BY ROBIN ROBINSON

Controlling the MESSAGE in CYBER SPACE and TIME

With all the buzz surrounding the push to have pharma move out of the comfort zone of Web 1.0 and into Web 2.0 practices, **PharmaVOICE** asked experts what would happen if the industry simply doesn't make the move?

OUR FORUM EXPERTS PROVIDE THEIR INSIGHTS TO THAT QUESTION AND MORE REGARDING THE CHALLENGES AND RISKS OF THE WEB 2.0 SPACE.

Keeping Up With the 2.0 Joneses

To maintain a competitive edge in today's crowded environment, most experts believe the industry needs to step up its 2.0 practices or get left behind in a swirl of networking dust. Not only may early adopters get a marketing leg up on companies that choose to drag their heels, but 2.0 savvy consumers will notice the laggards' absence from the space.

BATCHELDER. EMD SERONO. Every day millions of patients, physicians, nurses, and other healthcare professionals log into forums, read blogs, and use interactive platforms for sharing information. Open, collaborative, interactive approaches to communications using Web 2.0 technologies can help maintain and build relationships that provide a foundation for continued growth across the healthcare industry. Companies that do not embrace Web 2.0 will put themselves at a competitive disadvantage because much innovation will derive from increased collaboration. Medical information and knowledge management functions provide information platforms for bio-pharma and healthcare professionals in a nonpromotional manner that is well suited to the peer-to-peer networking approach of Web 2.0, because they draw upon expert customer's own impetus for interacting with the company. The industry needs to rethink marketing with Web 2.0 and begin to think more in terms of knowledge management and information delivery. Consumers and professionals have exploding access to technical content now with Web 2.0. The risk is that companies will rush to embrace Web 2.0 but lose the spirit of collaboration behind the medium and users will then reject the efforts. When done properly, Web 2.0 is a powerful application, helping patients connect with each other and to other information resources. Pharma companies can help bridge this gap. Time constraints on the clinical encounter reveal opportunities to begin to assist patients, healthcare professionals, and the industry at large seeking better, more efficient ways to communicate using Web 2.0.

WORTHINGTON. NIELSEN ONLINE. There are myriad opportunities for pharma companies in the Web 2.0 space. Online patients are some of the most knowledgeable and engaged consumers out there. They are adopting new technologies at a lightening pace and waiting for companies to catch up. Consumers will see nonparticipation in this space as a failing of the pharmaceutical industry, especially when so many other industries are adopting Web 2.0 strategies and using new media to connect and communicate with their customers. This will only add to the already poor consumer perception of the pharmaceutical industry.

LEWIS. ABELSONTAYLOR. The industry, as a whole, has by necessity focused on monologue over dialogue and control over democracy. The issue is that customers, from consumers to healthcare providers, have not been content to operate inside these constraints. Social computing is happening today and will continue. The question is whether the pharma industry will find a way to participate in these discussions. At this point, these audiences are relying more on each other than pharma manufacturers. Without engagement, pharma will not be able to influence these conversations, and hence, consumer decisions.

NAIL. CYMFONY. The growth of consumer usage of these technologies is inexorable and irreversible. There is talk of a bubble in 2.0 these days, but pay no attention. I believe this is a dramatically more important shift than the growth of interactive marketing and that it completely changes the relationship between brands and their consumers. Marketers of all sorts risk becoming irrelevant to the consumer decision-making process if they don't participate. Consumers are increasingly relying on word of mouth — both online and offline — and ignoring marketing fluff. On the other hand, while early adopter consumers are actively using these technologies today, they aren't conventional yet. Pharma companies should hurry up with pilot tests to begin to learn the best ways to use these tools so that they are adept with them when they become truly mainstream in a few years. Consumer behavior doesn't change nearly as fast as the technology changes, so there is time to catch up and be aligned with consumers.

WE NOW HAVE A WINDOW ON THE WORLD THAT WILL ENABLE US TO ENGAGE WITH MORE INTELLIGENCE AND WISDOM THAN EVER BEFORE. This should be good for patients, for healthcare providers, and for the pharma companies hoping to serve them.

BILL DRUMMY, Heartbeat Digital

PIETZ. MICROMASS COMMUNICATIONS. Web 2.0 technologies are changing the way marketers think. Marketers today are becoming more respectful of the customer's mindset, control of media consumption, and potential influence over others. This perception shift is exciting and will have a positive impact as it forces new, exciting thinking. But we are not there yet. Much energy is still being spent on experimenting with the new tools versus establishing programs that recognize a clear business need and determine, based on that need, how to leverage newer technologies to accomplish specific objectives. It appears that interest in Web 2.0 is high in the pharma industry. But this interest is curtailed by fear of undetermined risk. To be fair to brands, we have yet to provide tangible proof of benefit over risk. I am confident, however, that we are making progress and believe we will start to witness some innovative 2.0 applications in the realm of disease-education efforts and relationship marketing programs. While I am not sure I agree with "hurry up and incorporate it," I do believe it is essential that we, as pharmaceutical marketers, recognize the level of influence customers have, respect that influence, and build from there. Social media cannot be treated as another mass marketing tool. It is about intimacy, trust, empathy, and a dialogue. If pharma companies ignore the impact and sphere of influence social media have on their customers and patients, mass marketing efforts will end up competing with social media instead of working synergistically. As a result, the effectiveness of mass marketing would decrease.

