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DTC: New tools, old rules

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The shiny new toys pharma marketers have at their fingertips may inject innovation into direct-to-consumer advertising, but tools themselves are not enough; marketers and manufacturers still need to be mindful of key relationship-building principles to find success.

by Cara Latham

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The state of direct-to-consumer advertising has been evolving over the past five years, as marketers and manufacturers look to capitalize on the digital and mobile opportunities new technology brings. Even as DTC advertising includes more digital, social, and experiential marketing strategies, industry experts believe successful marketers focus more on the goals they hope to achieve with their campaigns and the relationships these tools can help build, and less on the digital tools themselves.

With these relationships in mind, marketers have been crafting better mobile strategies to get information about their brands – and the conditions themselves – to consumers as a way to improve patient education. As more people take control of their health and actively search for information about their conditions and treatment options directly from their mobile devices, marketers should target audiences who may be receptive to obtaining information about their brands in these hand-held platforms.

However, marketers and manufacturers can easily fall into the trap of wanting to be digitally innovative because of the shiny, new digital object. Determining what is best for the brand requires advertising professionals to get back to basic DTC principles as they look at new technology: who are the audiences, and what is the best way to reach them?

Creating patient communities

Marketers are getting better at identifying where their patient base is located, how to mobilize these patients, and how to gain access to and zero-in on these groups, according to Mike Rutstein, CEO, Strikeforce Communications. Mr. Rutstein believes that DTC is not a standalone activity, and while its role can be a key growth driver, it is only one piece of an increasingly complex web of marketing drivers across payers, patients, and providers.

"Given the proliferation of new forms of media – particularly in the digital and mobile arenas – DTC may be becoming less 'visible' as it becomes more directly targeted to specific populations and in specific forums and communities where patients can congregate and provide support and motivation to each other," Mr. Rutstein told *Med Ad News*. "This is especially true in specialized areas, such as oncology and in rare diseases. This not only makes sense economically, but it provides anonymity, and the communication often necessary to educate and motivate patients."

Marketers are looking for ways to create online communities actively involved with a disease state or product. But this strategy comes with a built-in risk. "Obviously, you've got the issues of what people say on that site," says Bruce Rooke, chief creative officer, GSW Worldwide.

However, building communities that create a life of their own can keep the drug active in patients' minds, and

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advertisers who do so in a genuine manner can capitalize on the wisdom of crowds and the power of inspiration.

"It has to be done in an authentic way that doesn't sound self-serving as a brand, or else it would never work," says Marcee Nelson, chief content officer, The Well @GSW. "When we think about being authentic, it frightens us because you think, 'Everyone is going to see my flaws and see the downside,' but the trick is not in being perfect, but how we manage our imperfection as brands. If we own our whole story, people give you a lot of latitude, and that's where the wisdom of crowds comes in – the ultimate democracy that when things are said that are harsh, the crowd comes back and corrects it. It will find its balance. It's being brave enough to go out there as a brand and own your whole story with honesty."

Honing in on DTC strategies that target specific populations also yields benefits from a regulatory standpoint. Michael Sanzen, partner and chief creative officer, Concentric Pharma Advertising, says FDA has traditionally been concerned that the industry is targeting consumers who do not need a product, and these patients are going to doctors to get something they should not have.

"DTC marketers are better able to target the right audience, and so there is a lot less exposure to the wrong audience," Mr. Sanzen told *Med Ad News*. "This creates a lot less risk, and this targeted approach directly addresses some of FDA's concerns with mass marketing. What's still being scrutinized are ads that are appealing to the wrong audience, but we already know that approach – reaching out to a mass audience and hoping the right audience is in there somewhere – doesn't work.

"With targeted online marketing, you can spend \$4 million to \$10 million and have a high degree of accuracy versus spending \$80 million to reach a bunch of folks who aren't right for your product."

Searching for answers

With an eager base of consumers who are researching diseases, conditions, and treatments, marketers will need to build better solutions for Internet searches. Although organic search is not the flashiest strategy, the tool is still new and innovative for some brands because they have never before incorporated the method into their strategies, says Casey Williams, associate director, health sciences, iProspect, a global, digital marketing agency specializing in search engine optimization.

One organic search method that has generated better results on the Internet may come as a surprise to some – launching a YouTube page, which can open doors to innovative applications within the social networking site and be more effective than simply running commercials on the channel.

