

Feature Article

Use of Twitter for Patient Support

Should Pharma Fill the HCP-to-Patient Social Media Vacuum?

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“Six million asthma patients are wondering what to do now,” proclaims Rich Meyer on World of DTC Marketing in response to the FDA’s warnings about asthma drugs Advair and Symbicort. “If you’re a patient who is taking either Advair or Symbicort,” said Meyer, “you’re probably ... very confused this morning and wondering what the hell you should do next.”

One thing you could do is you go to product Web site. But you won’t find any more information about this warning there.

What about calling your doctor? That should work. On the basis of personal experience only, however, I can vouch that calling your doctor also may not work (see box, this page).

Meyer blamed the FDA for overly scaring consumers and not making it easy for them to understand what’s going on. “Welcome to the new FDA,” Said Meyer. “An FDA that is making life for patients more difficult. An FDA whose website is about as user friendly as a maze of barbed wire. Those who can navigate the FDA’s website often find the language difficult to read and understand and leave with more questions than they originally had. The FDA is out of touch with what the American public needs and wants in health information; clear, concise, easy to understand information on the drugs they take everyday.”

But shouldn’t the makers and marketers of Advair and Symbicort—ie, GSK and Astrazeneca—step up and support the patients who take their drugs? It may take some time to modify product Web pages, but what about using online social networking tools like Twitter to provide support to patients taking drugs? Would that be an effective method of implementing “customer support?”

Twitter for Customer Service

Marc Monseau, the Twitter and social media face of Johnson and Johnson, suggested that Twitter could be used for “Customer Service,” which is probably close enough to “Customer Support” to cite here. Monseau listed it first among five uses of Twitter by pharmaceutical companies that he thought were appropriate (see this video from Digital Pharma 2009: <http://bit.ly/aE1vT4>):

1. Customer Service
2. Provide Expert Advice and Information
3. Traditional News and Information Provider
4. Suggestion Box
5. “Engage with you in some other fashion”

Let’s focus on “Customer Service” and what that means in the context of the pharmaceutical industry.

My Doctor is on Vacation: Should I Stop Taking Zetia?

In 2008, after Merck and Schering-Plough admitted that Vytorin—a combination of Zetia and Zocor (simvastatin)—worked no better than an older, generic medication to reduce plaques in arteries and after Dr. Steven Nissen, head of cardiology at the Cleveland Clinic in Ohio, immediately called for a “moratorium” on the use of Vytorin and Zetia, I wondered what to do. I was taking Zetia at the time and I did not hear from MY CARDIOLOGIST or MY FAMILY DOCTOR about whether or not I should continue to take it. My only option was to call THEM and ask.

Neither my cardiologist nor or any other healthcare professional/nurse in his office returned my call. OK, he was on vacation and this is was not a emergency. But you would think that SOMEONE would have called me back.

This started me thinking more about my doctor-patient “relationship” and I asked myself questions like: Why hasn't he contacted me a long time ago and either re-assured me about Zetia or told me to hold off until more data were available?

I know you will say that I should find a doctor who is more proactive. Hey, it may be possible to find one. But who has the time for all that due diligence and switching medical records around?

Who’s the Customer?

First, who is pharma’s “customers?” To a PR, corporate communications person like Monseau, the customer might be journalists and investors. A recent study of pharma Twitter accounts by Silja Chouquet, CEO of whydot GmbH, shows that a good chunk of followers of these accounts, which are managed by corporate communications people, are journalists and bloggers (see Figure 1, pg 2).

For medical affairs people, “customers” are key opinion leaders and other healthcare professionals. For the managed markets people, customers are P&T committee members and other managed care professionals.

