

EphMRA NEWS

EUROPEAN PHARMACEUTICAL MARKETING RESEARCH ASSOCIATION

Issue: June 2005

Berlin... an exciting setting for our Conference



The Conference is upon us and the culmination of many months of work and effort from so many. It is easily forgotten that it was in early 2004 that the Programme Committee met to formulate and bring together the Call for Synopses for the meeting and since then there has been much time

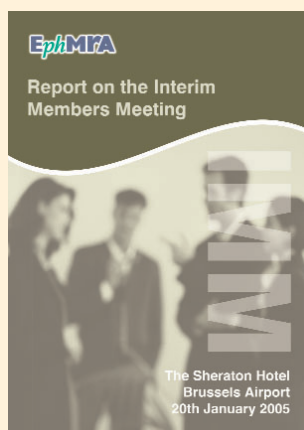
spent reviewing synopses, written papers and presentations. We anticipate that such Committee effort will show through in the quality of the presentations and the food for thought put forward by all the presenters.

The work of all our Committees and Groups is on clear display in Berlin – for the first time we have initiated a Committee Poster display. This is to highlight and focus on the work undertaken, often in the background and in 'spare time', but always for the benefit of all EphMRA members. As President I would like to thank all Committee Chairs and active members for their conscientious dedication in addressing issues which improve our daily work in both primary and secondary data areas. The poster display shows the extent to which many members are working hard in EphMRA – please take the time to visit the poster displays. For those unable to attend in Berlin there will be a poster booklet distributed afterwards.

The Agency Fair in Basel was a great success and in Berlin we are looking to emulate this and already have over 50 exhibitors who have booked booth spaces. I encourage all pharma company delegates to spend as much time as possible at the agency fair, networking and talking with suppliers. The exhibitors have spent much time and effort to be in Berlin and we look forward to them having 'good traffic'.

In addition I also must thank the conference sponsors and we really value your commitment to this event and your support every year is tremendous.

Back in January we had our Interim Members meeting (20 January in Brussels) and by now you should have received the feedback booklet.



Our conclusion based on those attending was that the event was well attended, positive feedback was received and the networking was very beneficial. The Executive has already put in the Diary the next event – 8 February 2006 in Brussels again – a location found to be very convenient for attendees.

As a short recap of the event - the overall value of the individual Members meetings were rated highly (score 4.0 - 4.2)* and the range of topics covered in each meeting was appreciated (score 4.0 - 4.3). The Members meetings were stimulating and insightful, with the exchange of thoughts and ideas particularly welcomed. The mix of those attending was highly valued by both Full (4.6) and Associate members (4.0).

After the Members met in the morning there then followed a Networking event. EphMRA invited from South Africa, Jan Hofmeyr to give a valued and lively presentation entitled 'Building Brands that Last – Lessons from the Histories of the World's Greatest Brands'. Jan's presentation was very interesting to all those attending (score 4.3 - 4.4) and certainly provoked food for thought about branding.

For myself as President it has been a very busy year, preparing for the Berlin Conference and dealing with the many issues which have arisen in the day to day business of the Association. I have enjoyed meeting with many of you and networking and listening to the range of diverse views and opinions expressed – these have certainly supported my role as President. In this respect too, my fellow Executive Committee members have provided invaluable 'behind the scenes' sensible advice and input into a wide range of EphMRA topics. Thank you to all.

Enjoy the Conference in Berlin.

Barbara Ifflaender

EphMRA President 2004 – 05

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* - a scale was used throughout the evaluation questionnaire.
1= low score/poor, 5=high score/very good

Facts & Figures

about the Newsletter publication

Deadline for Advertising in the Post Conference
News is July 8th 2005 (see page 3 inside).

What Song Does Your Brand Sing?

Recently, a friend of mine told me that the only time he cries is when listening to opera. This struck me as quite surprising – and also profound (and, naturally, did not stop me from calling him a big pussy cat). Usually we would not admit, even to ourselves, that certain music evokes a stronger reaction than some sad events which, rationally, we might feel should move us more. Yet my friend is one of the most open people I know, and frequently comes up with this type of comment without any apparent filter of post-rationalisation.

It made me think about how strongly music can influence our emotions, and then, how music can be employed to bring value to a brand. The impact of consumer emotions in driving brand choice is a developing area for marketing and marketing research; and a recent book by Martin Lindstrom is dedicated to understanding how powerful brands can be built through all the 5 senses [1].

A few brands explicitly use a piece of music as their signature tune. Globally, British Airways help to convey a sense of refinement and tranquillity with *Va Pensiero*, popularly known as The Chorus of the Hebrew Slaves, from the opera *Nabucco* by Verdi; as well as an arrangement of the Flower Duet, from the opera *Lakmé*, by Delibes. In the UK market, Hamlet cigars (in the days when tobacco TV advertising was allowed) used *Air on a G String* by Bach to give a sense of relaxation.

As an aside, I think jingles are rather separate as they are usually very short, and do not touch our cultural/personal memories in quite the same way. They might just remind us, for example, that we should ensure that our computers have Intel Inside.

However, most brands are not particularly associated with a piece of music. Yet, from a market research perspective, we could probably elicit a sense of how people feel about a brand by the music associated with it.

Consider this; could you imagine that opera and Rover cars be credibly associated together? From a personal viewpoint, I could not! (For those who do not know it, Rover is the last British mass-market car manufacturer which finally stopped trading in April 2005 after years of heavy losses.) However, I do believe that opera and Saab could sit together very well; though, curiously, not BMW, which may be to do with the particular associations I have with that brand. I also rather like the association of the updated VW Golf with the striking “Singing in the Rain” advert involving an animated Gene Kelly.

In pharmaceuticals, could we find what music associations doctors, patients and pharmaceutical company employees have with different brands; and could this reveal how these target groups feel about them?

Indeed, could music be used in the branding of pharmaceutical drugs? Is that too absurd? Could we imagine music which is

tailored to the specific condition suffered by the patient, and the specific personality of each brand?

Traditionally, the media for marketing drugs has not been conducive to using music as part of the branding process. It is difficult to see how it could be incorporated into a standard sales rep detailing visit, and in most major markets, TV/radio advertising is not allowed.

In considering how music can be incorporated into a brand, it would be useful to make an audit of all current and potential touch-points with key target audiences.

One area that music has been used has been with the motivation of internal brand teams - reputedly to good effect. For example, Glaxo used the theme of *Licence to Kill* in this manner for the launch of their anti-biotic Zinnat. Also, in the mid-1990s, Zantac faced the looming competitive threat of the proton pump inhibitors, and Glaxo came up with the Blue Z campaign for Zantac to reinforce the power of this brand. The video reel for the sales teams showed a blue Grand Canyon set to the music of *I've Got the Power* by Snap. There was also good fortune that at the launch sales meeting, a freak thunderstorm and power cut of the preceding day meant that the *I've Got the Power* helped to enhance Zantac's reputation since it coincided with the resumption of electricity!

The Internet also has the potential to offer some interesting opportunities to use music in the branding of pharmaceuticals.

A key marketing imperative of any new business is now to be clear about what the business (or brand) is about, and communicate that through the business/brand website. This communications role of marketing was expressed very well by Lord Browne, Group Chief Executive of BP, the multinational energy company, as follows:

“Some people think marketing is a word associated with manipulation and pretence – a concept that is part of a culture of mistrust and cynicism. On the contrary, marketing is about expressing a real purpose, and doing so in a way that huge numbers of people unfamiliar with the detail can understand.” [2]

It is the Internet which can offer the best platform to deliver a consistent, global brand message – including music.

Continued >

[1] *Brand Sense, How to build powerful brands through touch, taste, smell, sight & sound*, by Martin Lindstrom (2005)

[2] J Browne (Summer 2003) *Beyond Petroleum: Marketing and the future success of BP Market Leader Issue 21*, as quoted in *The Business of Brands*, John Miller & David Muir (2004)

Whether many of the target audience will activate the audio capability on their computers is currently a moot point – but the indications are that the Internet is becoming a more sound-enabled medium. Indeed, pharmaceutical companies could positively encourage doctors to have their sound enabled on their computers in such activities as e-detailing initiatives. For brand messages aimed at patients, the challenge would be to make the audio element entertaining whilst also complying with ethical and legal guidelines.

Much of this is still in the future. Currently, most consumer brands concentrate their energies on strong visuals and ignore music. Lindstrom tells us that only 4% of the world's Fortune 500 brands have a sound element as an integrated element online [3].

Yet this could change. Maybe we could expect blockbuster-drugs of the future to each have their own sound track?

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[3] Ibid, Lindstrom (2005) page 23.

Facts & Figures

about the Newsletter publication

Deadline for Advertising in the Post Conference News is July 8th 2005. The Post Conference News is mailed out the end of August.

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).

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



Online access to our panel of physicians, patients
and healthcare professionals across Europe and
the United States.



