

OptimizeRx

Conversations That Convert

Physician Survey on Opportunities for
HCP and DTC Marketing Synchronization





**You target healthcare providers (HCPs).
And you target patients.**

New data sources, tools like artificial intelligence and machine learning (AI/ML), as well as the growth of digital channels, make these campaigns easier and more precise – even as the two audiences stay locked in separate strategies due to **entrenched marketing silos** and habits that pre-date new targeting technologies.

It's time for that siloed approach to change.



**Physicians want informed patients.
Patients want receptive physicians.**

Based on our 2024 independent research survey of 170+ physicians across seven specialties, we know that HCPs welcome engaged, informed patients. But they're skeptical of the quality of information patients consume and cite a number of factors impacting the physician/patient conversation. However, when information and timing align, these conversations can transform treatment.

Synchronizing engagement with HCPs and patients is a powerful opportunity hiding in plain sight. But first, we need to move beyond the marketing silos that separate the two.

AI-driven, patient-first approaches make it possible to anchor HCP and direct-to-consumer (DTC) marketing in a single journey and personalize their marketing strategies based on when brand information is most relevant. The result is faster therapy starts, stronger brand relationships, better outcomes, and higher marketing ROI.

Today's HCP-patient conversation

The specialists in the survey see a high number of patients with questions about their condition and potential treatments. Even during follow-up visits, the questions continue. And each interaction is a potential opportunity to discuss treatment options, clinical trials, or affordability and education programs that improve care.

But many patients have poor information or inflated perceptions about the appropriateness of treatments for their condition. And, they may be silenced by highly specific social and cultural barriers. This harms care conversations, as physicians value well-informed, engaged patients.

Information drives dialogue for many, but not all, patients

PHYSICIANS ESTIMATE THAT

76% New patients have specific questions/topics

49% Follow-up patients arrive with specific questions/topics

48% New patient visits driven by their care questions

23% Patients are moderately informed about disease and treatment

16% Patients are well informed



Who the patient is matters. A lot.

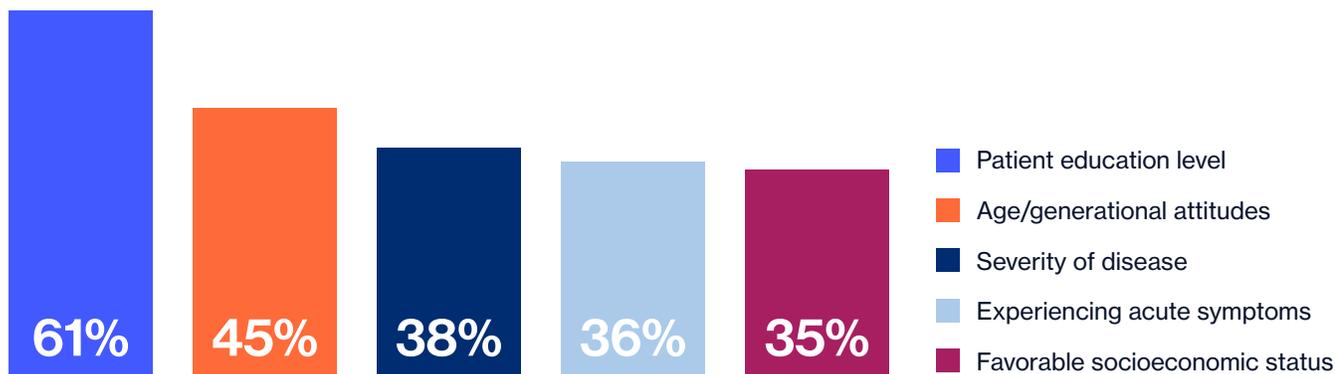
Disease type and status, along with social determinants of health (economic, political, racial, and social conditions where people live, work, and play) can impact how much the patient will interact and converse with the HCP. In addition, limited medical understanding, cultural/language barriers, low access to information, and fear can also make patients less engaged in critical, collaborative treatment discussions.

