FOCUS ON RUSSIA

Though the Government is taking steps to control drug development and protect the domestic market, the country remains a target for global pharma companies, which see its untapped potential.

RUSSIA AT A GLANCE

Area: 17,098,242 km²
Population: 140,041,247 (July 2009 est.)
GDP (official exchange rate): $US1.232tn (2009 est.)
GDP growth: -7.9 per cent (2009)
GNP per capita: $US15,200 (2009 est.)
Healthcare expenditure as % of GDP: 5.3 (2006, WHO)

Figures from GalbraithWight Horizons Expert Network
INDUSTRY OVERVIEW

The Russian pharmaceutical market has been growing rapidly in all segments since the financial crisis in 1998, with an increase of 19 per cent in the compound annual growth rate (CAGR) between 2003 and 2008. The CAGR experienced a slight decline in 2009 owing to the global economic crisis, but it is recovering and estimated to grow approximately five per cent over the next three years. The Russian pharmaceutical market is divided into four distinct segments, the largest being the retail market (approximately 60 per cent) which has an annual growth of 15 per cent. The remaining segments of the market are Government funded, with the State reimbursement system accounting for around 20 per cent, the hospital segment 14 per cent and national health programmes four per cent. The State reimbursement programme started in 2005 and currently includes drugs for socially dependent citizens, as well as expensive drugs for seven selected diseases. Financing for this programme is expected to increase in 2010 and further into the future. The private sector is limited but developing, largely due to the improved economy and evolving middle class.

REFORMS AND POLITICS

Russia is undergoing significant developments in terms of political reforms and initiatives, many of which will introduce important changes for the pharmaceutical industry. The major trends for Russian healthcare include:

• An increased share of government purchases in the pharmaceutical market
• Government more actively regulating pharmaceutical prices
• The development of foundations for a national drug medical insurance programme which will replace existing preferred population medicine provision programmes.

An important development in drug regulation came into effect in 2009 with the acceptance of a new Essential Drug List (EDL), consisting of drugs recommended by the World Health Organisation (WHO) (all countries registered in Russia) and an assessment system based on drug inclusion and exclusion criteria. From 2010, drug registration and price declaration are required for drugs to be included on the EDL. In addition, the Ministry of Health and Social Development has developed legislation to link EDL with treatment standards, preferential drug provision and pharmaceutical procurement. This new pricing mechanism came into effect on April 1, 2010 and it is believed that other price-regulating measures will follow. A total of 65 out of 83 Russian regions have price regulation mechanisms, with local authorities in some lobbying for even stricter controls.

Several major changes will come into force on September 1, 2010, with the new Medicines Turnover law. According to the draft law, drug pricing will be more controlled, with price regulation for EDL-listed drugs. Manufacturers will be obliged to perform annual (before December 1) registrations of the maximum factory price calculated according to the Ministry of Health’s criteria. This should result in a more efficient and transparent drug registration system with similar conditions for domestic and foreign manufacturers. The review period for generics will be limited to 60 days, and 120 days for new drugs, with applicants being able to track their registration process via the internet. Instead of several specific payments, the registration tax will be fixed at 300,000 roubles (approximately $10,000). This reform also proposes new safety measures with the implementation of multiple standards to identify sub-quality and imitation pharmaceuticals. With the goal of making production of high quality pharmaceuticals possible, mandatory Good Manufacturing Practice (GMP) standards will be established in Russian factories. Currently there are more than 400 drug manufacturers in Russia and only 30 of them use GMP standards. Local manufacturers have until January 1, 2014 to switch to GMP production, after which all non-GMP compliant factories will be closed. The Government is expected to assist domestic producers to modernise their facilities. Although the reform proposes to introduce equal market access for local and foreign manufacturers, in reality more favourable conditions for Russian manufacturers will be created. An ethics committee will be created to validate clinical trials in certain categories. The new law will also address drug supply by allowing drug sales through doctors and outpatient clinics in remote villages without a pharmacy.

