

Reprint

Your Pharma Marketing Sucks

By John Mack



Mark Stevens

According to Mark Stevens, author of the current Business Week Best Seller "Your Marketing Sucks," in the world of marketing today, people and companies are relying on the notion that a blend of "proven" or "traditional" marketing combined with slick new creative will yield results. The problem, says Stevens, is the creative ends up being the

quantifying metric regarding how successful the marketing is rather than the achievement of the intended goal—driving sales.

Speaking on this topic at the Strategic Research Institute's *2nd Pharmaceutical Marketing Global Summit* held in Philadelphia, PA, February 26, 2004, Stevens offered advice for pharmaceutical marketers on how not to make their marketing suck. However, most of the examples Stevens chose to look at were from the packaged goods, automotive, or retail markets and not the drug market.

You Know Your Marketing Sucks When... Your Ads Win Awards?

Stevens questions whether advertising expenditures produce a return on investment or do they merely entertain? He suggests that "before you hire an [ad] agency, you have to forbid it from entering any advertising contest which is based solely on aesthetics. No more submissions for Clios," he says. "The only thing that puts dollars in the bank is market share, and Clios don't do that (except for the ad agency that wins them)."

You could search www.clioawards.com 'til the purple cows come home, but you are unlikely to find any Rx drug ads that have won Clios. According to Harry Sweeney, CEO of Dorland Global Health Communications, "traditionally, drug ads are not thought of as a 'hot' category by the TV or consumer print creatives or people in charge of the Clios; too

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The EFFIE: A More Relevant Award for Pharmaceutical Advertising

EFFIE Awards are given several categories, including a category for Rx drugs (Health Aids/Prescription Products). It is the award presented annually by the New York American Marketing Association in recognition of the year's most effective advertising campaigns—campaigns that have delivered superior results in meeting the objectives they were designed to achieve.

In the words of a recent winner, "Effective advertising is advertising that sells; advertising that builds market share. The EFFIE award is the symbol of effective advertising and a tribute to the client and agency partnership that strives to create it."

Winners in the Prescription Products category last year were Detrol LA ("Gotta Go", GOLD), Advair (Asthma Was, Advair Is, SILVER), and Paxil ("My Anxiety" and "What They Face", BRONZE).

See www.effie.org

much boilerplate, distasteful topics, boring, etc. You may recall the AlkaSeltzer tummy ads of the 1960s; they were among the last drug category 'breakthrough' ads -- and that's forty years ago!"

Mark Gleason, Partner at HyGro Consulting Group, dismisses Clios as an inappropriate measure of success as well. "Don't count on Clios covering Rx advertising," says Gleason, "as they are for creativity only and I doubt the FDA would allow or pharma marketers would want to win a beauty contest that has little if any relationship to effective communication or in-market effects."

Not that it's bad to win awards—even Stevens' firm MSCO has won some, although it no longer enters contests. It's just that your marketing success should not be measured by what awards you have won.

Nothing happens until someone sells something

Perhaps we equate success with awards won because measuring the effectiveness of promotions is too difficult or expensive (however, see article "The New Written Prescription: Leveraging Technology to Measure Change in Physician Behavior as it Occurs" in this issue). Effectiveness is determined, as Stevens says, by sales. In this regard, he likes to quote the phrase, "Nothing happens until someone sells something."

In the Rx drug market, when exactly does someone sell something? Is it when the consumer goes to the physician? The drug industry often claims that the goal of DTC advertising is getting the consumer to see a physician. But that is just the first step in the selling process.

The consumer can leave the physician's office without a prescription or, worse yet, with a prescription for another product. Also, even if the consumer gets a script for the advertised product, he or she may not fill the prescription at the pharmacy, which is the actual place where "someone sells something."

Stevens, however, has a more pragmatic definition of when a "sale" is made in the pharmaceutical market. He recognizes the chain of events whereby the sales rep "sells" the drug to a physician who, in turn, "sells"

it the patient. Finally, the patient buys the drug at the pharmacy to complete the sales process.

In Stevens view, pharmaceutical companies need to break away from "recipe thinking," which says to put an army of sales people in the field to detail physicians while directly marketing to consumers to drive them to the physician's office.

He suggests that playing both ends of the game is inefficient. "You don't need an army of sales people," claims Stevens, "to sell a product consumers are 'dying' for." I assume he meant figuratively 'dying,' not actually. Create demand and consumers will drive the process.

How to Make Your Pharma Marketing Not Suck

Pharma marketers are not sure what works, contends Stevens, so they "try to put a finger in every hole in the dyke" and leave too much up to guesswork. Stevens believes that PR is not used enough, especially for simple, effective drugs that consumers understand well. Word of mouth and more stories, Steven says, could help products like Nexium for acid reflux. "I use this product, but don't even know who makes it! Pharma companies should bring the company brand into the marketing more," he says. "The end use has absolutely no relationship with the company."

Infomercials, says Stevens, is where pharma companies can really educate people, tell stories and generate buzz. Realizing that this might be a "bold" move, Stevens suggests that pharma marketers need to "go right up to the traditional line of what they are permitted to say" while staying within the bounds of regulatory law.

In general, Stevens says pharma is allowing billions of dollars to be wasted because of recipe thinking. The industry is lopsided in its application of science—too much science is applied to discovery, while not enough is devoted to marketing. Until this message reaches senior management, which has "taken a back seat to marketing," pharma marketing will continue to suck, according to Stevens.

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