BY ROBIN ROBINSON

A 360-DEGREE VIEW
of E-Patient Connections

Four crucial players need to be in place for successful e-connections: patients, physicians, pharmaceutical companies, and technology providers.

Healthcare information technology has created the platform for the exchange, collection, and documentation of health data and information, but it is up to the crucial players — patients, physicians, pharma companies, and service providers — to make e-connections work. The patient, the physician, and the industry all have crucial roles in building relationships with each other, relationships that provide value and improve health outcomes. Our experts on this topic believe that if all stakeholders do their part, e-connections can enhance the management of health, improve the healthcare system, and subsequently yield better health outcomes for patients.

PARTICIPATORY MEDICINE

Patients are turning in droves to branded and unbranded Web sites to learn more about a condition or to manage their health. Sites such as CML Earth created by Novartis, Changing Diabetes created by Novo Nordisk, and Facebook accounts developed by McNeil Pediatrics ADHD Moms and ADHD Allies allow patients to participate in their own healthcare. (A more detailed list of sites is available via the digital edition.) This type of engagement is called participatory medicine by the Society for Participatory Medicine, a new group that provides a blog (e-patients.net) and a journal (Journal of Participatory Medicine), both of which aim to bring e-patients and healthcare providers together. Dave deBronkart, software marketer at TimeTrade Appointment Systems and co-chair of the Society for Participatory Medicine, is one of these e-patients.

Mr. deBronkart is a true believer — and living proof — that better healthcare can be achieved through active patient engagement. In 2007, Mr. deBronkart was diagnosed with stage IV, grade 4 renal cell carcinoma. Through the cancer-support site acor.org, Mr. deBronkart became fully engaged in his treatment and care. Since then, Mr. deBronkart, or "e-Patient Dave" as he is known, has created his own blog and authors posts on e-patients.net. To read more about Mr. deBronkart's story, visit patientdave.blogspot.com.

"I went into this cancer adventure wearing many hats," Mr. deBronkart says. "I was a patient, a software product manager, and an advocate for great customer experience. It was natural for me to engage in my own healthcare."

According to Bill Fox, executive director of The National Center For

> *"Digital technology offers new opportunities to deliver the relevant, timely, and valuable information physicians need."*
>
> **DEBORAH SCHNELL**
> **Healthy Advice Networks**

Patient Interactive Research, social media is a powerful tool for improving healthcare.

"The proliferation of health information available via social media is going to have a positive impact on the healthcare system," he says. "Ever since the RAND Health Insurance Experiment, or HIE, everyone agrees that the only way to seriously reduce costs for chronic disease care is if some patients decide to lead their own care teams."

(The HIE, a 15-year, multimillion-dollar effort that to this day remains the largest health policy study in U.S. history, addressed two key questions in healthcare financing: how much more medical care will people use if it is provided free of charge and what are the consequences for their health. The HIE project was started in 1971; the study's conclusions encouraged the restructuring of private insurance and helped increase the stature of managed care.)

To reduce costs of chronic disease, it is crucial that patients, like Mr. deBronkart, are hardwired into the system, Mr. Fox says.

"A patient who can contribute clinically significant data to his or her

healthcare team will be able to differentiate meaningful information, which will inspire patients to take more responsibility for their own healthcare," he says.

One of the on-ramps to the healthcare information highway is electronic medical records. As people become more comfortable interacting with health records online and databases becomes larger, patients' integration with the system will increase, Mr. Fox says.

"E-patient involvement will have a ripple effect throughout the healthcare system, which will cause a cultural change for doctors as well," he adds. "As more and more physicians engage with their patients through electronic solutions that are less expensive and more efficient, there will also be more transparency of information. And the momentum won't stop there; eventually there will be a systemwide change in the way things are done."

The evolution has already begun as more and more patients go online and use healthcare tools. The key, Mr. Fox says, is transforming this patchwork system into a well-integrated system of data that can be used to yield higher quality, lower-cost care and better program integrity.

E-PATIENTS AND CLINICAL TRIALS

The evolution of e-healthcare connections to address e-patients, however, will not solve every communication challenge.

According to Scott Connor, VP of marketing at Acurian, using e-based communications to tap e-patients for clinical trial recruitment should be used as a supplement to other more traditional marketing methods.

"E-solutions shouldn't be a stand-alone solution to fulfill a clinical trial's enrollment goals," he says.

