

Direct-to-Patient Campaigns: Dos and Don'ts



As the lines between traditional DTC and current DTP efforts blur, it is more crucial than ever to know what makes a DTP campaign successful.

The long-established definitions of DTC and DTP are out of date and out of touch with today's marketing environment. In just the recent past, traditional DTC focused solely on acquisitions by reaching out to all possible prospects for a therapy, and DTP efforts concentrated on one-on-one persistency programs to keep patients on a therapy. As a result of economic pressure, the patent cliffs, and payer influence, the industry must move away from these conventional concepts to create a new, evolving DTP model that is a fusion of customer relations and patient education. Overall, a progressive DTP campaign for today needs to consist of appropriate messaging, real-time metrics, and current best practices.

"It has become very apparent that we have

to do something different," says Jay Bolling, president and CEO, Roska Healthcare Advertising. "The industry can no longer afford the inefficiencies of just putting messages out there and hoping they'll stick."

Messaging Matters

Instead, the industry must try to align messages with consumers at every stage; avoidance, awareness, acceptance, acknowledgment, and action phases may require different messages to resonate with consumers at each different point. Traditional DTC messages relate predominantly to consumers in the acknowledgment phase (i.e., they're already ready to take action). But in today's competitive market, reaching out only to that target is

unsustainable, and relationship marketing must be integrated into the DTC mix to move consumers through the other phases of avoidance and assessment.

"It's no longer truly effective for prescription brands to use a classic CPG/GRP-drive DTC model that beats people over the head with product features and benefits," Mr. Bolling says. "If we are going to drive action, we need to help prospective patients accept that the therapy is right for them, and create a bridge between awareness and action."

Mr. Bolling says moving prospects from awareness to action is achieved only by gaining patient acceptance — in other words, the realization that seeking out solutions and treating their conditions are positive steps to

Options and Data Increase the Likelihood of a Successful DTP Campaign

Effective DTP programs are rarely born; most are made over the course of the campaign.



The combination of creative options, observing and understanding user preferences, and updating the DTP campaign will increase the likelihood of actualizing a successful DTP

campaign. Highly successful DTP campaigns have helped some brands achieve blockbuster status. Such campaigns effectively break through to target customers, compel them to discuss and ask physicians about the prescription, and motivate advocacy. But successful DTP campaigns are difficult to predict; promising DTP campaigns fail, and seemingly mediocre campaigns have delivered runaway success.

According to Iyiola Obayomi, head of analytics at Ogilvy CommonHealth Worldwide, brands must increasingly look beyond trying to “birth” the beat idling %KB, WbWzqB2xSqZK5v.G#8

crease the number of prospects who take the desired action.

For example, a consumer in the avoidance stage might view a TV ad that drives her to go online for more information. Learning more about the condition in the context of how much it’s affected her everyday life, she starts moving out of avoidance and into the assessment stage. Online she finds other tools and information that educate her about the different treatment options and how to talk with her doctor, and these messages start to move her toward acknowledgement.

“Messages need to be tailored to appeal to patients at every stage along the acceptance continuum, from avoidance to assessment to acknowledgement,” Mr. Bolling says. “It’s crucial to create messaging that appeals to these different stages because something that resonates with a patient who’s in denial of her condition is very different than messaging for someone who knows she needs to treat her condition but just doesn’t know how.”

“One way to ensure messages resonate with all prospective patients is to incorporate the three Ps: personification, personalization, and projection,” Mr. Bolling says. “Personification means consumers can see themselves in every communication. Personalization occurs when people feel the message is aimed specifically at them. And projection means the message allows patients to see what success looks like and they can feel it’s attainable. Patients can relate to the message, empathize with it, and also see where action can take them.”

“Consumers will no longer adopt or accept mass messaging that doesn’t feel personal,” Mr. Bolling continues. “Former President Bill Clinton, often considered one of the best presenters in the world, was expert at delivering a highly personalized message to millions of people simultaneously. When he speaks in front of a large audience, each audience member feels like he’s speaking directly to him or her. He uses certain techniques to accomplish this level of personalization, and we use these same techniques in our messaging to make patients feel like we’re talking directly to them.”

Another factor to keep in mind when designing messaging is the timing.

“An under-tapped lever that can easily drive significant incremental marketing value is timing,” says Chris Neuner, executive VP, sales and client engagement, QualityHealth. “Most marketers tailor patient messages to demographic, behavioral, or attitudinal segments, but rarely to where patients are in their treatment chronology or pathway to purchase.”

ward a healthier life and better lifestyle. These messages must be integrated throughout all media channels and new technologies must be leveraged to gain patient acceptance and in-



LIZ KAY / Cramer



According to Mr. Neuner, a test QualityHealth recently conducted illustrates how timing can influence the content of a message. The test involved a recent email program being sent to patients with heartburn to determine how timing of content might impact response rates. QualityHealth identified patients who had a doctor’s appointment scheduled in



“Predictive modeling can identify and profile patients based on their predicted behavior.”

