Advertising TO THE MASSES

DTC advertising takes on a personalized approach in today's digital universe, however, television remains a stronghold for reaching broad audiences.

arlier this year, eMarketer predicted that digital ad spending across all industries would surpass TV for the first time in 2017. Overall, TV ad spending will total \$72.01 billion, or 35.8% of total media ad spending; digital ad spending in 2017 will equal \$77.37 billion, or 38.4% of total ad spending.

But these rising digital figures do not pertain to the life-sciences industry. Although there are many more channels for pharma to use to reach a targeted audience, and ad dollars for digital in the industry are growing slightly, TV still holds too much value for reaching broad audiences, especially when combined with an integrated approach that incorporates the many other ways to reach health consum-

"Prescription drug advertising on TV isn't going away," says Erin Fitzgerald, VP of marketing at AccentHealth. "In fact, it's steadily increasing and exceeded \$3.5 billion last year."

> TV, which has always offered the ability to define targets and tailor messages, is largely used to get the attention of a broader audience, which is then followed up through the right channel for the right consumer.

> According to our experts, mass marketing has always been a misnomer. The term conveys the idea that a blanket positioning and messaging set is put forward regardless of customer segment. In reality, these campaigns have always had a target audience in mind, be it based

on broad categories such as gender and age, or a more specific set of demographics, says Ankil Patel, partner, director of client services at Calcium.

"The advent of thousands of television channels, and millions of websites and You-Tube channels, pushes mass marketing toward a hyperamplified and simultaneously microrefined application of the same principles that were used to sell aspirin in the 1940s," Mr. Patel says.

He continues: "In practice, the world has gotten immensely more complicated. Instead of buying a particular prime time slot on NBC, the marketer must construct a campaign architecture that is built on an assessment of myriad channels and shifting/unknown viewership. And, as many of these sites waver in and out of use and influence, highly dynamic models to calculate impact and potential ROI must be developed."

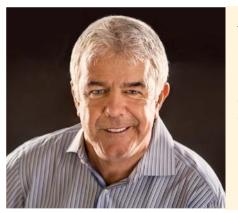
According to Sharon DeBacco, VP, product promotion and communications, at Ironwood Pharmaceuticals, the term "mass" is no longer accurate in today's target-enabled environment.

"The masses have long since dispersed and



The advent of thousands of television channels, along with millions of websites and YouTube channels, pushes mass marketing toward a hyperamplified and microrefined application.

ANKIL PATEL Calcium USA



The role of mass media will decrease as specialized medicine increases and the size of patient populations decrease.

NEIL MATHESONHuntsworth Health

fractionated, and can no longer be reached in one fell swoop as when 18-20+ Nielsen ratings and network domination were the norm," she says. "Now, with a 1-2 rating considered good, and a seemingly limitless supply of cable options, we have to segment and activate very specific, niche-like audiences whose interests align with our key segments, and re-aggregate them to achieve a mass effort. This is actually a step toward mass personalization."

Despite this fragmentation, prescription brands with sizeable patient pools still need to get the broader condition and brand messaging out to the appropriate set of mini-masses to ignite the process of consideration, and nothing achieves scale and builds awareness better than TV, even today, Ms. DeBacco says. TV provides the essential upper funnel broad messaging that enables the lower-funnel targeted channels to work harder.

"And with this as a backdrop, we can now add a new layer of targeting onto TV aimed at the household level for segments that represent a highly concentrated opportunity," she says. "Going well beyond yesterday's targeting by geography, channel, network and program mix, we now can deliver specific messaging based on what we know about the household, such as purchase behavior and media consumption habits."

In many ways, Ms. DeBacco says, the fragmentation in TV and the increasing opportunities to hyper target in digital has pulled TV and digital closer together, working in a much more integrated way. This helps marketers to think more broadly about how to balance mass reach with targeting across channels.

"Our ability to hyper target consumers on an individual level, using actual, de-identified, HIPAA-compliant prescription data, and to reach individuals after they have visited relevant content, searched for a competitive brand, visited a brand's website, and/or exhibited behaviors of key patient segments continues to expand," she says. "But despite the innovations in targeted media and how rapidly they are catching up to TV, mass media still represents

the lion's share of ad spending, with traditional media such as TV retaining the lead."

