

**40th Anniversary
1961-2001**

FOUNDATION NEWS

Welcome to our final edition in 2001 - where has the year gone to. Next year sees the following editions of the Foundation News landing on your desks: March 2002, June 2002, and December 2002. In September 2002 the post Conference Newsletter will also be available.

Ian Mackenzie our Editor has been on board with us since September 2000 and really helped improve the image and value of the Newsletter. This is Ian's last Newsletter as Editor and we would like to thank him for his contribution and appreciate him making the time for EphMRA. The Editors job lasts for 4 editions and so as of January 2002 we are inviting applications for the post from agency executives who have joined the Foundation. Please contact EphMRA for an application form. The closing date for applications is 8th January 2002.

Many thanks

Bernadette Rogers

Foundation Administrator

Letter from the Editor

Dear Colleagues

In this edition Alan John highlights several important findings on the HIV market in Europe and identifies some of the main drivers in product selection.

In previous editions we have examined the impact of the Internet on physician/patient/company relationships. Martine Leroy Sharman picks up this topic and suggests ways in which the quality of the interaction between physicians and companies can be improved.

Kim Hughes continues his series of articles and explores further the essential elements of brand development, sketching in some of the quantitative methods we can use to identify, observe and assess these elements.

In his third forecasting article Terry Hardy moves on to discuss ways of adjusting historical time series, prior to forecasting, in order to eliminate the effects of a typical events.

Last but not least, we have an amusing article from Gian Antonio Soldi tracing his career over the last ten years. He makes interesting points about the growing use of larger samples in qualitative research and of cultural obstacles in Italy to the use of research on the Net.

Finally, I would just like to say how much I have enjoyed my year as Editor. It has been a pleasure talking with many of you about possible articles and about issues which affect our industry. I look forward to meeting you all at future EphMRA events.

With my best regards to all EphMRA members

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Contact Us

By phone, fax or email....

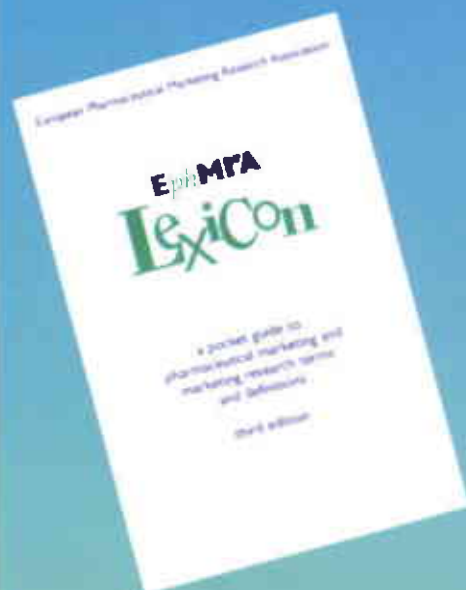
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Visit the EphMRA web site
at <http://www.ephmra.org>

Briefbits

EphMRA Lexicon



The new and third edition of the Lexicon is available for purchase at 9 Swiss francs each.

EphMRA Training...

Positioning - Getting it Right

The EphMRA Primary Research Methods & Training Committee (PRM&T) held their annual training workshop in Zurich, Switzerland - 11 - 12 October 2001.

This workshop was well attended and very highly rated according to the evaluation forms received.

Correction - MAFO Institute, Germany. In the 2001 Yearbook [page 163] the fax number is wrong and should read 0049 619 685 188.

PLEASE READ AGENCY FAIR 2002 IMPORTANT

The 2002 Programme Committee has evaluated and discussed many suggestions from members and agencies about the conference for 2002. One important decision has been made about the agency fair for 2002.

A number of major conference sponsors and agency fair exhibitors asked the Committee, following the fair in Athens 2001, to consider opening the fair to pharmaceutical company delegates and agency exhibitors only. Thus agency delegates who have chosen not to book a booth space will not be able to attend the fair in 2002 but this does not affect attendance at any other event at the conference. The agencies who approached EphMRA about this matter felt that the agency fair should be available only to those exhibiting.