MOORHEAD. AVENUE A | RAZORFISH. When I started in this practice two and a half years ago, I believed that the exuberance of the clients was an indication that companies needed to jump on and leverage all of these media channels for marketing drugs, but what I've learned over time is that the pharma industry as a whole doesn't need emerging media as much as it thinks it does. TV advertising is still an emerging media for drug marketers. Companies have only been able to advertise directly to the consumer on television for a handful of years, so this is still a fairly new medium for them. There isn't a real dramatic need or at least not as much pressure for pharma to embrace leading-edge emerging media channels. The channels that exist are still new enough and there is enough proof that ad messages on TV still need work. Instead, pharma needs to shift to listening to what consumers want and delivering real value to those consumers. Pharma needs to get better at communicating with its consumers before it takes on new channels.

RESSI. MANHATTAN RESEARCH. The risks of

Thought Leaders

TIMOTHY BATCHELDER, M.S. US Medical Information Manager, Systems and Business Resources, EMD Serono Inc., Rockland, Mass.; EMD Serono specializes in several therapeutic areas, including reproductive health, neurology, and metabolic endocrinology. For more information, visit emdserono.com.

BILL DRUMMY. Founder and CEO, Heartbeat Digital, New York; Heartbeat Digital is an interactive marketing and software company specializing in sales and marketing solutions for the pharmaceutical, consumer products, and financial services industries. For more information, visit heartbeatdigital.com.

TIM LEWIS. Director, Interactive/Relationship Management Strategy, AbelsonTaylor Inc., Chicago; AbelsonTaylor is a medical and pharmaceutical advertising agency. For more information, visit abelsontaylor.com.

PATRICK MOORHEAD. National Manager, Research and Development, Advanced Marketing Solutions Group, Avenue A | Razorfish, Philadelphia; Avenue A | Razorfish is an interactive agency. For more information, visit avenuea-razorfish.com.

JIM NAIL. Chief Strategy and Marketing Officer, Cymfony Inc., Watertown, Mass.; Cymfony, a division of TNS Media Intelligence, is a market influence analytics company that interprets information on blogs and social networks to gain consumer insight and develop stronger bonds with influencers. For more information, visit cymfony.com.

JAMES PIETZ. VP, Digital Strategy, MicroMass Communications Inc., Cary, N.C.; MicroMass Communications is a relationship marketing agency. For more information, visit micromass.com.

MEREDITH RESSI. VP, Research, Manhattan Research LLC, New York; Manhattan Research conducts market research surveys among physicians and consumers. For more information, visit manhattanresearch.com.

LYDIA WORTHINGTON. VP, Client Services, Healthcare, Nielsen Online, New York; Nielsen Online measures, analyzes, and leverages consumer-generated media. For more information, visit nielsenonline.com.

If companies choose to remain unaware of the content of online conversations, **THEY WILL SURELY LOSE TOUCH WITH THEIR CUSTOMERS.**

MEREDITH RESSI, Manhattan Research

WEB 2.0 TECHNOLOGIES ARE CHANGING THE WAY MARKETERS THINK. This perception shift is exciting and will have a positive impact as it forces new, exciting thinking.

JAMES PIETZ, MicroMass Communications

being reactive instead of proactive in addressing how the proliferation of user-generated content impacts a business are twofold: First, if companies don't address how employees can, and should, be interacting with or creating user-generated content, then there are bound to be issues down the line of employees crossing legal or regulatory lines they didn't know existed. Most employees are now well trained in how to use or not to use e-mail, online, and user-generated content, but these guidelines still need their own place in the company handbook. Second, if companies choose to remain unaware of the content of conversations online, they will surely lose touch with their customers. Wikipedia is a great example. In a recent study, we found that Wikipedia is one of the most commonly used health-information seeking sites among consumers in many countries in Europe. In the absence of a WebMD in their language, Wikipedia is the best one-stop-shop some European consumers have available to them for health information. So just as a company might make sure the information about a product is up-to-date on WebMD, perhaps companies should have policies in place for monitoring and updating Wikipedia.

