TO MEDICAL EDUCATION

• Essential advice on publishing trial data
• Why CME is a "must", not a "maybe"
• Involving opinion leaders – how to make it work

PLUS:
• 2 case studies
• 1 instant expert

FIND ALL THIS AND MORE @ WWW.PMLIVE.COM

© PMGROUP WORLDWIDE LIMITED 2009

Buy a copy of this guide online at www.pmlive.com or call +44 (0) 1306 740777
Be all together inspired

Effective Medical Education programmes involve scientifically sound concepts and the development of tailored communication packages. Implemented effectively, they can demonstrate a very positive ROI and strongly influence the way customers evaluate your brand.

As one of the top 5 UK healthcare Med Ed and PR agencies, our 600-strong global team prides itself in nurturing a strategic approach to modifying behaviours and providing counsel, to cultivate an ongoing communication needs of your brand.

From KOL development and management, through publications planning, to symposia development and management, Huntsworth Health offers a highly developed, strategic and creative solutions with the very best pharmaceutical companies across a broad range of therapy areas.

In addition to our medical communication expertise, Huntsworth Health is leading the way in integration, delivering consistent and cohesive communication across all four corners of the marketing mix, to all four corners of the planet.

By eliminating inter-agency competition, we work hand-in-hand together and together, via all appropriate communication channels, advising what's best for the brand, not what's best for the agency.

So whether you need an ad board, publication planning or a totally integrated communication programme, contact:

SandyRoyden@hhealth.com
+44 (0)1628 483196

www.hhealth.com

© PMGROUP WORLDWIDE LIMITED 2009

Buy a copy of this guide online at www.pmlive.com or call +44 (0) 1306 740777
Pharmaceutical companies invest heavily in the clinical trials that are an integral part of the development of their products. The publications resulting from these trials are critical to the market positioning of the products, intended to persuade prescribers and patients, and ultimately to increase product sales. The planning of publication of the results of the clinical trials is likely to be a key activity in the marketing strategy and will require due diligence and consideration. This involves:

- Positioning and key messages
- Competitors
- Place in the market
- Position in its life cycle
- The audiences likely to be interested in your product
- How best to communicate with the audience
- When you would like the information to be in the public domain.

**COMMON PITFALLS**

However, one of the most common aspects overlooked by pharmaceutical companies in this process is following the numerous publication guidelines that exist. In recent years, many companies have received bad press due to selective reporting of trial results and/or failure to meet the requirements of the journals that publish these results. This is likely to reflect a lack of understanding of the processes, information and standards now required by journals. This forms the basis of current good publishing practice and some journals have not been kind to these companies. Some of the other negative headlines deal with the tricky issue of ‘ghost writing’ and ‘ghost authorship’. Over the years, some key opinion leaders have not been backward in talking about occasions when they have been asked to put their name to a final draft manuscript that they have never even seen or, worse, author a paper from a trial that they had no involvement with and for which they had no involvement with the trial data. This continues to happen (and will likely continue to happen) with increasing frequency in the years to come.

Pharma has come in for some stick about the publication of data and the involvement of KOLs, so what are the common pitfalls and how best can you avoid them?

A bad press – some well-known cases have hit the headlines recently...

Select the correct publication and call +44 (0) 1306 740777.
There are some key points to consider when you are writing or reviewing manuscripts:

1. **Title and Abstract**: The title and abstract should be concise and informative. They should convey the main findings and conclusions of your study.
2. **Introduction**: The introduction should provide background information and state the purpose of your study. It should also include a clear statement of the research question.
3. **Methods**: The methods section should be detailed and reproducible. It should include information on the study design, data collection, and analysis.
4. **Results**: The results section should present the findings of your study in a clear and concise manner. It should include relevant tables and figures.
5. **Discussion**: The discussion section should interpret your findings in the context of existing research. It should also address the limitations of your study and suggest areas for future research.
6. **Acknowledgments**: The acknowledgments section should thank any individuals or organizations that contributed to your study.
7. **References**: The references section should include a list of all the sources that were cited in your manuscript.