EphMRA has decided to support the idea and in 2002 the agency fair will be open only to those agencies who reserve a booth space.

To facilitate booking there will in 2002 be 3 price levels for fair booths:

- the current standard single/double space
- the current small agency space fee [available to those agencies who qualify]
- a new [lowest] priced booth for one person consultants/freelancers.

We hope that most agencies will appreciate this new initiative - which has come about because of agency request. If you would like to discuss this further please feel free to contact your agency representatives on the committee Allan Bowditch Martin Hamblin [bowditch@martinhamblin.com] or Julie Buis Aequus Research [jbuis@aequusresearch.com]

Many thanks

Bernadette Rogers

EphMRA General Secretary

Facts and Figures

about the Newsletter publication

Copy/Advertising Deadline:
January 31st 2002.

Advertising rates and details are as follows: Four colour and B&W ads can be carried. Prices are quoted in Swiss francs.

	Quarter Page	Half Page	Full Page
B&W	300 CHF	500 CHF	800 CHF
Four Colour	N/A	750 CHF	1200 CHF

Prices do not carry VAT

(EphMRA is a Swiss based Association) and invoices will be issued in Swiss francs - you transfer the relevant amount into our bank account (details of which will be on the invoice).

2002 IN BRUSSELS - HERE WE COME...

STAYING AHEAD



Brussels, 25th - 28th June 2002
Sheraton Hotel and Towers
in conjunction with the
41st Annual EphMRA's General Meeting
(25th - 26th June 2002).

Registration opens January 2002.
On-line registration available.



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WHO WE ARE

SGR International *Health Care Marketing Research* is an independent company, established in 1986.

WHAT WE PROVIDE

- Formulation of Research Projects
- High Quality Fieldwork
- In-house Data Processing
- Drawing up of Reports in Italian, English and German
- Presentations in Italian and English
- Recommendations for Future Strategies

METHODOLOGICAL SKILLS

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TARGET GROUPS

- GPs
- Opinion Leaders
- Hospital / Office Specialists
- NHS Managers
- Hospital / Retail Pharmacists
- Nurses / Care Givers
- Patients

MEDICAL AREAS

- AIDS
- Cancer / Hematology
- Pain Therapy
- Cardiovascular
- Vaccines
- Diabetology / Obesity
- Transplantations
- Neurology / Psychiatry
- Erectile Dysfunction
- Gastroenterology / Hepatitis
- Osteoporosis
- Growth Hormone
- Dialysis
- Bio-technology
- Diagnostics
- Antibiotic Therapy
- Pneumology / Cystic Fibrosis
- Cardiosurgery
- Dermatology
- Surgical Instruments
- Infectivology
- Alcoholism

STRUCTURE

- Office located in the centre of Rome
- CATI positions
- 2 meeting rooms with:
 - viewing facilities, one way mirror, CCTV system
 - Sound System with Simultaneous Translation
 -  (video-conference on line)

BRANDS AND HOW TO UNDERSTAND THEM

We know that clinicians do not act rationally. Their emotive relationship with a brand often dictates their behaviour. This can keep them prescribing after other improved brands have been launched or starting initiating new brands based on limited hard data. As researchers we need to explain the non-rational components of brands to our clients.

The question is how can we understand the relationship with brands so that we can communicate better with our customers?

There are three elements to successful brand development.

1. Having a common understanding of how brands work, in particular how the rational components of the brand links into the emotional.
2. Putting together a programme which builds the brand with consistency.
3. Having good research tools that really understand the emotional motivations and less tangible aspects of the brand.

Models of how brands work

Most models of how brands work are two dimensional and merely describe the brand making little attempt to link the rational with the emotional. We prefer to think of the brand as a spiral staircase moving from product attributes to benefits and beyond to the higher emotive motivators such as being a good doctor (look how consumer brands have built themselves on the respondent being seen as a good mother) and beyond that even higher values such as a positive purpose (e.g. Virgin, the consumer champion, against monopoly players).