ONLINE HEALTHCARE SURVEYS

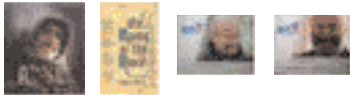
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The Science of Logo Design

As an undergraduate forced to study semiotics, I remember coming to the conclusion it was a load of jargonistic, inscrutable and useless nonsense dreamed up by a load of intellectuals with nothing better to do. And yet semiotics has had a massive influence on our daily lives, whether we realise this or not. Listed below are just some of these influences.

Big Ideas:	Postmodernism, deconstruction, linguistics, media studies, philosophy, literary theory, modern political theory
Specific Bits of Communication:	Novels, films and Advertising 

Semiotics is most simply defined as the study of signs. As such it is really the study of how meaning is generated.

As researchers active in the field of marketing communications, we are primarily concerned with the generation of meaning. It is now generally accepted in communication theory that meaning is created as much by the recipient of the message as the source of the message, and this is one of the reasons why researching communications material is so important.

In decoding messages, the recipient draws heavily on her or his own subjectivity and cultural environment. These clearly differ between countries and a discussion of international communication is too broad for the scope of this article. We shall instead endeavour first to examine semiotics in a national context before returning to the bigger issue of multinational marketing.

Recently I wondered whether it might be possible to re-visit semiotics, wade into its dense and murky waters, sort through all the jargon, sift out the nonsense and find any nuggets that could be useful to me in my job.

So I looked through my old books and notes and came across the work of Charles Saunders Peirce.

Remember that Semiotics is defined as the study of signs. A sign is defined as a meaningful unit which stands for something other than itself. Signs take the form of words, images, sounds, acts or objects. As we are essentially communicative beings, a lot of what we do involves signs, even if we do not realise this. One example is body language. In holding ourselves a certain way we can send out all kinds of messages unconsciously.

A sign is made up of two elements:-

- A 'signifier': the material form that the sign takes - e.g. the word itself, a picture, a body movement or, to give a marketing example, a logo. Logos are perhaps the simplest marketing signs which we research and therefore present a good starting point.
- A 'signified': the mental concept represented by the signifier - e.g. a meaning, interpretation, a feeling or, to give a marketing example, a brand.

Peirce identified three basic types of signs which he labelled:-

- **Icon** or iconic sign
- **Symbol** or symbolic sign
- **Index** or indexical sign

An icon is a type of sign in which the signifier resembles or imitates the signified in some way. Iconic signs recognisably look, sound, or feel like the thing that they refer to. Thus, photographs are icons, as are scale models, portraits and as is onomatopoeia. A great, poetic example of onomatopoeia is to be found in Wilfred Owen's Anthem for Doomed Youth:-

stuttering rifles' rapid rattle.

This is iconic because the sentence sounds like the noise made by the First World War rifles to which Owen refers. Likewise, this photo of Wilfred Owen is iconic because it resembles the man himself.



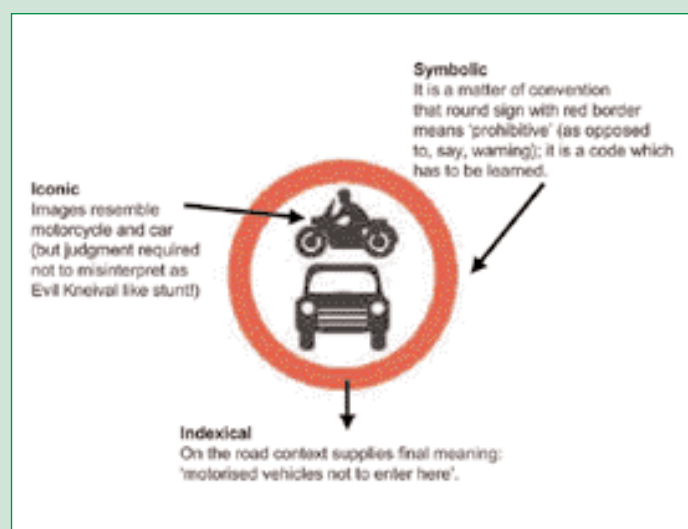
Symbol

The symbol formerly known as a successful pop artist! In a symbol, such as the one left, the signifier does not resemble the signified. A symbol is that element of a sign in which the relationship between the signified and the signifier is purely arbitrary or a matter of prior knowledge or convention. A symbolic sign is one in which the signifier is not inherently like the signified in any way and the relationship between the two has to be learned. Most words are symbolic; for example there is nothing inherent in the word 'man' to lead somebody who has not learned some basic conventions of the English language to identify the meaning of the word. Beyond words and language in general, other symbolic signs include numbers, Morse Code and national flags.

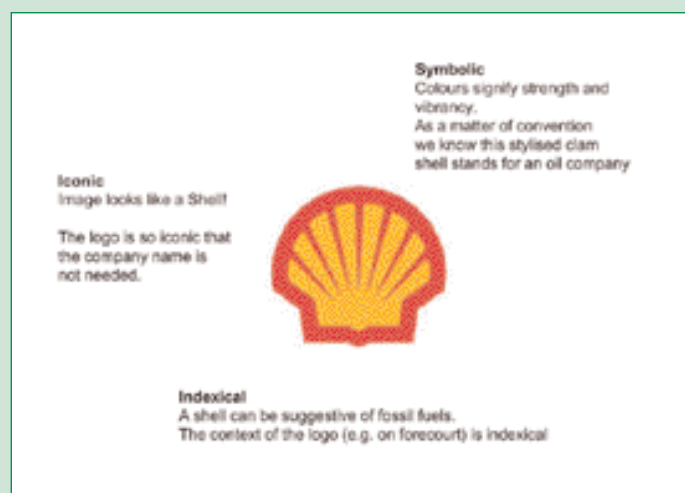


Index

The word 'index' comes from the Latin for forefinger and is etymologically linked with the verb 'to indicate' meaning to point to. An indexical sign is one in which the signifier and the signified are directly connected in some way. This link can be physical or causal and can be observed or inferred. Thus, smoke is indexical of fire and medical symptoms are indexical of underlying disease. Other indexical signs include measuring instruments such as barometers or thermometers, footprints and personal trademarks such as fingerprints and handwriting. The three distinctions defined above are useful in helping us 'deconstruct' any sign. The following illustration shows how simple signs can be analysed in terms of the three constituent elements.



So how is all of this useful to us as marketers? Most obviously, it gives us the language to talk about marketing communication in a different and more analytical way. This in turn allows us to look at communication differently and to analyse which elements are working and why. The analysis of the Shell logo below provides an example of this.



We can therefore take a more scientific approach to logo evaluation and ultimately design. An application of Peirce's work to some randomly chosen pharmaceutical logos leads to some interesting conclusions.

A brief survey of some randomly chosen logos (from MIMS and GP magazine) has identified at least three types of iconic signs.

Firstly, there are some logos which make an iconic reference to the therapy area. The Olmetec logo, with its recognisable heart icon is a simple example of this.

Perhaps less obvious examples of this are afforded by two statins. The rings on the Lipitor logo are redolent of cholesterol particles, as is the yellow circle on the Crestor logo.



Secondly, there are some logos which have an iconic resemblance to a differentiating product feature. These include the arrow icon in Pariet's logo. This arrow can, in turn, be taken as a symbolic portrayal of a rapid and targeted mode of action.



The third type of iconic sign which we have identified seeks to associate the brand with successful outcome. In our random survey we noted that the human icon is often shown in a pose designed to denote a positive resolution and/or release from symptoms. The icon of uplifted arms recurs with surprising frequency as illustrated below.



As far as the other types of signs are concerned, we identified two broad ways in which pharmaceutical logos use symbolic signs. Firstly, there are symbols which derive from medical convention. One such example is the colour coding used with asthma products.

SYMBOL SIGNS

Colour coding is a matter of medical convention in many therapy areas



Secondly, logos often make use of well recognised symbols. For instance, the flame is associated with sexual appetite in many cultures and it is therefore entirely appropriate that a product for erectile dysfunction should feature it in its logo.



Likewise, the circle has long been used to convey wholeness and well-being and it is perhaps not surprising that the circle also emerges as a recurring theme in pharmaceutical logos.



The type of sign which our survey was less successful at finding was the indexical sign. Of course, all logos have an indexical component which is provided by the context in which they are found, in the same way that the road sign described above requires needs to be located in a particular setting to provide its full meaning.

One example, however, of a logo design hinting at a direct causal relationship is provided by the Xatral logo. As illustrated below, the flowing writing could be interpreted as indicative of an absence of acute urinary retention.



What is perhaps most notable about the above examples is the extent to which the most striking logos contain more than one type of sign. Thus, the Olmetec, Oxis, Crestor and Lipitor logos have all been shown more than once. Clearly, they work on more than one level. As a semiotician might say, they are inherently more meaningful.