As the Ministry of Health and Social Development becomes more influential, most experts believe the Government will accept the reforms outlined in the draft Medicines Turnover law.

The modernisation of ambulance services reform will introduce specialist call centres that will help prioritise and optimise the number of incoming emergency calls. It will also upgrade the service to a more Western approach by removing doctors from most paramedic teams (except for psychiatry and intensive care). The reform will be tested simultaneously in three regions (Chuvash, Tatarstan and Rostov) with results expected in 2011.

In line with the Government’s policy to develop further State reimbursement systems, from January 1, 2011, several regions will participate in a new pilot project on drug purchase compensation. It will cover certain vulnerable categories of people (the same as the O NLS State reimbursement programme) with payments only being provided for EDL drugs on the basis of registered prices. If the pilot is successful, the project will be expanded to cover all Russia and all patients, replacing the existing State scheme.

GOVERNMENT HEALTHCARE FINANCING

In 2009 there was relative stability in federal and regional drug reimbursement programmes with total expenditure increasing 33 per cent compared to 2008 and reaching $2.4bn. Funding for certain costly “nозології” [diseases], such as schizophrenia, was $133bn, a 13 per cent increase compared to the previous year.

Drug registrations increased in 2009, with the Roszdравнадзор (the Russian regulatory agency in charge of all drug approvals) registering a total of 1209, of which 675 were local registrations (up 8.6 per cent from 2008) and 534 were imported drugs (up 24.2 per cent from 2008). Additionally, economic aspects of national healthcare are likely to receive more focus in the future. United mandatory standards of healthcare are currently under development and will be used for 90 per cent of cases (with rare diseases accounting for 10 per cent). These standards will allow for real cost estimation of medical treatment.
PRICING AND REIMBURSEMENT

There is no traditional Western European reimbursement system currently in Russia. The existing system guarantees free drug provision to certain vulnerable groups of patients. Currently, there are two national reimbursement programmes:

- The seven diseases (7N), covering medicines for selected expensive-to-treat diseases, affecting approximately 66,000 patients. The seven diseases and drugs covered include: paediatric growth hormone deficiency (somatropin); cystic fibrosis (dornaza); multiple myeloma (bortezomib) and multiple sclerosis (interferon beta, glatiramer acetate).
- The ONLS (State reimbursement programme) providing necessary medication to socially-vulnerable groups, including the disabled, veterans and victims of the Chernobyl accident. There are 5.7 million people in the programme.

In parallel with the provision of national funding, all regions have adopted drug reimbursement programmes which are regulated and financed by local authorities. These programmes cover all regionally-listed medicines, with wealthier regions, such as Moscow, Khanty-Mansiysk, St Petersburg, Samara and Yekaterinburg having a better drug supply service. The main sectors of the population covered include children from ages 0-3 and honorary citizens of the city.

On January 1, 2010, the Roszdravnadzor started to register the maximum ex-factory price for EDL-listed drugs. From April 1, 2010, all EDL drugs without this registration are prohibited from sale in Russia. Russian regions were required to develop and approve regulations defining maximum wholesale and retail markups by March 1, 2010 as per Government Decree 1116, dated December 30, 2009. The average markup is 12-15 per cent for distributors and 15-18 per cent for pharmacies.

GENERICS AND INNOVATION

The current Russian president, Mr Medvedev, has declared the development of medical equipment, technologies and domestic pharmaceutical production as top priorities for his Government, promising to provide citizens with high quality and affordable medications for prevention and treatment of life-threatening diseases.

Associated with the aim to improve Russian drug production, the Government has defined a list of strategically-important medicines that will be manufactured in Russia, including expensive drugs for the treatment of oncology and cardiovascular diseases. Production of flu and cold medicines will also be increased considerably. The goal is for domestically-manufactured pharmaceuticals to reach 50 per cent of market share by 2020 (currently around 20 per cent). This will be stimulated through government purchasing programmes.

