

AFTER THEY

walk out the door

Pharmaceutical companies recognize that direct-to-consumer campaigns have to address compliance with treatment regimens if they are to hold on to patients after they leave the doctor's office.

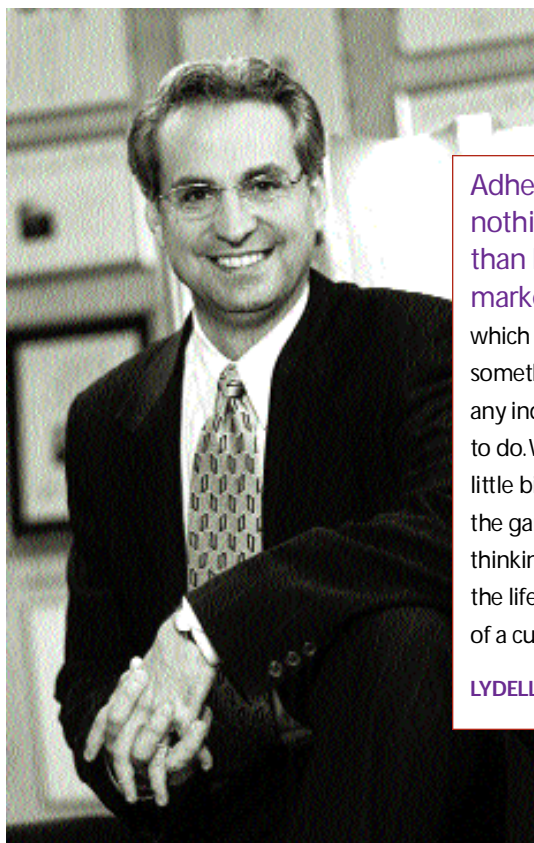
The messages in direct-to-consumer advertising are shifting. While still focused primarily on raising awareness and getting consumers to switch brands, DTC ads are beginning to remind patients about the importance of taking medications as their doctors have prescribed.

Advertising that addresses patient compliance — how well patients follow doctors' orders — and persistence — how long a patient remains on prescription therapy — can go a long way toward improving patient health, as well as increasing pharma sales.

Poor compliance can lead to the perception of poor efficacy and premature discontinuation, which often leads to the use of more expensive and/or more invasive therapies. Current estimates indicate that about half of all prescribed drugs aren't being taken correctly and this is leading to unnecessary medical complications.

The cost of noncompliance is \$210 billion a year in lost productivity and increased





Adherence is nothing more than loyalty marketing,

which is something that any industry has to do. We are a little bit behind the game in thinking about the lifetime value of a customer.

LYDELL CAPRITTA

healthcare costs. More than 200,000 people die annually from effects of noncompliance.

Existing DTC advertising is designed for a specific reason, to create awareness and encourage patients to talk to their doctors about a particular treatment. These advertisements may act as reminders, but whether they have a substantial enough message to convince patients to be compliant is open to debate.

"We need to create advertising and relationship marketing that will give patients a reason to continue taking their medication and that will give them a better understanding of why they are not compliant and then address those issues through advertising and relationship marketing," says Jenny Hobbs, senior consumer promotions manager of oncology products at AstraZeneca.

Although compliance has always been top

of mind for manufacturers, experts believe that there is a rejuvenated focus on this area.

"The focus in the past has been more on new prescriptions and the hope was that patients would stay compliant because it is the right thing to do," says Lydell Capritta, executive VP of direct marketing at Gerbig, Snell/Weisheimer. "We didn't put enough energy behind adherence programs, especially for drugs that are for chronic diseases, such as asthma, allergies, or high cholesterol."

"Too much money is being spent to attract customers to only watch them go out the back door," says Stuart Klein, president of The Quantum Group. "The industry needs to find a way to use DTC to

enhance compliance."

The industry is aware that the problem of noncompliance is analogous to a leaky bucket, says Edward Rhoads, senior VP of marketing and new business at Catalina Health Resource.

"We are pouring in patients at the top and acquiring new users, but the average new patient is not retained for more than a few prescriptions," he says. "For a typical chronic-use medication, 40% to 60% of new patients don't return for their first refill. Switching to another drug typically accounts for less than 5% of this drop. Many patients simply choose to quit after their initial trial with the product. The challenge to the industry is to sell patients on why they should stay on therapy. We sell to doctors, we sell to managed care, now we need to sell to patients. Most people know little or nothing about their disease or the product when they fill that first script. Patient education — how the drug works, evidence of effectiveness, what to expect, and long-term benefits — goes a long way in converting trial to loyal use. Mass media can't accomplish this. There needs to be targeted access."