Overcoming Web 2.0 Challenges and Risks

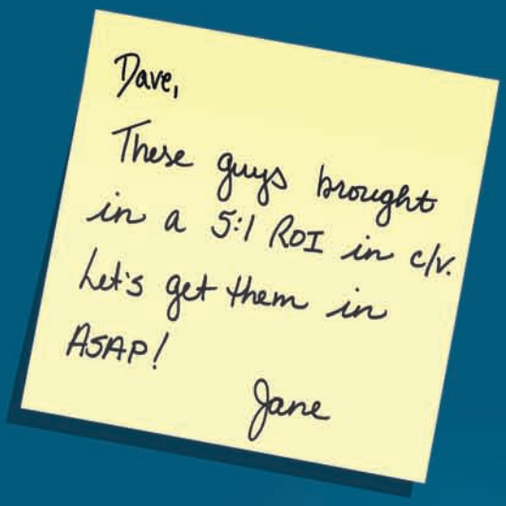
Experts have identified regulatory constraints, staffing, and lack of awareness as a few of the Web 2.0 hurdles facing the industry.

BATCHELDER. EMD SERONO. The largest challenges for pharma companies moving into Web 2.0 are staffing and expertise. The e-business leader must have a wide set of skills to make these projects work. In particular they must have the ability to analyze existing resources within their company, consolidate and develop a portfolio of services, publish frequent updates and communications to stakeholders, and travel and work flexible hours to match different time zones and cultural backgrounds. They must also bring in agencies and outside expertise as needed, attend conferences on e-business and new media, read periodicals and obtain training, identify evangelists, and participate on cross-functional team meetings with diverse players in IT, medical/regulatory, marketing, and training/sales. And they must conduct constant monitoring and reporting to assure ROI. Customer service teams need constantly updated links to online product information resources. An ideal e-business and new media specialist will be able to tolerate uncertainty, adapt to new approaches, and maintain a level of enthusiasm and an entrepreneurial mindset. Specialists will want to do this work and will be willing to stay with their companies for several years to see projects through to completion. The same goes for Web 2.0 vendors. They need to do some benchmarking and develop ranking schemes to assess features between alternatives quickly. And lastly, the consumer of Web 2.0 services is shifting rapidly as well. Before Web 2.0, and the resurgence of new consumer technology such as Apple computers, most people's only experience with computers were large, tightly controlled databases at work over which they had little control. The customer was a "user." Developing a system became a substitute for addressing cultural fundamentals in the organization and industry but with the time, headaches, and cost associated with systems, IT became a scapegoat for a wide variety of corporate institutional problems. Today, with Web 2.0 the technology is less an obstacle to business and increasingly an enabler. The user is a creator.

RESSI. MANHATTAN RESEARCH. The biggest hurdle that pharma faces in contemplating Web 2.0 strategies is, of course, legal and regulatory uncertainty. Individual teams are often afraid to be proactive in thinking creatively about what Web 2.0 means for the brand and how they can respond, because in the absence of clear guidelines, it is difficult to know which ideas are doable, and which are doomed for failure when it comes time for approval. By developing guidelines surrounding how to monitor, respond to, and solicit user-generated content, companies will be putting measures in place to protect themselves against liability for employee action or inaction, while also empowering the individual brands to be more creative in the types of initiatives they can undertake, rather than being paralyzed by a fear of being rejected.

WORTHINGTON. NIELSEN ONLINE. Companies are starting to think about Web 2.0 more seriously and develop plans, even if Web 2.0 isn't being used in practice. The risk is that all things Web 2.0 related are changing faster than plans can be rebuilt and modified. Using an out-of-date, long-term plan could exclude new and important sources or technologies and focus on areas that are no longer hot or exciting. This is a new and previously untested world. The industry faces fierce regulations and extremely cautious legal departments; companies should not abandon any safety measures to tackle Web 2.0. There are huge opportunities to be had, and by looking at those industries that have gone before — automakers, packaged good manufacturers, etc. — and learning from their successes and mistakes, the pharma industry is well-positioned to develop highly effective and innovative Web 2.0 strategies.

NAIL. CYMFONY. Regulatory issues are certainly a barrier, and there is no sign of FDA guidance coming in the foreseeable future. Companies must make their policies based on their best assessment of how the FDA might decide to extend and adopt existing DTC regulatory concepts to social media. The other issue for pharma marketers is how to break the one-way, push-messaging, interruptive mass marketing mindset and learn to love losing control of their brands. The emerging research shows that for the most part, citizen marketers will do a better job of representing a brand than company marketers can do. On the other hand, if the product isn't as effective as its competitor, or isn't sufficiently more effective to justify a price premium, there is no place to



Filling the prescription is only the beginning.

Connecting patients and physicians means success over the long term.

