched Master's in Clinical Research Management Program. The scholarship is named in honor of Mary Hofmann Murphy, a Winston-Salem native and clinical research participant. The inaugural scholarship was awarded to Darius Ford of Raleigh, a student enrolled in the first cohort of students in the program.

Greater Gift's goal is to further the engagement of underrepresented groups in clinical research by investing in future leaders in the industry. According to Executive Director Lilly Skok Bunch, "We will only have real equity in clinical research participation when the research industry is reflective of our community. This scholarship is a step in that direction."

Patient
HEROES

Recognizing people who are doing great work on behalf of patients

Patient Heroes provide a meaningful and sustainable connection with patients, which is more vital than ever. Successful organizations recognize that understanding patients and their needs is key to their success.

Has somebody in your organization gone the extra mile to improve the patient experience? Do you have a colleague or client that puts the patient first in their work all the time? This is your opportunity to recognize your patient hero and the positive influence he or she is having on the patients they serve as well as your or their organization.

The **Patient Heroes** program is a unique way to feature your Patient Hero who is having a significant impact on moving the industry forward. In an exclusive interview with **PharmaVOICE** Editor Taren Grom, your hero will discuss his or her passion for patients, how they are enhancing patient engagement, and embracing patients as partners as part of the process. Give your Patient Hero the visibility they deserve.

For more details or to place an advertisement, contact Lisa Banket, Publisher, at 609-730-0196; Suzanne Besse at 561-465-5102 or sbesse@pharmavoice.com; or Amy Bishop at 267-374-8891 or abishop@pharmavoice.com.

Patient HEROES

Eve Dryer
Executive Director, Patient Advocacy
Retrophin

Improving women's healthcare can be **EXPONENTIALLY IMPACTFUL**, as women play the chief medical officer for their families.

Retrophin

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Daemion T. Johnson
Director, Patient Engagement
GSK Specialty Business Unit
GSK Pharmaceuticals

Daemion continues to **PUSH creative and corporate BOUNDARIES** to discover new and innovative ways to educate patients.

FAVORITE PATIENT ENGAGEMENT PROGRAM

gsk
GlaxoSmithKline

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