Brand name products represent two-thirds of the pharmaceutical market in Russia. Their sales were stimulated by the introduction of the DLO Programme in 2006, which became the ONLS and 7N state reimbursement programmes in 2008.

Substitution with a locally-produced product is a key goal for the Russian pharmaceutical industry, with some lobbyists proposing a ban on exported drugs from federal and local tenders when three or more domestic substitutes are available. State purchasing of Russian-made generics of imported medicines has also been suggested, with the domestic producer Pharm-Sintez announcing Milanfor, an oncology medicine for treatment of multiple myeloma, and the first generic competitor for Velcade.

Compared to the retail sector, the share of generics is much higher in the underfinanced hospital segment, but the market is developing quickly and remains highly attractive for generic manufacturers.

MARKET ACCESS

Improving market visibility and developing a positive image with the Russian authorities are key factors for access to the Russian pharmaceutical market. This usually involves investment in Russian healthcare, a policy which many leading global pharmaceutical manufacturers have adopted. For example, Bayer has constructed a specialist logistics centre intended to function as an integrated pre-wholesale preparation and distribution site for its Russian product portfolio and several companies, including sanofi-aventis, GSK, KRKA, Gedeon Richter, Hemopharm and Ferrosan, have also launched proprietary manufacturing facilities, opting either to construct new facilities or to renovate existing obsolete facilities. Many companies prefer to build bespoke new sites; Nycomed recently started construction of a factory in the Yaroslavl region and Berlin-Chemie recently signed an agreement to build its manufacturing facility in the Kaluga region.

Hoffman-La Roche entered a joint scientific agreement with Chemrar, financed by the Russian Government, with Hoffman-La Roche providing its knowledge and technological expertise. Supporting relevant Russian non-profit organisations, such as patient associations like the haemophilia and oncology associations, and industry organisations, is another positive way to improve a company’s image.

The Author

GalbraithWight Horizons Expert Network supplied the above sections.

MARKETING SITUATION

Marketing of pharmaceuticals in Russia is becoming more and more challenging for foreign manufacturers. There are far more restrictions than opportunities. This, to a significant extent, is a result of the launch of the 2020 programme aimed at raising the competitiveness of Russian manufacturers. As well as increasing the share of pharmaceuticals manufactured in Russia on the domestic market, the Government is also moving towards giving all state purchase contracts for additional pharmacological support to domestic manufacturers. Thus, foreign companies have a reducing commercial segment, making effective marketing even more important.

Even there, the Government keeps a close eye on foreign pharmaceutical manufacturers, gradually reducing opportunities for promoting medicines, criticising the advertising of pharmaceuticals (both OTC and prescribed drugs) and aiming to restrict company representatives’ access to doctors.

In September 2009, the Federal Antimonopoly Service (FAS) revised promotion techniques used by foreign manufacturers to influence the medical community, arguing that financial and other incentives stimulate doctors to choose and recommend expensive foreign medicines despite the fact that there are
cheaper versions produced in Russia. FAS also claims that, owing to active promotion, foreign companies managed to raise their share in State purchases to 95 per cent in the first half of 2009, while substituting their medicines with Russian equivalents would be justified in over 5,000 cases. This would enable a saving of 1.2bn roubles.

In autumn 2009, at a meeting dedicated to pharmaceutical industry development, Prime Minister Vladimir Putin actively criticised the established relations between manufacturers and the medical community, calling them ‘abnormal’.

“Companies sponsor corporate events, various seminars, including trips to warm seas, and this way thousands of practitioners are embraced here in Russia,” he said, according to a quote in Vedomosti.

In October, the FAS prepared a number of amendments to the current legislation and to the draft law, On Circulation of Pharmaceuticals, which significantly restrict relations between pharmaceutical companies and medical practitioners and forbidding company medical representatives to visit doctors in their working hours. Keeping one consultant costs a company around €4000 monthly (including bonuses, promotion materials, travel expenses and taxes). Each of the 20 largest pharmaceutical manufacturers operating on the Russian market has a network of 200-250 representatives; smaller companies have fewer. Between 7,000 and 8,000 medical representatives work in the country in total (according to Vedomosti). Manufacturers currently spend 10 to 15 per cent of their turnover on keeping consultants, which is comparable to production costs. For foreign companies that do not have their own production facilities in Russia, this share may reach 40-50 per cent, suggests David Melik-Guseinov, research director at PharmExpert.

