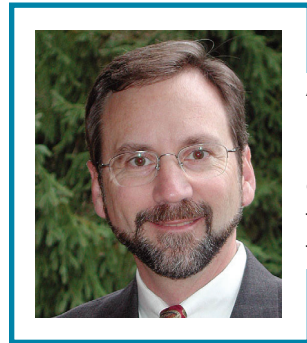


A Peek into the Ways Drug Companies Analyze Consumers

BY ANDREW HOLTZ, MPH



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I got a call the other day from a reporter at a public-relations newsletter, who was working on a regular feature about how to pitch stories to journalists. He asked me what kind of news releases I might want to receive from pharmaceutical companies. “Short ones,” I chuckled, adding that I get the drug study news I need from journals.

But then another thought popped into

mind. “You know,” I told him, “what I would really love to see are the market research studies.” Goodness knows we are inundated with crowing news releases when companies get favorable results from research on drugs, but when was the last time you heard a pharmaceutical company tout results of the research they do on us?

His question sparked memories of stories I’ve written about tobacco company market research. Company secrets began spilling out after a trove of internal documents literally landed on the doorstep of anti-tobacco activist and University of California San Francisco cardiology professor Stan Glantz, PhD.

In an interview a few years ago, Dr. Glantz told me about walking into his office in May 1994. There was a large express shipment box on his desk. The sender’s name: “Mr. Butts.” Inside the box were 4,000 pages of internal documents from the files of the Brown & Williamson Tobacco Corporation displaying 30 years of research, marketing, and legal maneuvering. The paper payload blew apart decades of tobacco industry secrecy.

“When I opened it and realized what they were, it was kind of like an archeologist discovering King Tut’s tomb or being let into Hitler’s bunker,” he told me. “I mean, it was this incredible view inside the tobacco industry. Just amazing.”

Since then, lawsuits and other sources have brought to light many more tobacco industry files. Most are available online at <http://legacy.library.ucsf.edu>

‘Goody-Goodies,’ ‘Preps,’ ‘Rockers,’ ‘Party-Parties,’ ‘Burnouts’

One of my favorites is titled “Successful Marketing to Younger Adult Smokers.” This R.J. Reynolds market research report from the 1980s sliced young people into segments including “Goody-Goodies,” “Preps,” “Rockers,” “Party-Parties,” and “Burnouts.” Each segment was linked to attributes along a spectrum from conformity to non-conformity.

While the “Goody-Goodies” and “Preps” were said to favor Mercedes cars and t-shirts with mild slogans, “Burnouts” just wanted to have wheels, any wheels, and might sport t-shirt slogans like “Time Flies When You Don’t Know What You’re Doing.”

The point, of course, was to help the company’s marketers aim effective messages at the people most likely to be drawn into smoking their brands.

What are Pharmaceutical Market Equivalents?

So, what are the pharmaceutical market equivalents of the “Goody-
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Pediatric Neurocognitive Screening Method Found to Be More Accurate than Parental Observation

BY ROBERT H. CARLSON

JCO 2008;26:
 4138-4143

While parents of childhood cancer survivors are typically watchful of neurocognitive problems that arise in their children, a recent study suggests that a 30-minute neurocognitive screening method is more accurate in identifying children at risk for future cognitive and academic difficulties and who need more comprehensive follow-up.

The researchers, from St. Jude Children's Research Hospital, said in an article published in the September 1 issue of the *Journal of Clinical Oncology* (2008;26:4138-4143) that their screening method is practical, cost effective, and clinically useful. Further, they said, it offers a more specific and sensitive evaluation than parents' observations.

As many as 40% of childhood cancer survivors may experience neurocognitive impairment in areas such as processing speed, attention and memory, noted the



St. Jude Children's Research Hospital Biomedical Communication

authors, led by Kevin R. Krull, PhD, Associate Member in the Department of Epidemiology and Cancer Control.

They cited the Children's Oncology

KEVIN R. KRULL, PhD: "The longer out from diagnosis, the more likely a childhood survivor is to have cognitive problems. So if we catch this early enough, we may be able to retrain some of these underlying cognitive foundation skills such as attention and memory, to help future learning."

Group as recommending regular evaluation to monitor development after cranial radiation therapy and/or antimetabolite chemotherapy. But for a variety of reasons, including costs and time restraints—a full evaluation can cost \$1,500 and take four hours or more, the article notes—routine evaluations are difficult to implement.

Dr. Krull said in an interview that this screening method could be administered at annual follow-up visits by a technician or nurse.