**Ethical Considerations**

- **Patient Consent**: In studies involving human participants, informed consent should be obtained from all participants. This includes ensuring that participants understand the purpose of the study and the potential risks involved.
- **Confidentiality**: Confidentiality should be maintained throughout all stages of the study. This includes ensuring that personal information is not disclosed without the consent of the participant.
- **Blinding**: In studies involving interventions, blinding should be used to minimize bias. This includes ensuring that participants, investigators, and evaluators are unaware of the allocation to treatment groups.

**Conclusion**

In conclusion, writing and reviewing manuscripts requires careful planning and attention to detail. By following these guidelines, you can ensure that your work is clear, concise, and impactful.
In summary – key points to remember

1. Register your clinical trials (ideally before patients are recruited) – it will be difficult to publish results if not done.
2. Get authors involved as early as possible.
3. Make sure all authors meet authorship criteria – you don’t want to be accused of ghostwriting.
4. Acknowledge everyone involved in a trial, including writing of the manuscript.
5. Provide financial and conflict of interest disclosures, according to journal requirements.
6. Be transparent!
7. Keep up to date with publication guidelines – they are constantly evolving.

It is not appropriate to send a final or near final draft of a paper to an author (or their company) before an outline is even written (a short phone conversation or meeting with the author is sufficient).

In the interests of transparency, readers should be able to identify all contributors to manuscripts. Journals that operate with the contributor system also require one of the authors to take public responsibility for the content of the paper.

As already outlined, the authors of the study and content of the paper must have access to and involvement from the start of the project. This is ghostwriting if anyone other than the authors themselves do any writing. If you do this you will have committed professional misconduct.

PREPARATION OF MANUSCRIPT

The systematic manner in which scientific papers are being prepared and published is under increasing scrutiny. Editors of scientific journals have requested that authors state whether their manuscripts have been “written by professional medical writers”.

The European Medical Writing Association (EMWA) provides the following guidance:

Professional medical writers are trained in translation, logical structuring and presentation of scientific information. There has been a professionalisation of medical writing in recent years. EMWA states that the contributions of medical writers are acknowledged, such as “providing editorial assistance,” “providing medical writing assistance,” “providing medical writing assistance, including writing of the abstract or introduction of the paper”, “providing medical writing assistance, including writing of sections of the paper”, “providing medical writing assistance, including writing of the draft of the manuscript”, “providing medical writing assistance, including writing of the draft of the manuscript, and proofreading or editing the draft of the manuscript”, “providing medical writing assistance, including writing of the draft of the manuscript, and proofreading or editing the draft of the manuscript, and offering suggestions, and offering guidance on how to improve it.”

The contribution of the medical writer should be acknowledged in the Acknowledgments section of the paper and should be stated in the Methods section as well. It is good medical practice to list the names of all medical writers in the manuscript. The following is an example of how this can be done:

© PMGROUP WORLDWIDE LIMITED 2009

Buy a copy of this guide online at www.pmlive.com or call +44 (0) 1306 740777

PMGROUP WORLDWIDE LIMITED 2009
If you're looking for exceptional results for your brand in the UK or across Europe, choose an exceptional agency. Choose Brand(x), the new European hub agency for Lowe Healthcare Worldwide. Work with a highly experienced team that will provide the special blend of expertise your brand needs for success. This includes unique branding capability, inspired advertising, promotion and tailored integrated medical education and public relations. Our European and Global network joins the leading brands that already benefit from our services. Please call Imelda Garner-Patel on +44 (0) 20 8987 6700.
Non promotional activities and CME

Marking public scrutiny of promotional activities has created increased importance for non-promotional activities. Are you pursuing enough opportunities for CME?

Traditionally pharmaceutical companies have used promotion of products direct to healthcare professionals as the mainstay of their marketing approach. However, whilst these promotional activities have been aligned with market authorisations, the industry generally has come under increasing public scrutiny and criticism over the last five years for the ethics and worthiness of some activities.