"It goes back to the idea that you need to be present where your consumers are, and consumers are on YouTube," Ms. Williams says. "It's the second largest search engine after Google. You might say, why would a consumer look on YouTube or want to see a drug commercial? The answer is that's where they like to consume information. Maybe they saw the commercial, and they didn't catch all of it, they had questions, or maybe their doctor mentioned something about it, and they were looking for it."

Some brand managers have discovered that YouTube users had already posted their brands' commercials on the site before they could launch official accounts for the products. The demand for online accessibility of the commercials and the information they contain prompted the brand managers to quickly create official YouTube channels, Ms. Williams says. In addition, pharma marketers view YouTube as one of the least risky social media sites for pharma because a channel administrator has more control and more flexibility in disabling other users' comments and designing the page. In addition, a brand's legal team may be more comfortable with YouTube because of the site's similarity to TV – one medium for which the team is already familiar with reviewing content.

"YouTube and other online video destinations are providing big impact for brands that wouldn't be candidates for traditional DTC marketing," says Ken Begasse, partner and chief operations officer, Concentric. "YouTube can meet all regulatory requirements and engages patients who are seeking information. As part of your marketing mix, it is effective because it is an immediately shareable, on-demand, visual product demonstration or brand message that is efficiently delivered across a multitude of channels."

Paid search can generate significant traffic for a DTC campaign, as long as marketers ensure they are driving the right audience to the sites.

"With paid search, you can make it very targeted in getting in front of those consumers in different parts of the funnel – they're just researching, or maybe they just came home from the doctor's office and the doctor has a concern about their high cholesterol level," Ms. Williams says. "You can get them at different parts of the funnel and hit them with an appropriate message."

Because of the high level of competition, marketers need to ensure that a brand's Website not only has the right content, but uses the right language – whether branded or not – so that search engines are able to access, read, and understand the content.

"When somebody is searching, they're asking for an answer, so it represents a really important opportunity to capture that demand," Ms. Williams says. "It's not like a mobile search or social media, but all of those tie back to organic search. It's one of those foundational elements every marketer needs to think about."

The mobile patient

Although the search mechanism on a mobile phone is different than that of a computer, marketers cannot overlook the importance of ensuring their brands are appropriately represented here: search is the second-most commonly

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performed activity on a mobile device.

"The percentage of patients who complete a search immediately before or after a visit to the doctor is incredibly high, and brands have to make sure the patient can find them when they conduct that search," says Ross Quinn, managing partner, director of integration, Concentric. "Patients show up prepared in the age of smartphones, and that has wide and varied implications for DTC pharma marketers."

Ms. Williams says mobile search is different on a technical level, as iPhones and other mobile devices do not read Flash, and a Website that is not mobile-friendly is hard to access from such a device. This is why brand marketers need to be mindful of creating a positive experience for mobile visitors, even if they do not actually have mobile sites.

With a more educated consumer and a system that forces a patient to take a more active role in his or her healthcare, marketers are also using mobile technology in a variety of ways to actually have a conversation with their audiences, says Jay Bigelow, CEO of MicroMass Communications.

"Consumers are now very comfortable using their iPhone or Blackberry to carry on, whether it's SMS or text-based messaging or visiting a Website or downloading information or doing a search," Mr. Bigelow says. "The kind of Web experience you can build for a desktop computer is very different from the one you can build for a mobile phone."

The first apps developed for mobile devices within the pharma industry hardly offered an element of interaction. Many contained copied information from the brands' traditional Websites and offered little reason for users to incorporate the app into a daily routine. The emerging trend is now to develop apps that incorporate the brand name but add value to a customer's life – something he or she would use daily to help manage a disease or condition.

"It doesn't necessarily say, 'Take this pill,' but whatever they're using it for, whatever malady they may have, they rely on the app whenever they need information," explains Joe Doyle, interactive director, HCB Health. "Any time that information comes up, so does your logo. It's an extra touch point. If you go back to Advertising 101, it's the theory that it takes nine touches before somebody really even considers your product. What we're starting to see is there's a definite shift to an electronic-based touch point that is allowing brands to stay on the minds of their consumers a little bit more."

Mr. Doyle points to the Zyrtec Allergycast app, which provides users with real-time information about air quality conditions to help them better manage their allergy symptoms. Users will know when to reduce their outdoor activities based on the levels of allergens that specifically affect them. Marketers theorize that a consumer's use of the app – and the frequency he or she sees the Zyrtec logo within the product – will establish brand recognition. The next time a consumer purchases a remedy for his or her symptoms, Zyrtec will be the first brand to come to mind, marketers believe.

