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Medical Information Series

Medical Information in the Digital Age

Quick and Efficient Meets Responsive
and Responsible



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MEDICAL INFORMATION (MI): OVERWHELMING DEMAND, UNDERWHELMING RESPONSE

Responding to healthcare professional (HCP) and patient requests for medical information (MI) is a time-sensitive matter. Unfortunately, most companies are ill-equipped to respond in a way that satisfies the need for speed while remaining compliant. This leaves HCPs scrambling for answers, and patients looking to Doctor Google for advice.

The sheer amount of information available online is a concern for HCPs when they want to make quick prescribing decisions, for example, when a patient is experiencing a side effect due to a medicine and wants immediate relief, or asks whether a pill can be split in half.¹ It can be challenging to sift through the digital deluge and choose what is most appropriate for the case at hand. With such large volumes of information available online, evaluating the quality, context, source(s), and credibility of the data adds an extra layer of complexity to what should be a relatively simple process. This is a high-risk issue when prescribing decisions depend on such information.^{1,2,3}

Most pharmaceutical companies are ill-equipped to respond to MI requests in a way that satisfies the need for speed while remaining compliant.





MI desks across the pharmaceutical industry respond to product-related medical requests from multiple stakeholders, including HCPs, patients, caregivers, patient advocates, payers, medical science liaisons (MSLs), pharmacists, medical researchers, as well as pharmacy and therapeutics (P&T) and formulary committee members. Their responses to these requests need to be quick, relevant, and scientifically accurate. In most cases, this predominantly happens over the phone, or nowadays, email or live chat.

WRONG NUMBERS: TODAY'S SYSTEMS ARE INEFFICIENT AND COSTLY

TOO MUCH TIME

Typically, phone calls mean long hold/waiting times—often 20–30 minutes. In case of a weekend or when a message is left outside of working hours, 2+ days may pass before a response is received.⁴ This is simply unacceptable to most people.



Approximately two-thirds of customers surveyed will not wait on a call for more than 2 minutes.



13% customers said, “no wait time is acceptable” to them.

These opinions were similar across age groups and genders.⁵

Long waits and delayed responses are exacerbated by failure to resolve a question or issue the first time. A benchmarking study of 100 major North American healthcare contact centers, conducted by a company specializing in the improvement of first call resolution (FCR) rates in healthcare contact centers, showed that a mere 4% have an FCR rate of 80% or higher. For context, a good FCR rate is considered to be 70%–75%.

When a call is not resolved at the first attempt, customers have to call back for resolution of the same query or problem.⁶ The very low FCR rate for so many healthcare contact centers translates to low levels of customer fulfillment with regard to MI requests. Across all industries, problems such as call waiting, long hold times, and forwarding of calls to various departments lead to irritated customers.

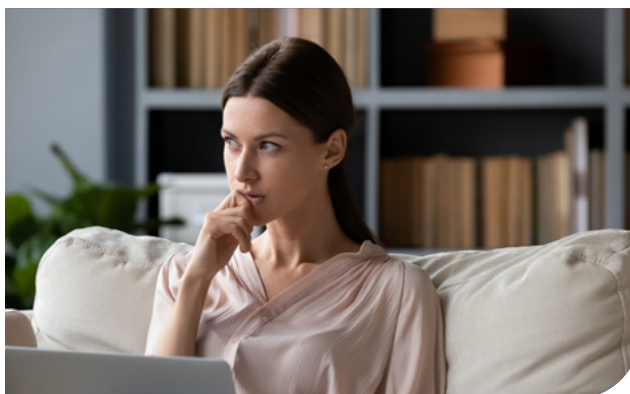


87%

customers feel frustrated when they have to repeat their issues ad nauseum via multiple channels.

73%

customers mentioned that this will lead them to question doing further business with the company or the brand.⁷



TOO MUCH INFORMATION

Emails pose a different challenge. While they can provide a faster response to an MI request, they are generally lengthy 40–50-page Word or PDF documents that contain summarized literature reviews and prescribing information.⁴ In fact, the answer to an MI query may be buried in the middle of a content-heavy response, and this can add to the user's frustration.