The opportunity

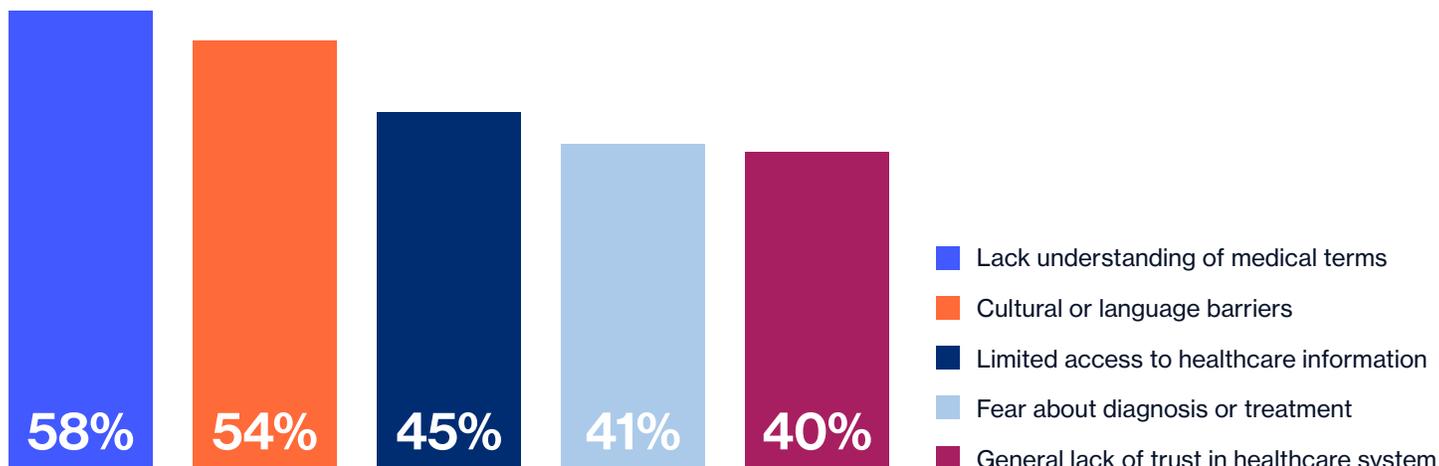
For every patient arriving with questions and information (likely from social media), there's a patient that's missing the benefit of HCP collaboration due to various social factors. Opportunity lies in personalization – helping both the less knowledgeable to become more empowered and the highly motivated to find better, more relevant information for their condition.

The use of deterministic geo-targeting can be helpful in addressing these differences as it precisely segments audiences while remaining compliant with strict privacy regulations. It identifies and finds patients while considering clinical data, social determinants, and media preferences, allowing for optimal coordination with HCP marketing. Incorporating additional predictive targeting through AI/ML scales the opportunity to better educate patients with clear, personalized, and realistic information – as opposed to generic ad claims – so that all patients have a better chance to feel more confident, understand treatment rationale, and engage with physicians who are receptive to their ideas and questions.

Top engagement drivers



Top factors making patients less engaged



Patient-sourced information

It affects outcomes and decision-making – for better or worse

The information and requests patients bring to office visits and other clinical conversations can impact physician decision-making. But while patients and physicians are in the same room, they're often not on the same page. What's dividing these two audiences?

Physicians view information from clinical sources, including pharma advertising, more positively than other patient-sourced information. Pharma-sponsored content is medically vetted and sound, but can't break through the significant attention patients give to other sources, such as online forums, websites, or friends. Patient-sourced information also may not reflect their individual needs and history. While pharma and other life science advertising includes robust eligibility information, patients may lack context regarding the brand's criteria, stated side effects, or other clinical caveats.

"A knowledgeable patient can be a good thing; they are able to ask more focused questions that I may not have thought were important."