TV works particularly well for reaching patients who have not yet been diagnosed with a condition, says Neil Matheson, global CEO, of Huntsworth Health.

"Broadcast media is an appropriate way to reach consumers who may not yet identify their symptoms with a medical condition or who may not be aware of the availability of a specific treatment for a condition that they are living with," he says. "Great examples are the campaigns that enabled consumers to identify the symptoms of depression — the 'Do You Feel Blue' campaign — and the campaign to educate consumers that overactive bladder is not a consequence of aging and they should seek treatment — the 'Gotta Go' campaign."

But in the era of specialized medicine,

the role of mass media will decrease as specialized medicine increases and patient populations decrease in size. Smaller patient populations can be accessed more effectively on a personal level, and these patients are often also associated with patient groups — from patient advocacy groups as well as informal online patient groups — and can be accessed through these channels as well, Mr. Matheson says.

Mass advertising has always been about broad reach and maximum

impressions, but it is evolving in response to today's market, says Dave Sheehan, chief marketing officer, ContextMedia:Health.

"Today's mass advertising includes channels that can reach audiences at scale with far more accuracy against key targets than in the past," he says. "By leveraging new

digital technologies, marketers can reap the advantages of advertising to the masses such as scale, brand recognition, low risk and cost, while minimizing the challenges of targeting and convincingly tracking a return on investment."

Until GenX and the Millennials start to experience the aches, pains, and disruptions of bodily functions that accompany aging, TV will have a role to play, says Deborah Lotterman, chief creative officer, precisioneffect.

"Given that an abundance of prescription drugs are indicated for patients over the age of 50, TV can still be very effective," she says. "We've seen this in our work with Cologuard, a non-invasive sDNA screening test for colon cancer."

Since the agency launched a national TV campaign with a targeted media buy, sales of Cologuard have increased by 24% and the number of physicians ordering the test has doubled.

That's not to imply that patients over the age of 50 do not spend time online; they do and they need to be targeted there as well, she says. Consumers are watching TV and using their phones and tablets at the same time, and marketers must keep in mind the overlay of cross channel viewing and multiple screens.

"Applying more incisive segmentation, targeting technologies, and thoughtful content marketing means we can use budgets far more effectively to identify, zero in on, and convert the most valuable prospects, be they physicians or patients," Ms. Lotterman says.



Changes in Creative for Today's Mass Marketing

Creative strategies have evolved from a single brand creative strategy into a set of multiple layers of increasingly targeted messaging, that connect "mass" - upper funnel broad creative — to lower funnel, "highly targeted" creative. This balance of channels and continuum to more targeted messaging facilitates the patients' journey from the initial spark of interest to full brand consideration and definitive action.

According to Ms. DeBacco from Ironwood, mass marketing serves an essential role as the upper funnel "inspirational" channel to start the conversation between a brand and its audience, and subsequent layers of messaging drive increasing relevance, engagement, and movement along the pathway, leveraging all the tools available, including dynamic messaging, retargeting, sequential messaging and customization. The totality of the brand's content, relevancy by channel, and overall channel delivery can create a meaningful, informed behavior change that leads to a solid new start on the brand.

"We are also seeing a shift in the creative development process," she says. "What used to be sequential and siloed — creative development in isolation by the creative agency, followed by the media agency deciding where to place the content — is now a collaborative process that jointly determines which tactics work best for the brand and which creative is best suited to those tactics."

Even as long as television has been used for DTC, it still isn't always leveraged to its best asset, Mr. Matheson says.

> Pharma can be much more focused on getting out the message to the right consumers versus blanketing the overall community, and as this trend grows, money will flow out of television and into the digital

Medmeme

"Television is an amazing medium for emotional engagement through story telling and I don't think we have taken advantage of the opportunity to utilize the medium in this regard," he says. "The creative approach to TV is still very much based on the traditional data-driven features and benefits approach the industry has taken with healthcare providers in the past."

Consumers want something more exciting and need to be drawn in with emotionally engaging content.

"Too many pharma ads are dull and boring," Mr. Matheson says. "Too many people use medical/legal restrictions as the excuse for mediocre creative and lack of emotional engagement but I don't buy it. There is plenty of room for amazing creativity and emotionally engaging story telling if agencies have the courage and talent to generate the creative, support their client through medical/legal review, and push their clients to be bold."