InfoMEDICS
The Patient Feedback Company

showmehowtoconnect.com
or call Bob at 877.972.9725

Social computing is happening today and will continue. THE QUESTION IS WHETHER THE PHARMA INDUSTRY WILL FIND A WAY TO PARTICIPATE IN THESE DISCUSSIONS.

TIM LEWIS, AbelsonTaylor

For many years, marketers didn't have to listen to consumers to market to them. SOCIAL MEDIA HAVE MADE IT APPARENT THAT MOST OF AMERICA'S MARKETING COMPANIES ARE TERRIFIED OF THEIR OWN CONSUMERS; they don't want to hear negative things about their brands. The Internet has become a great leveler.

PATRICK MOORHEAD, Avenue A | Razorfish

hide. No amount of advertising in the world will make up for product that is inferior.

LEWIS. ABELSONTAYLOR. There are numerous challenges for pharma in using Web 2.0, not least of which is an overall lack of awareness within pharma companies of the risks and benefits associated with Web 2.0. Product managers need to educate their management about the impact of this trend. A second major challenge is in relation to risk management. Before engaging in social computing, a pharma company must have a plan for dealing with negative interactions or contributions, as well as nonsupportable positive ones. A third, less obvious challenge is to remember the importance of audience segmentation. Content will be engaging and lead to further engagement only if it is relevant to the audience consuming it.

DRUMMY. HEARTBEAT DIGITAL. The self-publishing element of Web 2.0 is problematic for pharma companies. Once visitors are allowed to become commentators, we open Pandora's inbox. Many pharma companies have wanted to add community features to their Websites, allowing patients, caregivers, healthcare professionals, and others to comment on a particular disease state or therapy. None has ever been able to get it past legal. The concerns are two-fold: one is the possibility that a visitor will publish erroneous information for which the pharma company might be held liable. Second, a visitor might report an adverse event, about which the pharma company must conduct an extensive investigation and submit an elaborate report to the FDA. But there are ways to give an important audience a sense of community without running the risks of self-publishing. One technique that has been proven to be very successful is to use a large group of video testimonials from patients, caregivers, and so on, who speak about the condition and how they've managed to cope. The authenticity of the voices gives the site a real personality. And a teasing video that encourages visitors to join the community can give the site a sense of exclusivity and help build a very valuable database.

Web 2.0 Plans Need to Be Adaptable

One of the major challenges with Web 2.0 involves long-range planning. The industry must strike a balance between having a strategy for the future and keeping that plan flexible enough to accommodate the rapid-fire changes in 2.0 technology and consumer usage.

BATCHELDER. EMD SERONO. The greatest challenge and reward stemming from long-term planning and execution of pharma Web 2.0 is the transformation of the business model of the company. Web 2.0 business models can be much more flexible. Communications shift from unidirectional to bidirectional. Like biotechnologies, information technologies require that we dramatically rethink intellectual property, patent, and copyright laws. Web 2.0 has opened up participation and collaboration by millions of customers, scientists, and other users in a company's product development, as well as employees at all levels who were never involved before. With Web 2.0 a company can suddenly draw upon a vast expanse of knowledgeable experts both within and outside its boundaries. A business specialist can also implement an IT solution with a mouse click that previously took 12 months. Web 2.0 is best considered as hypothesis testing. I don't use the term Web 2.0 much anymore but prefer e-business or knowledge management.

PIETZ. MICROMASS COMMUNICATIONS. Companies and marketers need to embrace and recognize that social media will grow beyond brand-controlled messages. Marketers need to ensure that their brand strategies in this area are built on a business rationale and that they develop a flexible plan taking into consideration their company's receptivity to innovation.

NAIL. CYMFONY. Individual technologies come and go, so at this stage, long-term planning is almost irrelevant at the level of blogs, social networks, and so on. Long-term planning must focus on an overall strategy that allows the company to shift its marketing mix to incorporate consumer participation, and not just rely on interruptive mass marketing or advertising techniques. This

involves taking that consumer feedback and distributing it to marketing, PR, consumer affairs, regulatory affairs, product development, etc. Starting to pilot, to experiment, and learn now will enable pharma companies to be adept with these tools as usage expands beyond early adopters and goes mainstream. Companies can be aligned with their consumers rather than lagging behind them and struggling to catch up.

LEWIS. ABELSONTAYLOR. The risk in long-term planning for Web 2.0 content is that a company allows the planning, and hence the content, to become static or irrelevant. The content gets written and then is delivered regardless of changes that may have taken place in the meantime. Web 2.0 enables conversations to take place between companies and their customers. These conversations, because they are dialogues, will have some fluidity to them, so

Risk/Reward

EVALUATING THE RISK OF SOCIAL MEDIA COMMUNICATIONS TACTICS FOR PHARMA

Cymfony and healthcare marketing consultancy Envision Solutions and law firm Seyfarth Shaw — the co-authors of a related white paper — have evaluated a number of social media communications tactics and organized them into three risk categories: red, yellow, and green.