In conclusion, we have shown that it is possible to break down how meaning is encoded into logos, but the question which remains unanswered is what are the practical implications of this for us market researchers? It can be argued that models which describe how meaning is encoded and decoded can be a very useful tool for the researcher for all the reasons given below:-

- It provides us with the language to communicate more effectively and precisely with our clients.
- It allows us to make recommendations at the creative development stage as to how logos can be designed to be inherently more meaningful. This means that our clients can be more scientific about their approach to logo design, rather than relying purely on the creative inspiration of the advertising agency, as is most often the case currently.
- It can be used to design more effective creative development research. We can do this by using the model to help design appropriate enabling techniques and again as an analytic framework. From this we can produce a creative brief for logo design which details not just the appropriate brand values which the logo must communicate, but also the types of sign (indexical, symbolic or iconic) which it should incorporate.
- It allows us to design logo evaluation research and frame our questioning of respondents in such a way that we gain a full understanding of which values are being communicated and exactly how these meanings are arrived at. This, in turn, enables us to make clearer and more precise recommendations.
- Because, as described above, a central tenet of semiotics is that the 'recipient' of a message is an active participant in the generation of meaning, it allows us to make a stronger case for the need for robust research.

Finally, it should be stressed that the above is applicable to all types of communication (such as advertising), not just logos. We have only chosen logos as the simplest of all signs.

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THE EphMRA AWARD FOR Contribution to Pharmaceutical Marketing Research

Winner to be announced - Wednesday 22nd June in Berlin

In 2001 EphMRA initiated an 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.

In 2001 the winner was Panos Kontzalis from Novartis and runner up was Allan Bowditch from Martin Hamblin GfK.

In 2002 the winner was Allan Bowditch from Martin Hamblin GfK Inc and the runner up was Rainer Breitfeld.

In 2003 the joint winners were Janet Henson and Bernadette Rogers and the runner up was Dick Beasley.

In 2004 the winner was Isidoro Rossi, Novartis Pharma and the runner up was Dick Beasley.

Both Full and Associate members can make nominations and then vote.

The award recipient can be 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

Examples of such a contribution are:

- New technique developed
- Strengthened the role of marketing research in pharmaceutical companies
- Done much more than agreed and contracted
- Representation of EphMRA to other associations or organisations
- Strengthened the role of EphMRA
- Lifetime achievement etc

The award recipient will receive a certificate plus a token memento.

Update on PRM&T activities – Janet Henson – Committee Chair – janet.henson@wanadoo.fr

MEMBERS UPDATE

Fred Thomas of Celgene has joined the PRM&T committee – a welcome new member.



VACANCY

We have a vacancy for an EphMRA Full member to join the committee – if you are interested please contact Janet Henson

Training Courses – Evolution of the PRM&T Committee

The PRM&T committee historically always organised a yearly PRM&T Spring Annual workshop, featuring a new theme each year. This initiative was started in the 1980's and continues today.

In 2000 EphMRA launched a full training programme in response to member demand, and since then EphMRA has continued to augment its range of courses and workshops. Over 400 delegates have attended our courses and workshops since 2000, from all over the world in 25 countries:-

Australia	Hungary	Spain
Austria	India	Sweden
Belgium	Italy	Switzerland
Canada	Japan	The Netherlands
Denmark	Poland	Turkey
Egypt	Portugal	UK
Finland	Russia	USA
France	Singapore	
Germany	South Africa	

How do delegates rate our courses and workshops?

EphMRA evaluates all courses and workshops and the valuable feedback is analysed by the PRM&T committee. We actively incorporate feedback in future courses. Overall we are proud of the positive feedback and ratings. Here are some highlights:-

Basic Level Courses

Introduction to Pharmaceutical Marketing Research – our first course ran in November 2000, we have repeated the course 4 times and plan a fifth one in January 2006.

Overall Views – Scale 1 = low score 5 = high score

	Nov 2000 Base 25	Mar 2001 Base 24	Feb 2002 Base 10	Nov 2003 Base 12
Quality of Speakers	4.1	4.1	3.8	4.0
Value to me in my job	3.9	3.8	3.5	3.9
Value for money	3.8	3.6	2.9	3.8
Choice of Brussels	3.9	3.8	4.1	4.2
Choice of hotel	3.8	3.8	4.1	4.2
Organisation	4.3	4.3	4.4	4.4
To what extent would you recommend	3.8	4.0	3.0	3.9
Range of subjects covered	4.3	3.9	3.2	3.9

Pre Conference Workshops

In 1999 we introduced for the first time pre-conference workshops, which are normally pitched at an intermediate level. For the first time in 2005 we are also running an advanced course for highly experienced market researchers:-

Interest in the subject presented
Relevance to my job
Overall value to me
Overall structure of the workshop
Overall organisation

Intermediate Level Courses

Positive feedback is also received for our intermediate courses.

Overall Views – Scale 1 = low score 5 = high score

	Forecasting Jan 2002 Base 15	Conjoint Nov 2001 Base 21	Research Toolbox Nov 2002 Base 27	Desk Research Nov 2003 Base 16	Research Toolbox Oct 2004 Base 8	Segmentation Mar 2005 Base 9
Quality of the Speakers	4.3	4.1	3.8	3.8	4.3	4.4
Range of subjects covered	3.6	3.8	4.0	3.9	4.5	4.2
Value to me in my job	3.6	3.6	3.8	3.8	4.3	4.4
Value for money	3.6	3.6	3.8	3.8	4.1	4.1
Choice of city	4.3	3.8	4.2	4.1	4.1	4.2
Choice of hotel	4.3	3.9	4.0	4.0	4.1	4.3
Overall organisation	4.6	4.5	4.5	4.3	4.4	4.8
Overall structure of workshop	3.5	4.0	3.8	3.9	4.1	4.2
To what extent would you recommend	3.5	3.9	4.0	3.8	4.4	4.2

Intermediate Level Courses – Positioning – Getting it Right

This is the most popular intermediate course and in November 2005 will run for the 4th time; this time Branding will be incorporated.

Overall Views – Scale 1 = low score 5 = high score

	Positioning Oct 2001	Positioning June 2002	Positioning February 2004
Interest in the subject presented	4.8	4.5	N/A
Quality of the lectures	4.7	4.1	4.3
Relevance to my job	4.7	4.3	3.8
Overall value to me	4.6	4.1	3.7
Overall organisation	4.6	4.3	4.5

Overall Views – Scale 1 = low score 5 = high score

2001 Portfolio Base 15	2000 Internet Base 23	2001 Internet Base 28	2002 Internet Base 12	2002 Segmentation Base 13	2003 Value & Pricing Base 14	2003 Brand Equity Management Base 18	2004 Internet Base 16	2004 Licensing Base 15
4.1	4.5	4.4	4.2	4.4	4.0	4.6	3.9	4.3
3.9	4.1	4.0	3.8	4.1	4.0	4.0	3.7	3.4
3.6	4.0	4.0	4.2	3.8	3.9	3.7	3.5	3.5
3.3	3.8	4.1	3.9	4.1	3.7	3.9	3.9	3.6
4.0	4.3	4.3	4.1	4.2	3.9	4.0	4.1	4.0



New benefit to EphMRA Full and Associate Members On all future courses Book for 3 & pay for 2

(Terms – for delegates from same company and all booking at same time)

DIARY DATES –

“Global Significance of Customer Satisfaction”

November 17-18 Brussels, Belgium

Customer satisfaction is considered a critical driver for success by many organizations...

- 60% of all businesses cite ‘customer retention’ as a critically important measure. [Economist]
- Studies show a 5% increase in customer retention can trigger a 25%-to-125% increase in profitability [HBR]
- Some 45% of Global 2500 corporations already have a VP responsible for the overall customer experience
- Wall Street analysts look to customer satisfaction rates as a leading indicator of a company’s financial health and profitability
- Companies like PTC and Siebel are already publicly reporting some of this data in annual reports, quarterly earnings press releases and ads

... but is it relevant to pharma?

More and more pharmaceutical companies are looking at customer satisfaction initiatives but not necessarily under the guise of ‘customer satisfaction’.

Some facts and figures

Research shows that: 65% - 85% of customers, who switch to competitors, report that they were either ‘satisfied’ or ‘very satisfied’ [TARP]

Reasons customers leave:

- 3% move away
- 5% develop other supplier relationships
- 10% leave for competitive reasons
- 14% dissatisfied with product
- 68% perceive an attitude of indifference by supplier [TARP]

Losing customers is expensive: Bain and Co report that it costs 5 times as much to attract a new customer as to keep an existing one, and it costs 16 times as much to grow a new customer to the same level of profitability.

This course investigates:

- What do we mean by customer satisfaction and is satisfaction enough – what is loyalty?
- The many different ‘customers’ in our pharmaceutical industry
- The different measures of satisfaction – brand, company, service, representative
- Some research techniques used to understand and measure each
- The local tactical and international strategic use of customer satisfaction
- How satisfaction (and loyalty) drives growth
- The role of satisfaction in Customer Relationship Management (CRM)
- Some thoughts on the future of customer satisfaction in healthcare

Workshop Objectives

The aim will be to give delegates a thorough grounding in Customer Satisfaction together with what is involved in researching and measuring it within the unique environment of the healthcare industry. We will consider



who are our customers and the different measures of satisfaction. Delegates will have the opportunity to work with experts in customer satisfaction and to understand the growing demand for customer satisfaction research in the future.