Creative for mass-market ads must appeal to a broad swath of potential patients, and to some extent, the "boring" ads are still effective. The typical DTC formula includes representative patient types who carry on a story arc from disease/problem to brand/solution. Many ads boil down to "shiny, happy people" doing a variety of photogenic activities. Think of the typical beach walk, with dog, of course.

"These pharma creative clichés continue to have currency because, on some level they have been proven to work: they engage broad patient audiences on the basis of a sunny emotionalism, the sense that, even when a serious disease is present, the story can have a happy

> ending," Mr. Patel of Calcium says. "The success of this formula guarantees that this type of creative will continue to dominate DTC."

However, Mr. Patel has observed a change occurring mass-market pharma creative. Some brands are

Millennials start to experience the aches, pains, and disruptions of bodily functions that accompany aging, TV still has a role to play.

Until GenX and the



avoiding the clichés of slice-of-life advertising in favor of approaches that are more conceptual and differentiated.

"The Pradaxa 'Goldfish' TV campaign is a good example," he says. "The campaign uses swimming goldfish as a striking visual metaphor for blood flow. No people — and no beaches — are present."

The metaphor has an obvious conceptual appeal, but it delivers a surprisingly emotional impact as well. Mr. Patel hopes this campaign points the way to a more thoughtful - and less tired and predictable — DTC creative.

Bringing the techniques of virtual reality and real-time interaction to creative could be a wave of the future, says Mike Hodgson, chief creative officer, Cambridge BioMarketing.

As marketers become much more adept at linking the virtual world together with the real world to further contextualize brand experiences — think Pokémon Go — the commercialization opportunities are endless. Facilitating health dialogues that cross over from the virtual to the physical world in homes and in physician's offices is key to brand accessibility, Mr. Hodgson says.

"Consumers want to integrate their favorite brands into their lives, either having a conversation with the brand or using it as a jumping-off point for conversations with friends," he says. "A great example is the Taco Bell lens in SnapChat that allows consumers to turn their heads into giant taco shells. Similarly, we are working closely with clients to help patients and families integrate health experiences into their lives, and then communicate them with the broader community."



MAHESH NAITHANI



Marketers today are much more adept at linking the virtual world with the real world to further contextualize brand experiences.

MIKE HODGSON
Cambridge BioMarketing

The biggest change in mass-marketing strategy today is that messaging and creative are only a starting point. The most important work happens in the follow through.

"Technology has given us the ability to not only change behavior, but also measure how it changes," ContextMedia:Health's Mr. Sheehan says. "Today, digital solutions give us the tools to deliver the impactful creative strategies at scale, and draw actionable insights from them to better serve the patient and consumer."

Providing an immersive, individualized patient experience is becoming an increasingly larger portion of the value proposition and budget for pharmaceutical marketers, Ms. Fitzgerald of AccentHealth says. To deliver this experience, brands must educate and engage patients at key moments along the journey when they are hungry for information about their condition or treatment. This includes at the point of care, which is growing faster than DTC overall at 15% to 20% per year, as well as pre-visit symptom and post-visit treatment research.

"Furthermore, in light of today's culture of convenience and access, marketers must ground

Digital Spending

- In 2015, healthcare and pharma marketers in the US invested \$1.67 billion in paid digital media.
- In 2016, marketers will increase their digital spending by 15.4% to reach \$1.93 billion.

Source: eMarketer



the experience in digital and redirect some resources toward the new, compliant technologies such as geo-fencing, smart Wi-Fi, telehealth and, before long, virtual reality," she says.

Consumer Behavior Driving Trends

As television continues to get the larger share of the ad budget, brands must also di-



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Providing an immersive, individualized patient experience is becoming an increasingly larger portion of the value proposition and budget for pharmaceutical marketers.

ERIN FITZGERALD
AccentHealth

versify and use the remaining channels wisely, as consumers are using more and more digital avenues in their daily lives. Emerging trends in consumer behavior are creating a consumer-driven model that is laden with data along each touch point of the patient journey.