## Part of the Mix

In February 2002, Catalina conducted a survey of professionals at pharmaceutical companies and advertising agencies. The survey found that respondents allocated about 21% of their 2001 DTC budgets to persistency and retention efforts, compared with 35% on efforts focused on new patient acquisitions and 23% on efforts dedicated to brand switching.

Those surveyed said in 2002 they expected to

allocate 35% of their DTC budgets to persistency and retention, compared with 44% to new patient acquisition and 33% to brand switching. When asked what DTC objective they would most like to achieve both new patient acquisition and persistency and retention were ranked the highest at 31%. (For more information, see box on page 35.)

Experts believe the industry's renewed attention to compliance and persistence is related to shortfalls in pipelines, prescription to over-the-counter switches, and increased competition among like products.

"Pharmaceutical companies are beginning to understand that compliance marketing has to be a necessary part of their marketing mix, especially in light of increased competition," Ms. Hobbs says. "As more pharmaceutical companies develop 'me too' products patients are going to have more options. Pharma companies have to not only get that initial prescription, but try to keep patients from switching to another product."

The basis for compliance advertising is

to address a specific issue about the product, side effects, or how to take the medication. Therefore, all forms of compliance advertising are going to include some form of education.

JENNY HOBBS



Charles DeMarco, senior VP, creative director, copy, at Integrated Communications agrees that compliance and persistency messages are increasingly necessary for pharmaceutical companies to communicate because of fewer breakthrough drugs and other market forces.

Glen E. Griffiths, executive VP at Nelson Communications, says DTC geared toward patient acquisition and DTC geared toward compliance don't have to be mutually exclusive.

"Patient acquisition is a part of the behavior continuum that eventually leads to retention," he says. "How and where the two blend together will be different for every disease and every drug. It is a matter of getting the right message to the right person at the right time."

Compliance advertising is not the next wave, but it will be a growing subset of DTC advertising for ethical pharmaceuticals.

JOSEPH POGGI



## DTC and CRM: Working together to improve compliance

**NONCOMPLIANCE IS A PROBLEM THAT HAS BEDEVILED THE PHARMACEUTICAL INDUSTRY FOR YEARS. AS MANY AS HALF OF PATIENTS WHO ARE PRESCRIBED A DRUG FAIL TO FILL THE FIRST PRESCRIPTION, AND THE NUMBERS ONLY GET WORSE. ONE WAY TO IMPROVE THESE NUMBERS IS TO EVALUATE THE ROLE DIRECT-TO-CONSUMER COMMUNICATIONS CAN PLAY IN COMPLIANCE AND PERSISTENCY.**

"First, though, a more fundamental question: What do we mean by DTC?" asks Nancy Barlow, president of The Xchange Group, a CommonHealth agency. "Are we defining DTC narrowly to mean mass TV and print or broadly to include CRM in its consumer mode?"

According to Ms. Barlow, DTC should be looked at holistically — as the full range of strategies and tactics that can be brought to bear to influence consumer behavior, including CRM.

"Even the most promising drug won't deliver on its promise if consumers don't know how to take it; don't know why they should take it; don't understand they must continue to take it, in the case of chronic disease; are in denial about their need to take it; and don't fully understand the consequences of failing to take it as directed," she says.

In fact, it's asking a lot of any single discipline or channel to address issues as different and complex as the people involved. But it's particularly tough when that discipline is limited to 60- or 30-second TV spots, fair-balance statements included, or to the similarly limited real estate of the average print campaign.

"That's not to say that DTC, in its popular sense, can't have a positive impact on adherence," Ms. Barlow says. "With its reach and frequency, DTC broadcast, and print advertising can remind consumers to take their medications and positively reinforce

desired behaviors in those who are already adherent. And, of course, such communications rank second to none in creating disease-state and treatment awareness, as well as in supplying the initial spur to 'talk to your doctor to find out if [fill in the blank] is right for you.'"