This has led to tightening of the Association of the British Pharmaceutical Industry (ABPI) and European Federation of Pharmaceutical Industries and Associations (EFPIA) Codes of Practice, as well as the development of clinical trials registries and publication guidelines.

Together, these changes have provided new opportunities and increased the relative importance of non-promotional activities which can cover areas such as disease awareness and unmet medical need, although products can still be mentioned as part of an unbiased appraisal of all therapy options.

It is clear from widespread experience in the US that continuing medical education (CME) – educational activities undertaken by qualified doctors who want to maintain and develop their clinical skills – is a non-promotional activity they highly value. Pharma companies in the UK and Europe have varied in their response to the changing European environment, but actions they have taken include (see Figure 1):

- Considering non-promotional activities as an integrated part of the strategic communications mix and building them into tactical plans
- Separating the budgets for promotional and non-promotional activities
- Completely separating the functions and staff involved in these different activities, with promotional activities remaining with the marketing groups and medical departments given responsibility for non-promotional work

WHAT'S IN IT FOR ME?

So why should you budget for activities where you can't push your key messages?

Firstly, products cannot be actively promoted before they have a marketing authorisation. Secondly, it is clear that continuing medical education is a highly valued non-promotional activity which can enhance the worthiness and impact of your products. Examples of non-promotional medical education activities include:

- Market research
- Corporate activities
- Press releases (non-product focused)
- Pre-launch communication of new scientific data as part of a balanced programme
- Non-clinical skills training
- Disease awareness activities
- Disease management initiatives
- CME accredited activities
- Meetings
- Promotional materials
- Handouts
- Patient champions

1. The evolving response of industry to the increasing promotional/non-promotional divide

<table>
<thead>
<tr>
<th>BUDGET SEPARATION</th>
<th>TOTAL SEPARATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grant to CME provider</td>
<td>Marketing – promotional</td>
</tr>
<tr>
<td>Medical and marketing act on project basis</td>
<td>Medical – non-promotional</td>
</tr>
<tr>
<td>Potential for joint implementation</td>
<td>Potential for joint implementation</td>
</tr>
</tbody>
</table>
When to use promotional or non-promotional approaches

<table>
<thead>
<tr>
<th>Promotional</th>
<th>Non-promotional</th>
<th>Non-promotional or pre-launch CME</th>
</tr>
</thead>
<tbody>
<tr>
<td>• When focus is on product, • When marketing authorisation is in place</td>
<td>• When focus is on awareness/therapy options, • When target is a new target market</td>
<td>• Educational, • Pre-launch, • Entice to new/market entry area</td>
</tr>
<tr>
<td>• When representatives are involved to support a portfolio and maintain market presence</td>
<td>• When focus is on awareness/therapy options</td>
<td>• Educational, • Promotional activity, • Maintain corporate profile</td>
</tr>
<tr>
<td>• When messages relate to specific products or disease areas</td>
<td>• When focus is on awareness/therapy options</td>
<td>• Educational, • Promotional activity, • Maintain corporate profile</td>
</tr>
<tr>
<td>• When programme is key to too-promotional environment in established market</td>
<td>• When focus is on awareness/therapy options</td>
<td>• Educational, • Promotional activity, • Maintain corporate profile</td>
</tr>
<tr>
<td>• Establish KOL relationships</td>
<td>• When focus is on awareness/therapy options</td>
<td>• Educational, • Promotional activity, • Maintain corporate profile</td>
</tr>
</tbody>
</table>

Increased awareness of CME in Europe has been borne out by our recent company survey reported to the European network, where all five major European markets reported high levels of awareness of CME and an increasing importance by doctors. European markets are formally recognized by independent national bodies such as the Royal College of Physicians in the UK and the European Federation of Medical Specialists (UEMS) and are likely to gain wider use. The activity documented by companies considering most important by doctors was non-promotional programme (within a balanced framework).

The activity documented by companies considering most important by doctors was non-promotional programme (within a balanced framework).

The differing options of promotional, non-promotional medical education and ACCREDITED CME are appropriate in different situations and can be selected accordingly (Figure above).