This means that if we can identify, through research, the product attributes that link to the most potent emotive drivers, we can use our communications strategies to accelerate brand development.

By looking at the links between each step of the model and the next we can leverage the brand over time along a consistent development path.

Good research products can only be put in place once we understand what we are trying to measure. Some useful measures follow:

Explaining the non-rational parts of the brand

Benefit Laddering

This is, in our view, an under-utilised technique. By assessing product attributes with an escalating series of simple questions, e.g. "What's the benefit of that?" or "How do you know that?", we can determine the links between attributes and emotive benefits. The secret to this technique is to be clear about what you are looking for.

Deconstructing the Brand

Brand Experience Audit. Human beings respond to brands through all their senses. In research we concentrate on auditory, asking questions, transcribing words, writing reports. We need to give respondents the means to express themselves through all their senses. An Experience Audit interrogates all a respondents senses.

Some of the many techniques available include projective techniques. Such techniques can be useful in exploring the various image dimensions of a brand and its resonances with clinician motivators. Issues may arise that one technique does not usually fit all, and cultural differences can predicate different qualities of responses. Again, the better techniques take a gestalt approach, giving the respondent access through all of their senses. Gestalt rooms for brands can be particularly useful in this context where the respondent enters and experiences the brand as a room.

The key with projective techniques lies not so much in the techniques themselves but in how a context is created to gain good quality of response.

As with all these techniques, as well as with effective communication in general, following the three steps of matching respondents, pacing respondents and then leading respondents is fundamental to success.

If this is true of good utilisation of techniques it is even truer of brands.

In the next issue we explore how research can contribute to matching, pacing and leading the growth of brands. In the next article we explore the strengths and weaknesses of different brand classification models and the research techniques that go along with them.

Kim Hughes

The Planning Shop

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STRIVING FOR VALUE FROM PHYSICIAN INTERACTIONS

How does a pharmaceutical company align its strategic marketing efforts with the needs of the physician? The answer, it appears, is with some difficulty.

Datamonitor's moderated email group (MEG) in June 2001 asked physicians from the US and UK about relations with pharmaceutical companies and, although there were some regional variations, one common theme emerged - pharmaceutical companies do not provide a suitably valuable service for physicians. While companies have long been aware of the deep-rooted problems with traditional sales force productivity, their online activities have, thus far, proven to be imperfect too.

The interviewed physicians were conscious of conflicting agendas between themselves and companies. For physicians, the value of an interaction appeared to be an inverse function of time - therefore, the shorter the effective interaction, the greater the perceived value. However, for pharmaceutical companies, the value of a relationship is directly proportional to time, and this has generated a situation whereby companies and physicians have diametrically opposed perceptions of the value of interactions, whether online or offline.

Both physicians and pharmaceutical companies appear to place equal importance on the quality of the interaction. However, physicians feel that quality offline and online interactions should convey information on new products or new uses of existing products and, most importantly, should

be completely unbiased. The physician's perception of bias lies at the heart of the conflict, as pharmaceutical companies will always appear to promote their own products.

Interestingly, many physicians hold the personal interaction with pharmaceutical sales representatives in high regard. The message that many physicians gave was that, although the sales visit is fundamentally flawed, in the absence of an alternative, it is still one of the best ways in which to get specific questions answered about a product.

The possibility of creating online interactions with pharmaceutical companies, whereby impartial information is available on many product classes, was therefore seen as particularly attractive to physicians. In order to capitalize on this opportunity, pharmaceutical companies need to create personalized eDetailing services that address the individual needs of a physician through a technology platform that is both highly functional yet simplistic to use. The challenge that pharmaceutical companies need to meet is two-fold: when will physicians be ready for this change and how best to create perceptions of high value through Web-based services that align both the objectives of the company with the needs of the physician.

Martine Leroy Sharman

Datamonitor

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European Study on HIV

A recent market research project conducted across European countries by Taylor Nelson Sofres has uncovered some interesting trends amongst patients suffering from HIV.