With the legislative amendments coming into effect, manufacturers are to lose one of the most effective and accessible channels of promoting prescribed medicines. Considering that the latter cannot be directly advertised to the end consumer (advertising prescribed medicines is only allowed in specialist medical periodicals) it becomes increasingly difficult to launch new products. This will force companies to seek alternative, more creative and sophisticated ways to reach the medical community and consumers. This change of direction has already been partly encouraged by the general decrease in direct advertising during the recession.

However, the situation is not as pessimistic as it may seem. Russia is not the first country trying seriously to restrict the activity of foreign pharmaceutical companies, so most of them already have similar experiences and can employ the strategies they have worked out for other markets. The trend to localise production gives those companies that can afford it far more opportunities to succeed and promote themselves. In addition, pharmaceutical companies are switching from product promotion to corporate communication, paying increasing attention to CSR initiatives, partnership with Russian manufacturers, participation in, or initiating, partnership programmes between the Government and the private sector, and so on.

The range of PR tools used by communications specialists working for pharmaceutical companies includes traditional media, internet, special events for the expert community, organising hotlines and creating and maintaining new professional associations. Specialists feel more-or-less free to use them in OTC drug promotion. In promoting prescribed medicines, companies have to be more careful. They concentrate on describing a problem or a disease rather than a brand. One way is by creating a web portal dedicated to a particular health problem.

Online promotion is currently becoming one of the most effective ways of communication support. However, pharmaceutical communications practitioners should bear in mind that hardly any of the important age 50+ consumer bracket are internet users.

The specific viewpoints of Russian doctors and consumers are also worth mentioning. Russian medical practitioners are quite conservative and tend to prefer their ‘favourite’, tried-and-trusted medicines. Hence, strong arguments are needed to convince them that modern pharmaceuticals are better.

Russian patients do not trust physicians and are often reluctant to follow their recommendations, though they readily ask pharmacy employees for advice. They have a great passion for self-treatment, often preferring the same time-tested medicines used by their parents and grandparents, even though newer, more effective and gentle drugs are available.

In analysing pharmaceutical OTC brands’ promotion strategies on the Russian market, PharmExpert and IMS Health conclude that those brands which are most publicised succeed (unlike in the Western market, where success is defined by more specific factors, like package, dosage, additional companies and brand values). This is because there are so many pharmaceutical brands on the market, combined with high volumes of patients, which makes it impossible for doctors to have long, detailed talks with each of them. Pointing out the practitioners’ needs in pharmaceutical information and naming the volume and intensity of promotion a key factor of success, the experts stress the importance of including qualified evidence (especially comparative research). However, the latter is often too expensive for domestic manufacturers.

**MARKETING SITUATION CONTINUED**

**FREQUENCY OF MEDICAL PRACTITIONERS’ VISITS TO SPECIALIST EXHIBITIONS**

<table>
<thead>
<tr>
<th>% of respondents</th>
<th>Visited at least once, total</th>
<th>5 times and more</th>
<th>4 times</th>
<th>3 times</th>
<th>Twice</th>
<th>Once</th>
</tr>
</thead>
<tbody>
<tr>
<td>61.3</td>
<td>4.4</td>
<td>3.7</td>
<td>9.5</td>
<td>18.1</td>
<td>24.4</td>
<td></td>
</tr>
</tbody>
</table>
REGULATORY ENVIRONMENT

