

How robust is your information?

CASE STUDY

2018

BACKGROUND

Our client had recently completed a successful merger. Intriguingly, both legacy companies had a product on the market for exactly the same condition. Arch competitors had suddenly become the same company.

The Medical Affairs department was concerned that each of the two branches (of what were now the same company) were engaging exactly the same external organizations, for very similar activities. In effect, the company was doubling its efforts and resources to achieve the same outcomes. In addition, as a result of the merger, the budget allocated to engage with external organizations, such as medical associations and patient advocacy groups, had been reduced by more than half. Therefore, the drive to ensure the new company was allocating its resources and efforts effectively was intense.

Our client approached MMRG in an effort to accomplish three main things. Firstly, to disregard the established wisdom of both legacy organizations and conduct an independent and objective review of the medical associations and patient advocacy groups relevant to their chosen condition.

Secondly, to create one unified and contemporary list of these external organizations to engage in the future.

Finally, our client only wanted to engage with organizations that were financially viable and transparent.

KEY ISSUES

This was a global project. Our client specified a range of markets within five continental areas: North America, Latin America, Europe, Australasia and Asia-Pacific. In many respects, we were dealing with lots of different companies, in lots of different markets.

The targets for this research project were not individual people, but whole organizations. Furthermore, once a group of associations or patient advocacy groups had been isolated, our client wanted MMRG to conduct direct, in-depth interviews with some key personnel within each organization.

Both companies had built up a cohort of professional medical associations and patient advocacy groups with whom they had developed 'strong' relationships. As a result, they were guarded, and concerned that MMRG's research results would show their previous work in a bad light.

The requirement to build up a detailed picture of each association's operating structure, with a focus on its funding mechanisms and transparency, required financial reporting skills that were quite different from the scientific skills usually deployed in KOL research.

How robust is your information? **Cont'd**

KEY LEARNINGS

The most significant learning from this project was the discovery that, in the five years since both legacy companies had conducted research into this topic, the majority of external associations and patient advocacy groups no longer existed in their original form. They had either closed, merged, changed their name, or had been relegated in influence by new entrants to the marketplace. It turns out that the churn among influential organizations, at least in this condition, is high.

Secondly, without disclosing any information about the client company, we found that virtually all professional medical associations were unwilling to open discussions and participate in investigatory research being undertaken by a third party company – they only wanted to engage with the pharmaceutical company directly.

Despite being instructed by the client to deliver a hard copy, written report on the research findings, we simultaneously developed an online, interactive report. Over time, more people engaged with the online report than they did with the hard copy report requested by the client, which proved very encouraging for MMRG, and provided our client with valuable learning outcomes.

To be sure you're talking to the right people, talk to the right people.

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