Clear patterns emerge in terms of both route of infection by country and ethnic differences amongst sufferers.

The survey in France, Germany, Spain, Italy and the UK was conducted specifically to give a better understanding of the profiles of patients with HIV and also to better understand the dynamics of this unique therapy area.

Amongst the findings of the survey, were - Two thirds of HIV patients in Europe are male and aged between 25 and 44 years old.

In Spain and Italy, the greatest route of infection is via drug abuse, whilst in Germany and the UK, over half of the patients report infection due to homosexual or bisexual transmission.

Half of all HIV patients in Spain suffer from Hepatitis C.

It was also found that the majority of HIV patients were 'white European', but that in the UK 21% of patients are classified as 'black African'.

The survey also identified significant differences between countries in the therapy administered to HIV patients. Amongst all patients, 75% are currently receiving an anti-retroviral therapy, and a further 14% have previously received this therapy, but are not currently on this regimen. However in Germany, 18% of HIV patients have never been on an anti-retroviral therapy - compared with only 11% in the rest of Europe.

Analysis of the overall importance of therapy characteristics reveals that efficacy is seen as the key driver in treatment choice in all countries surveyed. A closer examination of 'efficacy' identifies that the reduction in viral load far outweighs the durability of viral load reduction or the increase in CD4 counts.

The use of this information will now enable a more detailed profile of the HIV patient to be constructed, and allow for a better understanding of the dynamics of anti-retroviral therapy.

The research discussed above was undertaken using Taylor Nelson Sofres' HIV Dynamics Monitor service with HIV specialists in the top five pharmaceutical markets of Europe.

Alan R. John

Taylor Nelson Sofres Healthcare

Pane e questionari

Bread and questionnaires. From interviewing to fieldwork supervision, almost a family saga.

Ho visto per la prima volta un questionario mentre ancora frequentavo le elementari; parlo quindi dei primi anni '70. Insomma, dato che mia madre era, ed è tuttora, supervisore di diversi istituti, sono stato cresciuto a ... pane e questionari, e sicuramente non si è trattato di una dieta ipocalorica.

Circa 10 anni fa, poi, qualcuno ha pensato che fossi sufficientemente "maturo" per le indagini mediche, giustamente considerate particolari, sia per gli argomenti trattati che per la tipologia degli intervistati, a volte visti, almeno in Italia, come appartenenti ad una "casta". Le prime esperienze, quale intervistatore di tutte le principali agenzie italiane, non furono facili: ricordo ancora oggi un'indagine con i pazienti (fibrosi cistica!), area oggi in fortissima espansione (sono pur sempre dei consumatori, si dice).

Allora il mio unico database era l'elenco telefonicomalgrado tutto utilissimo ancora oggi, magari in formato elettronico.

L'attività di intervistatore è stata assolutamente fondamentale per comprendere le difficoltà che giornalmente si devono affrontare nel reperimento e nella conduzione delle interviste; esperienza utile anche adesso che mi occupo quasi esclusivamente di supervisione, ed in particolare del mercato italiano di Quality Medical Field Ltd. Una collaborazione anch'essa iniziata nelle vesti di intervistatore e moderatore (attività, quest'ultima, in parte mantenuta) e proseguita con la supervisione di indagini sempre più complesse e "voluminose".

Cosa è cambiato in questi 10 anni? Se un tempo si pensava che le indagini quantitative avrebbero preso il sopravvento sul qualitativo, ho invece notato un notevole ampliarsi del campione richiesto per le indagini motivazionali, che spesso supera ampiamente le 50 interviste, ma con l'inserimento di molte domande a carattere quantitativo, per fornire ai clienti non solo "opinioni", ma anche dati numerici.

L'ultimo fronte (e l'ultima moda) sono le indagini svolte con l'ausilio di Internet. E' un mezzo che sino ad ora ha un po' stentando ad affermarsi, rispetto alle più ottimistiche previsioni di qualche anno fa.