© PMGROUP WORLDWIDE LIMITED 2009
Buy a copy of this guide online at www.pmlive.com or call +44 (0) 1306 740777
Critical success factors

- Online physician communities.
- Digital case studies
- Virtual patient applications
- Moderated discussion/chat rooms
- Text messaging
- e-books
- Interactive treatment pathways
- Disease education websites
- Radio and TV broadcasts
- Webcasts and tutorials
- Interactive CD ROMS

Digital delivery channels are likely to become the most frequently used and the most cost-effective in the future.


directives? If you answer “no” to any of the above questions, you should reconsider your options.

- To ensure the activity is aligned with regulations such as the ABPI Code and your individual company operating policy and internal codes of practice. At present, input into accredited CME events from pharma companies varies from country to country in Europe but is expected to be limited to financial support only (as in the US) to maintain the balance of the CME provider.

It is interesting to note that our recent Expert Survey, 2007), second most important thing that doctors felt pharmaceutical companies could do more of (Ogilvy4D Clinical survey of more than 400 medical opinion leaders (Ogilvy4D Clinical

Professional Health Education, an Ogilvy Healthworld company. She can be contacted on sue@ogilvy.com or on 01865 320222.

© PMGROUP WORLDWIDE LIMITED 2009

Buy a copy of this guide online at www.pmlive.com or call  +44 (0) 1306 740777
Managing KOL Relationships

Developing an opinion leader programme is complex, however building and maintaining lasting relationships can prove valuable for years to come.

Pharmaceutical companies that have a strong opinion leader (KOL) programme understand the importance of engaging with leading experts who are involved in the development and approval of new medicines. A well-planned approach with intelligent use of resources can lead to successful programs with benefits for all parties as well as patients and the wider public.

The valuable relationship between KOLs and pharmaceutical companies requires foundation built on trust and openness. A well-planned and managed approach, with intelligent use of resources, can lead to successful programs with benefits for all parties as well as patients and the wider public.

Terminology

‘KOL’, ‘expert’, ‘thought leader’ and ‘specialist’ are terms often used by pharma to refer to clinical experts that they engage with. It is important to have a clear understanding on terminology for each role. A ‘KOL’, ‘expert’ or even a form of title that reflects their job title, eg, senior lecturer, can impact on how the KOL is positioned, (eg, ‘generalist’ versus ‘specialist’). Discuss terminology with your KOL. Be aware that if a KOL becomes associated with only one specific disease, this may influence the perception of pharma and their medical peers about that KOL’s experience in the wider therapeutic condition, resulting in a ‘block’ on them being invited to participate in other disease areas.

Involving Your KOLS Early in the Product Life Cycle

KOL input can be beneficial at all stages of the product lifecycle. However, early input maximises the amount of time available to develop relationships and initial stages of the life cycle. KOLs are more likely to have an advisory capacity:

- Product lifecycle and KOL involvement
- Advisory roles
- Advocate roles
- Pre-clinical phase
- Phase I
- Phase II
- Phase III
- Phase IV
- Post-launch

© PMGROUP WORLDWIDE LIMITED 2009
Buy a copy of this guide online at www.pmlive.com or call +44 (0) 1306 740777
### Identification of opinion leaders: types of approach