"Consumers want more focused experiences, dictated by their own terms," Ms. Lotterman says. "In a bit of a virtuous circle, their focused online activities create tremendous data exhaust. This offers the potential for brands to anticipate and fulfill consumer needs better than ever."

"As marketers, this means if we can continue to deliver relevant information about products or services to patients when and where they seek it, we can influence behavior unlike ever before," Mr. Sheehan says.

First, the industry must learn how perceptions are the basis of attitudes and that attitudes drive behavior, Mr. Matheson says. The industry has a lot to learn about value drivers and how consumers apply their own perspective to determining value. In the consumer world, there are many value drivers that the pharmaceutical industry has never been exposed to and these drivers will create challenges for industry that is not used to listening to, and truly understanding, the real customer.

"To understand perceptions/attitudes we need to obtain deep insights from the consumers we want to target and connect those insights to brand value," he says. "Only then will we be able to impact consumer behavior."

Finding the right balance of messaging



Today, digital solutions give us the tools to deliver impactful creative strategies at scale and to draw actionable insights from them to better serve the patient and consumer.

DAVE SHEEHANContextMedia:Health

across channels and ensuring that the brand's content is relevant to how customers use each channel are essential. Content can't be created with one channel in mind, but should be tailored on a channel-by-channel basis, and delivered to everywhere it is relevant to large clusters of the target segments, so the totality of brand engagement inspires action, Ms. De-Bacco says.

At the same time, the industry should stay current on shifts in channel usage. According to Ms. DeBacco, digital use is projected to reach six hours per day by 2017, compared with three and a half hours for TV among consumers age 18 and older.

Mobile use exceeds desktop, and multitasking distracts the audience and reduces attention span — consider that 82% of consumers use their mobile device while watching TV, 69% text while watching TV, 55% watch video while watching TV.

"While these trends clearly influence media selection and channel mix, arguably their role in informing creative and messaging is critical," she says. "Messaging absent consideration for the context of user consumption is unduly compromised out of the gate."

"Many of the relevant and emerging trends in consumer behavior relate to how we need to adapt as marketers to better connect with consumers," Mr. Patel says. For instance, consumer attention continues to be fractionalized among various mediums: tablets, readers, desktops, TV, and mobile.

"This divided consumption of information comes with the prerequisite demand from consumers to make sure their experience feels unified by ensuring continuity of information across platforms," he says. "For today's consumer it is important that we make every act of engagement complementary to the one that came before it in our overall attempt to tell our brand narrative."

Consumers want to be able to pick up where they left off, regardless of which device they are using to consume content. This continuity of content does not mean to imply that each medium needs to provide the exact same experience, but each medium should deliver an experience in line with that medium's strengths: mobile for "quick bites" of information, tablet for additional "story lines' for the brand, and desktop for when a consumer is willing to make a deeper investment of time with a brand, Mr. Patel says.

Even scientific information provided by experts in the field is being disseminated through digital media channels these days, says Mahesh Naithani, CEO of Medmeme. Five to 10 years ago companies used traditional print and education mechanisms to reach physicians and patients through brochures and certainly television and radio spots.

"Today the use of digital, technology, and social media is emerging in the healthcare space, as younger consumers have grown up with social media and they want to be able to receive this information through a social media environment," he says.

This allows pharma companies to be much more focused on getting out the message to the right consumers versus blanketing the overall community. Mr. Naithani believes as this trend grows, more and more money will flow out of television and into the digital space.

"This is going to have a large impact on what happens," Mr. Naithani says. As digital gains more ground, the approach will become more screen agnostic. "It's not about television versus digital but what are the screens that people are using."

















Against the backdrop of New York City's elegant and high-tech Alexandria Center for Life Science, this year's **PharmaVOICE**100 Celebration brought together the most inspirational and influential leaders from across all sectors of the life-sciences industry, for much-needed collaboration through sharing ideas, insights, and business perspectives, while enjoying the opportunity to expand personal and professional networks.

If you missed it, don't forget to join us next year at the third Annual **PharmaVOICE**100 Celebration in September 2017!



See complete photo gallery online at www.pharmavoice.com/ pharmavoice-100-celebration-photo-gallery/











Advertising to the Masses

Experts answer two very crucial questions regarding TV spend and mass marketing in today's digital world.