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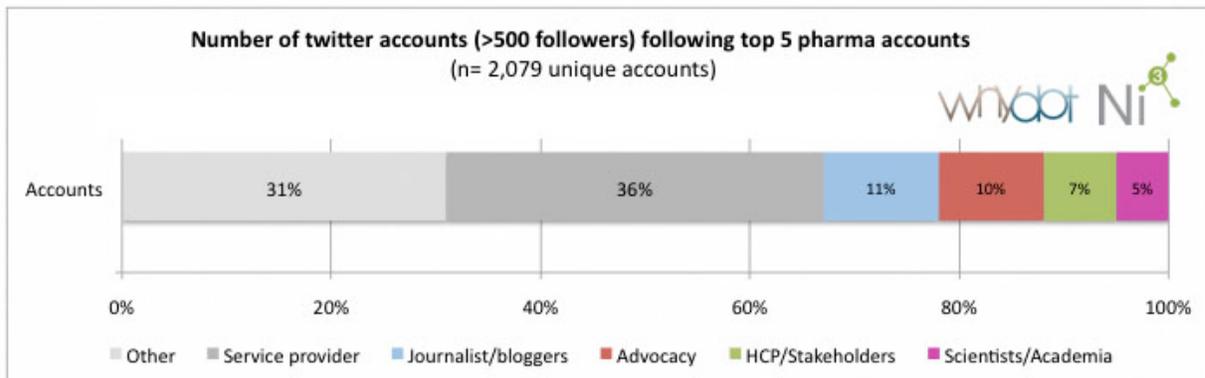


Figure 1. Service providers, journalists, bloggers, and advocates make up 75% of pharma following on Twitter. Analysis based on 19% accounts with over 500 followers that follow at least one of 5 pharma accounts (@pfizer_news, @novartis, @boehringer, @JNJComm, and @Roche). Source: whydotpharma analysis; <http://bit.ly/dir7Be>

But who inside pharmaceutical companies thinks of the patient as his or her customer? Officially, no one. The product manager and other marketing people certainly want to reach out to consumers and spend a lot of money doing it. For them, however, the consumer is a TARGET, not a customer to be supported. Once a consumer becomes a patient, the brand team virtually ignores him or her.

The Patient-Physician Obstacle

Another obstacle standing in the way of getting pharma more "engaged" with consumers/patients via social media is the sacrosanct physician-patient "relationship." Pharma is loathe to "interfere" with that relationship.

But is there really a relationship? I don't see myself having a relationship with any of my physicians. As I mentioned in the opening paragraphs, my physicians do not contact me by email or via Twitter or even by phone! I have a better relationship with CVS, which calls me every so often to remind me to refill my prescriptions. But my physician does not call me to remind me to come in for a test to make sure those prescriptions are not destroying my liver!

What the drug industry really should stay out of is the conversation between me and my physician once I am in the office.

But if CVS can call and remind me to refill my Lipitor prescription, why can't Pfizer DM and remind me via Twitter as well? In fact, there are many "support" activities pharmaceutical companies can offer patients via Twitter, including:

- Drug/device safety alerts (eg, drug recalls, medical device malfunctions, emerging safety issues)

- Prescription management, including pharmacy refill reminders
- Daily health tips from authoritative sources
- Publishing disease-specific tips
- Clinical trial awareness & recruitment
- Enhancing health-related support groups (e.g. buddy-systems for depression)
- Providing around-the-clock disease management
- Patient-sharing of health-related experiences
- Issuing dietary/lifestyle tips

(Thanks to Phil Baumann who compiled a list of "140 Health Care Uses for Twitter", which included many of these activities. See the complete list here: <http://bit.ly/9xgja7>).

In a recent #hcsmeu (Healthcare Social Media in Europe; <http://bit.ly/dg0jUw>) discussion via Twitter, I posed the question "Patient support via Twitter: is there a need for Pharma to do it? or should it be left to HCPs?" I was looking for some specific insights about how Twitter could be used for patient support such as the above. I hoped the insights could augment what I learned from the "What's Your Opinion About Branded Patient Support via Twitter?" survey that Pharma Marketing News hosted online from August 2009 to February 2010.

The #hcsmeu discussion got shifted somewhat into a debate about the roles of pharma versus healthcare providers in patient support. That issue was also covered in the Twitter Support Survey, the results of which are summarized in the remainder of this article.

