

## A KOL by Any Other Name

Too Toxic for Everyday Use, or Still the Best Term to Use?

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# Rate Pharma Marketing Buzzwords: Are They Good, Bad, or Just Plain Useless?

Lately, there's been a lot of criticism of pharma marketing "buzzwords" and *Pharma Marketing News* wonders what marketing professionals like you think of the many buzzwords commonly used by the pharmaceutical industry today. A selection of these buzzwords appears in the Pharma Buzzword Bingo Card below.

Please take a few minutes to tell us YOUR opinion about the usefulness of these terms:

**[Click Here to Take the Pharma Marketing Buzzword Survey Now!](#)**

The survey results will be summarized in the May 2015 issue of *Pharma Marketing News*. After you complete the survey, you will be able to see the summary of responses to date. Your comments are confidential (anonymous) unless you specifically provide your contact information at the end of the survey and allow us to attribute comments to you personally.

P H A R M				
B I N G O				
Gamification	Patient Centricity	Closed-Loop Marketing	POL (Patient Opinion Leader)	Sales Force Effectiveness
Big Data	KSOL (Key Social Opinion Leader)	Pharmaguy	Disruptive	Patient Empowerment
KOL (Key Opinion Leader)	Innovation (as in "Open Innovation")		Patient Journey	Target Audience
Market Access	Non-personal Communication	Transparency	Going Beyond the Pill	Cross-Channel Marketing
KAM (Key Account Management)	Patient Engagement	Multichannel Marketing	Patient Storytelling	Value-Added Services

**N**early two-thirds (62%) of physicians deemed to be genuine medical experts believe the pharmaceutical industry should replace the term “Key Opinion Leader” (KOL).

That was one of the insights gleaned from an international online survey presented at the Medical Affairs Leaders Forum in Berlin, Germany, in February, 2015. The survey of 185 pharma professionals and 199 “real” KOLs was conducted by System Analytic, which is a company that helps pharmaceutical teams “identify, map, and engage with their medical experts and key stakeholders.”

Sanjay Singhvi, Director, System Analytic, discussed more results and insights from the survey on a recent Pharma Marketing Talk show (<http://bit.ly/PMT235>).

### Defining “Key Opinion Leader”

According to the Pharma Marketing Glossary, Key Opinion Leaders are physicians who influence their peers' medical practice, including but not limited to prescribing behavior.

Pharmaceutical companies hire KOLs to consult for them, conduct clinical trials, give lectures and seminars, and occasionally to make presentations on their behalf at FDA regulatory hearings.

### What's a KOL Worth?

KOLs are valuable components of the physician marketing strategies of many pharmaceutical companies. How valuable? Marcia Angell, former editor in chief of the *New England Journal of Medicine*, estimated the worth of one good KOL is equal to 100,000 pharma sales reps:

“To buy a distinguished, senior academic researcher, the kind of person who speaks at meetings, who writes textbooks, who writes journal articles—that's worth 100,000 salespeople,” said Angell (see “How Drug Company Money Is Undermining Science”; <http://bit.ly/1yRWjf9>).

Angell is no friend of pharma—she wrote the book “The Truth About the Drug Companies: How They Deceive Us and What to do About It,” which I reviewed back in 2004 (see <http://bit.ly/pm31001>). Obviously, she merely pulled a number out of thin air for its sensational value. Whatever the worth of a KOL may be, without these influential physicians to legitimize claims made by sales reps, sales effectiveness might be much less than it is.

### Expert vs. High Prescriber

More than one industry expert has said that KOLs often are chosen more for their high prescribing habits than for their knowledge or other attributes.

This resulted in concerns by the medical community (many of whom participated in the research) that the term KOL is too closely associated with the world of marketing and is often used inappropriately for people who do not necessarily warrant the title.

“We received a lot of interesting points coming back from KOLs,” said Singhvi, “including ‘please don't ever send me an e-mail with the word KOL and please ask your pharma clients never to do that.’ There was quite an extreme range of views, however, from saying ‘I don't even want you to call me a KOL because it's associated with so many negative connotations’ to other KOLs saying ‘we're very happy with the term.’ I can't repeat a lot of the quotes because they were so inflammatory,” noted Singhvi.

This negative connotation affects the most important criterion for selecting KOLs: their credibility with other physicians. According to some KOLs surveyed by System Analytic, the term “Key Opinion Leader” puts them in a negative light with their colleagues, their peer groups, and those that work underneath them.

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### The Dark Side of KOLs

“We may need to seek them out and destroy them where they live,” said a Merck marketer quoted from an email regarding a “hit list” of doctors who had to be “neutralized” or discredited because they criticized Vioxx. This according to the Federal Court in Melbourne, Australia where in 2009 Merck & Co and its Australian subsidiary, Merck, Sharpe and Dohme, were sued by more than 1000 Australians, who claimed they suffered heart attacks or strokes as a result of Vioxx (see “Vioxx maker Merck and Co drew up doctor hit list”; <http://bit.ly/1aDdOdL>). These were physicians who were clinical investigators and advisory board members hired by Merck as key opinion leaders.