Mr. Connor believes that e-patients are not necessarily a panacea for R&D, clinical trial recruitment, or marketing efforts.

"The ubiquity of the e-patient has created a wonderful sea of opportunity, but the waters are incredibly crowded," he says.

Extending the metaphor, Mr. Connor suggests thinking about the opportunity as a crowded fishing boat.

"When the boat is packed from stem to stern with people who have different levels of skill, it becomes harder for everyone to catch fish," he says. "It's the same with trying to reach the e-patient. Access is pretty easy and can be very cost-effective based on the channels available, but that ease of access allows anyone in who wants to reach the e-patient."

Bonnie Brescia, founding principal of BBK Worldwide, says e-patients are aware, engaged, proactive, and community-oriented.

"The clinical research enterprise can benefit by listening through social media monitoring to e-patients, adapting messages for the specif-

ic audience, and interacting with them in two-way communications usually in a moderated environment," she says. "We are working with clients to build online communities and manage e-patient relationships to support franchise-level clinical research programs, whether by therapeutic area or by compound, and exponentially increase recruitment success.

"The best way to connect with e-patients to support clinical research efforts is to see them as partners in developing cutting-edge medical treatments," Ms. Brescia continues. "While the technology for communicating has evolved — through online and social media channels — the underlying process remains the same. The first step is always to understand patients' concerns and motivations, and meet them where they are in their disease state."

For clinical research, the rub is in the far-reaching aspects of social media. Although online behavior and profiles can help target specific patients for clinical trials, the e-patient is less valuable, since it is more difficult to identify his or her geographic location, and therefore proximity to the trial.

"An e-patient's physical location is perhaps the most important piece when trying to recruit a patient for a clinical trial," Mr. Connor says. "For example, there might be an IRB-approved clinical trial offer for a highly sought Type 2 diabetic who is taking only metformin, but if the offer can't determine if the e-patient is near one of the trial sites, it's a wasted communication effort and can lead to patient dissatisfaction because the interested party can't consummate the deal."

As a result, companies often resort to the shotgun approach by blasting out messaging and hoping that through sheer numbers something sticks. While this may work for the company, it does not work for the consumer who signs up for a trial only to find out it is located too far away.

"If companies continue with this approach, e-patients will get smarter and more discerning in their consumption patterns," Mr. Connor says.

According to Ms. Brescia, online communities with opportunities for interaction can be very effective for patient recruitment, for creating physician connections, and for supporting research sites.

"For direct-to-patient use of social media, opinion spans from enthusiasm to caution," she says. "We recommend a middle ground, a place where Internet techniques are used for appropriate e-patient audiences, with a mix of other marketing tactics, and in moder-

"The basic tenents of communication become even more relevant when trying to reach e-patients."

SCOTT CONNOR
Acurian

"The use of an appropriate online communication platform can actually ensure a more effective, offline communication between patient and doctor."

DR. STANLEY WULF
InfoMedics

"Online communities can be very effective for patient recruitment, for creating physician connections, and for supporting research sites."

BONNIE BRESCIA
BBK Worldwide

> *"Communication technology tools help physicians strike a balance and provide care that is both efficient and attentive."*
>
> **JEFF KOZLOFF**
> Verilogue

> *"Pharma's ability to create online relationships is driven by a willingness to decipher genuine consumer experiences."*
>
> **JEFF GREENE**
> HealthEd

> *"Contrary to popular belief, physicians want to engage in Web-based interactions, and they believe patients can benefit from online communications."*
>
> **SUSAN DORFMAN**
> Skila

ated social media environments that allow for some interaction but also respect privacy, scientific validity, and intellectual property."

According to Stanley Wulf, M.D., VP and chief medical officer at InfoMedics, scientists and R&D efforts can benefit from e-patient participation in other ways, such as using e-based platforms for gathering and aggregating real-world treatment experiences and allowing the pharma company to connect with patients and measure their perceptions, which can drive patient acceptance and adherence.

"As the industry's pipelines continue to be squeezed, new products are increasingly combination medications or longer-acting versions of original compounds," Dr. Wulf says. "The e-communications platform can gather and measure the softer end points, such as convenience, ease of use, and satisfaction. These are the subjective end points that often show the greatest improvements with these new products, yet are not commonly covered in clinical trials."