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Survey Results

The Twitter Support Survey asked respondents how effective they thought Twitter would be in carrying out each of the patient support activities and communications mentioned on page 3. Respondents also were asked to comment on the regulatory, corporate cultural, training, and other barriers that need to be overcome to achieve success.

Ninety-six (96) people responded to the survey (see Figure 2, below, for affiliations of respondents). The vast majority (80.2%) classified themselves as either very supportive (45.8%) or somewhat supportive (34.4%) of the pharmaceutical industry. Only 4.2% were somewhat unsupportive and the remaining 15.6% said they were neutral.

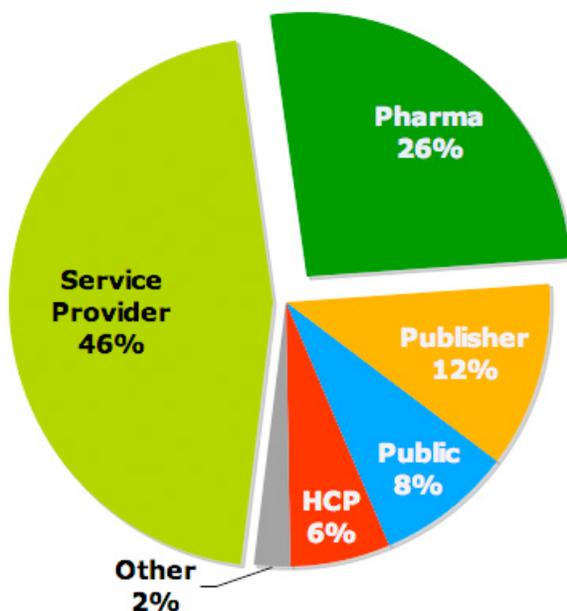


Figure 2: Survey Respondent Affiliations

Effectiveness of Branded Twitter Accounts

The survey asked respondents to consider a branded Twitter account (ie, Twitter page has brand name, indication, and required fair balance information with link to PI in the profile) and indicate how effective such an account could be for carrying out each of the patient support activities listed on the previous page. Respondents were also advised to suspend their disbelief and assume that Tweets from such an account conform to FDA regulations and that patients had opted in to follow the account via drug.com, coupons, direct mail, etc. Respondents could answer "very effective," "somewhat effective," "somewhat ineffective," "very ineffective," or "neither effective nor ineffective." The vote results are shown in Figure 3, page 5.

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Call For New FDA Guidelines

By John Mack

(Source: "Twitter for Patient Support: Not as It Is, but as It Could Be"; Pharma Marketing Blog post; September 1, 2009; <http://bit.ly/d6GI18>)

I have received several comments about my idea for pharmaceutical companies to use Twitter to notify patients about drug recalls, counterfeit drugs, or drug safety warnings (see "Twitter and Drug Safety: A Paramount Concern"; <http://bit.ly/aVRr9m>). One of my Twitter colleagues commented:

"John read ur great patient ed/Twitter wrap-up. But since tweets appear on feeds w/o all the warnings, don't u think that's a violation?"

To which I responded with a quote from George Bernard Shaw: "Some men see things as they are and say why - I dream things that never were and say why not?"

I've often been the first to bring pharma marketers to task when they push the envelope with regard to obeying regulations, especially when others are playing by the rules. But that doesn't mean I believe the rules are immutable.

For example, if a communications channel exists that clearly is very useful for getting critical information to patients, then the FDA rules may need to be changed so that the risks match the benefits of pharmacos using that channel for certain purposes. Twitter may be such a channel as I argued in my previous post.

This is also precisely the argument that some people have used against FDA's recent warning letters regarding branded search engine ads (see <http://bit.ly/bcQmI6>); ie, the benefits of searchers finding FDA-approved information via Adwords offsets any risks because the ad does not include the fair balance information.