<table>
<thead>
<tr>
<th>TYPE OF ACTIVITY</th>
<th>HOW BENEFITS</th>
<th>ACTIVITY</th>
<th>HOW BENEFITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Desk research</td>
<td>Helps initial identification of potential KOLs</td>
<td>B. Review publications</td>
<td>Helps increase understanding of KOL sphere of influence</td>
</tr>
<tr>
<td>Review websites</td>
<td>Helps initial identification of potential KOLs</td>
<td>Presentation and chairing Skills training</td>
<td>Increase identification of KOL segments</td>
</tr>
<tr>
<td>Medical education agencies</td>
<td>Experience of working with a number of years</td>
<td>Review health economics</td>
<td>Experience in working with different functional groups</td>
</tr>
<tr>
<td>Conference materials</td>
<td>Assess presentation and chairing skills</td>
<td>Review symposia</td>
<td>Assess presentation and chairing skills</td>
</tr>
<tr>
<td>Workshops</td>
<td>Assess presentation and chairing skills</td>
<td>Review post marketing</td>
<td>Assess presentation and chairing skills</td>
</tr>
<tr>
<td>Health economics</td>
<td>Assess presentation and chairing skills</td>
<td>Review post marketing</td>
<td>Assess presentation and chairing skills</td>
</tr>
<tr>
<td>Symposia</td>
<td>Assess presentation and chairing skills</td>
<td>Review post marketing</td>
<td>Assess presentation and chairing skills</td>
</tr>
<tr>
<td>Workshops</td>
<td>Assess presentation and chairing skills</td>
<td>Review post marketing</td>
<td>Assess presentation and chairing skills</td>
</tr>
<tr>
<td>Publications, eg, books, website editorials</td>
<td>Experience of working with a number of years</td>
<td>Workshops</td>
<td>Experience in working with different functional groups</td>
</tr>
</tbody>
</table>

THE MAKING OF A GOOD KOL RELATIONSHIP

A coordinated and integrated approach will mean that KOLs are not under-used and consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.

**Some tips on managing KOL relationships**

- **Identify the right people** – this should be the first step in building any relationship. It is important to know the KOL’s willingness to interact with a company and their general level of interest. 
- **Identify the right people** – this should be the first step in building any relationship. It is important to know the KOL’s willingness to interact with a company and their general level of interest. 
- **Assess presentation and chairing skills** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.
- **Be transparently** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.
- **Under-used and consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.**

**Some tips on managing KOL relationships**

- **Identify the right people** – this should be the first step in building any relationship. It is important to know the KOL’s willingness to interact with a company and their general level of interest.
- **Assess presentation and chairing skills** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.
- **Be transparently** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.

**Some tips on managing KOL relationships**

- **Identify the right people** – this should be the first step in building any relationship. It is important to know the KOL’s willingness to interact with a company and their general level of interest.
- **Assess presentation and chairing skills** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.
- **Be transparently** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.

**Some tips on managing KOL relationships**

- **Identify the right people** – this should be the first step in building any relationship. It is important to know the KOL’s willingness to interact with a company and their general level of interest.
- **Assess presentation and chairing skills** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.
- **Be transparently** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.

**Some tips on managing KOL relationships**

- **Identify the right people** – this should be the first step in building any relationship. It is important to know the KOL’s willingness to interact with a company and their general level of interest.
- **Assess presentation and chairing skills** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.
- **Be transparently** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.

**Some tips on managing KOL relationships**

- **Identify the right people** – this should be the first step in building any relationship. It is important to know the KOL’s willingness to interact with a company and their general level of interest.
- **Assess presentation and chairing skills** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.
- **Be transparently** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.

**Some tips on managing KOL relationships**

- **Identify the right people** – this should be the first step in building any relationship. It is important to know the KOL’s willingness to interact with a company and their general level of interest.
- **Assess presentation and chairing skills** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.
- **Be transparently** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.

**Some tips on managing KOL relationships**

- **Identify the right people** – this should be the first step in building any relationship. It is important to know the KOL’s willingness to interact with a company and their general level of interest.
- **Assess presentation and chairing skills** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.
- **Be transparently** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.

**Some tips on managing KOL relationships**

- **Identify the right people** – this should be the first step in building any relationship. It is important to know the KOL’s willingness to interact with a company and their general level of interest.
- **Assess presentation and chairing skills** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.
- **Be transparently** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.

**Some tips on managing KOL relationships**

- **Identify the right people** – this should be the first step in building any relationship. It is important to know the KOL’s willingness to interact with a company and their general level of interest.
- **Assess presentation and chairing skills** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.
- **Be transparently** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.