THE PHYSICIAN SLICE OF THE E-PATIENT PIE

According to Jeff Kozloff, co-founder, president, and CEO of Verilogue, healthcare providers are increasingly turning to communications technologies to help with patient care.

"Many physicians are asking patients to e-mail information, such as current medications or results from tests administered by other practitioners, that they don't have time to provide during office visits," Mr. Kozloff says. "The advantage with e-mail is that it allows physicians to demonstrate their dedication to providing attentive care while keeping in-office visits free from inefficiencies."

Naomi Grobstein, M.D., a family practitioner at the Family Health Center of Montclair in New Jersey, has been communicating with patients by e-mail for about four years, and she says it helps her provide better and more accurate care to her patients.

"E-mail allows us to take good care of our patients, even if it creates a little extra work for us; it's good for patients and good for the practice," Dr. Grobstein says.

Dr. Grobstein is part of a five-physician practice that has more than 5,000 patients signed up to use the office's secure online healthcare communication solution.

"Physician-patient communications are improved, and everything is documented," she says. "If I need to send a patient his or her lab work, I go clickety-clack and it's done; furthermore, I can see if a patient has opened the e-mail. Usually patients can't believe how great the system works; if a patient is resistant to the technology, we recommend that they just use the phone."

Dr. Grobstein says she finds e-mail communication particularly helpful when she needs more time to determine how to treat patients. She can send them home with instructions to e-mail her if something changes with their condition, and she can — and does — respond to e-mail (not phone calls) during non-office hours. She can easily order an X-ray or a follow-up prescription if the patient needs that type of care.

While the office has listed a couple of healthcare Web sites on its home page, Dr. Grobstein does not usually send patients to the Web for information.

"More often than not, they have already been to the Web," she says. "Patients come to me with questions about information they have already gleaned from the Web, and too often come in with the wrong information."

To keep the local community informed about health- and treatment-related topics, physicians are also increasingly developing their own Web sites and online patient registration tools, Mr. Kozloff says.

"The advantage is that physicians are able to post relevant content that's accessible from local patient communities, as well as proactively communicate with specific patient groups via e-mail," he says. "A case in point would be notifying patients by e-mail that the practice has flu shots or recommending a pollen count Web site to a patient with allergic rhinitis."

In addition to broad-based technology applications, digital technology can be used at a granular patient level, for example in the exam room.

"Physicians can now access the critical

Making a Case for E-Patient Interactions

information they need to stay current at the point of care," says Deborah Schnell, president of sales and strategic planning at Healthy Advice Networks. "Streaming late-breaking medical news and updated medical journal information in real time into the back office enables the physician and office staff to stay current. In addition, digital technology delivers information customizable down to the office level that physicians can use immediately in their practice of medicine, such as drug coverage by local healthcare plans, opt-in rebate programs, and localized flu or pollen information.

"Communicating with physicians has always been critical for pharmaceutical manufacturers," Ms. Schnell adds. "However, diminished access has presented an unwelcome challenge in reaching them. Today, digital technology offers new opportunities to deliver the relevant, timely, and valuable information physicians need."

Such uses of appropriate online communications platforms can actually ensure a more effective offline communication between the patient and doctor, Dr. Wulf says.

In fact, in response to rising patient consumerism, there is a growing array of online support sites, information, and tools available to the e-patient. However, he says, these online resources can have the potential to further drive the disconnect between patient and doctor and may lead to even more confusion, noncompliance, and potentially a poor health outcome, especially if the data are not credible.

But there are platforms that can actually help the patient by assessing their individual needs, providing tailored education about their condition, detailing the specific treatment that has been prescribed, and then closing the loop with the prescribing physician so that he or she is well-informed about the patient's treatment response, condition understanding, and individual progress.

"This online platform results in engaged patients, informed physicians, and better treatment outcomes," Dr. Wulf says.

Susan Dorfman, global VP, marketing, product strategy, and alliances, at Skila, who is also a doctoral candidate at the University of Phoenix, recently completed her research that identified the ramifications of Web-based health assessment tools on consumer behaviors and health outcomes.