In the case of Adwords, however, I personally don't agree that the benefits outweigh the risks because the message is purely promotional and not educational or supportive of current patients. That is, the Adword is specifically designed to acquire new patients for the advertised drug, not to support patients already on the drug.

I would support new FDA guidelines for use of Twitter that would relax FDA fair balance regulations to allow pharma companies to use Twitter to send certain notifications to patients—such as drug safety notices. What I am dreaming about is a Tweet that mentions a brand name drug while warning about some safety issue with a link to more information about that safety issue.

Effectiveness of Branded Twitter Accounts for Patient Support

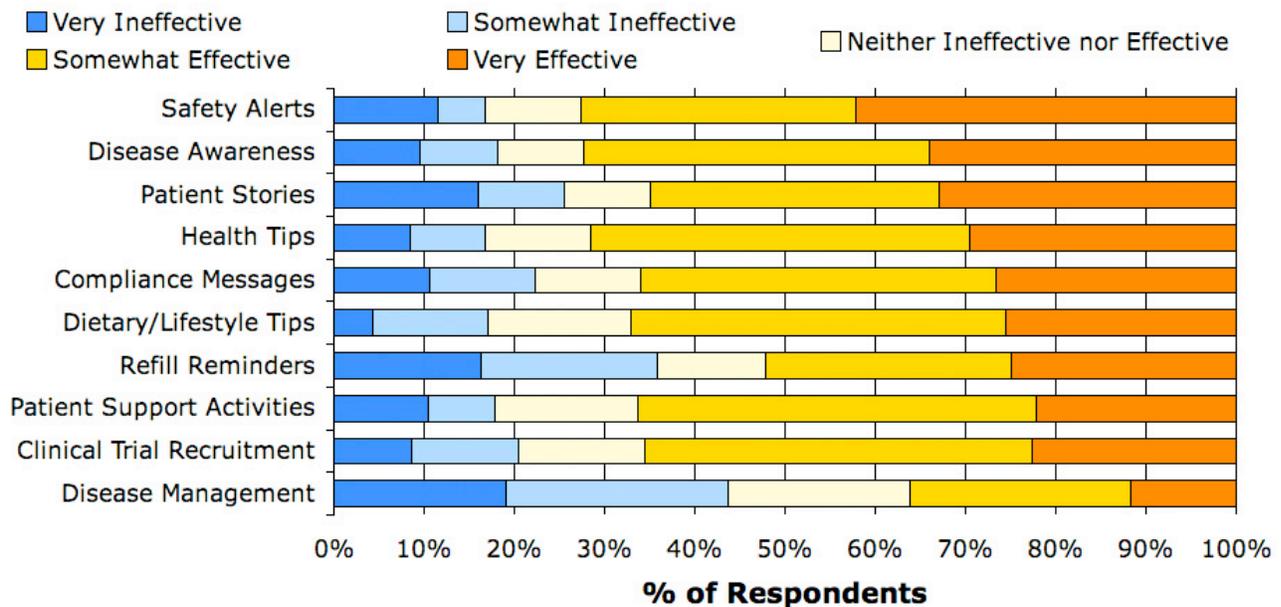


Figure 3. Summary of Survey Results. N=96.

Although a majority of respondents felt Twitter could be somewhat or very effective for nearly ALL of the patient support activities listed, there were significant reservations about those activities that require personal communications such as disease management, prescription refill reminders, and patient stories. Obviously, it would not be acceptable to post patient-identifiable information to Twitter for all followers to see. And DM'ing such information on a patient-by-patient basis may require use of Twitter technology that is not secure.

Would It Hinder or Help the Patient-Physician Relationship?

Some of the patient support activities proposed in this survey may be seen as interfering with the "patient-physician" relationship. About 57% of respondents were of the opinion that use of Twitter by pharma for some of these activities could be viewed by physicians as coming between them and their patients (37% said "yes" and 20% said "maybe, it depends"). Only 30% said "No," it would not interfere.