PHARMA SPENDS MORE MONEY ON TV THAN ANY OTHER CHANNEL. IS THAT LIKELY TO CHANGE ANYTIME SOON?



SHARON DEBACCO

VP, Product Promotion and Communications, Ironwood Pharmaceuticals

In this current 2016-2017 upfront market, our industry

remains one of the leading five categories driving TV ad sales, and it will likely continue to lead DTC in the foreseeable future. TV consumption has increased among consumers ages 50 and older — up 2.3% Q4 '14 vs. Q4 '15 — and only slightly decreased among consumers ages 35 to 49 — down 2.5% Q4 '14 vs. Q4 '15. Since many pharmaceutical brands target older audiences, TV remains essential to most media plans. While media mixes are diversifying, with dollars moving to more targeted and accountable digital media, TV will continue to have the highest investment, as no other channel can match its scale and speed in communicating about a medical condition and related brand information.

DTC spends are likely to continue to push higher, as I would expect that the inherent longer unit size of 60-second and 90-second spots will continue to disproportionally increase the pharmaceutical industry's cost relative to other industries. And the TV marketplace's dynamics of supply and demand are becoming increasingly challenging. Demand for national TV media is expected to grow by 2.5% in this current 2016-17 upfront, however supply (ratings) are expected to fall by 7%, as a result of fragmentation driven by channels such as Netflix and Amazon Prime, among others. Seven percent less supply in a market of growing demand is likely to cause an inflated market.



NEIL MATHESON
Global CEO,
Huntsworth Health
The reason the spend is
more on TV is because TV
spots are incredibly expen-

The important question is: what is the ROI on that spend compared with the spend on other channels? If we don't generate data that supports the appropriate use of this powerful medium to achieve positive health outcomes we are exposing ourselves to ongoing criticism from those that believe it unnecessarily drives up marketing costs and ultimately increases the price of drugs.

I believe the spend will change as the industry learns how to maximize the channel mix to generate the best ROI. Our industry has been too channel focused rather than being content focused. If we believe that changing perceptions, attitudes, and ultimately behavior requires engaging content delivered to the right audience via the right mix of channels at the right time, then mass media such as television will be used appropriately as part of that channel mix.

I also believe there is a role for radio and newspaper advertising in areas such as clinical trial recruitment.



ANKIL PATEL

Partner, Director of
Client Services, Calcium
It's unlikely. Despite predictions that broadcast TV
would be supplanted by
digital channels, that hasn't

quite happened in the pharma category and in most other categories. Broadcast TV remains a powerful and efficient way to reach a mass audience. We live in a multiscreen media universe, where audiences travel constantly and fluidly among connected devices. Yet for pharma target audience, who tend to skew older, the broadcast TV screen has maintained its primacy. In disease states with large numbers of patient prospects, the 60-second TV commercial will remain a vital informational gateway. The continued relevance of broadcast TV is also related to creative factors: no other medium has proven to be as immersive and as compelling, from a storytelling perspective. Digital channels play an important role in the algebra of DTC; yet, a website, whether delivered on a desktop or on mobile, doesn't typically have the persuasive impact of an effective TV spot. So, in terms of mass audience delivery as well as creative engagement, broadcast TV will remain a preeminent media choice for pharma.



DAVE SHEEHAN

Chief Marketing Officer, ContextMedia:Health TV is still a valuable spend,

and for now, is a driver for brands that seek scale for their campaigns. However,

it is the marketing spend beyond TV that is changing media mix models for the better. TV ads remain foundational for brands if for no other reason than they offer the allure of media "success" — impressions. But brands are looking beyond TV to find ways to expand the conversation beyond the living room. Marketers can keep their brands top of mind for patients after they leave home, all the way to the physician practice, and in the actual moments before, during and after consultation. These strategies are proven, time and again to be effective, and the proof is in the pudding; we're seeing point-of-care ad spend increase year over year at a rate that vastly exceeds alternative DTC channels.

WHAT ARE THE CHALLENGES FACING MARKETERS TRYING TO MOVE THE SUCCESS NEEDLE ON MASS ADVERTISING?