The problem: as a single-message mass vehicle, traditional DTC can't fully address the numerous, highly personal factors that lie behind nonadherence. These factors — in an increasingly depersonalized healthcare environment — contribute to suboptimal outcomes at the individual and public-health levels and lost revenue and opportunities for the industry as a whole.

"This brings us to CRM," she says. "As a discipline, CRM works hand-in-glove with DTC, providing the pull-in marketing communications to DTC's push; the why of a particular brand to DTC's what; and, especially, the how with regard to achieving that brand's promise."

According to Ms. Barlow, by virtue of its targeted, channel-neutral, and dialogue-based nature, CRM brings to the problem of nonadherence the following unique solutions:

- **ATTENTION THAT'S ONE-ON-ONE.** As its name suggests, customer-relationship marketing is all about the customer: whoever she is; wherever she is; whatever channel she favors. CRM, at its best, "repersonalizes" the healthcare experience by identifying the individual drivers of and barriers to success with a given therapy. It's even CRM's business to know whether the customer prefers e-mail to the traditional kind, and chapter and verse or just the headlines on



Nancy Barlow

**Relevance through mass customization is CRM's stock in trade.** The more a CRM program is customized to a patient's adherence needs, lifestyle, or therapeutic situation, the more successful it's going to be.

her particular condition. This is intelligence that can mean the difference between months and years on a particular therapy.

- **COMMITMENT VERSUS THE PROVERBIAL ONE-NIGHT STAND.** Dating metaphors abound in CRM, and no wonder. CRM is the only marketing discipline that addresses the various stages in the consumer's relationship with a brand, from initial attraction through commitment. It offers tools, tips, and incentives that evolve over time as the user passes through the acquisition, retention, and loyalty phases of a full CRM program. Want customers to stick with your brand for the long haul? Try sticking with your customers.

- **EXPECTATIONS MANAGEMENT.** Most of us can live with anything if we know that any unpleasantness will be time-limited and we fully understand the trade-offs. And while fair-balance statements do a very nice job of telling would-be users absolutely everything that might befall them, such statements are blunt instruments at best. CRM allows companies to put risk and life-of-therapy information in context and to outline why consumers may want to endure any discomforts of taking a drug.

- **CRITICAL TIMING.** A well-executed CRM pro-



## What is the objective pharmaceutical manufacturers and advertising agencies would like to accomplish most?

New Patient Acquisition	31%
Persistency/Retention	31%
Switch	27%
Disease Awareness	7%
Concomitant	4%

Source: Catalina Health Resource, St. Louis, DTC Advertising & Point-of-Care Executions. For more information, visit [catalinahealthresource.com](http://catalinahealthresource.com).

gram targets the points at which users are most likely to fall off the therapeutic wagon. These points vary by disease state, therapeutic category and class, and can be positive (“I’m doing so well I think I’ll stop my medication”) as well as negative (“My medication is making me nauseous”). By providing an ongoing dialogue with users, recognition for milestones achieved and incentives to stick with the program, CRM takes aim at one of the key challenges of our industry: the six-month average “lifetime” value of healthcare consumers today.

- **SEGMENTATION, CUSTOMIZATION, AND ASSESSMENT.** Is the consumer newly diagnosed or a therapeutic old hand, an optimist or a fatalist, comorbid or not? CRM uses ever more finely parsed segmentation data to speak in the language most relevant to consumers at the times they’re most receptive. What’s more, because CRM campaigns are cost-efficient, modular by nature, and above all trackable, marketers can gauge the effectiveness of individual components and retool or jettison as needed.

- **ROI: THE BIG KAHUNA.** It costs up to six times as much to obtain new customers as to keep customers. That’s because establishing brand equity is more costly by far than working to preserve it. All the more reason for the industry to make CRM an integral part of any direct-to-consumer effort.

“Adherence as a problem isn’t going away soon; that much we know for sure,” Ms. Barlow says. “Indeed, a certain percentage of patients will never be adherent regardless of which ‘fix’ we apply. That’s hardly a prescription for inaction, though. We owe it to ourselves and the users of our brands to employ all the tools at our disposal, to include CRM in the DTC mix to connect as meaningfully as possible with consumers.”

## How Helpful are DTC Ads?

HOW HELPFUL HAS ADVERTISING FOR PRESCRIPTION MEDICATION BEEN IN:

	Sufferers	Caregivers
Informing about available treatments	44%	53%
Side effects and risks of medication	40%	51%
New information about treating condition	43%	50%
Reminder to refill prescriptions	23%	27%
Reminder to take medication	21%	27%

Note: Respondents were patients and caregivers who have seen DTC ads.