As part of her study, she interviewed a panel of 26 physicians, who acknowledged that while access to inaccurate health information was a key issue and concern for safe and effective care, they were not able to agree that the Internet represented a disorganized repository of informa-

The Pew Internet & American Life Project reports in its June 2009 study, The Social Life Of Health Information, that about 20% of e-patients visit social-networking sites to discuss their health with medical experts and other patients. In other words, patients who are using social media tools to connect with friends and family are also using the medium to connect with health professionals. Another way patients are using online technology to improve their health is by posting their medical data on sites such as Google Health or Patients Like Me to organize and collect their health information and share securely with family members, physicians, or caregivers. But for patients to get the most out of their healthcare, all stakeholders must be fully engaged, and when this happens, a new healthcare model will emerge.

The evolution has already begun as more and more patients go online and use healthcare tools. Bill Fox, executive director of The National Center For Patient Interactive Research, says the key is to transform this patchwork system into a well-integrated data system that can be used to yield higher quality, lower cost care, and better program integrity.

There are a multitude of benefits that can be gleaned from new insights gathered through the collection of aggregate real-world patient feedback.

For example, Stanley Wulf, M.D., VP and chief medical officer at InfoMedics, says brand teams can learn about the patients' experience with treatments while supporting the educational needs of physicians and potentially enabling more confident prescribing decisions.

As pharma has less and less ability to interact with patients and doctors directly, this information is going to become more important.

"This evolution should have an impact on pharma marketing, because the more that is known about what consumers think about products, the better," Mr. Fox adds. "A system that allows patients to report their experiences on a grander scale will provide pharma companies with more transparency once the prescription drug passes through the doctor's office to the patient."

Today, with marketing intelligence and advances in technology, the pharma industry can connect with patients and have interactive and personalized communications that truly help the individual patient, which in turn helps the prescribing physician and the pharma marketer, Dr. Wulf says.

"Although pharma companies are late to recognize the need to engage directly with patients, they can now provide meaningful ways to support the patient and inform the physician via online patient-physician communication platforms," he says.

Healthcare consumers want to have a dialogue with pharma companies, and they look to the Web as the natural venue, says Jeff Greene, director of strategic services, social media, HealthEd Group.

"But if consumers feel the communication is solely promotional and against the candid nature of the medium they will not connect," he adds.

According to Mr. Greene, e-patient communications bring value to the patient through the chance to have a straightforward, factual dialogue with manufacturers and an opportunity to go beyond the clinical and gain access to reimbursement assistance, prescription savings, ongoing treatment education, and support, as well as customer service.

He says companies are still trying to figure out what e-patient communications can bring to the table for them, but total abstinence from communication will limit opportunities to understand consumer needs.

"The FDA may release guidelines this year that will thaw some of the fear exhibited by manufacturers considering digital consumer promotion," he says. "I'm told that a few companies will not even read blogs or use Facebook — they don't want their employees to accidentally see an adverse event. But this leaves their hands tied from learning more about the patients who use their products, and that's a key strategic consideration."

There is much e-patient wisdom that can be gleaned from the Web, which will one day help contribute to the creation of better medications and more targeted therapies, he says.