Red. These are social media activities that may place a pharmaceutical company at high risk of violating FDA regulations.

Yellow. Companies may be at moderate risk of being cited for noncompliance by implementing these tactics.

Green. These activities carry low risk of violating FDA regulations, either because drug firms are already implementing them or they can be very tightly controlled.

To evaluate each activity, Cymfony assessed the likelihood of a company being cited for violating fair balance, adverse event, and off-label promotion regulations during the activity. (Note: This framework is not all-inclusive.)

Developing Branded Content for Distribution on Video-Sharing Websites — Risk Level Green

A number of drug companies are considering whether and how to distribute branded content on video-sharing Websites, such as YouTube. This is a relatively low-risk activity because companies normally include information about drug risks in the videos and the content is carefully vetted and controlled. Without this scrutiny, however, a company may violate fair balance requirements.

To decrease the odds of being cited by the FDA for noncompliance, drug companies should ensure that the video is accompanied by a brief overview of medical side effects and provide additional product information that is easily accessible via a prominently displayed hyperlink embedded in the video content.

Monitoring Social Media Using Internal Resources — Risk Level Yellow

Reviewing blogs, online bulletin boards, and other forms of social media generally does not heighten a drug company's risk of violating fair balance or off-label promotion regulations. Companies must evaluate their responsibility to report adverse events that may be discussed, but most posts will not qualify as reportable events.

Because of the anonymity of members of most social media sites, most posts will not meet the first two required elements of a reportable event. Without an author's real name and other identifying facts, the post will fail to meet the criterion of "an identifiable person reporting the event." Similarly, most posts will fail to include "an identifiable patient," whether the anonymous author claims to have had the experience himself or is describing someone else's experience.

But if a post includes all the required elements, it must be reported along with adverse events identified by all other means.

Monitoring Social Media Using External Resources — Risk Level Yellow

If an external vendor is monitoring social media on a company's behalf, drug companies are still obligated to report all verifiable adverse events that they become aware of through the activities of the external vendor. Companies can minimize the potential for reportable events by defining external monitoring projects around topics where adverse events are less likely to be discussed, for example, a study on consumers' reaction to a DTC campaign, or patients' experience with their doctor during treatment. But following this strategy could create product liability issues for the company in the event of subsequent injury if it could be argued that the company could have or should have known about the adverse reaction.

Developing a Branded Blog — Risk Level Red

Blogs are often spontaneous, opinion filled, and free wheeling. While this type of approach could lead to many regulatory issues, the risks can be lessened by ensuring that the branded blog is compliant with fair balance regulations by developing a brief statement of common drug side effects that appears in the blog, by regularly reviewing reports of adverse events, and by incorporating those reports that are identifiable and credible into existing protocols. Companies must develop proper disclaimers, site use policies, and internal policies and procedures to avoid inadvertently endorsing off-label uses discussed in comments. Given these restrictions, drug companies should evaluate whether a product blog will be effective in satisfying patient/healthcare provider expectations for a blog. The reviews needed to ensure that the blog complies with FDA regulations may prohibit companies from fully satisfying blogging's cultural requirements for candid conversation and quick response times.

Source: Cymfony, Watertown, Mass. This information is an excerpt from the white paper: "Managing the Risks and Regulatory Issues Associated with Successful Pharmaceutical Social Media Monitoring and Marketing." For more information, visit cymfony.com.

the planning needs to be somewhat fluid. The benefit to long-term planning is that the company, having established an editorial concept, can guide interactions and conversations toward an ultimate goal.

RESSI. MANHATTAN RESEARCH. When it comes to planning specific user-generated content initiatives, a company has to be nimble enough to implement a project on a relatively short timeline to be effective. For instance, if a brand is considering launching a Facebook page, it's probably not something you want to plan to launch in 2009.

PIETZ. MICROMASS COMMUNICATIONS. Web 2.0 content changes too rapidly to develop long-term 2.0 planning. But business planning that respects, understands, and incorporates a learning-based approach to 2.0 is critical to long-term success. Brands that test, learn, and build flexibility within the planning cycle will experience a greater degree of success than with defined, long-term applications.

Since experimentation is very inexpensive in e-business, A PROJECT'S SUCCESS RATE IN THE SINGLE DIGITS IS FINE AS LONG AS THE RISKS HAVE BEEN ANALYZED.

TIM BATCHELDER, EMD Serono

The Same Message Everywhere

Consistent messaging is key in internal as well as external communications, and company policies need to be in place for an effective Web 2.0 plan.