CHRIS NEUNER / QualityHealth

the next 30 days specifically for heartburn. Half of these patients received an email highlighting disease education content that legitimized the clinical implications of acid reflux. The other half received a free doctor discussion guide with seven questions they should discuss with their doctors in their first communication.

The click-through rate to the doctor discussion guide was 89%, almost double that of the educational content, which had a click-through rate of 45%.

“Timing the content to the individual patient’s reality — in this case, the upcoming doctor’s appointment — is critical to drive action,” Mr. Neuner says.

Ilyssa Levins, president and founder of the Center for Communication Compliance, cautions marketers to make sure the content and context of their messaging in DTP campaigns is compliant with current regulations.

For instance, avoid making blanket quality-of-life (QoL) claims, she says. The Office of Prescription Drug Promotion reviews QoL claims according to the same basic requirements — substantial evidence, truthful and non-misleading, consistent with approved la-

beling — of any other promotional claim. The FDA’s draft guidance states that general claims about a product improving quality of a patient’s life are “too broad to be considered appropriate” because quality of life necessarily includes non-health-related aspects of life.

“While marketers can prospectively evaluate endpoints in a clinical trial or conduct patient surveys, well-validated instruments to measure patient reported outcomes must be used,” Ms. Levins advises.

Marketers need to also think carefully about patient spokesperson choices and always confine patient messages about the drug to the indication. Patients need to be typical, that is, they cannot share their experience about a drug if that experience is not consistent with labeling.

“While it may be wonderful that a patient lost 15 pounds while on a company’s drug, this weight loss cannot be part of the testimonial shared within a DTP campaign if it’s not within the indication,” Ms. Levins says.

Measuring and Tracking

Along with appropriate messaging, there needs to be tracking metrics from the beginning to the end of the campaign to keep the campaign on point and cost-efficient.

Roska Healthcare integrated physician office call tracking to monitor a DTP campaign for Acclarent (see digital content for case study). This software-as-a-service enables continual tracking of patient response regarding which physicians are called, the duration of the call, and from which messaging channel the calls come.

“Through a physician locator, we can track when the patient called, where he or she called from, how long the call lasted, and then predict the type of call based on the analytics, for example, whether it was a consultation or appointment setting,” Mr. Bolling says. “Based on the timing and frequency of calls, we can make certain determinations about the patient/physician interactions.”

According to Mr. Neuner, predictive modeling — often used for profiling physician prescribing behavior — is also being used to target patient behavior. Predictive modeling can identify and profile patients based on their predicted behavior. For example, patients who are forecast to be low adherers can be targeted for interventions. Used in conjunction with other measurement data, predictive modeling can guide a DTP campaign to improved ROI.

“To supplement program engagement

tracking, survey-based analyses, and post-program third-party match back studies, we’re starting to see energy being invested in predictive modeling to prospectively determine program ROI,” Mr. Neuner says. “When done well, this will enable more proactive, and therefore fiscally responsible, marketing funding decision-making.”

DTP Best Practices: Attract, Align, Activate, and Analyze

» **Attract.** Efficiently reach a large volume of category-specific patients who meet the brand’s target profile. DTP products in niche categories such as lupus, MS, and even bigger categories like diabetes are relying on narrowly targeted media channels with high accountability and low media waste. For these specialty categories, pay-for-performance media options where the brand only pays for the patients who meet their specific target profile end up being the best spend for their media dollars is a best practice.

» **Align.** The ability to seamlessly learn about those patients — their treatment profile, behavior psychology, insurance status, future intent — and align the right patients with the right messages in the format most likely to get them to act is essential. Many profiling methods exist, such as geo-demographic (e.g., Experian), transaction-based (e.g., Catalina), contextual (e.g., Google or the specialist’s waiting room) or explicit profiling, where you directly ask and receive information directly from the patient.

» **Activate:** Break down barriers and get patients to act. In addition to having the right creative fodder, doing this well requires having access to the right marketing systems that can seamlessly and cost-effectively operationalize segmented and multichannel campaigns.

» **Analyze:** Monitor and measure all aspects of the campaign (message, offer, placement) to optimize end-to-end performance and drive positive results.

Source: Chris Neuner, QualityHealth

“Marketers must always use well-validated instruments to measure patient-reported outcomes.”

ILYSSA LEVINS

Center for Communication Compliance



Best Practices

Along with appropriate messaging and new methods of tracking measurement, marketers will also need to abide by more topical best practices to succeed in the changing landscape of DTP.