Delegates will leave the workshop with a better understanding of

- what is customer satisfaction
- who are our customers
- why satisfaction is important
- why satisfaction will become more important to our industry
- how to measure satisfaction
- what research techniques can be used and when to use them

Who should attend?

The course is aimed at experienced Market Researchers, Business Analysts and Marketing personnel from companies and agencies. Anyone can attend, but EphMRA Full and Associate members have priority for places.

Convenors – Ruth Evans, IMS Health, Bob Douglas, Synovate Healthcare, Jeremy Lonsdale, Aequus Research and Werner Gorath, Altana Pharma.

“Positioning & Branding - Getting it Right”

Now includes Branding.

November 17-18 Brussels, Belgium

Positioning is ‘the act of creating an image of what a product can offer and to whom, so that it will occupy a distinct and sustainable competitive position in the mind of the target consumer.’

– EphMRA Lexicon

Positioning Statement written declaration by a company regarding its view of where its product or service sits in the marketplace – EphMRA Lexicon

Branding creation of brand image through visual and verbal elements. Includes, but goes far beyond, ‘brand name’ and ‘logo’ alone. – EphMRA Lexicon

Brand Image perceived impressions of a brand, frequently related to abstract associations. May be the result of contrived marketing action or an accident of market perception. – EphMRA Lexicon

Few terms cause as much debate in the industry as positioning and branding. What exactly is positioning and branding? How are they defined? At what stage in the development cycle should positioning and branding start? What are the responsibilities of headquarters vs. local affiliates? And, last but not least, how and when should positioning and branding be generated and tested?

EphMRA’s Primary Research Methods and Training Committee feels it is worth revisiting this important topic in a dedicated workshop, and to bring together experienced marketing research professionals and experts to discuss these issues.

Workshop Objectives

The key objectives of this workshop are:

- To exchange opinions on the terminology and process of positioning and branding



- To learn about the process of positioning and branding through case studies, and to illustrate the context in which positioning and branding takes place
- To learn about the latest techniques used in positioning and branding research

Who should attend?

The workshop is aimed at experienced market researchers from pharmaceutical companies or agencies. Anyone can attend but EphMRA members and EphMRA Associate Members have priority for places.

Convenors – Cathy Clerinx, Adelphi International Research, Steve Grundy, GfK Martin Hamblin Global HealthCare and Peter Winters, Brand Health International.

REGISTRATION NOW OPEN "Introduction to International Pharmaceutical Marketing Research"

**31 January – 2 February 2006 –
Brussels,**

Introduction

The aim of this course is to enable delegates to understand the basic principles and practices of Pharmaceutical Marketing Research.

At the end of the course all delegates should have a basic grounding in the course sessions topics below:-

- Session One** – The Role and Scope of International Pharmaceutical Marketing Research
- Session Two** – International Sources of Data
- Session Three** – The Product Lifecycle – the Role of Marketing Research
- Session Four** – Types of Primary Market Research and Translating Business Objectives into Research Objectives.
- Session Five** – Commissioning Marketing Research and optimal utilisation of Marketing Research within the company

Course Objectives

On completion of this course delegates should have an understanding of:-

- Pharmaceutical MR and its uses
- Different types of MR
- The scope of MR, clearly differentiating between the role and character of qualitative and quantitative research methodology
- The role of MR and its clients
- The role of MR in business decisions
- The fundamental elements within research practice
- Using research findings to make a difference

Who should register for the Course

The target audience for this basic course is those who have joined an international pharmaceutical market research department or agency within the last 12 to 18 months.

Course Convenors - Xander Raymakers from NV Organon, The Netherlands, Baerbel Matiaske from GfK HealthCare, Germany, Ruth Evans from IMS Health.



REGISTRATION NOW OPEN "Understanding and Using Desk Research"

**1st – 2nd February 2006 –
Brussels, Belgium**

Introduction

In answering business questions, pharmaceutical company researchers need to have a good understanding of sources available and which type of sources can be utilised for specific business questions. For example, in making decisions about business which compounds offer the most promise pharmaceutical company executives usually need to understand market potential based on both primary research and desk research.

Desk research is a systematic examination of all available sources and data in the context of a particular business / marketing research problem. Sources for desk research are practically endless and include epidemiology data, audit/panel data, all published statistics etc. We will be including a review of desk research sources in the workshop.

Often the market analysis is required quickly, as with an in-licensing opportunity, so that timely decisions can be made. How can the analyst make the best use of his/her time in delivering the results?

This course is organised into five main sessions, the first looks at the scope of desk research, problem definition/clear objective setting and defining and reviewing of types of desk research sources and their utility. Session two looks at in-licensing desk research an important area for desk researchers currently, the third and fourth sessions then focus on the product lifecycle firstly New Product Development followed by Currently Marketing Products highlighting specific desk research needs and approaches within these lifecycles. Final section is designed to give an understanding on how analyses from available sources can be integrated into models. Each section is very interactive and includes hands-on syndicate work.

There is such a vast amount of information available, particularly through the Internet, and information needs may cover a range of target groups. This course should help the pharmaceutical company analyst with these challenges.

Workshop Objectives

The key objectives of this workshop are:

At the end of the workshop, delegates will understand

- How to go about developing clear-cut objectives for a desk research project
- How to know which sources to use and to assess the value of each in a critical manner
- How to go about integrating the various information sources into a comprehensible and reliable market picture and how to integrate primary and secondary research data

Who should attend?

The course is aimed at experienced Market Researchers or Marketing personnel from pharmaceutical companies. Market researchers from agencies may find it useful to attend, but they should bear in mind that the primary



audience is anticipated to be personnel from pharmaceutical companies. Typically delegates would already have a basic understanding of desk research and would regularly be faced with a requirement to undertake or organize desk research projects.

Course Convenors - Semra Grundy, Allergan, Janet Wagster, J Wagster Consulting and Peter Winters, Brand Health International.

**Course in the Planning Stages –
PRM&T SPRING WORKSHOP
“The Role of Marketing
Research in Pharmaceutical
Forecasting”**

April 4-5 2006 - Germany



Introduction

The pharmaceutical industry represents a very dynamic yet fluctuating market that is very challenging to analyse and predict. Market drivers are diverse, ranging from government regulations to the introduction of drugs or diagnostics that influence the course of diseases.

With the cost to launch a new drug over \$800 million we no longer have the luxury of maintaining large drug portfolio pipelines. Forecasting and modeling market dynamics is an increasingly important function used to develop and support the clinical development of drugs. In addition to new products forecasting, in-line analysis of current drugs is critical to ensure that past analyses reflect current and future market drivers. Therefore, it is imperative to analyse not only the historical market, but to predict the evolution of the market with accuracy by incorporating a multitude of market events that impact the future.

The course aims to focus on the role that marketing research plays in forecasting achieved via the use of a case study from implementation to output.

Who should attend?

The target audience for this intermediate course are pharmaceutical market researchers, pharmaceutical marketers and pharmaceutical strategic planners.

Course Convenors - Ulrich Wuesten, Bayer Healthcare – Germany, Alexander Rummel, Psyma International Medical Marketing Research GmbH – Germany, Werner Gorath, Altana Pharma – Germany

PUBLICATIONS UPDATE

The two PRM&T publications – Research Through the Product Lifecycle and Managing a Research Project have been updated.

We have also changed the format of the publications and they are both now handy A5 size.

If you need extras copies please contact Janet Henson or Bernadette Rogers.

If you have any comments on these publications which would help our updating please let us know.

**Managing a Research Project
Introduction**

This guide has been drawn up to give guidance to both pharmaceutical company market researchers and agency researchers, as to good practice in running research projects. The aim is to improve communication, working practice and to ensure that projects are run to the satisfaction of all parties.

This document was prepared by the PRM&T Committee, who have updated and expanded an earlier document, prepared by Kevin Mahoney on behalf of EphMRA. This was then substantially revised by the PRM&T Committee with the assistance of Martin Hamblin GfK and Taylor Nelson Sofres Healthcare, in 2002. In 2005 the document has been updated and revised with the assistance of Aequus Research and Brand Health International.

Pharmaceutical companies are always facing new situations. The competitive business environment in which they operate is constantly changing. Companies develop new products and new promotional strategies. Prescribers and users respond to changes in the economic, social and legislative systems by changing their product use patterns. New organisations, affiliations and initiatives are continually being born.

All these provoke management to ask questions about:

“Who...?”

“Which...?”

“How...?”

“Why...?”

“When...?”

The questions frequently pass across the desks of market researchers and you, as a marketing researcher, are expected to have specialised knowledge about acquiring the information required by your management. Our aim in developing this guide is to help you to improve the quality of the research you do, avoiding the common pitfalls that lie between taking a brief from your in-house client and reporting the results of your research.