The Russian pharmaceutical industry is one of the most strictly regulated business spheres. Key laws regulating the promotion of drugs are the federal law, On Advertising, the federal law, On Pharmaceuticals, as well as the draft law, On Circulation of Pharmaceuticals, which should have come into effect at the beginning of 2010. There are also subordinate documents (eg guidelines and letters) on particular issues related to the promotion of medicines issued by the Ministry of Health and Social Development of Russia, the FAS, the Superior Arbitration Court of Russia and other structures. The draft law, On Circulation of Pharmaceuticals, does not focus on advertising and only covers information about medicines; it is basically the same as the On Pharmaceuticals law. The latter allows the publishing of information on OTC drugs in general interest and specialist periodicals, as well as publications issued by manufacturers. Information on prescribed medicines can only be provided to medical practitioners and pharmacists in specialist periodicals, reference books, monographs, research papers, reports at scientific events and instructions prepared specifically for doctors. Advertising in the mass media is only allowed for OTC drugs. It should not present a medicine as unique in any respect or confuse a customer about its contents, origin, newness or patent. Ads should not compare a drug to that of a competitor and spoil the overall reputation of pharmaceutical manufacturers. Finally, they should not claim a guaranteed effect for the product, nor suggest a specialist consultation is not required. If any of these rules are broken, further advertising of the medicine can be banned, or the advertiser can be forced to change the advertising approach.

The On Advertising law echoes most of the above statements, but also covers the advertising of medical goods, medical services (including treatment methods). It gives some more specific restrictions regarding the content of pharmaceutical advertisements, as well as specific directions on advertising particular medical products or services. These state that medical advertisements should not: address the under-aged; refer to particular cases of recovery as a result of taking the advertised drug and contain words of gratitude related to using it (excluding ads targeted at specialists); suggest to a healthy person that he or she needs to take the medicine (unless it is a prophylactic drug); contain a suggestion that a consumer has a particular disease or health disorder; or state that the safety or effectiveness of the drug is guaranteed by its natural origin, etc. Medical advertisements for consumers must contain information on contraindications and possible side effects. Abortion services can be advertised, but there are numerous restrictions on the media used. There are also industry associations’ national and international codes of practice. Members of the Association of International Pharmaceutical Manufacturers operating in Russia have their own Marketing Practice Code. Russian manufacturers do not have such a document. The Russian Association of Pharmaceutical Marketing is still in the process of creating its own code of practice, but refers to a number of other documents, such as the Russian Advertising Code of the Russian Advertising Council, the International Chamber of Commerce (ICC) International Code of Advertising Practice, Private Medical Practitioner’s Code (adopted by the First All-Russian Association of Private Medical Practitioners), the Russian Doctor’s Code of Ethics and the ICC/ESOMAR International Code. Sophia Malyavina, Assistant to the Minister of Health and Social Development of Russia, told us in April that the Ministry “is currently preparing a number of changes in the fundamentals of legislation, which regulate relations between the medical community and pharmaceutical manufacturers. These concern certain restrictions, for which we have taken into account European legislation in this field. Thus, for example, it is planned to ban doctors from visiting industry events organised by one manufacturer. The regulation also covers the receiving of presents from manufacturers, visits to doctors by medical representatives during their working hours, the writing of prescriptions on letterheads prepared in advance and the mentioning of particular drugs and a number of other aspects of relations between the medical and pharmaceutical community. Any breach of these rules will result in the application of measures such as monetary fines and temporary suspension from work.”
BUSINESS INTELLIGENCE RESOURCES

Information about the Russian pharmaceutical market is easily available. There are several research companies specialising in surveys in this sphere, the most well-known and most frequently referenced by experts and the media being DSM Group, PharmExpert and COMCON-Pharma. They provide general market overviews for free or publish some data and charge for more specific research reports.

COMCON-Pharma specialises in researching medical practitioners, medical representatives and patients’ opinions, employing patented databases MEDI-Q, PHARMA-Q and PrIndex (Prescription Index). It also has a special database, ContentaMedicalIndex, for the analysis of pharmaceutical advertisements and content analysis of articles in specialist medical periodicals.

