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Why Advocacy Beats DTC

The battle for market share should be waged in doctors' offices.

There is no way to avoid it. DTC advertising is in your face, every minute, plastered onto anything that conceivably can carry a promotional message. Such DTC promotions result in excesses in spending, awareness overkill, mistargeted messages, and an overall negative image for our industry. In contrast, as a veteran pharma marketer, I have witnessed that the most direct and efficient tool for driving long-term support for brands has been, and continues to be, a well-designed, advocacy-based public education program.

Enough Already

Until recently, the ubiquitous Claritin (loratadine) campaign was the poster child for awareness overkill. You couldn't open a pharmacy bag, watch TV, or grab an airline luggage tag without seeing that brand name. For a while, it seemed that the company's marketing plan demanded that a dozen new brandable vehicles be added to the promotion mix each year.

The latest sensory offensive is the pride and joy of the three "male function" promoters slugging it out in spending matches. We already had plenty of over-the-top and "more than you ever want to hear" ad messages for Viagra (sildenafil) when it was alone in the marketplace. Now the drug's two new com-

petitors each feel compelled to match that high spending to get their messages heard above Viagra's noise. The result is that consumers are force-fed "erection wars" messages at three times what was already an excessive level. What's more, the offensiveness of these ad messages to families with children adds plenty to the nation's growing anti-pharma sentiments. I understand that millions of dollars spent on DTC ads may increase patient requests for the product in the short term. But exercises of this type do little to dissuade consumers from the belief that pharma companies have more money than they know what to do with—and those ads are not good for brands, or the industry, in the long run.

To make matters worse, DTC promotion regulations obligate advertisers

side effects, DTC ads don't convey that information in a meaningful way. The ads give each adverse event equal weight no matter the prevalence or the likelihood of it occurring. Rather, companies should place their dollars into disease education and public awareness campaigns so patients can self-identify and go to their physicians, who can then help them properly understand a drug's benefits and warnings.

Responsible Alternative

On the other hand, working with advocacy groups is one of the most accomplished means of raising disease awareness and enhancing the industry's image as deliverer of new and tangible value to patients. Often this advocacy work is unbranded, stimulating con-

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to frighten the public with laundry lists of side effects—witness the attractive prospect of "explosive diarrhea" that one anti-obesity product loudly announced to the disgust and laughter of millions of consumers. Although *Prevention* surveys show that consumers want to know about medication

sumers to ask doctors about their symptoms. Then, companies can compete by promoting their brands to physicians.

And that makes sense for the industry. We don't need to waste money encouraging patients to argue with their doctors about brands. In "Marketing 101," we all learned that targeting a concentrated group of gatekeepers (like

physicians) is a far more efficient buy than promotion to the universe they serve. Consider how much money must be spent to get a patient to a doctor to ask about brand “X” only to have that physician say the brand is either inappropriate or not the first choice. Instead, consumers need to know they have a treatable problem and must be motivated to seek that treatment. Then the individual product teams can use professional promotion to battle for brand share of the newly diagnosed patients in the doctor’s office.



Steps along the path

Recent campaigns show that companies are rethinking their approach to consumer communications. Instead of hard-selling brands through DTC advertising, Novartis and Merck/Schering-Plough have invested in campaigns that educate consumers about heart health.

Advocacy groups speak out for relevant issues in times of need, and are viewed as more objective than industry spokespersons.

Over the years, the industry has worked through existing or specially convened advocacy panels or government-industry collaborative groups to raise awareness of disease states such as hypertension, high cholesterol, and clinical depression. Certainly, sending controlled messages through DTC ads was important to category expansion by helping patients rapidly identify themselves as candidates for treatment. But these disease categories’ success would have been lessened without the strong PR messages from doctors, advocacy groups, and the government.

For example, the National Heart Lung and Blood Institute (NHLBI) led several public education efforts that raised hypertension and cholesterol awareness—and dramatically reduced the rate and effect of heart disease. To facilitate this effort, NHLBI partnered closely with the industry and even maintained an open panel of interested persons from pharma companies. In addition to NHLBI’s own public health advertising, the organization would allow pharma companies that sponsored programs to print the NHLBI symbol on their privately created company literature, as long as it passed muster of the NHLBI review process, which also helped to increase the credibility of the messages.

Another example is the National Public Education Campaign for

Clinical Depression, which was rolled out by a coalition of more than 150 advocacy groups (many of which were supported by pharma companies) to increase awareness of the chemical nature of the illness, its rapid treatability, and the need for aggressive screening.

Education and destigmatizing disease greatly expanded the market for drugs. Then, salesforces battled for market share—appropriately—in doctor’s offices.

Bonus Benefit

The reason advocacy-based public education builds longer-term support than brand-name DTC promotion is founded on a fundamental PR principle: a message’s credibility is greater when delivered by impartial third parties than by entities seeking to profit from it.

Unlike DTC, advocacy-based promotion brings with it a cadre of allies who’ve bonded with their industry colleagues in pursuit of a common cause. This factor grows in importance as the pharma industry becomes more of a political target. Advocacy groups who know a company and its values can be counted on to speak out for it and relevant issues in times of need, and the media will view them as more objective sources than industry spokespersons.

A case study of this advocacy benefit is the way nonprofits helped correct

misinformation that nearly caused patients to stop taking a vital medication en masse. The problem started when the *New England Journal of Medicine* published an “outlier” drug study alongside an editorial that clearly stated that the study had serious flaws and should be viewed in the context of other more favorable studies. But that balance initially received precious little media coverage up against the efforts of a publicity-seeking nonprofit that called on patients to spontaneously discontinue their medications—without seeing a physician who could put the new (and flawed) data into perspective. Almost immediately, disease advocacy groups stepped in, publishing “See your doctor first” messages and—citing themselves as authorities—put the data into a medically responsible perspective for consumers.

When interviewed about this controversy, company spokespersons just pointed to the advocates’ comments and said they agreed with the balanced message those organizations delivered. No DTC campaign can produce this kind of credible support or enhance the image of industry in this powerful way. ☪

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