According to Mr. Neuner, whether the objective of the DTP campaign is conversion or compliance, efforts can be guided by following what he calls the best practice of the four A's: attract, align, activate, analyze. In short, the campaign must have the ability to efficiently reach a large volume of category-specific patients, then align the right patients with the right messages and break down barriers to get them to act. The last step is to analyze the responses along the way.

Addressing adherence is still a vital goal of DTP, and the industry needs to become more savvy about patient behavior and view the patient journey holistically, rather than just providing a medication reminder by text or product information.

“It important to continually recognize the value and importance of addressing adherence right from the start and all along the patient journey,” says Liz Kay, VP, account strategy and marketing, Cramer. “It’s an opportunity to think differently about the real challenges patients face in accepting the need for treat-

ment, persisting with the medication over time as prescribed, and overcoming obstacles and finding ways to commit to treatment and fitting it into daily life.”

This is particularly important in chronic and/or asymptomatic disease states where long-term treatment is required for maintenance or to slow progression, but won’t cure the patient and might not even make them “feel better.”

“As healthcare marketers, we need to acknowledge to the patient that maintaining a treatment routine isn’t always easy,” Ms. Kay says. “Then we can create motivating messaging and robust tools that proactively encourage adherence, reactively uncover partial- or non-adherent behaviors, and intervene in a timely fashion with necessary and relevant support.”

This initiative shouldn’t sit solely within the product brand team, she says, because truly addressing adherence requires a collaborative, coordinated effort across the healthcare spectrum — HCPs, pharmacists, pharma patient support programs, etc. — where all parties involved, including the patient, are doing what they can to support adherent behaviors and improve outcomes.

When collaborations include patient advocacy groups, Ms. Levins suggests that engagements be guided by standard operating procedures given the congressional scrutiny regarding the industry’s relationships with these groups.

“SOPs ensure that work with these organizations is done in a fair, equitable, compliant, and uniform manner that is consistent with PhRMA and company guidelines, as well as applicable federal and state laws,” she says.

Ms. Kay agrees, adding that we are all learning how to create and apply appropriate tools that address natural human behaviors as well as best determine how to measure effort for better patient outcomes.

“I suspect we will be refining and revising these approaches across populations for years to come,” she says.

“This new patient-centric approach to messaging is based on the new realities in our industry,” Mr. Bolling says. “Consumer behavior is different when it comes to pharmaceutical products, and today’s campaigns need to leverage behavioral psychology based on consumer insights and are driven by the technology of message customization.”

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JEFF BURKEL, Chief Operating Officer, MicroMass Communications

Forget about the product and focus on the patients. What are they going through? How do they feel? And how can you be there to help? Understand what patients are up against by identifying the barriers to being successful in their therapies and provide the support necessary to help them become successful — whatever it takes — even if that goes well beyond taking your product.



JAY CARTER, Senior VP, Director of Strategy Services, AbelsonTaylor

The simplest and yet most often ignored piece of advice I would offer in formulating a DTP campaign is to get your audience right. We live in a world where marketers have very high ownership and adoption of smartphones and tablets. We use them every day. Many of our customers do not. The sweet spot for the pharmaceutical industry is adults 55 years old and older. Fewer than half own a smartphone. Fewer than a quarter own a tablet. They visit Facebook one-thirtieth as frequently as they watch the network evening news. Know your customer to reach him or her.

“Today’s DTP campaigns must be measurable, accountable, and drive ROI in ways that just can’t be achieved with old-school approaches,” he says.

And DTC and DTP are not two separate entities.

“The biggest problem today is that people are still separating their DTC efforts from their DTP adherence initiatives, when the two are no longer separate,” Mr. Bolling says. “All DTC efforts must be patient and relationship focused. DTP and DTC should be considered as one single model that centers around the patient experience from first exposure to on-going adherence.” **PV**



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Case History of Acclarent Balloon Sinuplasty

Meeting a marketing challenge with direct-to-consumer communications.

Accclarent was interested in finding out if DTC advertising could successfully pull through demand for its Balloon Sinuplasty product, a minimally invasive treatment for blocked sinuses that offers several advantages over traditional sinus surgery, most notably, less bleeding and quicker recovery time.

The company's marketers had several questions that needed to be answered:

- Can advertising to consumers generate demand from patients?
- Could they reach prospective patients effectively and efficiently?
- Could they measure DTC efforts — from initial response through to the surgery?
- Did they have enough trained physicians to pull through an increase in patient demand?

Most importantly, however, management wanted quantitative evidence that advertising to consumers could directly impact sales. This meant the marketing team had to devise ways to measure consumer response and calls to physicians, as well as track the direct impact of DTC advertising on sales.