DSM Group publishes monthly overviews of the Russian pharmaceutical market containing information on the market volume and structure, import volume, pricing, as well as leading pharmaceutical manufacturers and brands. The overviews are based on the analysis of volume and structure of product circulation in the retail pharmacy network (all licensed pharmacies in the country).

Other large research companies, like All-Russian Public Opinion Research Centre, COMCON and Gallup, also provide market surveys (volume and dynamics, product range, communications activity on the market, influencer audits and so on) and brand surveys (brand presence, awareness and communications activity, preferences of consumers and the professional community, testing communication messages, etc), as well as consumer characteristics, consumer and expert opinion research. Communications agencies offer monitoring of media coverage of the industry for their client companies working in this industry. They employ a wide variety of quantitative and qualitative research techniques.

The Federal State Statistics Service (Rosstat) provides open data on the social and economic aspects influencing the pharmaceutical industry, demographic parameters of the population, morbidity rate, quantitative indicators of healthcare industry development, including the numbers and availability of healthcare institutions and medical personnel, the numbers of disabled people and availability of special care.

Almost every large research company publishes its own periodical. FORUM-Q is produced by COMCON-Pharma and Farmatsevticheskii Vestnik by PharmExpert. Various open analytical data are also available on their websites. DSM Group publishes monthly ratings of Top 100 pharmaceutical brands and manufacturers by sales volume.

The Association of International Pharmaceutical Manufacturers and the Remedium Group of Companies publish a monthly bulletin on the Russian pharmaceutical market featuring national and regional market trends (available in English on www.aipm.org).

There are also internet portals providing both business intelligence information for pharmaceutical companies and specialist information for the professional community. A wide variety of official documents, as well as numerous reports and publications covering various medical and social issues, is also available on the website of the Ministry of Health and Social Development of Russia (www.mindrassoc.ru).

Regarding information for medical practitioners, specialist periodicals are well-established in Russia. There are abstract journals and bulletins for specialists in almost every field issued by research institutions, universities, professional associations and private publishers. However, few practitioners and healthcare institutions can afford a long-term subscription to several periodicals. This is why a significant number of doctors name pharmaceutical company representatives as the most important source of information on new medicines after medical reference books. However, they are not considered to be the factor which has a strongest impact on which drug is prescribed. There is a national and local association of specialists in almost every medical practice area that hosts special events and organises training programmes for its members.

FORMATS OF DOCTORS’ INTERACTIONS WITH PHARMACEUTICAL COMPANY REPS

<table>
<thead>
<tr>
<th>Format</th>
<th>% of respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal talk</td>
<td>88.1</td>
</tr>
<tr>
<td>Seminars and presentations organised by a manufacturing company</td>
<td>67.2</td>
</tr>
<tr>
<td>Medical representative’s presentation at a morning conference in a medical institution</td>
<td>24.4</td>
</tr>
<tr>
<td>Contact authorised by chief doctor (head of division)</td>
<td>21.5</td>
</tr>
<tr>
<td>Study groups, schools</td>
<td>12.3</td>
</tr>
</tbody>
</table>

Source – MEDI-Q, Medical Practitioners’ Opinion Poll, November 2009
FOCUS ON RUSSIA

PR AND ADVERTISING EXPERTISE

As the Russian pharmaceutical market is one of the most actively developing markets in the world, pharmaceutical companies have become sought-after clients for communications agencies. Communications practitioners’ interest in this industry has been fuelled further by the fact that the pharmaceutical market was one of the few to demonstrate consistent growth in 2008-2009, despite the general recession, and experts forecast ongoing growth for the next two years.

Pharmaceutical marketing is a relatively young area of expertise for Russian communications practitioners. This is, however, characteristic of the Russian communication services industry as a whole, which is only about 20 years old. Specialisation is not that distinct among market players, nor is it offered by institutions providing higher education in the field of PR and marketing communications. However, medical universities do teach pharmaceutical company representatives.