BATCHELDER. EMD SERONO. It is important to have guidelines for sharing medical information using Web technologies by company personnel because of certain regulations, such as CFR Part 11 compliance and EU directives on data protection. Each region's policies on drug information security are very different. Consider China's blocking of specific content on the Web and how this could affect medical information. Tracking compliance is also crucial. With Web 2.0, everything a user does with our information can be tracked. We track customer inquiries methodically using CRM databases, such as IRMS, including their sources of information and interactions online. When we notice a trend or negative or inaccurate information on Web resources we alert our U.S. communications function. Increasingly, we can track views on sites and registrations and if we can't track down to the user level, the platform is less valuable to us. The industry is finally moving toward electronic signature capture by physicians but new license databases are a better way to validate the user. There are many technical and business level controls to assure that we are aware of company communications and information resources across the vast digital ocean of the World Wide Web. Externally, these include embedded DRMs to alert us when our media are used and physical controls such as monitoring and participation in online media. Internally we have publishing queues for intranet sites in the form of staging environments, blogs and mass e-mails, and forums where moderators can assure that any posts meet the company's standards for appearance and content. Password authentication ensures that only authorized staff are able to use these tools. We also have company databases for product information, media assets, and finance policies for purchases of Web 2.0 tools. Overall, our experience in running an online industrywide user community has been free of any issues due to our careful use of appropriate controls.

WORTHINGTON. NIELSEN ONLINE. Having a central team that manages messaging is key. We are finding too often that different groups in pharmaceutical companies are working independently when it comes to new media. All branding and messaging should be consistent and aligned regardless of where it is being placed.

NAIL. CYMFONY. Consistency of message is less important in this world than openness, trans-

Five Tips for Marketing Online

Tip No. 1. Deliver deep content to the most engaged online visitors

The most highly involved patients and professionals are thirsty for information. Create separate Websites or information centers with expert opinions, deep technical content, talkable new ideas, community interactions, and exclusive features that can be accessed by your company's best customers. They will then carry the information forward to a larger audience.

Tip No. 2. Focus on events

Don't underestimate the willingness of consumer and patient participation. If you create the right types of events — Webinars, live online chats, in-person meetings, facility tours — the most highly involved stakeholders (who also tend to be word-of-mouth igniters) will engage. Make sure participants leave with new and interesting topics they will be excited to share with their peers.

Tip No. 3. Treat online commentators as influential media

According to a recent Jupiter Research study, one in five online consumers turns to other online consumers for advice on health and medical treatment. Develop genuine one-on-one relationships with leading medical bloggers, discussion group leaders, and similar individuals who serve as filters and authority figures to their respective groups. Engage them in a conversation — do not talk at them.

Tip No. 4. Extend existing marketing with word-of-mouth tactics

Nontraditional, buzz-marketing programs introduced by pharma companies may set off red flags with a regulatory affairs department, making inventive ideas difficult to get approved and implemented. It is dramatically easier to get projects through your legal department if they are connected with an existing program.

Tip No. 5. Start with education programs

Tie your word-of-mouth strategies to education-based initiatives. Health education is viral and participants are usually eager to learn more about specific conditions, diseases risks, and treatments. Education marketing also is less restrictive than other tactics, so companies can execute more aggressive programs.

Source: Lydia Worthington, Nielsen Online. For more information, visit nielsenonline.com.

Taste the **bold brand** flavor, feel the **bold brand** buzz.
For a sudden burst of scientific, strategic, and creative energy
call Frank X. Powers at 267.532.1060

dudnyk.com

THE INDUSTRY FACES FIERCE REGULATIONS AND EXTREMELY CAUTIOUS LEGAL DEPARTMENTS; companies should not abandon any of these safety measures to tackle Web 2.0.

LYDIA WORTHINGTON, Nielsen Online

COMPANIES MUST MAKE THEIR POLICIES BASED ON THEIR BEST ASSESSMENTS of how the FDA might decide to extend and adopt existing DTC regulatory concepts to social media.

JIM NAIL, Cymfony

parency, and responsiveness to consumer feedback and participation. The act of being open to participation sends a more important message than any catchy jingle ever could.

LEWIS. ABELSONTAYLOR. Probably the most important policies a company can put in place ensure there is a complete brand message map and a brand steward who is responsible for the execution of this map.

RESSI. MANHATTAN RESEARCH. It is important that companies have policies in place for employees surrounding content that they post online, monitoring online content, and any inbound online communication from patients. Specifically, companies should have policies in place that answer the following questions: what types of content can the employee post online or in online forums; can sites run by the company — brand.com, corporate portals, unbranded disease sites — solicit user-contributed content; and if so what are the guidelines for handling adverse events or off-label discussions in these types of forums? Additionally, companies need guidelines for how employees can monitor the blogosphere, message boards, and other types of online user-generated content outside of the company's sphere of sites.