"Today, we're just scratching the surface," he says. "I'm pretty confident that e-patient communications are going to move beyond the banner ad and the brand.com."
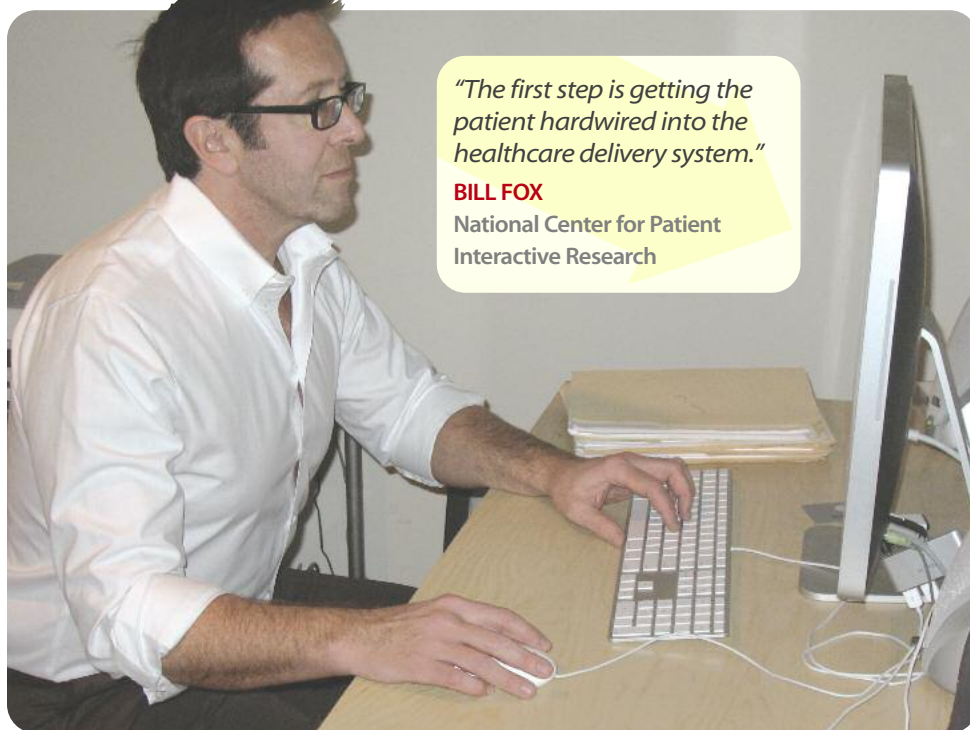
"The first step is getting the patient hardwired into the healthcare delivery system."
BILL FOX
National Center for Patient Interactive Research
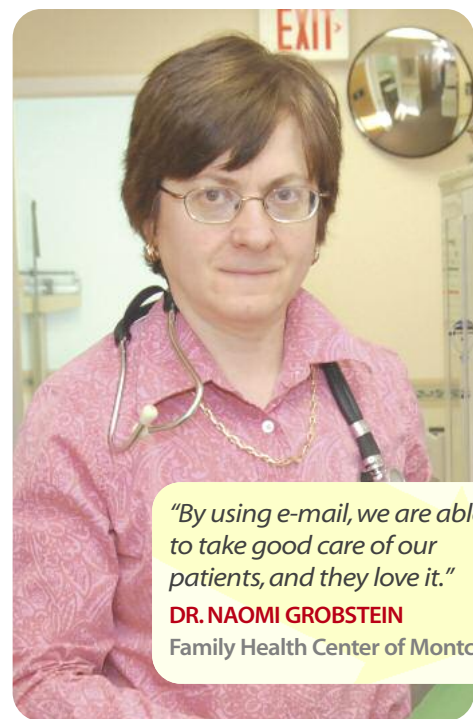
"By using e-mail, we are able to take good care of our patients, and they love it."
DR. NAOMI GROBSTEIN
Family Health Center of Montclair

"Just as pharma companies would not consider ignoring physicians online, they can no longer ignore online patient communities."
KEVIN KRUSE
Kru Research

tion and that the majority of such information was false or misleading.

Ms. Dorfman says one of the common misperceptions around online information is that it negatively impacts the patient/physician relationship. However, panelists in her study agreed that informed consumers make more powerful partners for their physicians to collaborate with.

While a Pew report states that just 3% of e-patients say they or someone they know has been harmed by following medical advice or health information found on the Internet, a finding that has remained stable since 2006, Ms. Dorfman's study suggests there are health risks for consumers who use the Internet to access health information. For example, patients could stop taking necessary medications, delay access to physician care, or increase the risk of inappropriate medication taking without the physician's knowledge. In addition to impacting consumer health outcomes, such risks could also impact the total cost of care.

As such, Ms. Dorfman's study concluded that physicians want to engage in Web-based interactions with patients to support better and safer healthcare, and they report that patients can benefit from these interactions. Learning how to manage the information and the communication will be a challenge for everyone, however.

Mr. deBronkart, aka "e-Patient Dave" agrees, adding that pharma companies need to get in the game.

"Patients have access to information about drugs and drug companies that was not avail-

able in the past, and the industry needs to be proactive to face the enormous reputation challenges this access presents," he says. "The fastest path to overcoming this hurdle is for pharma companies to engage authentically with e-patients by contributing real value, being real, and being known for being real."

A PLACE AT THE E-PATIENT TABLE

Social media will become an even louder drumbeat in the pharma industry in 2010, says Jeff Greene, director of strategic services, social media, at HealthEd Group.

"The conversations happening in the pharma industry are the same discussions that the automakers and consumer goods companies were having three and four years ago; those industries began solving the challenge by redefining their expectations," he says. "For example, a Facebook page or YouTube video isn't like a DTC ad that's going to deliver 20 million guaranteed impressions. But if these start a relationship with 5,000 healthcare consumers who are considering a product, those voices might be even more valuable and worth amplifying."