Sicuramente, almeno in Italia, dobbiamo considerare alcuni aspetti tecnici e culturali, come la limitata diffusione di Internet tra la classe medica "media" ... e la difficoltà di togliere agli italiani (medici, ma anche intervistatori) tutto il piacere di chiacchierare. Sono stati 10 anni emozionanti e mai noiosi, malgrado le difficoltà da affrontare ogni giorno, e mi reputo fortunato di non essere stato considerato maturo solo per le indagini sui dadi per brodo!

Gian Antonio Soldi

Quality Medical Field Ltd.

soldi@libero.it

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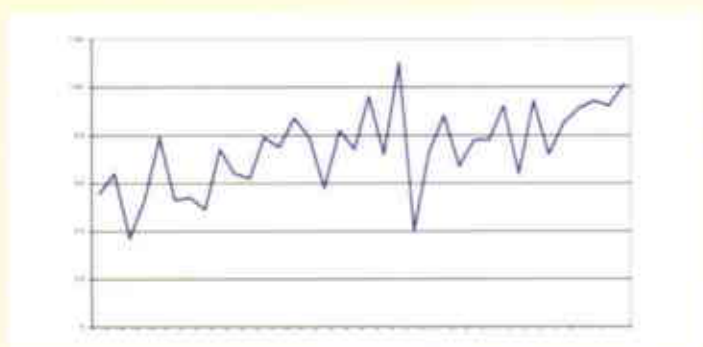
Musing 3

Dear Colleague,

Having thought about the political effects of your forecast and the effects of population, you are now ready to begin developing the forecast. We will now think about a forecast for the next two years to be developed from historical data. Models are slightly different and will be dealt with separately.

Forecasting is all about assumptions. The underlying assumption is that the sales tomorrow will bear some relationship to the sales today. This assumption is equivalent to the equation for a straight line or trend. However before we begin to look at this line you need to gather some data.

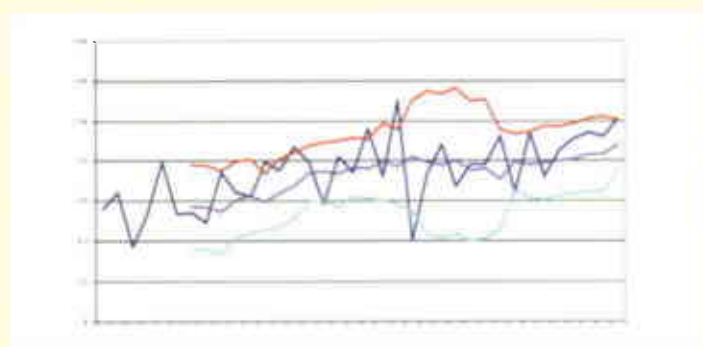
As a simple rule of thumb, if you are forecasting 24 months ahead you need twice that amount of history. Be greedy for data, it will help to reduce the variability in your forecast.



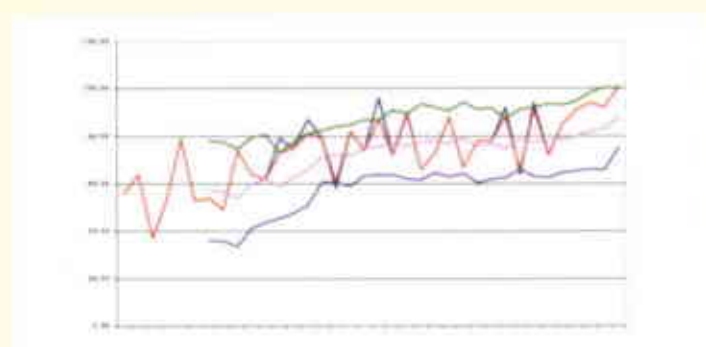
The above chart contains a suitable series of data on which a forecast can be based. However, you need to ask if these data are real, errors, exceptions or changes. The data reflect volumes and are excluding price changes. This does not mean that they are still suitable for the development of a forecast. You should only include real data in the calculations. The graph above shows considerable variations between periods, especially in the centre of the series. To use the data as it is would require the assumption that this variance is real and that it will occur again in the future.