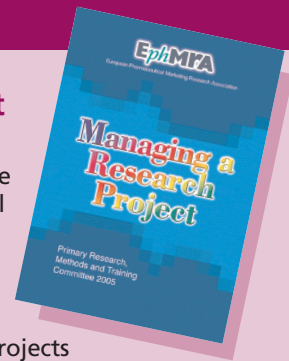
Section I Defining Information Needs covers the process of defining exactly what you need to find out, by when, and by what means. This helps you define the best process, its cost and the reliability of the information. It also helps you to decide whether you need to use a market research agency and what they can do for you.

Section II Choosing and Briefing an Agency covers the process of selecting an agency, and the many considerations involved in arriving at a decision about which agency to use.

This is also an invaluable checklist to be used every time you prepare a market research brief.

Section III Working with an Agency addresses the development of a professional working relationship with a chosen agency to ensure that a market research project progresses smoothly.

Finally, in **Section IV, Reporting the Results**, we present a series of points you should consider in deciding how to make the information available to your in-house clients. Remember - information only has value by being acted upon, so effective communication to your in-house clients is vital.



Research through the Product Lifecycle

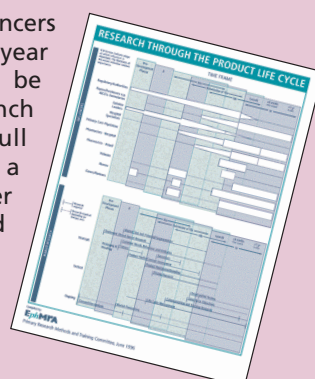
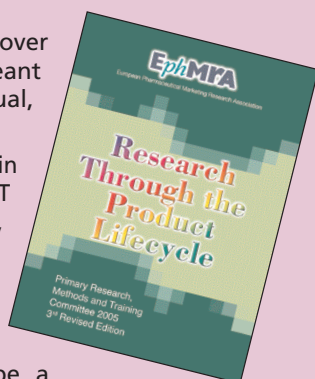
Introduction

This guide has been designed to cover the Product Life Cycle. It is not meant to be a fully comprehensive manual, but a general guide.

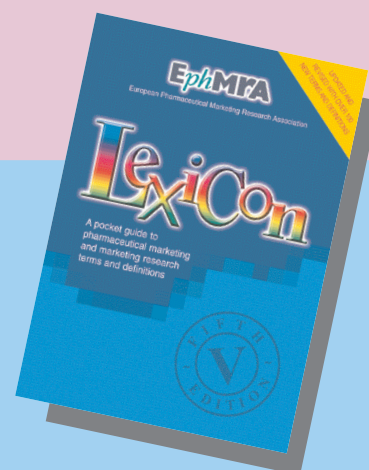
The original guide was produced in 1996. In 2002 and in 2005 the PRM&T committee updated the document, with the assistance of Taylor Nelson Sofres (2002), IMS, Fast Forward Research and Psyma International Medical (2005).

The wall chart is designed to be a practical guide that illustrates the main groups of influencers on prescribing a pharmaceutical product. It also highlights the types of marketing research projects that could be conducted during the life cycle of a prescription pharmaceutical product. We do not suggest that every influencer and marketing research approach needs to be contacted/conducted for every situation.

The wall chart only shows influencers and marketing research up to one-year post launch; however, it should be assumed that similar post launch issues apply throughout the full product life cycle, although to a greater or lesser extent. Soon after launch, close monitoring is called for. Later in the product's life cycle the research programme will depend on, for example, whether the product is to be relaunched, repositioned etc.



This guide provides more information and attempts to clarify some of the issues involved. Within the guide a summary table shows what type of marketing research could be conducted using the different groups of influencers as a sample at each stage in the product's life cycle.



Lexicon

The update of the Lexicon is now complete and over 100 new terms have been added and you will find a copy in your delegate bag.

HOW YOU CAN BECOME INVOLVED IN THE PRM&T COMMITTEE WITHOUT BEING A MEMBER

There are many ways you can be involved in the activities of the PRM&T Committee – here are just some:-

- We are always looking for course and workshop speakers
- Course and workshop convenors is another way to become involved
- We regularly update and extend our publications – contributors are always welcome

If you are interested in any of the above, or other ways to become involved please see visit the PRM&T poster session at the EphMRA Conference, or speak to any PRM&T member.

PRM&T & The Foundation Board

The PRM&T and the Foundation Board have a permanent link via the representation of a PRM&T committee member on the Foundation Board. Currently this is Jeremy Lonsdale, who will serve a two-year term. We liaise closely and work together on some projects and always obtain feedback for each others projects.

PRM&T Committee Member Profiles



Bob Douglas – Managing Director - Synovate Healthcare, Europe and Asia Pacific. Joined in June 1999.

Convenor of:- The Research Toolbox, Harnessing the Potential of the Internet, The Online Research Revolution, Internet Research Pushing the Boundaries, How Internet Research has Changed our Lives, Global Significance of Customer Satisfaction and Brand Equity Management. Bob also presents at the Basic Training Course, The Research Toolbox, Brand Equity Management and many of the Internet workshops. Bob was also a previous member of the working party to update Research Through the Product Lifecycle.



Kurt Ebert – Market Research Manager - F. Hoffmann La Roche Ltd. Joined in June 2002.

Convenor of:- Brand Equity Management, Gaining Understanding and Insight with Conjoint and Discrete Choice Models. Kurt is also a speaker at the Basic Training Course.



Cécile Ecoffet – Global Market Research Analyst - UCB Pharma. Joined in June 2004.



Ruth Evans – Vice President Client Services Europe - IMS Health. Joined in June 2002.

Convenor of:- Basic Training Course, Evaluating Licensing Opportunities and Global Significance of Customer Satisfaction. Working Party Member for the update of Research through the Product Lifecycle. Ruth is also a speaker at the Basic Training Course.



Carolyn Fenwick – Business Analyst - AstraZeneca. Joined in March 2002.

Convenor of:- Segmentation – How to Target and Promote to the Customer Effectively and How Internet Research has Changed our Lives. Carolyn is also a presenter at Segmentation – How to Target and Promote to the Customer Effectively and The Research Toolbox.



Semra Grundy - Director, Global Marketing Information – Allergan, Europe & Africa Middle East Region. Joined in March 2002.

Convenor of:- Developing and Evolving Brand Workshop and Desk Researchers Course.



Stephen Grundy – Group General Manager - GfK Martin Hamblin Global HealthCare. Joined in March 2002.

Convenor of:- Positioning and Branding Getting it Right, Forecasting, Segmentation – How to Target and Promote to the Customer Effectively, Gaining Understanding & Insight with Conjoint and Discrete Choice Models, Value and Pricing: A Continuous Challenge, Developing and Evolving the Brand, Evaluating Licensing Opportunities, and How can Market Research help in Effective Portfolio Planning. Steve also presents at the Basic Training Course, Segmentation Course, Conjoint, Forecasting, Developing the Brand and Evaluating Licensing Opportunities and Value and Pricing.



Werner Gorath – Group Manager - Altana Pharma. Joined in September 2003.

Convenor of:- Role of Marketing Research In Pharmaceutical Forecasting and Global Significance of Customer Satisfaction.



Janet Henson – PRM&T Chair - Appointed by EphMRA in June 2001.

Janet is a previous President of EphMRA and previous Executive Committee Member. She also chaired the former MIDAS committee and served on the Classification Committee, Medical Data Committee and Former Members Council. Janet has over 20 years International Pharmaceutical Market Research experience gained in Pharma companies and Agencies.



Jeremy Lonsdale – Director - Aequis Research. Joined in June 2002.

Convenor of:- Global Significance of Customer Satisfaction and Brand Equity Management. Jeremy also serves as the PRM&T representative on the Foundation board. Working Party Member for the update of Managing a Research Project.



Baerbel Matiaske – Business Development Manager - GfK Global HealthCare. Joined in June 1999.

Convenor of:- Four Basic Training Courses and shortly a 5th course, How Internet Research has changed our lives and Positioning and Branding – Getting it Right. Barbel also presents at the Basic Training Course, Segmentation – How to Target and Promote to the Customer Effectively, Internet workshops and The Research Toolbox.



Dorothy Parker – Managing Director - Fast Forward Research. Joined in September 2003.

Convenor of:- The Research Toolbox and Segmentation – How to Target and Promote to the Customer Effectively. Dorothy also presents at The Research Toolbox and Segmentation Courses. Working Party Member for the update of Research through the Product Lifecycle.



Xander Raymakers – NV Organon. Joined in March 2003.

Convenor of:- Basic Training Course, Evaluating Licensing Opportunities and Masterclass – Beyond the Norm – Advanced Qualitative Research Techniques. Xander also presents at the Basic Training Course, Desk Researchers course and Evaluating Licensing Opportunities Workshop.



Alexander Rummel – Managing Director - Psyma International Medical Marketing Research. Joined in October 2004.