Other examples include VaxTrak, an app by Novartis (novartis.com) that helps a user keep track of his or her family members' vaccinations, and GoMeals by Sanofi (sanofi.com), which can help a person with diabetes manage his or her diet by tracking calories, fats, carbohydrates, and protein. Sanofi is associated with the app, and every day that a consumer uses the program, the company will get an extra "touch point."

"It's all about the sub-conscious connection between brand and value," Mr. Doyle explains. "What we really try to tell people when we're rebuilding their sites and we're presenting a new user experience or new design is that the app has really taken over as your first perception of what people think of your brand. It's your door; it's your storefront now."

A move toward 'gamification'

In addition to mobile apps, the trend toward the development of digital games – referred to as "gamification" – has gained some traction within the industry, but industry experts say the same adage remains: fancy graphics and new capabilities are entertaining but are less important than the experience of the game.

"The right pharma-gaming experience can change behaviors around adherence, increase brand loyalty, and build community if properly integrated into social media," says Stacy Busking-O'Malley, account supervisor, Siren Interactive. "As an example, HopeLab developed a game for children with cancer called Re-Mission. Studies found that those who played the game had higher blood levels of chemotherapy and took their antibiotics more consistently than those who did not play. Gamers also demonstrated a higher rate of cancer-related information learning."

However, some brands have launched games that do not have any relevance to the condition or product, and they turn into lost opportunities, Mr. Rutstein believes. A game that is appropriate reinforces the brand message and simplifies a complex subject into something that engages, motivates, and educates the user.

Back to the roots

One long-lived trend of the industry is that pharmaceutical marketers will use the most efficient tools to drive return-on-investment, using the vectors that drive their business most effectively, says Jay Carter, senior VP, director of strategy services, AbelsonTaylor. "This means that there will always be reps, there will always be sales calls, there will always be education for patients so long as that education drives demand," Mr. Carter told *Med Ad News*. "And there will continue to be communication for select brands to the consumer, subject only to the control of the regulators."

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Although Mr. Carter does not believe "digital" is a fad, the core of the DTC business is the adult patient, age 55 and up.

"The digerati will be quick to point out impressive statistics showing how those patients are rushing to the Internet for their education," he says. "And that is true: in just the last 12 months, visits to Facebook by people 55 and up increased from 16 million per month to 23 million per month, an astounding 43 percent increase. However, note that the mainstay of DTC promotion, the network news, delivers 16 million 55-plus viewers every night. Given that same 43 percent growth per year, it will take 10 years for Facebook to catch up to the networks. As a marketer charged with driving business today, not 10 years from now, I expect to continue to rely upon Brian, Diane, and Scott for a while."

The future, though, is in mobile. "It's the one thing you will have on your person all the time," Mr. Rutstein says. "There is no communication that is going to be more relevant to you than something that's with you all the time because you can intervene at critical points in the lifestyle." For example, an emergency contraceptive manufacturer might develop a mobile app to send messages reminding consumers to take their pills after a busy Saturday night.

However, marketers must capture the moment of truth, regardless of the medium. "There are a lot of new things emerging, but the rules are the rules," Mr. Rutstein says. "A solid, tactical plan will always follow good strategy, not the other way around. People often try to back into the strategy by identifying what's cool and what's hot, and what they want to do from a tactical point of view, but it doesn't necessarily all tie to a single-minded strategy, and I think that's where a lot of marketers have found themselves in hot water."

Marketers must also present a message about a pharmaceutical product in the right place, at the right time. Mr. Bigelow says, for example, that a person who is online chatting with a friend is not receptive to a campaign for a pharmaceutical product – even if that person is a potential patient for the product. "You're not in the mood to see or hear it," Mr. Bigelow says. "I'd have to engage you at a time when you're doing searches online or visiting health sites or maybe involved in an online community for a particular condition."

Marketers spend too much time focusing on the channel and not enough thinking about the fundamentals of the trade. Too often, when a new medium or new channel opens up, a marketing team asks which current material can be re-purposed to fit that new medium, says Leigh Householder, VP, digital strategist, managing director of iQ, GSW's innovation lab. "But the opportunity to really change behavior or drive incredible change in your DTC is to ask the question, 'What can we create that we could have never created before?' What door just opened that we could really use to change the game?"

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