Listenomics — The Economics of Listening to Customers

While pharma companies may struggle to actively participate in social networking, the one area in Web 2.0 that has almost no risk and tremendous benefit for marketers is listening in on the conversations consumers are having around their brands.

MOORHEAD. AVENUE A | RAZORFISH. The way that the regulatory environment is set up in the United States makes it extremely difficult for drug marketers to have any meaningful role in what their audiences are doing online in a social networking setting. The harsh truth might be that it may not be possible for drug marketers to directly participate in a social environment Web 2.0. I don't believe that, necessarily; I want to believe there is a way to take advantage of the opportunity, but this space has been talked about for more than a year and there has not been a single drug maker that has done anything significant so far. But the industry can benefit from social networking if it is used as a research tool. It could become the new face of audience profiling. Right now, there may not be an obvious way for pharma companies to play but they certainly can listen, which provides very different insights into consumers and their feelings about their conditions and their approaches to treatments. This practice has recently been called "listenomics." In a focus group, consumers are more inclined to say what they think the sponsors want to hear about a brand, but blogs, social networks, and chat rooms provide organic conversations that are unsolicited and unfiltered. Our healthcare clients have used word-of-mouth research products and we have discovered some surprising things. For example, for years a particular brand we work with had assumed XYZ about patients' attitudes toward their treatment, and brand managers made decisions about creative messages and media inventory based on those assumptions. Through word-of-mouth research, they found out their assumptions were wrong. This group of patients didn't care at all about the issue that the company had been focusing its message on. The message it had been sending out for years was totally lost on these patients.

RESSI. MANHATTAN RESEARCH. Most importantly, social networks provide a chance for companies to gain insights into the concerns and opinions of today's consumers. While insight gleaned from such sources cannot be considered true market research that is representative of the opinions of the entire target population. It is nonetheless critical to be aware of what the consumer opinion leaders, who typically post on these sites, are saying, as their opinions are likely to have an extended impact on friends, family, and, of course, those reading their comments online.

DRUMMY. HEARTBEAT DIGITAL. Hard as it may be to believe, social networking is not limited to college kids. There are thousands of sites where people of all ages actively discuss their personal medical conditions and look to others for help and answers. These sites have become a rich repository of market intelligence and consumer insights, available for the probing. Think about it: what is the value of thousands and thousands of people with real interest in a particular condition or therapy, who are offering their unsolicited, unfiltered opinions? What can pharma learn about the true state of mind of patients by simply reading what they're saying in real time? And what of physicians, now congregating on sites like Sermo, commenting openly and extensively about the practice of medicine? What can be learned from them? This is the true promise of the multidirectional, open book of Web 2.0. We now have a window on the world that will enable us to engage with customers, consumers, and patients with more intelligence and wisdom than ever before. And that should be good for patients, for healthcare providers, and for the pharma companies hoping to serve them.

PIETZ. MICROMASS COMMUNICATIONS. Social media can be an incredibly valuable vehicle for research and learning. Social media allows for a dialogue with the consumer and between consumers unlike any other. Moving forward it will grow to be essential to gain deep consumer insights and key audience understanding.

The Few, The Proud, The Web 2.0 Leaders

Not many in the industry have truly embraced social networking as a marketing edge. Our experts have identified a few companies and allied organizations as early adopters.

BATCHELDER. EMD SERONO. The biopharma leaders of Web 2.0 include companies that are most interested in learning about their customers and expanding their research and development pipelines. They also seem to be the leaders in integrating IT into business processes and include companies like Procter & Gamble, which is widely recognized for its collaborative approach to R&D. The American Cancer Society is building drug interaction calculators, glossaries, treatment guides, clinical-trial tools, clinical portals, widget suites, and reminder assistants. The society also created mash-ups using Google maps, and its events database and a Second Life world have raised tens of thousands of dollars in the first year using free, user-generated content. Since experimentation is very inexpensive in e-business, a project's success rate in the single digits is fine as long as the risks have been analyzed. Abbott Diagnostics e-Business is exploring a rep finder with interactive territory maps, community forums, internal e-news that is BlackBerry compatible, multilingual Webcasts, library databases with PIs, letters, MSDS, 3D virtual product demos, and live trade show coverage. Ovation is working with podcasts using tools such as Liquidtalk. Sermo and other like companies are laying new ground in building Web 2.0 physician communities.

LEWIS. ABELSONTAYLOR. There are few examples of pharma companies that are reaching out to their customers via Web 2.0. One worthy of note is the GlaxoSmithKline outreach campaign for Alli, which has more than 130,000 users and 142,000 posts. On the whole though, the record is a bit more disappointing. Research conducted by MBC and CBI in March 2007 showed that two-thirds of all pharmaceutical manufacturers responding to their survey provided at least some type of Web 2.0 element. This same survey, however, showed that fewer than half offered multiple elements, and fewer than one-third offered networking opportunities.

