

Thought Leader Engagement Planning: Words Matter and So Do Scientific Platforms

PHARMAVOICE: Why do you use the term thought leader rather than key opinion leader?

WEST: The term key opinion leader conveys a certain type of thought leader and it's too limiting, particularly for companies that are often looking for clinical leaders at the local and regional level, and these are people that clients often ask us to help identify. We believe the term thought leader better describes the full range of locally influential clinical advisors and policymakers who establish the clinical and economic value of new medical innovations. These people are a critical voice for extrapolating and translating science to bedside clinical practice.

PHARMAVOICE: Can you talk about how the word "opinion" fits into the lexicon?

EICHERT: A KOL who does a trial has formed an opinion largely based upon the trials and his or her own personal experience, which is formed in a very different environment to the one that a healthcare practitioner operates within the community experiences. That clinical trial experience needs to be translated into a real-world setting. It's those thought leaders, who actually digest and translate that experience into terminology, whose opinion is more meaningful to the practicing physician.

WEST: Pre-launch, it's really important to understand and engage those scientific academic leaders who are doing the clinical research to create awareness among clinical prescribers in the marketplace. But post-launch, it's those local and regional thought leaders whose opinions in translating that science into bedside clinical practice becomes crucial for the product to be a recognized and become desirable across the broad base of potential prescribers.

PHARMAVOICE: Industry and environmental changes are bringing the need for engagement planning for thought leaders to the forefront. What does that mean in both the medical affairs and commercial space?

WEST: The difficult thing for many companies to achieve is alignment and coordination in how they approach thought leader engagement. Identifying, segmenting, and prioritizing thought leaders is just the beginning of the journey. Then you need a systematic and aligned process for your own internal stakeholders to be coordinated in the way they engage thought leaders. In our mind that requires technology.

EICHERT: You have clinical and medical thought leaders, but you also have patients and caregivers, and companies do have to align the felt medical need of the practitioner with the felt medical need of the patient and the patient's family.

PHARMAVOICE: Do you feel that engagement planning with thought leaders is underutilized?

WEST: There is some form of thought leader engagement planning being done in most client organizations. The problem is, it's not particularly strategically driven or coordinated. We rarely see effective profiling and segmentation of the full range of thought leaders, who are key for targeted and effective engagement planning.

PHARMAVOICE: Who should have overarching visibility over this in an organization?

EICHERT: If the identification, profiling, segmentation, and



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engagement strategies are built on a common strategic platform, or scientific platform, which aligns the organization on the unmet medical need built on scientific evidence, it's easier to have a strategy that is better aligned. The medical tactics and brand tactics may vary, but the foundation of the communications and tactics is built on the same basic assumptions and beliefs. But in a matrix organizational structure, it's almost impossible to have one person own it all.

PHARMAVOICE: What do you see as the future of engagement planning?

EICHERT: As the rate of innovation accelerates, the window of opportunity for success is narrower and narrower. Companies need to make sure they're identifying the entire landscape of thought leadership.

WEST: The trajectory of a brand's

performance in the marketplace is established in the first six months of commercialization. Starting early and identifying those clinical leaders, knowing who those academic and scientific players are before launch and engaging them with your medical affairs team is really the path to performing fast.

PHARMAVOICE: How do you create better connections with thought leaders throughout a product's lifecycle?

WEST: There is a real need to understand the interests and perspectives of the thought leader and build a win-win environment.

EICHERT: Companies often get involved with the regional and local point of view too late, by which time they don't have much flexibility to modify or change the product story. Getting there early is key.

PHARMAVOICE: What does IQVIA offer in terms of engagement planning capabilities?

EICHERT: We've created a comprehensive identification, profiling, and segmentation capability that utilizes a wide range of methods and allows us to create customized scores, ranks, and segments that are more aligned to a specific brand strategy. By combining multiple methods and leveraging IQVIA big data, we can understand a lot about the people and how they are connected to each other. In addition, advanced analytics capabilities enable us to understand the dynamics of what's going on with these thought leader communities, which helps companies drive more meaningful campaigns, whether educational or promotional. Finally, engagement planning software help companies align their strategy and their engagements across the organization.

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