Yet another issue faced by most stakeholders, especially patients, is that the information available on MI portals and via other online sources is very difficult to understand as it can be full of medical jargon and abbreviations or acronyms. This even includes the information in patient medical records and on patient portals.⁸

TOO MUCH MONEY

From a cost perspective, the traditional MI model is inefficient and costly. It generally costs anywhere between \$25–\$60 to answer, handle, and log an MI query.⁴ Sometimes, this cost can go up to \$100 or more, and it increases with every repeat call for the same query.⁹ Moreover, a survey showed that among the different sources of errors that prevent contact centers from achieving a good FCR rate, 38% are because of mistakes made by the agents.¹⁰

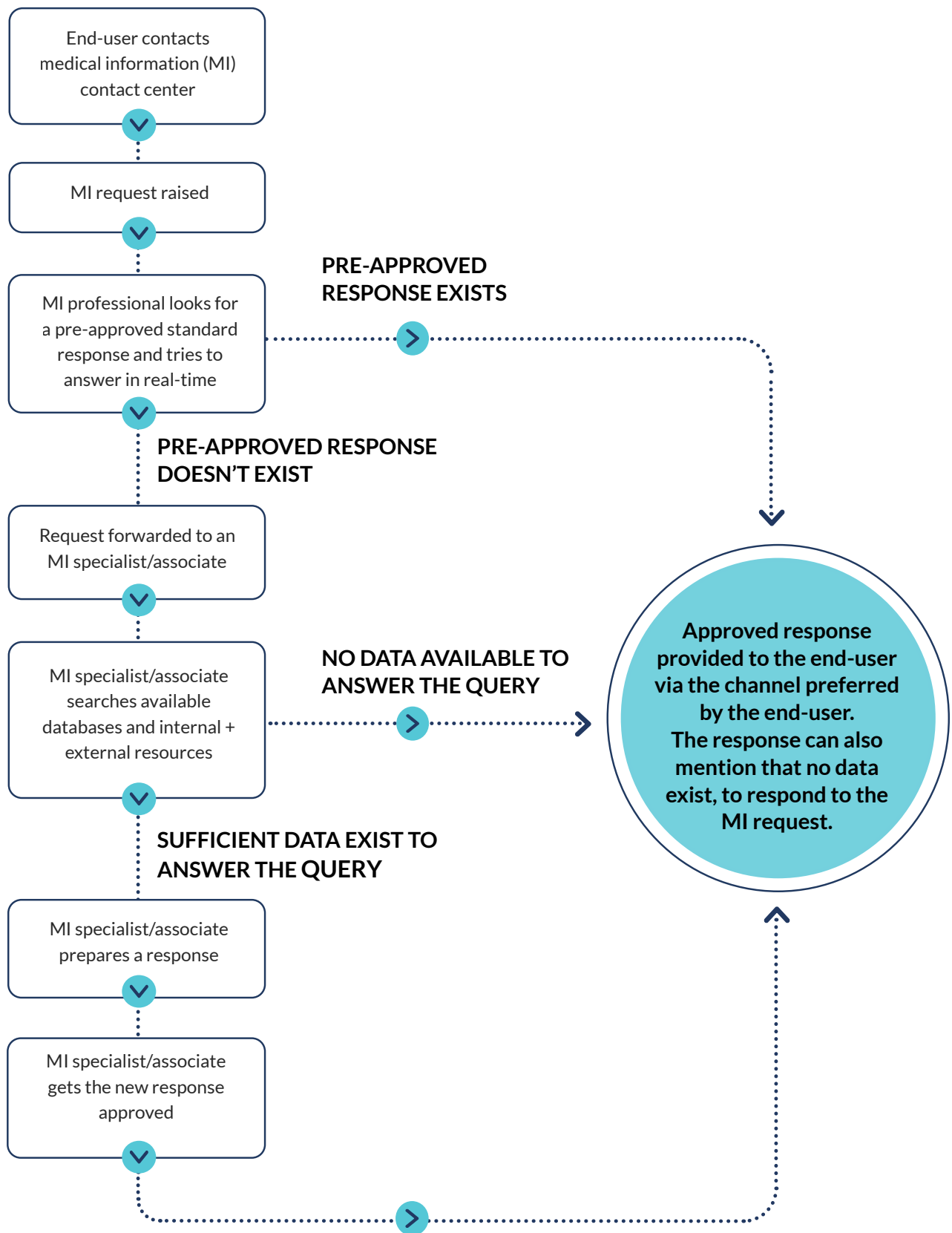
Digitization of MI helps solve both these issues. It refers to the breaking down of long-winded, static, and linear MI documents into bite-sized content using formats such as infographics, charts and tables, interactive PDFs, virtual customizable dashboards, etc. This enables MI specialists at contact centers to pull up relevant information as-needed while attending MI requests. It can reduce the number of mistakes made at the source as the required information will be more readily available, which, in turn, will reduce the cost per query by minimizing delays and repeat calls for the same unsolved query/request.