– Neurologist

Physicians believe patient-sourced information impacts conversations

64% Agree or strongly agree it can complicate treatment discussions

55% Agree it's crucial to shared decision-making

53% Are neutral to slightly positive about whether it's a valuable supplement to medical expertise

Physicians say these non-clinical sources negatively impact care conversations

66% Misleading or inaccurate information sources

59% Hearsay and anecdotal evidence

53% Conflicting friend and family advice

In contrast, relatively few consider pharma advertising in this way

13% Pharma-sponsored brand advertising has a negative impact

12% Pharma-sponsored disease awareness advertising has a negative impact

Poor information wastes physicians' time, hurts relationship

59% Believe the information patients cite during visits is fair-to-poor quality

61% Spend notable amounts of visit time (5+ minutes) on countering bad information

"New patients may decide they don't like what I have to say and they may choose not to come back."

– Immunologist

Physicians believe aligning patient/HCP information may improve care

70%

Agree that when patient-sourced information aligns with the information they get from manufacturers, it streamlines care

13%

Agree that currently there is strong alignment

45%

Agree that patient-sourced information may cause them to consider treatments they wouldn't otherwise

The opportunity

A patient-centric approach can help life science companies reach and support HCPs and patients by personalizing information delivery to the care journey. Pharma ads and information are medically vetted, from an HCP's perspective, but need to be delivered at times when patients are most receptive (such as prior to an upcoming visit) to compete with information from friends, family, social media, and other sources that have not been medically reviewed.

Data-driven messaging along critical touchpoints of a shared patient/HCP journey is paramount to improving the conversations between them. When brands focus on the dimensional nature of their audience segments and take advantage of more dynamic and privacy-safe targeting technologies based on real-world evidence, the ability to drive more informed conversations is exponentially improved.

Physician perceptions of consumer advertising

Sometimes helpful, but limited for both patients and HCPs

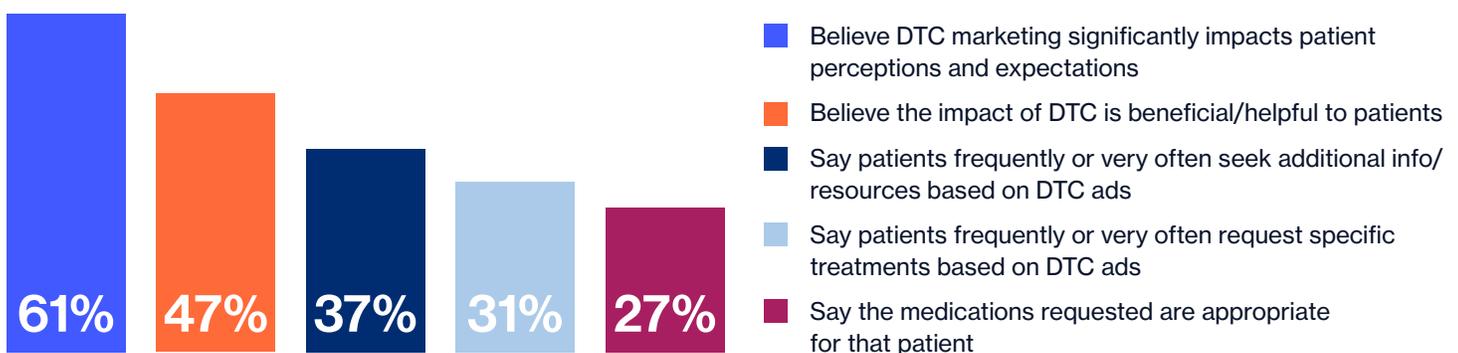
Based on physician responses, it's clear that DTC advertising is getting through to patients. Nearly 40% of physicians reported their patients are seeking more information "frequently/very often" as a result of these ads.

But, at the same time, physicians are lukewarm – if not skeptical – that DTC advertising helps patients in its current form. From inappropriate medication requests to unrealistic expectations, the data suggests DTC ads aren't reaching the right patients, or patients are missing key pieces of information. So, are the billions spent annually on life science DTC ads a good investment? What types of medical information foster collaboration more efficiently?

"They'll see advertisements on TV or in magazines, but I tell them, 'You can look at this, but this particular therapy just doesn't apply to you'."