No data is truly accurate. If you consider invoiced sales they are dependant upon the efficiency of the accounts department in generating invoices, and few departments would guarantee that an order dispatched at 6.30 pm on the last day of the month would be invoiced in that month. It is much more likely to appear in the following months figures.

Each point on the above graph is therefore the most likely point in a distribution curve. The real figure may have been slightly more or slightly less. We can use this fact to test the validity of the data. Firstly take a copy of the data and work on that NOT the original.



In the second graph a moving mean and control limits based upon standard deviations have been applied. It is now clear that several points are higher or lower than one would expect for normal data. The large movement in the centre of the series (higher than anticipated followed immediately by lower than anticipated) is typical of a purchasing pattern caused by bonus activity. There are also a number of points prior to this where the figure is higher than expected which require further investigation. If these figures were used to develop a forecast they would be the source of future variance that is unlikely to be present. Adjustment of these points is required, but only in a manner that will not disturb the underlying data patterns. This can be achieved by changing those points to the nearest control limit. The graph below now provides an illustration of the adjusted historical data from which the forecast will be generated in comparison with the original and control limits.



As you can see the red line now provides a more stable picture of the activity of this brand.

This is a simple device to use, but it should be used with care. Firstly changes should only be made when the reason for the data point being high or low has been investigated. It just may be an exceptional point that will repeat. Should two consecutive points occur outside of the control limits on the same side they usually indicate a change in the dynamics of the product or market under review. Buying patterns or out of stock will also be picked up and may require more severe treatment than simply adjusting back to the control.

Now that you have looked for the possible errors etc in the data, what is the data telling you about the development of the product? Half close your eyes and look at the adjusted graph. Your colleagues may think you are going to sleep - you should be so lucky! This data set looks to have three different trends. Growth at either end and a flat bit in the middle. Check this by sketching a line through the data; your eyes are as good if not better than any computer program. This data set requires two questions to be answered and understood before you can continue with the forecast. Why did the growth stop? Why has it started again if that is indeed the case?

Unfortunately I am not able to answer either question, but the data is real. At the head of this musing I said that you needed to be greedy with data. If the last eight data points are the ones showing the future direction why have we taken so much data? The additional data is going to help us judge the true direction and will also be used to assist with the calculation of seasonality. This leads us to look at the relationship between straight lines and curves. Next time we will muse a little on the straightness of an S shaped curve.

Terry Hardy
Radmos
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European Pharmaceutical Marketing Research Association



17-18 January 2002

Intermediate Pharmaceutical Marketing
Research Training Course
on Forecasting,
Geneva, Switzerland

6-8 February 2002

Basic Marketing Research Training Course,
Brussels, Belgium

25-26 April 2002

'Developing the Brand',
EphMRA - PRM&T Workshop,
Geneva, Switzerland

Full details on the EphMRA Web Site
www.ephmra.org

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The EphMRA Award for Contribution to Pharmaceutical Marketing Research

In 2001 EphMRA has initiated an annual award which was first presented at the Athens 2001 conference. This award is a recognition of a person's outstanding contribution to pharmaceutical marketing research. The award recipient, identified by EphMRA members, can come from a pharmaceutical company or supplier/agency and will receive the award based upon:

- having made an outstanding/recognisable contribution to EphMRA
- having made an outstanding/recognisable contribution to pharmaceutical marketing research

The winner in 2001 is **Panos Kontzalis, Novartis AG**



Winner:
Panos Kontzalis,
Novartis AG

Feelings about a Priceless Award

There are moments in a person's professional career which are unique and unforgettable. Such a moment I had the luck to experience during the 40th Annual Conference of EphMRA last summer in Athens, Greece. For first time EphMRA had decided to honour a person for his/her outstanding contributions in the association's affairs and/or the profession of the Pharmaceutical Market researcher.

Among other well respectable and recognised candidates (both from the Agency and the Company side) with invaluable contributions in the field of Pharmaceutical Market Research the majority of the EphMRA Company members have voted for the writer of this article.