This was precisely the argument Tricia Geoghegan, communications lead, neurology and ADHD, at McNeil Pediatrics, made to stakeholders within her group to earn their buy-in for the company's first unbranded Facebook group page for caregivers affected by attention deficit hyperactivity disorder.

"My job was to go to the brand team, regulatory, and legal folks and demonstrate the need/benefit analysis of starting this Facebook page for moms with children who have ADHD," she says. "I had to find people within the company who understood that the social media math added up on a creative and strategic level, and most importantly, on a service-

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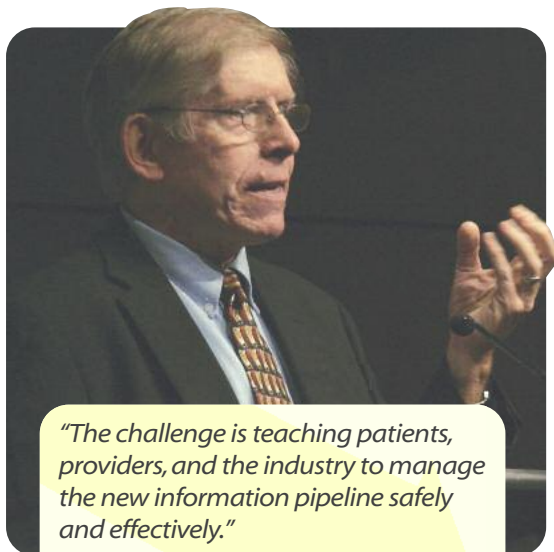
"The challenge is teaching patients, providers, and the industry to manage the new information pipeline safely and effectively."

DAVE DEBRONKART
Cancer survivor and Society for Participatory Medicine

need level. If we did this the right way, we could make it work and make it meaningful."

The McNeil Pediatrics' launch of ADHD Moms in mid-2008 was one of the first online resources created for ADHD caregivers in the social media landscape.

"At first the community had no comment functionality, thus we were not truly 2.0 at that time," Ms. Geoghegan says. "To stay in accordance with our compliance guidelines, we could not launch it with real-time interactivity, so we got permission from Facebook to turn the comments segment off."

At the time of launch, a few folks were critical of the lack of real-time interactivity. Within a few months however the page was able to allow pre-moderated comments in compliance with J&J Social Media Guidelines, following Ms. Geoghegan's work with internal partners in IT, legal, regulatory, and healthcare compliance. Together, this team developed an Application Programming Interface (API) and review process for compliant pre-moderation. In October 2008, the API was added to ADHD Moms, allowing pre-moderated comments by users to be posted, per the posting and privacy policies.

By 2009, when ADHD Allies was being launched, the landscape had changed dramatically. The challenges of launching this page were quite different, Ms. Geoghegan says.

"The story of this page is really the story of the shift in users of Facebook in 2009," she says.

Facebook was hitting its stride, moving toward 200 million users at the same time she was launching ADHD Allies.

The ADHD Allies page, aimed at providing information and insights to adults, was launched in April 2009. While ADHD Moms

had exceeded expectations in 2008 with an initial milestone of 8,000 fans, the number of visitors who signed up for the second page created for ADHD adults blew McNeil away.

"At the end of 18 months of the ADHD Moms site going live, we had 12,000 fans," Ms. Geoghegan says. "In just eight months, we had 13,000 fans on the ADHD Allies site."

Despite the success of this initiative, Ms. Geoghegan does not encourage everyone to jump on the Facebook bandwagon.

"Companies need to understand that a direct line cannot be drawn from an unbranded Facebook page to sales; that is not the reason to be in this space," she says. "The most common misconception is that the effort is about meeting

brand goals and objectives. It's not; it's about using social media to build a community."

McNeil's market research found that mothers of children with ADHD needed a place to communicate with other moms in similar situations.

"We wanted to provide an ADHD resource where we knew our consumers were going; we also wanted to reinforce our company's leadership and commitment to treating ADHD," Ms. Geoghegan says. ✦

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

Experts on this topic

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knowledge about patients to unlock the fullest potential of healthcare, turning education into performance. For more information, visit healthed.com.

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KEVIN KRUSE. Founder and President, Kru Research, a global think tank that teaches life-science marketers how to use social and e-media to connect with empowered, digital patients. For more information, visit kruresearch.com, or e-mail info@KruResearch.com.