Target Audience

Acclarent learned through market research that chronic sinus sufferers were desperate and skeptical; most had tried all the OTC and prescription treatments and experienced no relief. Some even had traditional sinus surgery with mixed results. Sinus pain has a significant impact on their quality of life — in the workplace, with family and children, and in relationships — preventing them from fully participating in life.

Acclarent's marketers knew that simply raising awareness of the procedure would not be enough. They had to convince doubtful patients who had little hope for relief to accept Balloon Sinuplasty as a treatment that could bring them real relief. They had to move these

“The very cool element of this campaign was that 63% of the calls to physicians occurred after the eight-week flight of the test campaign. This is very characteristic of the engagement model; there is a wonderful long tail around these communications because individuals are motivated to be their own advocate and that continues long after the stimulus that got them there in the first place.”

JAY BOLLING / Roska Healthcare Advertising



patients beyond avoidance and denial, and convince them to consult with a physician trained in the procedure.

Campaign Objective

The challenge was to launch a DTC pilot and provide quantitative evidence that marketing directly to patients is a viable way to cost-effectively drive sales, and thus make the case for future DTC/DTP funding.

To accomplish this objective, Acclarent's marketing team members crafted a methodology that allowed them to track consumers at three key points:

- » Initial response to a website/toll-free number (from TV, radio, paid search, etc.)
- » Use of a special physician locator that allowed tracking of calls to physicians
- » Connecting with a physician trained in Balloon Sinuplasty technology

First, Acclarent assembled a group of external partners — all with a core expertise in measurement — and turned them into a tightly knit measurement-focused team that included:

- » Roska Healthcare Advertising — creative and program management

- » Mercury Media — TV and radio planning/buying
- » WCG — online advertising
- » Ansafone — inbound call center
- » Thimble River Analytics — physician office call tracking

Eight markets were selected for the pilot program based on several factors, including, market size (large and medium), air quality, allergy index, number of trained physicians, and salesforce activity.

Creative Strategy

Knowing that chronic sinusitis sufferers are desperate for relief, the creative strategy had to acknowledge their pain, express empathy, and offer real relief.

These key insights had to be embedded across every touch point of the program — in the media, the call center, the website, and at participating physicians' offices.

The creative had to acknowledge that sinus pressure and pain has a significant impact on patient quality of life, makes it difficult to enjoy normal everyday activities, and causes frequent absenteeism from work.

The creative also had to empathize with

the fact that, for many patients, standard treatments, including OTC and prescription medications are ineffective, leaving them with suffering that prevents them from participating in everyday life, and that traditional sinus surgery, which is painful and has an extended recovery time, is often ineffective.

Finally, the creative had to convey that Balloon Sinuplasty offers real relief as an effective, minimally invasive solution that provides relief from sinus suffering and helps patients get their life back with a minimum of disruption, and that most are back to work in a day or two.

Media Strategy

The program launched through multiple media: TV, radio, bus, billboard and paid search.

Consumers could respond via phone or through a URL that took them to a micro-site where the physician locator could track calls to trained physicians through the use of special phone numbers.

The simple, yet multi-functional micro-site mimicked the look and feel of the cam-

paign, provided a brief description of the procedure, and allowed prospective patients to: take a quiz to see if the procedure was right for them; hear testimonials from people who've had the procedure, including NFL great Marshall Faulk; watch an animated video to see Balloon Sinuplasty in action; and find a nearby doctor trained in the procedure with a simple ZIP code look-up.

Each medium was carefully tracked to measure the: cost to generate a consumer response; the cost to qualify a lead — getting a respondent to look up a physician; and the cost to move the prospect to action — call a doctor's office to make an appointment for an evaluation.

The Results

The marketing team carefully monitored the key metrics on a weekly basis and made in-campaign adjustments to optimize each consumer touch point: the media buy, the call center, and the physician locator.


Radio, transit, and outdoor were discontinued after they failed to perform as well as TV

and paid search, and the budget was allocated into the best media. A follow-up email campaign to responders encouraged those who were on the fence to take action and call a physician.

Quantitative Evidence

Campaign optimization resulted in ongoing improvements, including the number of leads increased steadily each week to more than 500% of initial response and the cost per lead decreased by more than 70%.

The ultimate test of the pilot was the post-campaign sales analysis. Regression analysis showed DTC/DTP advertising came out as a statistically significant sales driver: sales in markets where the campaign ran were 24% higher and ROI was as high as 65%.

More importantly, campaign-related calls to physicians continued long after the advertising stopped running. More than 63% of the calls to physicians occurred after the eight-week flight of the test campaign — a tribute to message staying power and email follow-up that drove a high level of patient acceptance. 

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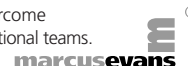
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