Healthcare communications expertise can be gained via educational programmes, training and special events organised by consultancies, research companies, professional associations and specialist and business periodicals. Thus, COMCON-Pharma hosts the School of Pharmaceutical Marketing, a series of seminars designed around current market needs and delivered by communications practitioners working for key players on the domestic pharmaceutical market. Round-table discussions on particular aspects are organised by the Russian Association of Pharmaceutical Marketing. Healthcare marketing strategies are also discussed at large pharmaceutical industry events.

Though healthcare communications as a field of expertise is still in its infancy in Russia, there have been several communications campaigns which demonstrate a high level of professionalism and innovative strategic approach. One recent example is the nationwide campaign to develop mass voluntary blood donation, launched by the Ministry of Health and Social Development as part of the five-year programme of Blood Service development, established in 2008. The campaign was designed and implemented by the Ministry, in conjunction with several communications agencies. The strategy of the campaign was to build the social institution of blood donation. The integrated communications programme included the creation of a website and a hotline on blood donation issues, a series of events (over 500 in 2008 and over 1,000 in 2009), a nationwide public service advertising campaign, media relations, business partnership programmes, as well as creating a new corporate style for the Blood Service and a corporate culture programme for its employees.

As a result of the 18-month programme, by the end of October 2009, donor numbers had grown by two per cent nationwide (including target and non-target regions), in several regions reaching levels equivalent to those across Europe (35-40 per thousand). In 2009, the campaign won two national industry awards and was nominated for three international awards: the SABRE Awards, the IPRA Golden World Awards and the European Excellence Awards.

The Author
Andrey Barannikov, CEO, SPN Ogilvy, and vice president, Russian Public Relations Association, supplied these latter sections and the charts.

Source – MEDI-Q, Medical Practitioners’ Opinion Poll, November 2009

TOPICS OF MEDICAL REPS’ PRESENTATIONS VS DOCTORS’ PREFERENCES

<table>
<thead>
<tr>
<th>Information about a new drug</th>
</tr>
</thead>
<tbody>
<tr>
<td>Argument for therapeutic effectiveness of the drug</td>
</tr>
<tr>
<td>Indications and contraindications</td>
</tr>
<tr>
<td>Information on availability of the drug in city pharmacies</td>
</tr>
<tr>
<td>Price of the drug in city pharmacies</td>
</tr>
<tr>
<td>Clinical drug trial data</td>
</tr>
<tr>
<td>Side effects of the drug</td>
</tr>
<tr>
<td>Information from congresses (conferences, symposiums)</td>
</tr>
<tr>
<td>Drug interaction (combined therapy)</td>
</tr>
<tr>
<td>Drug evaluation by renowned experts</td>
</tr>
<tr>
<td>Personal experience of drug prescription/recommendation</td>
</tr>
<tr>
<td>Upcoming events planned by the manufacturing company</td>
</tr>
<tr>
<td>Information about the drug in specialist periodicals</td>
</tr>
<tr>
<td>Discussing opportunities of cooperation with reps during patient care</td>
</tr>
</tbody>
</table>

Frequency of coverage of a topic
Doctors’ interest in the topic

% of respondents
FREQUENCY OF USE OF SUPPORTING PROMOTIONAL MATERIALS

Advertisements for particular drugs
Detailed description of the drug
Brochures for patients
National clinical trial data
Info on availability and price of the drug in pharmacies
Foreign clinical trial data
Copies of scientific articles (national)
Copies of scientific articles (foreign)
Advertising brochures about the company
Schemes (standards) of diagnostics and treatment
Advertising posters
Company price lists
Medical literature
Medical periodicals (magazines)
Catalogues of drugs produced by the company
Reference books on pharmaceuticals
Monographs
Information on CDs and DVDs

Source - MEDI-Q, Medical Practitioners’ Opinion Poll, November 2009

% of respondents

10 20 30 40 50 60

Documents frequently used by medical representatives
Documents frequently used by doctors

We’re always thinking.
And when an idea strikes, nothing else matters.