It was really a great honour for me, an unrepeatable moment in my professional life, the most prestigious of the awards I ever received which happened to be in my mother country, Greece.

Every award has a specific meaning for the person who receives it but when it comes from reputable colleagues then its value is really, priceless.

Thank you.

Panos Kontzalis
Novartis

the Runner up is Allan Bowditch, Martin Hamblin Inc

Firstly as one of the recipients of this new EphMRA initiative I would like to thank the voters for considering me a worthy contributor to the marketing research industry. Such a gesture comes as a very considerable, but pleasant surprise, since when anyone is involved in a career which they enjoy, it seems strange that others wish to highlight it in this way. I believe that such an acknowledgement should hopefully give many involved in the industry considerable encouragement to know that efforts that are made to try to enhance the reputation of the industry do not go entirely unnoticed even though they are not done for altruistic reasons.

I am very humbled by the gesture and as I am sure as are all those that were considered as deserving candidates for this award in the first place.

Thank You.
Allan Bowditch

EphMRA Foundation Project - 'Verification of the Internet as a Research Tool

The workshop for the presentation of the results of this project was held on 28th September in Brussels. The workshop was well attended despite travel restrictions and speakers featured were as follows:

Presentation of findings and conclusions from the 2001 EphMRA Foundation Project.

"Verification of the Internet as a Research Tool."

Peter Winters, Jennifer Brown,
PSL Research

"How does telephone research shape up as a tool on key questions"

Phil Howe,
Martin Hamblin

"How it all seems to me"

Jean-Michel Courat,
Novartis Pharma Switzerland

"How I see the Challenges for Marketing Research"

Martine Leroy Sharman,
Datamonitor

"Best practice"

Bob Douglas,
Taylor Nelson Sofres Healthcare

"Marketing Issues On Line Research can Support"

Kurt Troll,
EphMRA Foundation Board

Agency Foundation Members 2001/02

The following agencies have joined the Foundation since the membership year started again in October 2001:



Radmos Ltd



Other agencies joining are:

Isis Research, Aequus Research, PASS PharmaWare, I+G Nürnberg.

NEWS *about your company*

New appointments - Isis Research

Geoff Eaton has been appointed CEO of Isis Research, which takes effect immediately. He replaces Colin Maitland, who established Isis Research in 1973. Colin is now the Executive Chairman and Research director. Geoff was previously Executive Vice President of Gates Engineering, the US\$1.6 billion company headquartered in Boulder, Colorado and Vice President of RHM, the UK dominant flour and baking company. Before this he was with Arthur Andersen and Hill Samuel Merchant Bank in London and Hong Kong. Geoff is also Isis' Europe Regional Director and oversees Europe's offices and their clients.

Sean Fay has been appointed Finance Director of Isis Research. Additionally Sean assumes responsibility as Isis' Global IT Manager. He previously worked for Cranks Retail Limited (restaurants) as a Finance and Property Director from 1997-2000. He was also Finance Director for Group Flo UK Limited from 1994-1997 and an Audit Manager at Coopers and Lybrand from 1989-1994.

New appointments - MMR International

New recruits at Medical Marketing Research International include Ana Galvez del Rio as senior research executive (previously at Martin Hamblin), Nicola Neville as research executive, Clara Casanueva as research executive, Adel Abdellaoui as research executive (previously at Sanofi) and Rachel Perrett as research executive. Recent promotions include Fiona Farr to associate research director, Nigel Griffiths to associate research director and Basil Feilding to senior research executive.

NHIB Joins EphMRA Foundation

Nicolette Huiskes MD MBA and her company NHIC have joined the EphMRA Foundation. Nicolette is a past president of EphMRA and founder of the company. She provides solutions for corporations that need experienced and all round as interim international marketing research support. NHIC writes marketing research plans and carries them out, provides the analysis of secondary data, selects agencies, does the project management, and assists in implementing standards. more information at www.nhic.nl

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