Source: Parade Magazine, New York, 2003 Parade Healthcare Study: Compliance, Caregivers, and The Consumer — New Perspectives on Health Management, as presented at the FDA/DDMAC Public Hearing September 22-23, 2003. For more information, visit [parade.com](http://parade.com).

## Patient Initiative over the Course of Therapy

% OF PATIENTS ON THERAPY AFTER SIX MONTHS

	Doctor choice (no request)	Patient request (no ad)	Patient request (with ad)
Allergy	21%	34% <sup>a</sup>	44% <sup>a, b</sup>
Arthritis	32%	43% <sup>a</sup>	56% <sup>a, b</sup>
High Cholesterol	62%	71% <sup>a</sup>	72% <sup>a</sup>
Depression	43%	50% <sup>a</sup>	59% <sup>a, b</sup>
Diabetes	68%	72% <sup>a</sup>	75% <sup>a</sup>

Significance Testing

a = Significant effect vs. “Doctor Chose” @ 95% level

b = Significant effect vs. “Asked Without Prompting by Ad” @ 95% level

Source: Impact of DTC Advertising Relative to Patient Compliance. Prepared by Pfizer Inc., New York, in partnership with RxRemedy Inc., June 2001. For more information, visit [pfizer.com](http://pfizer.com).

It’s easier said than done, but more complex challenges have been met in the past.”

Steve Kilponen, VP, account group supervisor, consumer, at Pace Inc., says the pharmaceutical industry is beginning to follow the path of leading consumer goods marketers.

“Many pharma companies are embracing what consumer and OTC marketers have known for decades — consumer-focused advertising plays a big role in establishing brand loyalty, and in the case of pharmaceuticals, influencing patient behavior regarding treatment,” he says.

Mr. Kilponen’s assertion that consumer-focused advertising can impact patient behavior regarding treatment is backed by research conducted by RxRemedy and Pfizer. The study, Impact of DTC Advertising Relative to Patient Compliance, has found that consumers who are prompted by advertising to be more involved in their healthcare are significantly more likely to remain persistent with their therapy than less-involved consumers. (For more information, see box on this page.)

“DTC advertising has been shown to have

an impact on the likelihood that patients will take their medicine and refill their prescriptions as directed by their doctor," says Dorothy Wetzel, VP of the consumer-marketing group at Pfizer US Pharmaceuticals. "Prescription drug ads help people become more engaged in their healthcare, which in turn helps patients who suffer from chronic conditions to become more compliant with their drug regimen."

"Improving compliance and persistence is not going to replace new patient acquisition as the primary objective of DTC advertising," Mr. Rhoads says. "But marketers are increasingly pursuing this objective, and they are shifting the DTC mix accordingly. Research shows persistence and compliance will receive more funding, primarily for more targeted approaches to patient communication."

Ms. Wetzel sees differences in the communication needs geared toward patient acquisition and those to increase compliance. She believes that general DTC communication, including ads, is aimed at raising consumer awareness of medical conditions and available treatment options. To promote compliance, she says, the message must resonate with patients who already have started taking

**Advertising has to do two things:** it has to make people aware of the brand and it has to give them a reason to try a brand and to stay with it. Pharma has done a really good job on the first part, but we have not done a really good job on the second part.

**STUART KLEIN**



the medicine and needs to focus on breaking through barriers to noncompliance.

"DTC communication can increase the likelihood that patients will take their medicine and refill their prescriptions as directed by their doctors," she says. "That's why it's important to focus messages on reminding people about the medicine and also the importance of remaining with the treatment."

## DTC's Role

Steven Jagger, senior VP at MSW Research, says DTC advertising has evolved through two distinct waves. The first wave was about category recruitment, explaining to consumers that there are categories of drugs that can help alleviate certain symptoms. The next wave was brand-switching advertising, which explains the benefits of one drug over others in the category. He believes that for certain brands, DTC advertising's next role will be to focus on patient compliance.

"Compliance is the next wave, but it is not likely to be a significant goal for every brand," he says. "This will likely be a goal for certain therapeutic classes, those where patients are on a long-term regimen, such as drugs for blood pressure and high cholesterol."