Convenor of:- Role of Marketing Research in Pharmaceutical Forecasting and Gaining Understanding and Insight with Conjoint and Discrete Choice Models. Working Party Member for the update of Research through the Product Lifecycle.



Fred Thomas – Senior Director - Celgene. Will join the committee in June 2005.



Peter Winters – Managing Director - Brand Health International. Joined in June 2001.

Convenor of:- Desk Researchers Course, Positioning and Branding – Getting it Right, Forecasting and Masterclass – Beyond the Norm – Advanced Qualitative Research Techniques. Peter also was the previous representative on the Foundation Board. Working Party Member for the update of Managing a Research Project.

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Report from "Segmentation – How to Target and Promote to the Customer Effectively"

March 2005

The two day EphMRA PRM&T training course on segmentation was designed and convened by Stephen Grundy (GfK Martin Hamblin), Carolyn Fenwick (AstraZeneca) and Dorothy Parker (Fast Forward Research). It was enthusiastically attended by 13 delegates from both industry and agency backgrounds.

A balanced programme of presentations and highly interactive workshops explored theory and practice; strategy and tactics; which enabled the delegates to apply some of what they had learned and to appreciate the implications of advice they were hearing from the speakers, sharing experiences and discussing in open forum and breakout groups. The energy and commitment of delegates and speakers ensured a very productive two days.

Delegates were exposed to a thorough grounding in a variety of topics about segmentation within the unique environment of the healthcare industry. The details of why, when, where, who and how to implement segmentation were all addressed – not without controversy and challenges from the floor – and there was considerable discussion around the dual role of segmentation – in strategic planning and tactical implementation.

Stephen Grundy and Carolyn Fenwick introduced the programme with a review of the role and value of various segmentation approaches in healthcare. Theory and case examples illustrated how segmentation could enhance the effectiveness of a healthcare company's strategy, portfolio and the brands within an optimised portfolio. i.e. to derive competitive advantage. They also shared some thinking from the consumer world.



Left to right: Dorothy Parker Fast Forward Research, Stephen Grundy GfK Martin Hamblin and Carolyn Fenwick AstraZeneca.

Trevor Brown (Premark Services Ltd) reviewed some of the important issues to consider before embarking on a segmentation project. He drew from experience and case examples taken from work done in supporting development projects. Trevor communicated how segmentation makes competitive advantage and differentiation possible and urged the industry to be pro-active about segmentation; to drive its own segmentation and positioning or risk this being driven by competitors' aggressive strategy. This session was concluded with a workshop debate about the factors that should be used to segment healthcare markets.

Dorothy Parker presented and discussed the value of qualitative research in segmentation and the various types of segmentation including needs-based and psychographic approaches. Qualitative research has a role both prior to and following the collection and analysis of quantitative data for segmentation. She emphasised the need to use qualitative work and some projective/enabling technique tools to identify the deep-rooted differentiators and beliefs i.e. the values that drive the behaviours. Communications and key messages could then be designed accordingly to focus on optimum segments. The delegates followed the session with lively experimentation; they set up and moderated mock focus groups, teasing out factors for use in a segmentation study!

The industry is showing a growing interest in the quantitative segmentation approaches reviewed by Stephen Grundy. He demonstrated who to and how to segment; and revealed how segmentation solutions, based on needs, psychographics and patients' key symptoms often yield meaningful insights and actionable recommendations. Stephen also reviewed the strengths and weaknesses of various data collection approaches.

Stephen's session dovetailed into the important presentation given by Beverley Henry (GfK Martin Hamblin Marketing Sciences Group). Beverly gave a statistician's perspective on the strengths and weaknesses of both traditional data analysis methods, such as factor and cluster analysis and newer approaches such as latent class analysis and decision trees.

One insight that emerged during the discussion on latent class analysis, was the strength of this technique to identify hidden or latent variables. For example, you can't question a physician directly about how good they are at treating a certain disease, but by analysing responses to other variables latent class may predict latent variables which drive segments such as "uninformed", "pro-active and informed" etc.

Bärbel Matiaske (GfK HealthCare) provided case histories to bring alive quantitative segmentation solutions. She revealed the utility of segmentation in helping companies understand their target audience and markets in depth. The cases illustrated the strengths and utility of various approaches. Bärbel's talk provided an excellent demonstration of a number of ways to segment a population - whether consumers, patients or physicians - according to beliefs or behaviours - while adding the cautionary note that the key to a successful project is to focus on the main purpose of the segmentation and how the results are to be applied.

The sessions presented by Stephen, Beverley and Bärbel helped set the scene for the workshops, where delegates were tasked to look at data sets for patient segmentation and physician segmentation and to develop actionable segmentation solutions from the information provided. Theory and learning were put into practice and the teams developed insightful segmentation solutions and developed key strategies and tactics for the key segments; demonstrating advanced marketing skills.

Finding a way to segment i.e. understand your market is only the first step and utilizing segmentation results is an important area. An expert's view of segmentation was provided by Paul Jones (IMS Health). Paul also provided more food-for-thought by addressing a few of the issues around targeting of customers from a tactical point of view. Paul recommended that we choose the appropriate and optimum means of differentiating between our customers NOT just historical prescribing behaviour.

The course ended but not the debate, especially with regard to effective implementation and utilisation of segmentation solutions.

Delegates on Segmentation – How to Target and Promote to the Customer Effectively



Pami Alvesalo
Finnish Pharmaceutical Data



Stuart Bartlett
Synovate



Caroline Bravo
Boston Scientific



Nicola Frost
Novartis Ophthalmics



Barbara Hammacher
F.Hoffmann-La Roch Ltd



Andrew Hobbs
Pope Woodhead and Associates



Lotta Lehtinen
Finnish Pharmaceutical Data



Oi-Lin Man
SKIM Analytical



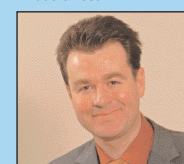
Vicky McLennan
GfK Martin Hamblin
Global HealthCare



Wendy Nuttall
GE Healthcare
Biosciences



Ceri Rothwell
Fast Forward Research



Thomas Weid
Psyna international
medical marketing research

Also a delegate -
Michal Zarbecki,
Abbott Laboratories

FOUNDATION UPDATE

News from the Foundation Board

The EphMRA Foundation has been established to support and fund original projects in the international healthcare marketing research and business intelligence fields. EphMRA Member companies will be able to benefit from these added value projects since they will provide incisive information and knowledge and address important issues - relevant to the Industry today and tomorrow.

The EphMRA Foundation retains full copyright and publishing rights to each completed project and will publish the findings to all EphMRA Member Companies and any other relevant parties. Joint projects are also undertaken with our allied organisation, PBIRG.

BOARD VACANCIES

There are currently 2 vacancies on the Board and we are looking for interested and motivated persons to support the Foundation in its role.

There is:

1 vacancy for a Full company member

1 vacancy for a member of Academia

Applications are invited – please use the Foundation Application form available from the web site at www.ephmra.org

The Foundation Board is currently:

**Su Meddis - AstraZeneca, UK - Chair
Business Analyst
Member since January 2005**

**Sally Birchall - Chugai Pharma Europe, UK -
Associate Director, Marketing Research
Member since January 2005**

**Jeremy Lonsdale - Aequus Research, UK - Director
PRM&T representative**

**Dan Fitzgerald - V2 GfK, USA - Executive Vice President,
Operations, Associate Members Group Contact
Member since April 2005**

**Angela Duffy - The Research Partnership, UK - Director
Member since June 2005**

**Sue Marett - GfK Martin Hamblin Global HealthCare,
UK - Global Research Director
Member since June 2005**

**Bernadette Rogers
EphMRA General Secretary**

HOW YOU CAN HELP THE FOUNDATION

1. Proactively make Suggestions for topics and projects
2. Apply to join the Board when vacancies are advertised
3. Work as part of a Foundation Project Team – we email out asking for volunteers to help work on our projects. This means that you can become involved in the work of the Foundation but do not have to commit to being a full Board member.
4. Give feedback and input on the value and utility of current projects

PROJECTS IN PLANNING

EphMRA / PBIRG Project -
See the Doctor Statistics Request for Proposals for more details.

Submission Deadline – 8 July 2005

The EphMRA / PBIRG report entitled Doctor Statistics has been a very successful project and a report welcomed and used by many members. The current report was completed in 2003 and the data now needs to be firstly, updated and secondly, expanded to include new countries/regions and specialities.

The current report covers 8 countries (USA, Canada, UK, France, Germany, Italy, Spain, Japan) and a wide range of specialities.

The Foundation has decided to considerably expand the Doctor Statistics report, including not only an update of the current data but to also initiate 4 new regional reports and to invite proposals for 5 separate projects as follows:



Project 1

An update to the current Doctor Statistics Report on 8 countries – grant of 10,000 euros. The expectation here is to considerably improve on the data quality and scope, not only re-visiting the data sources accessed last time to update the statistics but also to proactively find new sources which will proactively improve and validate the data found in the report. We are looking for proposals which will considerably enhance the value of this report to members eg by addressing issues such as specialists with mixed office and hospital practice where relevant to specific markets.