**Some tips on managing KOL relationships**

- **Identify the right people** – this should be the first step in building any relationship. It is important to know the KOL’s willingness to interact with a company and their general level of interest.
- **Assess presentation and chairing skills** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.
- **Be transparently** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.

**Some tips on managing KOL relationships**

- **Identify the right people** – this should be the first step in building any relationship. It is important to know the KOL’s willingness to interact with a company and their general level of interest.
- **Assess presentation and chairing skills** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.
- **Be transparently** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.

**Some tips on managing KOL relationships**

- **Identify the right people** – this should be the first step in building any relationship. It is important to know the KOL’s willingness to interact with a company and their general level of interest.
- **Assess presentation and chairing skills** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.
- **Be transparently** – this will mean that KOLs are not over-used or under-used. Consistency in approach and relationship will provide for good partnerships. Therefore, management and integration of this relationship across the different functional groups is of key importance.
Seek your educational needs.

Experienced medical writers and content managers.

We are looking for experienced medical writers, account managers, and team leaders in healthcare communications.

We are recruiting for a minimum of 2 years' experience leading healthcare communications agencies. We are looking for proven track records of sales and client management, as well as a desire to grow and develop within these roles. We are recruiting for a number of the leading healthcare communications agencies across the UK.

If you are looking for your next move or require career advice then please contact Carys on confidential 07988916553 or 07768448525 or Carys.carr@millenniumrecruit.co.uk.

www.cmrojournal.com

Whatever your content we have a publication to match…

Independent and authoritative peer review

Collaborative editorial approach

Accept submission of original research and review articles

No page fees

Indexed by all major databases including Medline, Current Contents and EMBASE

Broad coverage, from mechanism of action to post market studies

For more information contact Phil Garner, email address phil.garner@informa.com

(please quote PM in all correspondences)

Impact Factor 2.662
Impact Factor 3.062
Impact Factor 1.733

© PMGROUP WORLDWIDE LIMITED 2009

Buy a copy of this guide online at www.pmlive.com or call +44 (0) 1306 740777
Patient education is a fundamental aspect of medical education. For everyone, on how to implement these important initiatives...

Not only is patient education increasingly necessary for certain conditions, but funding and information are often actively sought from the industry. This article looks at the pros and cons of patient education and provides some helpful tips and guidance for those considering an initiative.

WHY OPT FOR A PATIENT EDUCATION PROGRAMME?
Along with some health providers, patients increasingly view themselves as decision-making partners that work with medical staff to agree the best management strategy for their condition and lifestyle. The new 'patient-centred NHS' calls for patients to take a more active role in their own health. This paradigm shift means consumers now proactively seek reliable information about their medicines and their medicines work. So education also contributes to rational medicines use.

THE DOWNSIDE
Despite increasing demand for better quality information, particularly via the Internet, a practical framework for this is still lacking.

Current regulatory systems impose restrictive conditions on direct communication with patients and many companies believe they are insufficiently clear about what is possible in terms of patient education. Code breach precedents have also caused companies to add further restrictions with their own guidelines.

TYPES OF INITIATIVE
Many different initiatives can be employed to ensure that patient-friendly information is distributed when it is needed – in many cases before diagnosis.

- Disease awareness campaigns: must always be non-branded to comply with the UK’s stringent restrictions on DTC advertising of medicines. MHRA guidelines stipulate that the main objective must be to encourage people to take appropriate steps, which may include seeking advice from healthcare professionals. They can be incredibly successful, particularly where it’s embarrassing, such as in female incontinence.

- Public–private partnerships: provide information to cover wider patient needs, such as guides covering treatment options or specific therapeutic areas. These transparent partnerships between the industry and local authorities (e.g., a PCT) and sometimes initiatives for smoking cessation where the PCT could not otherwise afford to provide a value-added service to patients.

- Concordance programmes: to teach patients new skills for conditions that may be asymptomatic.
If you are considering spending some of your budget on a patient education initiative worthwhile? Many disease areas exist by talking to health providers and patient groups to find out what they might need. When the market leader in a well-funded service remains under the terms of its agreements, support from a medical education provider is essential. This has led to the establishment of a mentor scheme. Educate patient education materials, especially those focused on chronic illness or that are non-branded, may be translated into several languages – particularly in disease areas that affect certain ethnic minorities.