This innovative approach to digitization achieves two important goals: increasing customer satisfaction by providing value, and improving operational efficiency.⁴

TOO CUMBERSOME

The entire process of an MI request and response is complicated and difficult. Instead of a quick, accurate answer, HCPs and patients are subjected to pre-approved messaging that may or may not be relevant to their specific situation. As shown in Fig. 1, today's MI request process involves multiple resources and myriad steps that add to delays and frustration. In today's fast-paced environment, MI needs to be customized to be effective, and data must be optimized to cut down on response time. This is possible with the correct digital solutions.

Fig. 1. Typical workflow of an MI response



DIGITAL INNOVATION: THE KEY TO FASTER, MORE ACCURATE, AND MORE EFFICIENT MI THAN EVER BEFORE

As mentioned above, most current resources do not fulfill the growing need for accurate on-demand MI. While the industry is eager to adopt a digital approach and employ more visual elements in answering MI requests, there is significant apprehension in the industry for a range of reasons. For example, MI teams may fear the risk of compliance and legal issues associated with content appearing promotional or the perceived operational complexity posed by delivering digital solutions. As a result, digital innovations in pharma have been deprioritized.

“

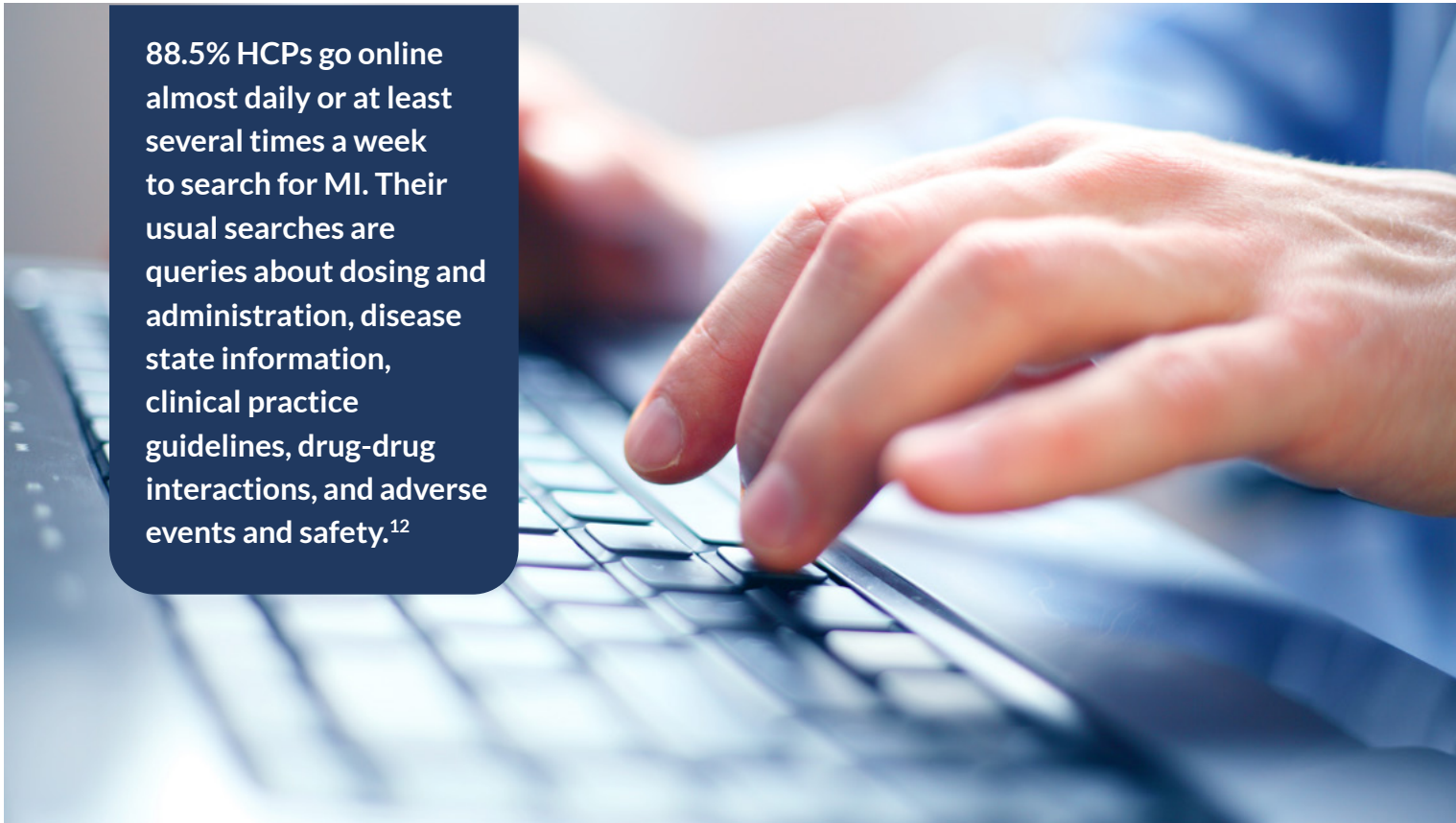
Compared to how much industries like banking and retail invest in technology infrastructure, pharma invests very little.”¹¹