Ms. Hobbs agrees compliance is part of the current pharmaceutical marketing continuum, which includes awareness, conversion, compliance, and brand loyalty, but, she notes that most advertising only focuses on introduction, awareness, and conversion.

"Through advertising we tell patients that there is a new product available, we remind them of that product name, and we offer them free trials," she says. "DTC advertising does a great job of getting that initial prescription, but if marketers want to hold on to the patients they have captured through awareness advertising, then they are going to need compliance DTC ads to give patients additional reasons to continue using those products."

Ms. Hobbs believes that compliance issues that are predominant to a specific category can be addressed in DTC advertising. But she suggests that some products may require tailored or segmented messaging.

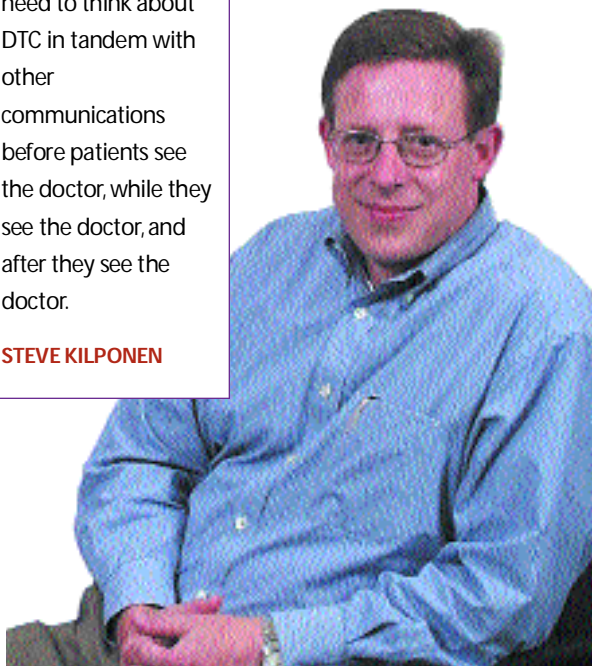
"Marketers are going to need to find out what tactics will help patients continue taking medications as directed," she says. "If research shows that patients don't understand the importance of taking the medication daily then marketers may need to create focused mailings to reinforce that message. If research shows there is a specific side effect, marketers may need to address that through a different form of advertising. All pharma companies should plan on adding some form of reminder service, either via e-mail or telephone in their future patient efforts to address compliance."

In addition to more targeted direct-to-patient communications (DTP), marketers are shifting the mix of TV spots to include more 15-second reminder ads. These show only the brand, not indication, and are thought to remind existing patients to take their medication, without explaining potential side effects.

"While the jury is still out on the effectiveness of this, the fact that marketers are increasing the use of these spots may show an increased interest in

**We need to think beyond the classical definition of DTC as just pushing patients to the doctor.** We need to think about DTC in tandem with other communications before patients see the doctor, while they see the doctor, and after they see the doctor.

**STEVE KILPONEN**



**There is certainly a lot of discussion on the need to focus on and improve compliance and adherence.** It is recognized that there is a need to move from broadcast awareness advertising to advertising that ultimately impacts compliance.

**SUE RAMSPACHER**





retaining their current patients,” Mr. Rhoads says. “There are no panaceas for this problem, but targeted patient education is a proven approach. Combining DTP education with DTC branding could be a winning combination.”

The challenge of fully shifting to compliance DTC advertising, according to Sue Ramspacher, senior VP of portfolio management at Market Measures/Cozint, is the lack of consensus on the most effective way to move forward and how to measure the success of the effort.

“I am not sure whether we are actually going to begin to see a huge number of compliance-oriented advertisements, but we already are seeing many more compliance programs as part of the marketing mix,” she says.

Mr. DeMarco says the real opportunity with

DTC advertising is to make a compliance-based connection with consumers.

“The Web has been underused by pharma companies to capitalize on this connection,” he says. “If companies can drive consumers to a Website and personalize the message, this becomes an opportunity to build a long-term relationship with consumers — something that strong brands do.”

## Not DTC’s Job

While no one disputes the importance of compliance and persistence education, not all believe that DTC advertising is the arena for this type of effort.