MAKING IT WORK
If you decide to provide written educational information to patients, it is crucial to ensure that all content is accurate, balanced and accessible to the patient. Further clarity can be achieved through Crystal Marking - www.plainenglish.co.uk. This may also be translated into several languages, particularly in disease areas that affect certain ethnic minorities.

© PMGROUP WORLDWIDE LIMITED 2009
Buy a copy of this guide online at www.pmlive.com or call +44 (0) 1306 740777
“Reputation in Medicine are not forged overnight.

As an premium subscription title BJHM has

The role of CD-26 deamidase is to protect incretin peptides, in a way better than cell-surface receptors. The incretin peptides are broken anyway by the ubiquitous neutral peptidase DPP-IV.

Incretin mimetics provide a safe and effective alternative to sulphonylureas for the improvement of glycaemic control in type 2 diabetes. However, the incretin effect is reduced in patients with type 2 diabetes compared with healthy subjects. Restoration of this incretin response is therefore an attractive therapeutic target. Several incretin receptor agonists (incretin mimetics) have been developed which are active when administered orally.

The incretin response is diminished in patients with type 2 diabetes, and restoration of this incretin response is therefore an attractive therapeutic target. Several incretin receptor agonists (incretin mimetics) have been developed which are active when administered orally. Exendin-4 (exenatide, Byetta, Eli Lilly & Amylin Pharmaceuticals, USA) is a 39-residue peptide which is produced by the Gila monster (Heloderma suspectum), a desert lizard capable of extended periods of fasting. It is a GLP-1 analog and is about 50% homologous with GLP-1. It is also a glucagon analog and is 93% homologous with glucagon.

Exendin-4 is administered subcutaneously, has been shown to reduce baseline meal glucose compared to placebo, and is associated with weight loss and a reduction in appetite.

Vildagliptin (Galvus, Novartis, Basel, Switzerland) is a DPP-IV inhibitor with a defined 100% homology with glucagon-like peptide-1 (GLP-1). Vildagliptin is well-tolerated and has been shown to be effective in type 2 diabetes.

The role of DPP-IV inhibitors in diabetes is discussed in detail in this article.
Haemophilia is a rare, genetic, bleeding disorder treated by replacement of a missing protein called a clotting factor. From patient research it is clear that patients are not well informed about their treatment and many do not know what they are taking. Baxter BioScience wished to address this.

The Challenges

Patients have very limited understanding about their treatment options and many do not know they are taking the correct specialist medication to receive appropriate treatment.

Solution

A value-adding educational service was initiated to benefit the haemophilia community. The website aimed to act as a central resource for patients and key stakeholders to ensure information was appropriate to the needs of patients and their carers.

The site is split into a general section and a password-protected section specifically for Advate patients. It was developed in conjunction with key stakeholders to ensure it was comprehensive and useful.

To launch the initiative, the site was promoted via all haemophilia centres.

Results

- Feedback from the haemophilia centres to date has been very positive
- Feedback from centres has shown nurses to be using the site as an extended resource to deepen awareness of and interest in the condition
- Patient Council initiated as a means to receive in-depth feedback for potential site expansion, with further qualitative research planned.

Narcolepsy is a rare and little-known condition. Through patients recognising their condition and presenting to their GP with some knowledge of narcolepsy, they are more likely to be referred to the correct specialist for appropriate treatment.

The Challenges

Unfortunately, narcolepsy is poorly understood and many sufferers do not seek help. It takes an average of nine years for someone with narcolepsy to be diagnosed, hence the condition is so under-recognised.

Solution

The power of a well-respected, prime-time TV documentary was used to raise awareness of narcolepsy among both consumers and the medical community, supported by a consumer and medical features programme. One-to-one meetings with researchers and broadcast journalists were held to gain their expertise about the condition. We worked closely with patient groups in the sector to secure their involvement in programmes and to ensure they were prepared to deal with enquiries after the broadcasts. Lead clinicians were media trained and patient case studies were fact-checked to ensure they were suitable.