– Oncologist

Physicians see the impact of DTCs ads – but it's not always positive

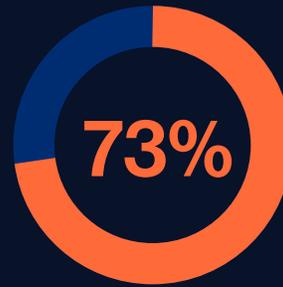


However, disease education may help

54% Say marketing for disease states helps patients

39% Say marketing for specific treatments helps patients

Misalignment between DTC ads and physician marketing



73% Say the medications patients request based on DTC ads are only sometimes, occasionally or rarely appropriate.

Top treatment categories where patients are requesting certain brands based on DTC advertising

- 1 Migraine/headache treatments
- 2 Immunotherapy for cancer
- 3 Weight loss and GLP1 drugs
- 4 Biologics
- 5 Inflammatory bowel disease, colitis and other GI therapies

Top reasons why requested medications are not appropriate

- Does not meet treatment eligibility
- No insurance coverage/step therapy requirements
- Other, more effective treatments available

What do physicians wish pharma would prioritize more in DTC marketing?

- Medication cost/insurance coverage
- Side effects, safety, and efficacy
- Clinical research and outcomes
- Eligibility criteria
- General disease information

“You can tell in the first five or ten minutes ... whether or not the patient is going to believe me over the information that they already have printed out in their hand.”

– Immunologist

The opportunity

The positive news for life science brands is that DTC ads are reaching patients – and that’s no small feat. But they only have value if they engage the right patients; otherwise, they may cause more harm than good to the relationship and treatment plan. It’s not that the ads are overpromising. Patients may simply be listening selectively or not getting enough basic disease awareness or education along with treatment benefits or differentiators. Shifting and aligning information with what’s being communicated to HCPs (and what they wish patients knew) about eligibility, cost, and more increases the impact of ad dollars. Delivering it when patients are more receptive, such as immediately preceding an office visit, and educating them about both their condition and treatment options, could potentially transform the care conversation.

Conclusion

Care conversations don't happen in a void – or in a world of perfect information. Patients and HCPs come to conversations with pre-conceived perceptions that can complicate treatment discussions. This physician survey highlighted how increasing knowledge alignment can improve clinical connections and streamline patient care. But there's a gap to close: Physicians often find their patients overwhelmed, unable to collaborate, and poorly informed. But an engaged, informed patient positively impacts care and collaboration and can even prompt HCPs to consider new treatment options.

Pharma brands can be a key part of the solution – but only if they break through HCP and DTC marketing silos. And the best way to do this? Grounding both programs in a shared, centralized patient audience. Dynamically prioritizing and segmenting that audience based on individual patient journeys allows brands to drive personalized, actionable, and aligned marketing to patient and physician audiences within the key windows where it is relevant to care conversations.

It's a big lift.

Today's technology advances are making this type of alignment possible. AI/ML solutions can scale the work of human marketers by synthesizing vast amounts of data across diverse sources to create holistic, clinically-specific patient audiences, predict their upcoming care needs, prioritize and segment patients and physicians with speed and accuracy, and direct channel placements based on media preferences. And AI-based solutions grow “smarter” over time – optimizing and course-correcting throughout the campaign lifecycle. The result is clinical conversations that convert: helping HCPs and patients find the best therapy options, resulting in faster starts, better health outcomes – and more efficient marketing spend for brands.

Methodology

OptimizeRx contracted with REACH, an independent research company, to conduct a qualitative and quantitative survey of 172 U.S. physicians in February and March of 2024. To qualify, physicians had to spend 75 percent of their time seeing patients and have between three and 29 years of post-residency experience.

REACH interviewed and surveyed specialists in dermatology, neurology, gastroenterology, oncology, immunology, endocrinology, and primary care.

About OptimizeRx

Founded in 2006, OptimizeRx is an award-winning health technology company providing best-in-class solutions to leading life sciences organizations. We help brands engage and support their physician and patient customers through our Dynamic Audience Activation Platform (DAAP), which connects over 2MM U.S. healthcare providers and millions of their patients through an artificial intelligence engine embedded within a proprietary omnichannel network.

 To learn more or to schedule a meeting with our team, visit optimizerx.com.