Project 2

A new report on Doctor Statistics – featuring Sweden, Finland, Denmark, Norway – grant of 7000 euros.

Project 3

A new report on Doctor Statistics - featuring Argentina, Mexico, Chile, Brazil – grant of 7000 euros.

Project 4

A new report on Doctor Statistics – featuring China, South Korea, Taiwan, Australia – grant of 7000 euros

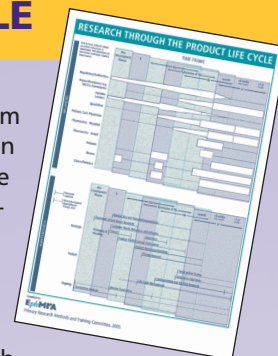
Project 5

A new report on Doctor Statistics in India – grant of 2500 euros. We are looking here for a report in two parts:

1. a qualitative overview of the healthcare structure in India and comments on reasons why statistics vary across specialities;
2. a comprehensive quantitative report on doctor statistics following the established structure of the existing report (Project 1).

RESEARCH THROUGH THE PRODUCT LIFECYCLE

This Foundation project sprang from the paper based PRM&T publication and wall chart Research through the Product Lifecycle. A need was identified to create a web based Compendium of research sources.



A Product Lifecycle Compendium was published to the EphMRA web site in 2004, which made available a web based compendium of lists of useful articles, book, web sites and other reference materials to enable market researchers to find relevant and reliable information.

The PRM&T publication has now been extensively revised by the Committee and the Foundation will be initiating an update in 2005.

Other projects will soon be announced.

COMPLETED FOUNDATION PROJECTS

2003

Research Through the Product Lifecycle - Research Reference Compendium/Wallchart

Conducted by J.Wagster Consulting

The aim of this project was to create a web based compendium of lists of useful articles, books, web sites and other reference materials so that when researchers wish to find information on say Pricing Research or Segmentation etc you can go to the Research References and web link to relevant information.

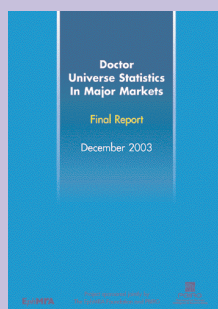
2003

Doctor Statistics Report

Conducted by Schmitow Ubeira, Spain.

EphMRA and PBIRG jointly funded project - available at www.ephmra.org - use your password to access the report. You can also order a paper copy on line.

This project fulfils a long-standing need of international pharmaceutical researchers for better access to doctor universe statistics. There has been tremendous support and enthusiasm for this project, particularly from agencies, reflecting how useful this guide could be. Many thanks to Schmitow Ubeira, Spain for conducting the study with such dedication.



The brief for the project was as follows: to establish Doctor number/populations across Canada, France, Germany, Italy, Japan, Spain, UK and USA.

The sources of the statistics were given – e.g. addresses of associations, contact details for each country. Information included was accurate total universe numbers as well as key demographics across 20-30 specialities – e.g. whether hospital or office based, age breakdown. EphMRA/PBIRG accept no liability for any errors in the report, nor from use of data.

2003 - 2005

What makes Market Research Useful [or not] to Product Managers

Conducted by Synovate Healthcare

This study aims to explore and identify what drives perceptions of value of Market Research amongst end-users within pharmaceutical companies.

The original focus of the project was on local and international Product Managers. The methodology is qualitative, using 16 in-depth interviews (8 US / 8 EU).

The scope is being broadened in 2005 to survey the opinions of another important end-user of Market Research – Business Development Managers and those involved in in-licensing decisions. Once again the approach used is qualitative, and the target sample is 8 US-based and 8 EU-based respondents.

Respondents were asked about:

- nature and purpose of interactions with the market research function
- involvement in the market research process and decision-making
- perceptions of usefulness of Market Research projects: what makes research more or less useful
- perceptions of role of market researchers
- factors that limit using Market Research

Data collection is ongoing, and results will be available in Summer 2005.

2001

Verification of the Internet as a Research Tool

Conducted by PSL Research

Pharmaceutical executives need to make the best decisions they can within the business environment of the early 21st Century. To help them do this, market researchers will more and more be expected to understand the research environment afforded by the Internet so that they can provide accurate and fast information, often at a global scale. This research project was designed to help meet this need and was undertaken in France, Germany, Italy, UK and the USA.

Market researchers need to know the detail of the type and quality of information that the Internet can generate, particularly compared to an equivalent phone interview. The types of hypotheses which were tested in this research included:

- The Internet is not an appropriate methodology for conducting studies into 'awareness of drug therapies'
- The Internet can generate more accurate prescribing information than phone interviews
- Respondents tend to exaggerate within phone studies in terms of the numbers of patients seen, volume of drugs prescribed and likelihood to prescribe a new compound.
- Differences in the detail of response from doctors in various countries (such as with open-ended questions) is often due to differences between interviewers in phone studies rather than national differences between doctors.

1999

Assessing the Cultural Impact on How Questions are Answered: An Application of Bias Correction

Conducted by Total Research

Experienced market research professionals within the global pharmaceuticals industry can speak volumes on the caveats and assumptions applied when analysing comparative findings across different geographical markets. Our qualitative sense tells us that Italian physicians are more likely to overstate their impressions and intent when evaluating a profile

for a new product, while British physicians may be much more sceptical. However, little has been published in our industry to assist market researchers to develop a robust, analytical approach to adjusting raw data from quantitative multi-country research for these recognised cultural differences.

This programme of original research was conducted with objectives to address the following:

- How real is our qualitative sense regarding the cultural differences in how physicians respond to a quantitative battery of questions when assessing impressions and prescribing intent after concept exposure?
- If significant differences do exist, can they be quantified and adjusted to provide more accurate interpretation of intended behaviour?
- Do the cultural nuances that describe these response behaviours differ greatly between physicians and consumers, in general?
- Can algorithms developed to adjust for cultural differences observed in consumer research be applied to physician studies in ethical pharmaceuticals?

1998

Perception and Reality in Prescribing

Conducted by Warwick University, Dr Philip Stern

This project aimed to provide benchmarks against which pharmaceutical marketers can both plan and evaluate their marketing programmes for both existing and new ethical medicines. Also to examine how closely survey-based research reflects actual prescribing behaviour. Surveys using self-reported behavioural and attitudinal data form the bedrock of the pharmaceutical marketing planning process. If actual GP prescribing behaviour differs from that which is self-reported, then the predictive power of much current research could be improved by bearing these differences in mind.

Project Aims

The project compared beliefs about GP prescribing in the UK, Germany and France with actual behaviour and starts to reconcile any differences which are found.

Committee Meetings and AGM Schedule

MR=Maximising Reach



Thanks to the 2005 Programme Committee for steering the Berlin programme

Barbara Ifflaender	Altana Pharma, Germany - barbara.ifflaender@altanapharma.com
Marianne Schiller	Schering AG, Germany - Marianne.Schiller@Schering.de
François Feig	Merck KGaA, Germany - francois.feig@merck.de
John Branston	PSL Research Europe, UK - JohnB@pslgroup.com
Nigel Burrows	IMS-Pitre, Italy - nigel.burrows@pitre-italy.com
Stephen Godwin	Synovate Healthcare, UK - Stephen.Godwin@synovate.com
Baerbel Matiaske	GfK HealthCare, Germany - Baerbel.Matiaske@gfk.de
Janet Henson	EphMRA Conference Organiser - janet.henson@wanadoo.fr
Bernadette Rogers	EphMRA General Secretary - MrsBRogers@aol.com

**EphMRA COMMITTEE MEETINGS, ASSOCIATE MEMBERS GROUP MEETING,
AGM, & TRAINING WORKSHOPS**

MONDAY 20 JUNE

	EphMRA Committee Meetings
0900 – 1800	Classification Committee
1400 – 1700	PRM&T Committee
Evening Free	

TUESDAY 21 JUNE

	EphMRA PRM&T Committee Training Workshops
0900 – 1700	Gaining Understanding & Insight with Conjoint
0930 – 1700	Advanced Leading Edge Research Master Class Beyond the Norm – Advanced Qualitative Research
0700 – 0830	Delegate Breakfast – Sponsored by EphMRA
	EphMRA Committee Meetings
0900 – 1800	Classification Committee
0900 – 1700	Database & Systems Committee Medical Data Committee NFC Committee Market Intelligence Committee (formerly Sales Data Committee)

1300 – 1700	Foundation Board
1000 – 1700	Executive Committee
1700 – 1830	Joint Meeting of Executive Committee & Committee Chairman
1400 – 1700	Associate Members Group Meeting
1900 – 2000	Welcome Reception – Sponsored by EphMRA

WEDNESDAY 22 JUNE

0700 - 0845

Welcome Delegate Breakfast – Sponsored by EphMRA

EphMRA AGM

0830 – 0845
0845 – 0945
0945 – 0955
0955 – 1000
1000 – 1010

CLOSED SESSION (For Full EphMRA members/PBIRG only – except by invitation)

EphMRA Presidents Report
EphMRA Statutes – Changes and Reaffirmation and Vote
EphMRA Treasurer's Report and Vote
Discharge of Executive Committee
Discussion & Questions
Election of Officers: President, Vice President, Treasurer & Executive Committee Members
Incoming President's & Vice President's Address

1010 – 1020

OPEN SESSION (For Full and Associate EphMRA members/PBIRG only – except by invitation)

1020 – 1050
1050 – 1055
1055 – 1105
1105 – 1120
1120 – 1130
1130 – 1140
1140 – 1150
1150 – 1200
1200 – 1210
1210 – 1220
1220 – 1225
1225 – 1240
1230 – 1400

Committee Poster Session and AGM Delegate Coffee
EphMRA President Welcome
Address by PBIRG President
Classification Committee Report
Database & Systems Committee Report
Medical Data Committee Report
Market Intelligence Committee Report
PRM&T Committee Report
NFC Committee Report
Foundation Board Update
Associate Members Group Report
Discussions and Questions
Delegate Lunch – sponsored by EphMRA – open to all delegates LA Café.