SHARON DEBACCO

VP, Product Promotion and Communications, Ironwood Pharmaceuticals Many of the key challenges

have been the same for years

— cost, efficiency, pace of innovation and complexity of measurement, ability to understand full effect, and optimization. As digital advertising rapidly innovates and increases in efficiency and accountability, the contrast to TV sharpens. TV is not the new shiny object, and rallying for its support can become more difficult in some arenas. Thankfully, for the brands I have been fortunate enough to work on, TV has played an instrumental role in the brands' success, with clear evidence of its direct contribution as the foundational anchor channel in the mix.



DEBORAH LOTTERMAN

Chief Creative Officer, precisioneffect

Mass marketing is really becoming an oxymoron. Smart marketing demands that we delve deeply to understand

prospect's needs, desires and aspirations. The more directly our messages speak to those individuals, the more successful we'll be in gaining the interest of those who are likely to consider, trial, and adopt.

The media landscape doesn't just give us more places to go. Navigated appropriately, it allows us to be meaningful and memorable — if we're prepared to shape messages, content, and creative for more focused audiences.

Ultimately, the challenges are having the discipline to effectively segment your audience (and cede some segments); understanding segments' information needs, consumption habits and preferences; applying necessary resources to develop branded content and creative that speak to individual segments; and being fearless. We need to ideate and sell approaches and tactics that may seem scary but offer a genuine connection to and provide experiences for consumers.



NEIL MATHESON Global CEO, Huntsworth Health

There are several challenges. The high cost of television advertising and the criticism that television advertising is

an unnecessary expense that drives drug pricing. We need to provide data that supports the value in terms of health outcomes and its likely to be in areas such as disease awareness, driving consumers to seek diagnosis and treatment through identification of symptoms, and ensuring appropriate use of medication (including adherence). Generating creative, emotionally engaging content that withstands medical legal review is another challenge. If medical/legal review takes the teeth/claws out of the creative then don't do it. It has to be effective; we shouldn't compromise for the sake of doing a TV spot. Agencies need to be courageous and push our clients to be bold and courageous. We also need to use the medium appropriately as part of a multi-channel mix that effectively reaches the target audience at a time when that audience is most receptive to the message.



ANKIL PATEL

Partner, Director of Client Services, Calcium The largest barriers are a slow content creation cycle and the increasing expectation for two-way communi-

cation between consumers and advertisers.

Across most industries, content creation has become a cornerstone in the race to consumer attention increasingly divided among ever more channels and ever more messages. Pharma is a very different industry. It hasn't adapted well. While most other industries are creating YouTube channels and Instagram pages, and filling their websites with robust content, pharma has fallen embarrassingly short. This has everything to do with the content creation and approval cycle in pharma in comparison with other industries. Major pharma brands may plan on two or three

website updates a year — and that's considered aggressive. Many industries will update their websites and other channels twice a day.

Further exacerbating that limitation is the demand for more interaction, more two-way communication, and less 'talking at' the consumer in the traditional sense of an ad. This is another hurdle that makes it difficult for pharma to compete in mass advertising channels where interaction isn't just expected by the consumer but often forced by the technology.

Advertising mediums such as Facebook-promoted posts, for example, require the advertiser to engage in two-way communication. This of course incites nightmarish fears of FDA letters and adverse effect reports in the minds of pharma brand marketers and steers them toward more traditional and increasingly less effective ways of capturing consumer attention.

These problems are not insurmountable. Med/legal teams working closely alongside a content creation team immersed in the disease state could churn out high-quality, relevant content at a much faster pace. Such a content creation cycle in a disease state that effects millions would be difficult to compete against, and could yield great benefits in the form of brand affinity and awareness to a brand willing to take the risk.



DAVE SHEEHAN

Chief Marketing Officer, ContextMedia:Health
For one, there is fragmentation. Every day, there are countless new channels available for mass advertis-

ing, and keeping up can be overwhelming if you don't know where to focus. Second, more than ever, advertising is no longer solely a marketing department function. Procurement is getting involved. CFOs are getting involved. For the new entrants to this conversation, the expectation is that marketers can hit the magic button and generate revenue without any waste. But these challenges are a sign of the amazing progress we've made over the past few years. If today's marketer continues to stay informed and bring focus to the outcomes of their advertising, they can have more success than ever before.