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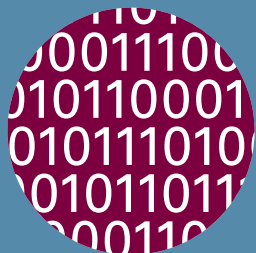## Summit for Clinical Ops Executives

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E-Patient CONNECTIONS

BY ROBIN ROBINSON

Countering the challenges of
E-PATIENT INTERACTIONS

Pharma companies are especially challenged to relate to healthcare consumers from their perspective, says Jeff Greene, director of strategic services, social media, HealthEd.

"It is important to keep in mind that a patient may actively seek information when presented with a health problem, concern, or diagnosis," Mr. Greene says. "He or she may be preparing for discussions with doctors and confirming or expanding on information imparted during the healthcare practitioner visit. It is important for companies to keep in mind that a diagnosis can be a highly emotional event that compromises patient comprehension.

"We see this reaction constantly in our research and interviews," Mr. Greene adds.

Therefore, brand communications may comprise only a small part of the patient's needs and expectations at this stage in the journey.

"A pharmaceutical company's ability to create online relationships with patients needs to be driven by its willingness to decipher genuine consumer experience," Mr. Greene says.

One best practice is to examine a given disease category as a whole and then identify common pathways traveled across the Web on a granular level.

"By mapping the stages along a patient's journey in detail, we're finding insights that are helping unlock opportunities for brands and consumers," Mr. Greene says.

With a deep knowledge of the patient, insights into the different factors patients are weighing as they determine the best treatment and identifying which behavioral models to apply, it is easier to align e-patient strategies with brand objectives.

For example, in one disease category in which products often lose efficacy, Mr. Greene found patients were stuck in the consideration stage indefinitely, always keeping their eyes open for a better product.

"These patients request information from brands they don't currently use, expecting that they might down the road," he says. "Acquisition-minded brands in this category can unlock the power in their eRM programs by increasing e-mail content for patients stalled in the consideration stage."

Pharmaceutical companies should not teeter on the sidelines of engagement, says Kevin Kruse, founder and president of Kru Research.

"There are more than 500 examples of healthcare organizations and pharma companies using social media to connect with patients, and there has not been one FDA letter so far connected to these activities," Mr. Kruse says. "The e-patient wave is not a fad; it's real, and now is the time to figure out how to engage meaningfully with these e-patients." ◆

"The industry is still trying to figure out what e-patient communications can bring to the table."

JEFF GREENE
HealthEd

"There are more than 500 examples of healthcare organizations that are using social media to connect with patients and not one FDA letter so far."

KEVIN KRUSE
Kru Research

Top 20 Health Information Web Sites

1. WebMD.com
2. NIH.gov
3. MedicineNet.com
4. MayoClinic.com
5. Yahoo! Health
6. RightHealth.com
7. Drugs.com
8. RxList.com
9. RealAge.com
10. MedHelp.org
11. Healthline.com
12. EverydayHealth.com
13. Wrongdiagnosis.com
14. Healthgrades.com
15. Wellsphere.com
16. FamilyDoctor.org
17. QualityHealth.com
18. HealthCentral.com
19. Prevention.com
20. Health.com

Source: eBizMBA. For more information, visit ebizmba.com.

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Social Media at Work

COMMUNITIES CREATED BY PHARMACEUTICAL OR HEALTHCARE COMPANIES FOR BRANDS OR CORPORATE EFFORTS.

- **23andMe** — a unique mix of social networking and community platform that provides information on genetics testing service and information and tools to understand your DNA.
  www.23andme.com

- **Accu-Chek Diabetes Link** — a Web site dedicated to helping people with diabetes gather information, learn important facts, and enjoy healthy lifestyles. Sponsored by Roche.
  www.accu-chekdiabeteslink.ca

- **Alli Circles** — a support community for Alli, a weight loss product from GSK. Sponsored by GlaxoSmithKline.
  www.myalli.com

- **Betaplus** — a support community/program for Bayer's Betaseron featuring a peer-mentor program. Sponsored by Bayer Health-Care.
  www.betaseron.com/patients/betaplus/index.jsp

- **C2C: Connect to Conquer Epilepsy** — a sub-site of epilepsyempowerment.com that allows users to share stories one on one after trading e-mail info. Sponsored by Valeant Pharmaceuticals North America.
  www.epilepsyempowerment.com/myLifeWith Epilepsy/connectToConquerEpilepsy.jsf