“Marketers can’t say everything in a 30- to

60-second television commercial,” Mr. DeMarco says. “Most of these spots are designed primarily to drive patients into physicians’ offices to ask about a particular drug. There also are unbranded spots that try to raise awareness of a disease state. But by the time the message is delivered and the required fair balance is included, there really isn’t enough time left to speak about compliance.”

Mr. Klein agrees that the limited time and space available for DTC advertising is not enough to include all the information that is required in the ad and a compliance message.

“Providing the incentive to remain on a drug in a 60-second TV spot or a one- or two page ad is a very tough issue, because the barriers to compliance are so complex,” Mr. Klein says.

## Earning Compliance Via the Internet

**PATIENT COMPLIANCE AND PERSISTENCY ARE BUILT THROUGH THE PRESENTATION AND REALIZATION OF VALUE, WHETHER IT IS PERCEIVED OR REAL. MEETING AND/OR EXCEEDING THE EXPECTATIONS OF CUSTOMERS, IN THIS CASE PATIENTS, CREATES THIS VALUE. THUS, FOR A PHARMACEUTICAL COMPANY TO EARN COMPLIANCE AND PERSISTENCE, VALUE MUST BE FIRMLY ESTABLISHED BY SETTING REALISTIC EXPECTATIONS AS FAR UPSTREAM AS THE MOMENT PATIENTS BECOME AWARE OF A BRAND. THIS IS WHERE THE INHERENT QUALITIES OF THE INTERNET CAN PLAY A MONUMENTAL ROLE IN ANY COMPLIANCE CAMPAIGN.**

The approach, however, is not to look at how a company can create Internet programs that drive compliance, but rather how a company can leverage the Internet, in concert with all of the other available consumer marketing channels, to provide a set of realistic patient expectations to earn the level of compliance it desires.

As an industry, pharmaceutical marketers and agencies have swiftly adopted a variety of Internet tactics to address this issue, including:

- **MEDICATION CHECKLISTS**
- **MEDICATION REMINDERS VIA E-MAIL, INSTANT MESSENGER, AND SIMPLE MESSAGE SERVICE TEXT MESSAGING**
- **INTERACTIVE HEALTH DIARIES AND JOURNALS**
- **INTERACTIVE EDUCATIONAL ACTIVITIES AND ANIMATIONS**

- **COMMUNITY BULLETIN BOARDS, CHAT ROOMS, AND LISTS**
- **ELECTRONIC NEWSLETTERS AND UPDATES**

These are all extremely powerful means of reinforcing compliance behavior. But while these tactics are adept at delivering compliance messages and claims, they are equally inept at establishing value, the core ingredient of earning compliance.

The key lies in developing a content resource that allows consumers to formulate realistic expectations — both positive and negative — of the impact of staying on a brand long-term. In doing so, a brand activates patients to form a value perception that is highly mutable, based on their experience with a brand in treating their condition. As a result, a brand enjoys the opportunity to exert influence over continued compliance behavior even in the face of hurdles,

such as perceived recovery, which happens frequently with patients taking statins, SSRIs, or allergy-type medications.

This type of content is called “expectation education.” For a dynamic platform to evolve expectation education, the Internet becomes the most logical home.

Using an Internet presence for expectation education reinforces the value companies have activated with tactics in all media to earn compliance. Remember, print, TV, radio, and Internet promotion are the foot soldiers of frequency, reach, and reinforcement, but content is king when it comes to value creation and compliance.

Source: Jason Epstein, senior strategist for I-SITE, a Philadelphia-based interactive design and development company that specializes in online marketing strategies for pharmaceutical, healthcare, and consumer products. For more information, visit [i-site.com](http://i-site.com).



Jason Epstein

**Print, TV, radio, and Internet promotion** are the foot soldiers of frequency, reach, and reinforcement, but content is king when it comes to value creation and compliance. Using an Internet presence reinforces the value of the other tactics.

Given the many reasons for noncompliance, some experts believe that mainstream consumer advertising can't be customized enough to impact patients.

"Direct response TV commercials can speak to a specific subset of patients, such as those with psoriasis," says Jed Beitler, chairman and CEO of Sudler & Hennessey. "But the rest of the audience tunes out unless they have a loved one or are a caregiver of someone with psoriasis."

Mr. Beitler believes that compliance education and awareness would be better dealt with through CRM efforts.