Chair of EphMRA New Form Codes Committee - Applications invited.

EphMRA is seeking to appoint a Chair of the NFC Committee.

The work involved is approx 5-6 days per year:

- Reviewing and Approving Form 10s
- A face to face NFC Committee meeting at the AGM
- Meeting with Executive Committee and making the AGM Presentation
- Review of meeting minutes, preparation of reports, presentations to AGM and replying to NFC enquiries.

A non-remunerated position with applications invited from pharmaceutical company persons.

Contact EphMRA General Secretary MrsBRogers@aol.com

Diary...

September 19-20, 2005

Education Workshop Series and Industry Networking Event

November 15, 2005

Industry Networking Event | Satellite Location TBA

EphMRA
Associate Member 2004/05



EphMRA



Post Conference News

The Post Conference News will be mailed out at the end of August 2005. This gives a comprehensive overview of all the Conference papers as well as reports from the Training courses.

If you would like to advertise in the News please let EphMRA know by 8th July - contact MrsBRogers@aol.com

Advertising Specification

	No bleed	With bleed	Type area
Full page	297mm x 210mm	307mm x 220mm	277mm x 190mm
Half page horizontal	148mm x 210mm	158mm x 220mm	128mm x 190mm
Half page vertical	297mm x 105mm	307mm x 115mm	277mm x 185mm
Quarter page	148mm x 105mm	158mm x 115mm	128mm x 185mm

Resolution/Artwork

If using photoshop or software dependent on resolution please ensure that it is set at the correct size and that the resolution is set to no less than 300dpi. Finished artwork needs to be supplied in CMYK (unless in Black & White). Finished artwork needs to be supplied in CMYK (unless in Black & White). Finished artwork needs to be supplied in CMYK (unless in Black & White). Finished artwork needs to be supplied in CMYK (unless in Black & White). PLEASE NOTE: We cannot be held responsible for any misprint, if fonts are not embedded/converted and the file is not in CMYK.

Operating System

Apple Mac

Programmes used

Quark Xpress, Adobe Illustrator, Freehand, Adobe Photoshop

Media

Compact Disc, Zip Disc, Floppy Disc and Email are available.

File Formats

Graphics should be supplied (CMYK) in the following formats EPS, TIF, JPEGs.

Prices (CHF)

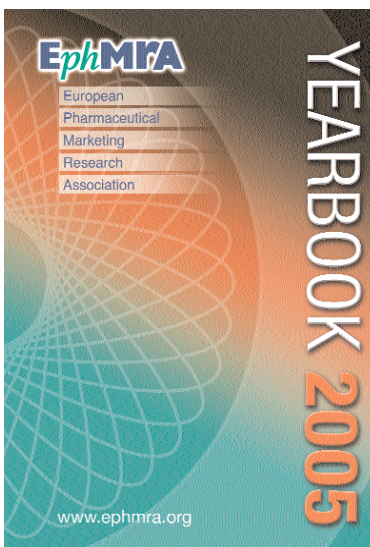
	B & W	Colour
Quarter page	300	500
Half page	500	750
Full page	800	1200

CHF = swiss francs

Deadline July 8th

JOIN EphMRA AS AN ASSOCIATE MEMBER

New membership brochure will be mailed in September 2005.
The current membership year ends 30th September and your current membership is automatically renewed
Register on-line: www.ephmra.org



Yearbook 2005 -
Available at the Berlin Conference and mailed in July.

www.ephmra.org

EphMRA

2006 Pharmaceutical Marketing Research Conference

Contributions & Synopses Invited

Deadline 23rd September 2005

TRUTHS
MYTHS & THE
FUTURE

21st - 23rd June
Athens 2006

in conjunction
with the 45th,
Annual EphMRA
General Meeting,
19th - 21st June 2006

Challenging Ideas

European Pharmaceutical Marketing Research Association

New People/ Promotions



Mike Pepp has joined as Research Director to the Insight team. Mike was previously with Context Research International and his experience spans 10 years of qualitative research in the pharmaceutical sector.



Dominic Trepel has also joined the Insight team as Senior Researcher. Dominic holds a Physiology & Pharmacology degree from UCL and brings valuable client side experience, having worked for Pharmacia and Cenes Pharmaceuticals. He is also a member of the ABPI.



DOUBLE HELIX DEVELOPMENT

Double Helix Development UK office announces the following new appointments:

Barry Crook as Project Manager with prior experience at NOP
Katie Brinn as SRE, with prior experience at IMS Health



NOP World
United Business Models



NOP World Health has appointed **Alan John** as European Business Development Director. Alan has twenty years pharmaceutical industry experience on both client and agency sides and joins from TNS Healthcare where he was global business development director.



Fast Forward Research
Quality research. Faster than ever. Guaranteed.



Fast Forward Research has appointed **Rachel Rae** as Research Executive. Rachel joins from Wirthlin Europe where she was responsible for global marketing research projects. Prior to this Rachel worked for AstraZeneca in their European Business Services where she utilised her fluent French language skills.



Gaku Sasaki has joined Synovate Healthcare in Japan as General Manager, CustomResearch Services Division and in this position he will have operational responsibility for all of Synovate Healthcare domestic and international custom research business in Japan. He has more than 15 years experience in market research.



Anja Visser

The Research Partnership announces that **Dr. Anja Visser** joins as a Research Manager from SKIM Analytical Healthcare in the Netherlands and **Celia Dacombe** joins as Marketing Manager. Celia has over 16 years experience in sales and marketing - initially in the publishing area and latterly with ISIS Research.



eQuesta, Fieldwork International's online division announces that **Lyndon Woods**, a field co-ordinator with 7 years experience from Research International, is now overseeing the development of their expanding physician panel.



At the CAM Group, **Milena Brankova** has expanded her regional responsibilities beyond that in the US and is now Regional VP/Director of Operations of USA, Latin America (Argentina, Brazil and Mexico) and Puerto Rico. In addition, **Jean-Baptiste Angeloglou** has been appointed VP Regional Director of France, Belgium, The Netherlands and Luxembourg.



Robin Maiden has taken on the role of Senior Consultant within the Consultancy Practice of Pope Woodhead and Associates. His major interest is to uncover the emotional and often irrational triggers to consumer behaviour and to describe "the mind of the market".

Service NEWS



Synovate Healthcare has launched the Hepatitis C Monitor in the USA which is based on a representative panel of physicians who regularly report on their treatment of HCV patients in the US so that changes over time can be monitored.



Fieldwork International now has video-streaming at its viewing facilities in Fulham, London. This enables clients to view focus groups or interviews in real-time via an internet connection on their pc from anywhere in the world.

Company NEWS



Brand Health International is a new pharmaceutical market research agency specialising in the use of innovative quantitative techniques to measure functional and psychological elements of branding.

Brand Health International
Wellington House
15a Leyton Green, Harpenden, Herts AL5 2TG
Contact Peter Winters
Tel +44 1582 766 475
Fax +44 1582 461 359



GfK Martin Hamblin

At the recent Annual Conference of the PBIRG (Pharmaceutical Business Intelligence Research Group) in Boston, **Allan Bowditch, GfK Martin Hamblin Inc.**, was awarded a "Lifetime Achievement Award" for his contribution to the industry.

He continues to assist in a number of areas where he is passionate about trying to improve the standards of those who strive to excel in their market research careers.

In 2002, Allan was awarded the EphMRA Contribution to Pharmaceutical Marketing Research Award.



Interested in submitting copy for the News?

If you would like to submit copy for possible publication in this Newsletter then contact EphMRA at MrsBRogers@aol.com.

Guidelines for articles and copy are available. EphMRA reserves the right to edit/adjust any material submitted.

Articles published in the EphMRA News do not necessarily reflect the opinions of EphMRA.

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WHEN GLOBAL EXPERTISE MATTERS IN MARKETING RESEARCH

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