The study included 240 patients ages six
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SCRIPTDOCTOR

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Goodies" and "Burnouts" market segments?

I turned to veteran market researcher Carol Morgan to get some insight into how drug companies analyze consumers. "In the long process of making and keeping a pharmaceutical sale, intuition and logic aren't reliable in determining what will motivate consumers," she wrote in a magazine article. Ms. Morgan and her partner, Doran Levy, PhD, have more than 35 years experience studying consumers for corporate clients, including pharmaceutical companies.

They have given labels to varieties of medical consumers such as "Proactives," "Faithful Patients," "Trusting Believers," and "Informed Avoiders." She says that if you show a TV drug ad to a couple of people from different segments, even if they have similar health situations, they are likely to respond quite differently.

"One, the 'Faithful Patient,' will say, 'Gee, that sounds really interesting. I'll go talk to Dr. Smith. Maybe he'll get me on this drug and that will solve my problems,'" Morgan explained. "And the other person [the 'Informed Avoider'] will say, 'Another disgusting ad! This isn't for me.'"

And those attitudes predict their likely behaviors. She says data show that Faithful Patients take far more drugs.

'Psychographic Segmentation'

Unlike demographic categories, such as "mothers with young children" or "college-educated retirees," or lifestyle descriptions that tote up favorite sports, TV shows, and the like, Morgan tries to understand consumers at a deeper level using what's called psychographic segmentation. In their book *Marketing to the Mindset of Boomers and Their Elders* (Attitudebase, 2002), Morgan and Levy lay out the results of more than a decade of study of 20,000 Americans. They synthesize their segmentation of medical

consumers into the Morgan-Levy Health Cube, in which "the four Health, four Health Compliance and six Health Information segments are combined to provide greater in-depth insight into patient motivation."

"What we are attempting to do is really look at these deep-rooted, deep-seated motivations or evidence of those motivations. Pharmaceutical companies are interested in those in order to position their products more effectively."

Her clients' ultimate goal? "Reach the greatest number of patients at the highest price."

But certainly people dealing with cancer are making treatment decisions based on the facts and advice they get from physicians, nurses, and pharmacists, right? TV ads for chemotherapy agents or supportive treatments remain rare, although Procrit (epoetin alfa), for example, was widely promoted on network news and other shows.

DTC vs DTP

Still, even cancer therapies are actively marketed to consumers, although rather than trying to blanket the country with Direct-to-Consumer (DTC) pitches, the makers of oncology products are more likely to employ DTP (Direct-to-Patient) campaigns.

Venues include magazines intended for patients and their families. For example, a 2006 review of advertising to cancer patients by Gregory A. Abel, MD, MPH, and colleagues not surprisingly found ads for Xeloda, Taxotere, Aloxi, Femara, Armidex, Emend, and other medications in a magazine for cancer patients.

The media kit claims that 14% of readers said their treatment decisions have changed because of something they read in the magazine, and that 20% of readers said they have requested information from at least one of the advertisers.

To pharmaceutical marketers, those requests are golden. Carol Morgan says

companies often use short quizzes or other techniques to pigeonhole consumers and then send them customized information: "They would be sent promotional materials that are appropriate for that segment. Or, if their segment is not very appealing to the pharmaceutical company, maybe they'll get less information. It's a way for the pharmaceutical company to justify an investment in this prospect."

Of course, everyone knows that patients are not all the same, and that it takes different techniques to motivate different people. But doctors and industry marketers just aren't in the same league. While most health care professionals learn their communications skills on the job, marketers take a far more sophisticated approach to understanding patients.

"I would say, unfortunately, that they are at opposite extremes," Morgan said. "Pharmaceutical companies are investing millions of dollars in this kind of research, studying their advertising to measure their effectiveness, and then spending money on their direct-to-consumer advertising versus, at the other end...it's still not at the level of the doctor quickly understanding what segment the patient is in."

Morgan says she and her colleagues are looking into developing tools and training to help providers do a better job deciphering patients, but for now it's as if doctors are getting by with only the findings of case series reports, while pharmaceutical marketers have the benefit of randomized, controlled trials and systematic reviews.

What's more, that vast knowledge base—with its rich insight to patient attributes, motivations, and effective interventions—is proprietary.

Maybe someday the vaults of pharmaceutical marketing studies will be pried open. Maybe someday a mysterious "Mr. Pills" will drop off a bulging box of internal documents, so we can see, in stark detail, what the medical marketers really think of us. ■