RESSI. MANHATTAN RESEARCH. GlaxoSmithKline's blog on alliconnect.com is a great example of taking control of the online conversation by anticipating, listening, and responding. With posts such as "Toilet humor never seems to lose its appeal, whether you're in kindergarten or on YouTube," GSK was very proactive in being a part of the online dialogue — both good and bad. Bayer Healthcare is also one of the market leaders in this space. The women's health group, in particular, was early to the game in sponsoring a MySpace band to promote Yaz, and it offered podcast content on the Mirena Website. Merck's Gardasil also has been appropriately aggressive with online promotion. The "Take a Step against Cervical Cancer" group on Facebook has more than 41,000 members, and it asks visitors to submit a video describing "what inspires you to act." Another promotion that is somewhat off the beaten path is one on Yahoo! Messenger in which users can create a shared "IMvironment" that allows them and the person they are messaging with to drag and drop refrigerator magnet icons. The only branding on the promotion is a link that says "Find out how you can be one less," which takes you to a page with information about Gardasil. ✦

PharmaVOICE welcomes comments about this article. E-mail us at feedback@pharmavoice.com.

Upcoming In-Person Web 2.0 Events

February 25-26, 2008
2nd Search Engine Marketing for Pharmaceuticals
Loews Philadelphia Hotel, Philadelphia
This event places "search" within the greater Web 2.0 context, and closely examines the regulatory component. Wherever SEM takes us, and where we take it, this is the forum to learn, share insights, network, and debate about this exciting marketing tool. For more information, contact Jasmaine John, ExL Pharma, at 212-400-6235, e-mail jjohn@exlpharma.com, or visit exlpharma.com.

March 6-7, 2008
7th Annual eMarketing for the Pharmaceutical Industry: Design Targeted and Interactive Web 2.0, Search Engine, and Online Marketing Campaigns to Influence Physician and Consumer Behavior
Park Hyatt, Philadelphia
This industry forum on pharmaceutical e-marketing features best-in-class strategies for improving interactive product promotion. Topics featured at the 2008 eMarketing meeting include Abbott Laboratories' low-cost, low-risk investments in online communities and Novo Nordisk's "Voice of Diabetes" social marketing program as examples of innovative uses of Web 2.0. For more information, contact Center for Business Intelligence at 800-817-8601, e-mail cbireg@cbinet.com, or visit cbinet.com.

March 31-April 1, 2008
2nd Annual Pharmaceutical Sales & Marketing Executive Congress
Bethesda North Marriott Hotel & Conference Center, Bethesda, Md.
This program features insightful perspectives on understanding and adhering to the new rules of marketing pharmaceuticals, including capitalizing on new media channels for sales, marketing, PR, and promotion. For more information, contact Ria Lubis, International Institute for Business Information & Growth, at 212-300-2523, e-mail rial@iibig.com, or visit iibig.com/P0802.

May 6, 2008
The World Congress Leadership Summit on Consumer Connectivity & Web Empowerment
Boston
During this one-day event, industry leaders and visionaries will share strategies to leverage the opportunities and efficiencies presented by today's new media, including social networks, blogs, online communities, search sites, and health and wellness Web tools. For more information, contact Catherine Rymsha, World Congress, at 781-939-2587, e-mail catherine.rymsha@worldcongress.com, or visit worldcongress.com/connectivity.

June 2008
Biopharma Web 2.0
Location TBD
This conference will help you navigate through the opportunities and challenges of implementing Web 2.0 as a sustainable long-term communications platform, for optimal consumer engagement, collaboration, and product co-creation. For more information, contact Allison Rigels, Institute for International Research, at 212-661-3500, ext. 3237, e-mail arigels@iirusa.com, or visit iirusa.com.

October 2008
3rd eCommunication & Online Marketing Summit
Philadelphia
2008 is the year of online marketing innovation. Web 2.0 is central to this movement, with more focus on user-generated content and Web portals than ever. Learn how to create the right business model for your product as well as generate, measure, and interpret the data your platform produce to ensure your interactive offering leads the market. For more information contact Ed Harris, eyeforpharma, at 44-0-207-375-7173, e-mail eharris@eyeforpharma.com, or visit eyeforpharma.com.

October 6, 2008
2nd Annual Digital Pharma
Princeton, N.J.
This event focuses on the impact of Web 2.0, consumer-generated content, and social media on pharmaceutical marketing. For more information, contact Jasmaine John, ExL Pharma, at 212-400-6235, e-mai jjohn@exlpharma.com, or visit exlpharma.com