Global Head, Medical Information, a multinational pharma company

Digitizing MI is an opportunity for the pharmaceutical industry to boost stakeholder trust by providing quicker access to accurate medical expertise at the precise moment they need it. For physicians, such an approach can dramatically improve prescribing behavior by minimizing confusion, while for patients, being educated can have a hugely favorable impact on their medication adherence.⁴

SHIFTING DIGITAL NEEDS OF HCPs, PAYERS, AND PATIENTS

MI requests from all types of stakeholders are coming in via multiple channels such as online chatbot queries, calls, emails, online discussion forums, company and third-party websites, etc. According to a study,



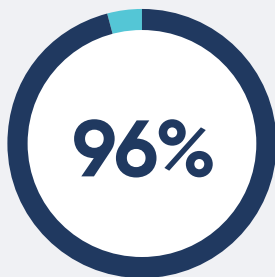
88.5% HCPs go online almost daily or at least several times a week to search for MI. Their usual searches are queries about dosing and administration, disease state information, clinical practice guidelines, drug-drug interactions, and adverse events and safety.¹²

Company-sponsored websites offering medical and scientific information are also becoming a new favorite among HCPs.¹¹

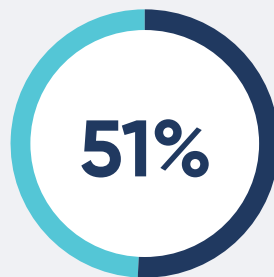
The preference for sharing and learning via multiple channels holds true for payers and patients as well. A survey showed that

P&T professionals use the internet for more than three hours daily to find digital resources useful for their work, and nearly 80% of them make use of digital channels and online tools to help with formulary decision-making.¹³

And patients as well as the lay public are not far behind. They are becoming increasingly aware of and looking for MI online. A consumer study indicated that approximately 90% of individuals in the 18–24 age group in the US rely on social media for health information and participate in online health activities.¹⁴



While 96% patients are interested in receiving more information about their health condition,



51% nurses feel there are insufficient reliable resources to directly share with patients for effective care.¹⁵

Moreover, HCPs are facing tremendous workloads and getting busier by the minute. Many physicians have barred pharma sales representatives from their practices and are getting less information from them.¹⁶



Staying up to date with the latest advancements in therapeutic options is becoming challenging for HCPs. This is due to the increasing volume and complexity of medical information, as well as a shortage of sources that combine trustworthiness (including objectivity, credibility, and transparency) with easy accessibility and navigability (including ease of use in a timely manner, intelligent tailoring of content, and intuitive, physician-focused user interface).¹⁷

Christian Seiffert, Pierre Jacquet, and Sej Brar
of L.E.K. Consulting

Thus, in light of the soaring demand for MI and the proven pitfalls of the current response methods, it is not feasible to limit MI teams to the conventional ways of answering MI requests. Digitizing MI in ways that provide useful, actionable information is a viable and valuable approach. And there is surely a huge demand for it with an increasing number of people trusting and depending on online resources and digital tools for MI.