“It gives you the dark side of the use of key opinion leaders and thought leaders ... if (they) say things you don't like to hear, you have to neutralise them,” said a lawyer for the plaintiffs. “It does suggest a certain culture within the organisation about how to deal with your opponents and those who disagree with you.

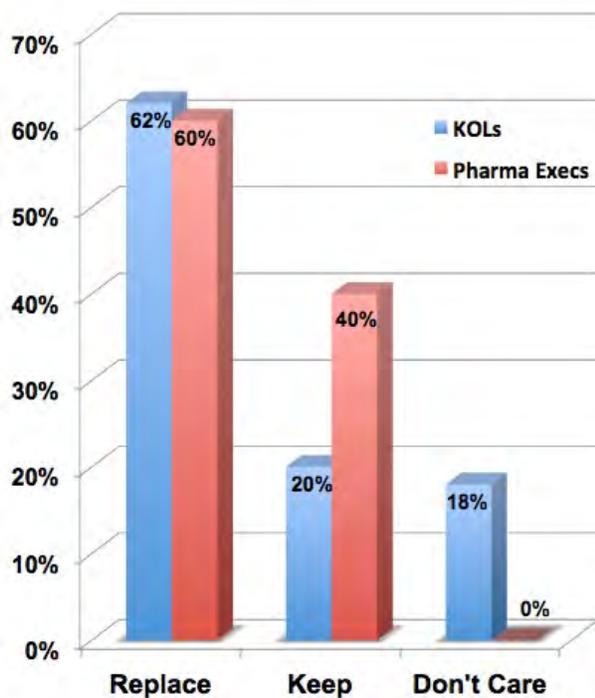
“Also see “Teva's ‘KOLs’ are Shams, Claim Former Sales Reps”; <http://sco.lt/8VTIYr>

“But on the other hand,” said Sanghvi, “there are people who say, ‘Hold on! The word KOL very succinctly and very clearly summarizes exactly what I do, which is I’m important and I have enough experience, expertise so that other people listen to me. Therefore, I am a leader, not a follower and the term key opinion leader fits me very well.’”

### Pharma’s Opinion

But how do pharmaceutical executives who work with KOLs everyday and who manage the KOL process, interactions, and engagements feel about changing the name? What name should be used instead? And, most importantly, will changing the name really change the game?

Despite the negative connotations, when questioned, 40% of pharmaceutical executives who participated in the survey opted to keep the name KOL (see Figure 1, below). This figure compares with just 20% of medical expert respondents in the KOL arm of the study. Yet 56% of pharma executives who took part in the survey said that industry should work towards a universal replacement of the term KOL.



**Figure 1.** Should the Term “Key Opinion Leader” Be Replaced? Results of System Analytic’s KOL Name Change Survey.

“A lot of pharma companies are still using the term,” said Singhvi. “But you raised some good points about the criteria for choosing KOLs such as the intellectual rigor and background of physicians, their

prescribing habits, their ability to enthrall an audience at a symposia because of their charm and their ability to speak, etc. A significant proportion of global pharmaceutical teams based in Europe and in the U.S. are moving away from the term KOL and opting to use alternative terms.”

### If Not KOL, What?

Unfortunately, there was no consensus on what that universal replacement should be. The most popular alternative among pharmaceutical executives was “external expert,” while only 4% of medical respondents appeared to favor that term.

Highest scoring alternatives among medical expert participants included “therapeutic area expert” and “expert physician” (see Figure 2, page 3). However, there was an overall lack of consistency on what exactly they thought the replacement term should be—with a total of 24 different options being put forward by the medical expert responders.

Some alternative terms such as “therapeutic expert” are too broad according to several KOLs taking the survey.

“Anyone above a certain level of education and age is a therapeutic area expert,” noted Sanghvi. “What matters is how you differentiate the real crème de la crème from all those other ‘experts.’”

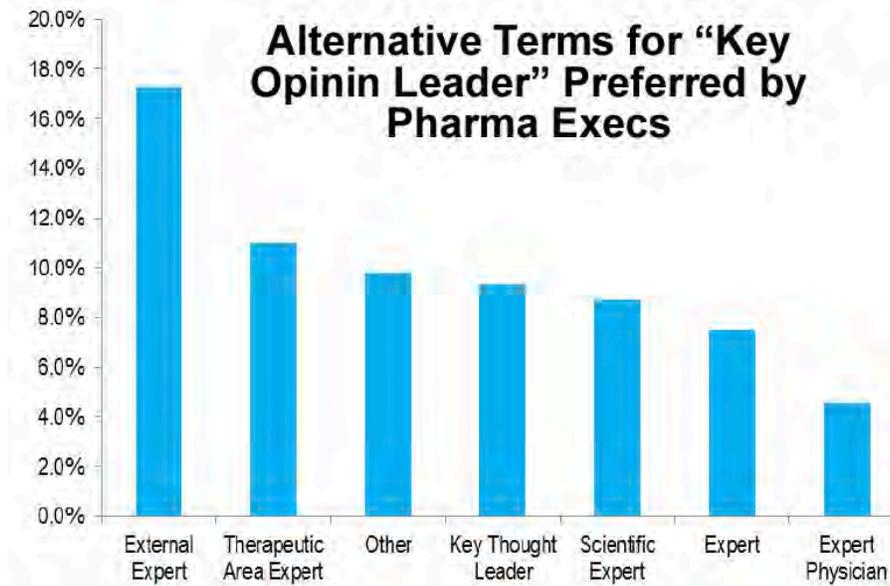
While 60% of KOL respondents said don’t call me a KOL, there was inconsistency in what they should be called instead. “Although ‘therapeutic area expert’ was the most-often cited alternative, only 8% of medical experts chose it. KOL respondents obviously weren’t really sure about the right terminology, but they feel there should be a change.”