Results

- Two documentaries on prime-time TV (Nap Attack, an hour-long BBC1 documentary and Living Nightmare); a 50-minute programme on BBC2's Horizon); a further two regional TV broadcasts, and 114 pieces of print coverage raised awareness of narcolepsy
- 400 people contacted one London clinic alone in the 48 hours following the broadcast of Nap Attack
- One-third more patients were receiving appropriate treatment and support as a result of the initiative.
Let the team at Springer Healthcare Communications keep you on the same wavelength as your customers.

With a team of professionals from both the medical education and publishing industries, Springer Healthcare Communications offers the full range of services to take your product right through the lifecycle, delivering your strategic solutions tailored to your product's needs.

Find out more about how we could put you in touch with your customers.

Contact Ann-Marie Cavanagh on +44 (0)1829 731 220 or email shc@springer.com.

www.springerhealthcare.com
Developing a med ed programme

FIRST… DETERMINE YOUR STRATEGY DONE

DEFINITION: A STRATEGIC OBJECTIVE ESTABLISHES THE ENVIRONMENT AND CONTEXT SO THAT THE
APPROPRIATE TACTICAL OBJECTIVE BECOMES EITHER OBVIOUS OR MORE CLEARLY DEFINED

1. Establish corporate strategy
   Develop your corporate mission/objectives and a summary of overall position and corporate strategy
   Clarify the resource available

2. Understand your external and internal environments
   Overview of the market – include a patient flow, changes in the NHS, government guidance, etc
   Competitor analysis – what are your road blocks to future success? Evaluate future trends/competitors
   SWOT – Strengths and Weakness are the internal perception of the company and your brand. Opportunities and Threats are the external factors you need to address

3. Develop the brand vision and strategic goal
   One sentence that sums up the positioning and effects of your brand. (Tailor brand messages to market segments)

4. Define the Critical Success Factors (CSFs)
   Four or five key actions that will overcome obstacles to achieve the brand vision and strategic goal
   eg, expand acceptance of Brand A among X stakeholder audience

5. Prepare the strategic objectives
   Elements that will build that tactical plan and drive the operational business for the year ahead
   Based on how you will ensure that each of the Critical Success Factors is met

THEN, DEVELOP YOUR TACTICS DONE

DEFINITION: A TACTICAL OBJECTIVE IS A DEFINED TASK THAT NEEDS TO
BE ACCOMPLISHED TO MOVE THE BRAND TO THE NEXT MILESTONE

1. Map your KOLs and other stakeholders
   Align with your brand and strategic objectives
   Include a measure of sphere of influence and advocacy

2. Draft your tactical objectives
   Deliver per strategy to determine your tactical programme, eg engage key rising stars in a communications programme

3. Identify suitable tactics
   Who should deliver the message, to whom, how and when (to maximise outputs for the year ahead)?
   Formulate your budget tactics
   Put evaluation criteria in place to measure success and RoI

4. Implement
   Schedule key tasks in the operational year, highlighting critical brand and environmental issues, and critical milestones for each tactic
   Ensure appropriate resource allocation for delivery, monitor budgets, and re-forecast if necessary
   Measure your success via the evaluation criteria from stage 3
Last year we became part of FD International, PR Week’s “International Consultancy of the Year”. By combining Santé’s award-winning medical education, marketing and media skills with FD’s financial, corporate and public affairs expertise, we can provide unparalleled range of consulting services, locally and globally.

This new partnership enhances Santé’s international capability, broadening our reach by providing a presence in most of the world’s major healthcare markets. This year we changed our name to FD Santé and moved to FD’s headquarters. If you would like to know how FD Santé can exceed your expectations contact Liz Shanahan, Managing Director, tel: +44 (0) 20 3077 0477 or info@fdsante.com.

Santé Communications has built a reputation for outstanding performance. Now we are innovating again.