"CRM efforts are all about enhancing adherence and finding those touch points on an individual basis, not on a broad scale," he says. "DTC is broad-based, the same message to everybody. What we want to do is be able to understand the individual as well as possible and craft messages that pertain to that individual."

Ned Newland, president of Edward Newland Associates, believes that developing programs to improve patient compliance is the responsibility of pharmaceutical manufacturers as well as industry trade organizations, the government, and other parties not involved with promoting the brand.

"I would suggest that the healthcare trade organizations spend some of their dollars promoting compliance," Mr. Newland says. "For example, let's have the AMA, the nursing associations, the pharmacy retail and chain associations, and the pharmaceutical manufacturer associations act independently or as a coalition. And even the government should be involved because of Medicare and Medicaid."

Joseph Poggi, executive VP, managing, and managing director at DVC HealthCare,



DTC strategies that only focus on getting the initial prescription into the consumer's hands prevent the product from achieving its full potential.

CHARLES DEMARCO

agrees that the issue of compliance is one that could be dealt with as a group effort between the industry and related organizations.

"Ideally, the pharmaceutical companies could collectively address this issue through an industrywide DTC advertising effort that provides a valuable public service to patients, caregivers, and healthcare professionals," he says. "Another opportunity is for the industry to work in conjunction with organizations committed to best practices in health awareness and education, such as the National Association of Chain Drug Stores. This should feature the integral role that pharmacists can play as healthcare professionals who influence positive outcomes through treatment adherence."

two sources of growth for drug manufacturers these days: developing new drugs that cost several hundred million dollars each to bring to market and retaining patients, at a cost of only several dollars per patient.

"Overlooking the revenue lost to noncompliant patients will no longer be an option for drug manufacturers," he says. "When Wall Street starts pressing manufacturers about this issue, the resources will be made available to fix the problem. That time has come."

"DTC can actually boost compliance if the right type of message is put out there," Mr. Jagger says. "This turns into a win-win-win situation for pharmaceutical companies, for patients, and for the medical profession."

With compliance levels for filling an initial prescription ranging from 80% to 50% and lower for refill levels, increasing compliance by 5 or 10 points can generate significant incremental revenue, according to Mr. Kilponen. Focusing DTC advertising efforts on compliance also could go a long way to silence critics who challenge the investment in DTC.

"Even a 5% increase in refills, for example, could equate to as much as doubling the profit for a brand," Mr. Capritta says. "Getting a patient to go back and refill his or her

We are not going to see ads that are purely about compliance.

Ads that explain the benefit of taking a drug have to be part of the mix of messages.

STEVEN JAGGER



## Return on Relationship

In any discussion of DTC advertising, return on investment is a factor. As DTC has matured, the pressure to validate ROI has increased. Addressing compliance and persistence is being viewed as a way to increase DTC's ROI.

"Given shrinking pipelines and the increase in Rx-to-OTC switches, companies are looking to bolster ROI with the brands they have," Mr. DeMarco says. "Obviously the longer a person takes a drug, the better the ROI is going to be. ROI is about long-term strategies; likewise, ROR — return on relationship — is about having a patient develop a lasting relationship with the brand based on trust. This trust is built through venues more intimate than TV."

According to Mr. Griffiths, there are only

There are converging trends that speak to a likely evolution toward a DTC model that leverages appropriate "touch points" for enhancing compliance and persistence.

STEPHEN WRAY





prescription even one time might double the value of that customer to the brand. Typically 90% of a brand's profit comes from repeat business. It makes sense to focus more energy on keeping people in the franchise."

Despite these numbers, Stephen Wray, regional president, the Americas, at Health-

world Communications Group, believes it is unlikely that compliance DTC will supersede traditional demand-creation DTC.

"There are converging trends that signal a likely evolution toward a DTC model that leverages appropriate 'touch points' for enhancing compliance and persistence," he

says. "This is further supported by the status of underdiagnosis and undertreatment that exists across most chronic diseases." ♦

PharmaVoice welcomes comments about this article. E-mail us at [feedback@pharmavoices.com](mailto:feedback@pharmavoices.com).

## Experts on this topic

**NANCY BARLOW**, President, The Xchange Group, Parsippany, N.J.; The Xchange Group, a CommonHealth agency, specializes in customer-relationship marketing and in designing and implementing relationship-building initiatives for healthcare industry clients. For more information, visit [commonhealth.com](http://commonhealth.com).