Although this issue is being hotly debated in Europe, I have not heard about it here in the US. I doubt that changing the name will happen given how deeply rooted it is in the pharma marketing lexicon. Think of all the job descriptions and consultant speak that would have to change. Besides, changing the name is no guarantee that pharma will change the selection process.

### Online versus Real World Popularity

It’s interesting that popularity with other physicians is mentioned as a criterion for choosing KOLs. That’s something that is routinely measured on physician-only online communities such as Sermo, Doximity, Univadis, etc., which host discussions. On these sites, physicians can rate other physicians to determine who is the most popular and whose opinion is most trusted.

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**Figure 2.** Alternative Terms for KOL Preferred by Pharma Execs. Source: System Analytic survey.

According to Singhvi, some of his clients inquire about online KOLs with social media experience. “There’s an opportunity for research and analysis,” said Sanghvi, “and there are definitely different ways to categorize and segment those experts. One of the things that we’re doing is looking at the top 10 or 20 experts in rheumatoid arthritis globally or the top 20 experts in asthma. What we’re trying to see is how much of an online presence they have, but not just on LinkedIn, or Twitter, or whatever, but how many times are they mentioned, what articles have they authored, and their activity online. And we’re comparing that against the top online active experts in those therapy areas to see whether there’s an overlap. And what we’re learning is that there are differences between “traditional” KOLs and online KOLs. But at the end of the day, what makes them a KOL is who you are trying to communicate to. So, if I’m a physician in an online forum and everyone in that forum rates me immensely highly and they listen to what I have to say, then I am a KOL in that forum or that world that I belong to.”

#### **Change the Underlying Process**

“I think the attitudes about the change in terminology is reflective of the need to change the underlying selection processes and the need for transparency,” said Sanghvi. “I think the most transparent way to work with KOLs and to decide which goals to identify is to collaborate with KOLs right from the start even before the identification process begins. A lot of our identification work involves working with the expert

themselves to say, look, this is what we’re trying to do. This is the picture we’re trying to build. This is the profile we’re trying to create. These are the people we’re looking for. Who do you think falls into that category? Do you fall into that category? Why? Why not? Because we’ve changed the underlying processes, it is justifiable that we also change the name so that everything is connected. You can’t get more transparent than that.”

#### **What About “Key Patient Leaders (KPLs)?”**

Now that practically every pharmaceutical company is striving for “patient centricity” and several have hired Chief Patient Officers, there is another term that may need to be evaluated: Key Patient Leader. That’s a term that was used by Dr. Anne Beal, Chief Patient Officer at Sanofi, who said “The Chief Patient Officer will work on how do we bring in ‘Key Patient Leaders’ or KPLs, if you will, to help set the future directions for our organization” (see “The Rise of the Chief Patient Officer”; <http://bit.ly/pmn140301>).

Other terms for the same thing include “Patient Opinion Leader” (POL), “Consumer Opinion Leader,” and “Online Patient Leader” (OPL).

Pharma companies are hiring influential online patients to act as POLs just as they have hired physicians to be KOLs. OPLs, for example, are pharma’s “secret sauce” for social media marketing because they have the benefit of already being part

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of the “conversation,” which neatly solves the marketer’s problem of how to “join the conversation.” Novartis AG, for example, hires OPLs to contribute article to its “Living Like You” website, Facebook page, and Twitter account focused on reaching out to people with MS. Already we are hearing how these relationships lack transparency (see “Patient Centricity, Transparency, & Pharma’s Reputation”; <http://bit.ly/pm140203>).

Jim Zuffoletti, president openQ, predicted in a 2011 industry conference presentation that “social media driven patient advocates or Patient Opinion Leaders will receive significant scrutiny” by the HHS’s Office of Inspector General (OIG).”

### The Online Patient Opinion Leader Survey

This survey attempts to determine the issues involving transparency and conflicts of interest that may arise when pharma companies pay individual OPLs/POLs to help manage their engagement with patients online. What best practices should govern pharma’s collaboration with POLs? Should the industry develop guidelines for their interactions with POLs via social networks (e.g., develop a “Patient Opinion Leader Transparency Policy”)? Take the survey and share your opinions on this issue.

Pharma Marketing News



**Pharma Marketing News**  
**Survey**

**Should Pharma Hire Online “Patient Opinion Leaders”?**

Best practices governing industry-patient interactions in the age of social media.

Please take 5 minutes to give us your opinion on this important issue by responding to the survey online now:

<http://bit.ly/c3Obcw>