INTERACTIVE FORMATS CAN ADDRESS DIGITAL NEEDS BETTER

All of this online activity underscores the need for accurate, compliant MI to be made available on multiple digital platforms and tailored to multiple audience segments. For instance, for MI teams to be able to provide responses to unsolicited requests for off-label information quickly, they need to be equipped with the relevant digital tools to help them find the standard response in the right format, develop a custom response in case a standard response is absent, and respond to the stakeholder in a timely manner through the preferred channel. This is where interactive standard response documents (SRDs)/MI response letters come in. More than 85% HCPs think that infographics in SRDs are visually appealing and positively impact their clinical decisions.¹⁸ They also find other formats, such as tables and charts, quite useful and prefer concise SRDs.¹⁹ Furthermore, digital technology can also help pharma to cater to payer needs better. By deploying the technological advancements available today, the delivery of information can be enhanced for payers to arrive at formulary decisions faster and more efficiently. Some examples of digital tools that can be useful for this purpose are



Interactive elements
in the dossier



Web-based tools,
i.e., dashboards

Ultimately, easier and quicker access to more accurate, high-quality MI will support the safe and effective use of prescription medicines and help improve patient outcomes.

SCOPE OF DIGITIZATION IN THE MI JOURNEY



The healthcare industry has struggled to wean itself from expensive, inefficient workflows such as call centers and complex forms.”²⁰

Greg Johnsen, CEO of LifeLink (a company that builds conversational mobile chatbots for healthcare)

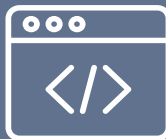
However, with stakeholders becoming more digitally savvy and demanding medical and health related information quicker than before, it is important for pharma to develop interactive assets that will not only help these stakeholders consume and digest the information easily, but also reduce the burden on MI teams. Some examples of these interactive assets are



**Interactive
PDFs**



Infographics



**MI portals:
HTML pages**

CHOOSING THE RIGHT ASSETS TO DIGITIZE

It is obvious that with the given developments in technology and innovation, HCPs, patients, and payers are seeking MI via digital channels. However, in the race to go digital, it is crucial to select the right documents to digitize.



The first question to ask is whether we are meeting the needs of the target audience. For example, do we know how they like to receive information? Do we know where they are currently going to get their information? Because understanding the preferences of your target audience—whether specialist, primary care physician, patient, or payer—is an important first step.

Laura Trout, Senior Medical Director,
MedComms, Cactus Life Sciences

Consumers are using digital communication channels increasingly often, and as such, science should be repackaged in a way that is accessible to all to facilitate increased engagement and understanding.

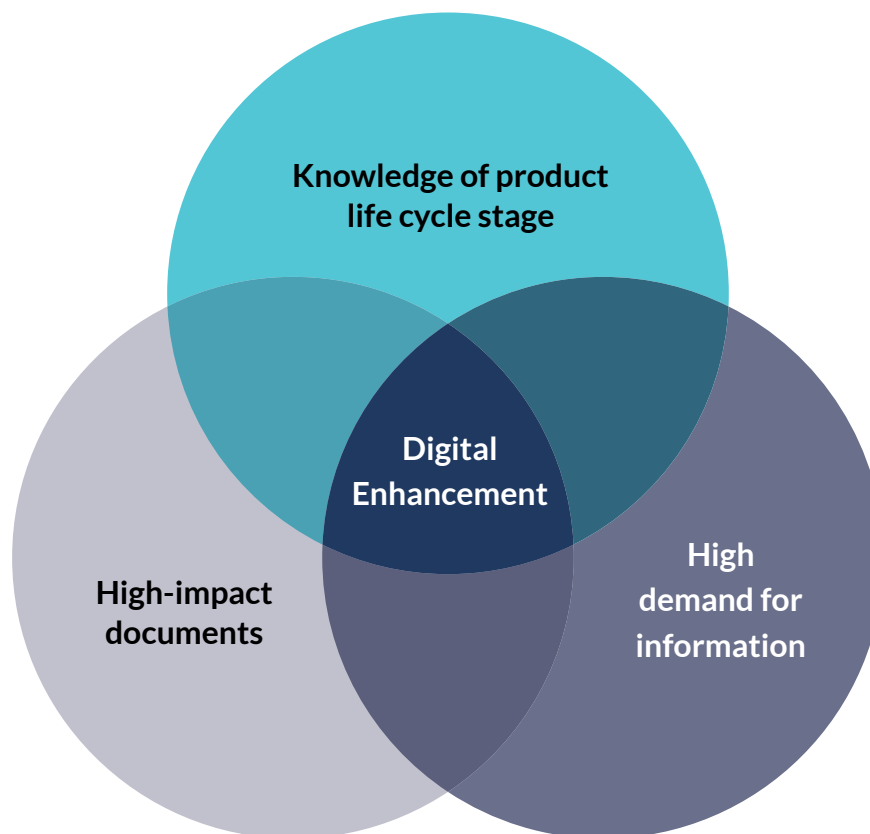
Pippa Colden, Vice President,
Medical and Scientific Services, Cactus Life Sciences