**JED BEITLER**, Chairman and CEO, Sudler & Hennessey, New York; S&H, a Young & Rubicam/WPP company, is one of the largest healthcare communications companies in the world. For more information, visit [sudler.com](http://sudler.com).

**LYDELL CAPRITTA**, Executive VP, direct marketing, Gerbig, Snell/Weisheimer, Columbus, Ohio; GSW, a subsidiary of inChord Communications Inc., is a full-service marketing and advertising agency serving clients in the United States and Europe. For more information, visit [gswa.com](http://gswa.com).

**CHARLES DEMARCO**, Senior VP, creative director, copy, Integrated Communications Corp., Parsippany, N.J.; Integrated Communications is a division of Lowe Healthcare Group, a global communications network that provides direct marketing, professional and consumer advertising, digital communications, public relations, medical education, and managed-care marketing. For more information, visit [iclink.com](http://iclink.com)

**JASON EPSTEIN**, Senior strategist, I-SITE, Philadelphia; I-Site is an interactive design and development company that

specializes in online marketing strategies for pharmaceutical, healthcare, and consumer products. For more information, visit [i-site.com](http://i-site.com).

**GLEN E. GRIFFITHS**, Executive VP, Nelson Communications, New York; Nelson is a full-service marketing and communications company that is a member of the Publicis Healthcare Group. For more information, visit [nelsoncommunications.com](http://nelsoncommunications.com).

**JENNY HOBBS**, Senior consumer promotions manager, oncology products, AstraZeneca, Wilmington, Del.; AstraZeneca is an international healthcare company engaged in the research, development, manufacture, and marketing of prescription pharmaceuticals and the supply of healthcare services. For more information, visit [astrazeneca-us.com](http://astrazeneca-us.com).

**STEVEN JAGGER**, Senior VP, MSW Research, Lake Success, N.Y.; MSW Research provides decision makers with the knowledge and consumer insights to effectively drive the strategic and creative implementation of their brand's development. For more information, visit [mswresearch.com](http://mswresearch.com).

**STEVE KILPONEN**, VP, account group supervisor — consumer, Pace Inc., Parsippany, N.J.; Pace, a Lowe Healthcare Worldwide unit, is an agency of creative minds focused on healthcare advertising, promotion, and communications. For more information, visit [paceconnect.com](http://paceconnect.com).

**STUART KLEIN**, President, The Quantum Group, Parsippany, N.J.; The Quantum Group, a CommonHealth unit, is dedicated solely to marketing healthcare brands directly to the

consumer. For more information, visit [commonhealth.com](http://commonhealth.com).

**NED NEWLAND**, President and CEO, Edward Newland Associates, Shrewsbury, N.J.; Edward Newland Associates is a medical communications agency with strength primarily in the healthcare market. For more information, visit [ena-adv.com](http://ena-adv.com).

**JOSEPH POGGI**, Executive VP managing, managing director, DVC HealthCare, Morristown, N.J.; DVC HealthCare is a division of DVC Worldwide, a global marketing, communications, and digital-solutions company. For more information, visit [dvc.com](http://dvc.com).

**SUE RAMSPACHER**, Senior VP, portfolio management, Market Measures/Cozint LP, East Hanover, N.J.; Market Measures/Cozint, a NOP World Health company, provides market-research services for the pharmaceutical and biotechnology industries. For more information, visit [cozint.com](http://cozint.com).

**EDWARD RHOADS**, Senior VP, marketing and new business, Catalina Health Resource, St. Louis; Catalina Health Resource, a subsidiary of Catalina Marketing, offers products that enable pharmaceutical companies to reach desired patient populations with behavior-based communications, providing meaningful information that educates patients about their medical conditions and medications. For more information, visit [catalinahealthresource.com](http://catalinahealthresource.com).

**DOROTHY WETZEL**, VP, consumer-marketing group, Pfizer US Pharmaceuticals, New York; Pfizer discovers, develops, manufactures, and markets leading prescription medicines for humans and animals and many of the world's best-known consumer brands. For more information, visit [pfizer.com](http://pfizer.com).

**STEPHEN WRAY**, Regional president, the Americas, Healthworld Communications Group, New York; Healthworld is a global provider of strategic marketing and communications services to healthcare companies. For more information, visit [healthworld.com](http://healthworld.com).