- **Celebration Chain** — a story site for the breast cancer treatment Arimidex that offers support and patient stories. Sponsored by AstraZeneca.
  www.arimidex.com/celebration/index.aspx

- **CFvoice** — an online community for people of all ages living with cystic fibrosis. Sponsored by Novartis.
  www.cfvoice.com/index.jsp

- **Children with Diabetes** — a Web site dedicated to promoting the care and treatment of diabetes, especially in children; to increase awareness of the need for unrestricted diabetes care for children at school and daycare; to support families living with diabetes; and to promote understanding of research into a cure. Published by Children With Diabetes Inc.
  www.childrenwithdiabetes.com/

- **CML Earth** — a global, interactive social network dedicated to connecting the CML community. Sponsored by Novartis.
  www.cmlearth.com/index.jsp

- **Crohn's and Me** — an unbranded site supporting the yet-to-be-launched Crohn's disease treatment Cimzia that provides overall disease information and features and an active community. Sponsored by UCB Inc.
  www.crohnsandme.com

- **DepNet** — an online community dedicated to people affected by depression and related diseases. Sponsored by Lundbeck.
  www.depnet.com.au

- **Diabetes Handprint** — a community program that encourages people to share a message (as a handprint) about their diabetes with others. Sponsored by LifeScan Inc.
  www.diabeteshandprint.com

- **Epilepsy Advocate** — a community of people and their families living with all types of epilepsy. Sponsored by UCB Inc.
  www.epilepsyadvocate.com

- **GIST Earth** — a global, interactive social network dedicated to connecting the GIST community from around the world. Sponsored by Novartis Oncology.
  www.gistearth.com

- **Hearing Journey** — a sponsored community Web site by a hearing implant company. Sponsored by Advanced Bionics.
  www.hearingjourney.com/index.cfm?langid=1

- **HER Story Community** — an online source that allows women to share their story about breast cancer and treatment with Herceptin. Sponsored by Genentech.
  www.herceptin.com/community

- **Heroes of Hope** — a program that recognizes and salutes individuals with cystic fibrosis who are stars in their own right striving to live full and productive lives, and for being role models of hope to others, while continuing to manage their healthcare needs. Sponsored by Genentech.
  www.heroesofhope.com/heroesofhope/?hl=en &client=firefoxa&channel=s&rls=org.mozilla%3 AenUS%3Aofficial&q=Heroes+of+Hope&aq= f&oq=&aqi=g4

- **How I Fight MS** — a community site featuring individual stories from MS patients, including blogs. Sponsored by EMD Serono.
  www.howifightms.com

- **I Walk Because** — a Web site that allows people to share the power of the Walk MS experience with others. Sponsored by Acorda Therapeutics Inc.
  www.iwalkbecause.org

- **iHateNeedles.co.uk** — a consumer Web site featuring Emla cream, a local anesthetic that numbs the skin. Sponsored by Emla cream.
  www.ihateneedles.co.uk

- **Living with Hemophilia** — a Web site developed to share some practical tools to help patients manage life in today's busy world. Sponsored by Bayer HealthCare Pharmaceuticals Inc.
  www.livingwithhemophilia.com

- **MS-Gateway** — an online community that puts people in touch with others living with MS. Sponsored by Bayer HealthCare Pharmaceuticals Inc.
  www.ms-gateway.com/scripts/

- **MSWatch** — a Canadian multiple sclerosis community. Sponsored by Teva Neuroscience.
  www.mswatch.ca

- **myMSmyWAY** — a resource dedicated to connecting people with multiple sclerosis to accessible technologies that can help them live their lives better. Sponsored by Bayer HealthCare Pharmaceuticals Inc.
  www.mymsmyway.com

- **PKU.com** — a support community for patients with PKU. Sponsored by BioMarin Pharmaceutical Inc.
  www.pku.com

- **Voices of Diabetes** — a Web site that allows diabetics to share their stories and comment on others. Sponsored by Novo Nordisk.
  www.changingdiabetes-us.com/voices

- **Walking Spree** — a Web site focused on delivering best-of-breed online wellness programs by incorporating online pedometer-based programs, online social networking programs, and online weight-loss programs.
  www.walkingspree.com

Source: Pharma Social Media Wiki. For more information, visit doseofdigital.com/healthcare-pharma-social-media-wiki/