Field insight teams will provide critical information at this step to facilitate decision-making regarding addressing specific customer needs. For example, studying how various MI teams provide MI access through online/digital channels, with focus areas such as ease of access on the available websites, the purpose that the website/digital channel solves, content types and formats, how search engine optimization is being used, as well as unique features and aspects for consumers, can offer valuable insights about how stakeholders use MI and help MI departments to serve them better.

Seeking and creating innovative methods of providing MI will solve many challenges. However, some factors to consider before setting up an MI strategy are demand for the information, the stage of the product life cycle, and availability of resources (Fig. 2.). It is also important to note that not all responses need conversion to all formats. Sometimes, smaller incremental changes, for example, converting an executive summary to a simple infographic, or paring down “older” response documents to a more crisp/shorter version, may have a great impact on your end user.

Fig. 2. Evaluation criteria for digital optimization



FINDING THE RIGHT EXPERTISE

OUR EXPERTISE

At Cactus Life Sciences, we have long-standing expertise in using innovation, technology, and data visualization to ensure that MI strategy and content are streamlined and impactful. Our experienced writing team works with clients across therapeutic areas to create *de novo* SRDs and update existing content. We have hands-on experience with systems and databases like Veeva Vault, ZINC, Ovid, EMBASE, MEDLINE, Biosis, and QUOSA. This allows us to manage the process with minimum stakeholder involvement. Our personalized combination of expert scientific services and technological capabilities for each customer has helped us gain their trust and enabled us to consistently deliver effective solutions. We provide customized delivery models based on the objectives of our clients. Our workflows have helped clients streamline content, manage costs, and increase efficiencies.

Cactus Life Sciences has the global experience to help you organize, prioritize, and digitize your MI offerings. Our team of digital veterans knows how to create compelling and relevant tactics that utilize proven digital platforms to present information in actionable ways that drive audience engagement. Our process has been tested with a variety of pharmaceutical companies across the world, and includes the following steps:

01

We consult with you to advise on what components of your MI portfolio need to be optimized

02

We collaborate with your compliance and legal teams to develop visual elements in SRDs/MI response letters that are non-commercial in nature

03

We help you break away from the mold, while ensuring quality and regulatory compliance

OUR OFFERINGS AND CAPABILITIES

Cactus Life Sciences' MI Offerings:



Monitoring, tracking, and routing of SRDs for approval



Localization and global template development and adoption



SRD authoring and curation



MI content strategy



Content streamlining & optimization



Literature search

Our innovative, customized MI services and capabilities across channels:

01

Addition of infographics and visuals to existing SRDs

02

Changing text to a navigable format

03

Creating interactive pdfs and online resources

04

Creating online-only content formats specific to MI web-portals

All in all, MI systems need an upgrade since the traditional ways of working do not take into account the urgent MI needs of HCPs, patients, and payers; the various ways in which this information can help them; and the different online channels and digital tools they use to ask their queries. At Cactus Life Sciences, we understand this. And we are making the jobs of MI teams across the pharma industry easier. As pharma's agile and innovative partners, we're reimagining scientific communications.

Interested in learning more? [Contact us](#) today.

ABOUT CACTUS LIFE SCIENCES

At Cactus Life Sciences, we deliver scientific content better, faster, and with greater value than ever before.

Using scientific acumen, cutting-edge creative and digital solutions, advanced technology, and transformational delivery models, we redefine efficiency across the healthcare continuum by delivering personalized and impactful content that provides lasting quality and value.

CONTACT US

214 Carnegie Center, Suite 102
Princeton, New Jersey 08540 USA

267.332.0051

inquiry.lifesciences@cactusglobal.com

lifesciences.cactusglobal.com

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