Some comments included warnings such as "pharma does not like to be seen as a healthcare providers and these activities are part of that" and "I'm sure some doctors would take umbrage at that." But most commentators did not dismiss the idea of Twitter patient support outright.

"I think physicians would be a little hesitant about the Pharma's providing prescription and/or disease management via Twitter," said Nicole Rivera, Product Marketing Manager at SMI Health Media (<http://www.smihealthmedia.com/>), a marketing communications agency. "While I think the pharma can really help patients via Twitter—i.e. Clinical Trial awareness, health related support groups, safety alerts, health tips—disease management is a whole separate thing. Disease management is different for everyone and should be done by a medical professional, especially when you're talking about very complex diseases such as cancer."

"If the info provided has to do with 'lifestyle' that can lead to better health, then dox will not consider it to be interference," said an anonymous non-pharma respondent who is very supportive of the drug industry. "If tweets contain disease and or drug advice, that's the domain of the physician as the learned intermediary—and patients want info from their doctors more than from any other source."

Several respondents pointed out that some physicians might welcome help supporting their patients. "Depends on the physician and their attitude toward pharma," said one respondent. "Some would appreciate the patient having the resource (and, hopefully draining less of their time) others would consider it meddling."

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"I have yet to meet a doctor who has enough time to meet the expectations or needs of a patient in terms of their health care management," said Amber Nicole Cannan who works for a contract research organization (CRO). "Perhaps if others who are educated in these areas could communicate with patients, they would feel less lost in medical care."

"Physicians could use the 'added' value of twitter in their patient follow-up," said an anonymous pharma respondent. "They would prescribe a drug, and would leave the management of the drug to the provider (either the pharmaceutical company, or ...) In this way physician should receive feedback about the success rate of the drug (did patient take it, was he feeling better after how many days, did he get an adverse event, ...)"

Dana Webster, Social Media Specialist at ParaPRO, a specialty pharmaceutical company, believes in sharing patient health stories via branded Twitter accounts, but points out a problem plaguing patient support in general. "Every company offers a support program to patients with chronic diseases (and some acute issues)," said Webster. "The enrollment is likely 20% (yet, all brand teams continue to offer them). A lot of Primary Care physicians don't like to refer on their patients with Diabetes because they're afraid of the Endocrinologist 'stealing' their income. If another HCP gets involved and starts offering medical advice in any way, it could be threatening to the physician's already dwindling income."

Specifically with regard to Twitter, Webster said "More needs to be known about the people who use Twitter, and the companies really need to understand the nature of the patient with the specific disease. Having a Twitter account won't make people want to take care of themselves, but it can engage the people who are interested."

One pharma respondent thought interference with the patient-physician relationship may be less of a problem in the US "where patients are taking active role in health partnership with HCP, but I could see this being an issue exUS. Would be good to provide a HCP kit prior to launch of support aids so HCPs are aware of program."

Are Patients Using Twitter?

Webster touched upon an important issue regarding the use of Twitter by pharma: are there enough patients out there using Twitter to make the effort worthwhile? That's a question any brand manager will need to answer in order to justifying spending resources on patient support via Twitter. If your drug treats diabetes, for example, you want to know the potential number of people with diabetes using Twitter.

"Twitter has low penetration among the Internet population and therefore it cannot be counted on to reach patients who take Rx medications," said Richard Meyer, consultant and author of World of DTC Marketing Blog (<http://bit.ly/b4G2Ua>). "However, drug companies should ask current customers to enroll in new informational updates via their product.com website."

Twitter is about as easy to use as email and offers many advantages over email—you can easily unfollow spammers or block them. Therefore, it may be easier to recruit people to open up a Twitter account and follow you via Twitter than to sign them up for an email-based program, especially if the program offers real value and not just marketing nonsense.

Fard Johnmar, Founder and President of Enspektos (<http://enspektos.com/>), however, suggested that email, in some cases, may be more effective as a Customer Relationship Management (CRM) channel than Twitter. "This all depends on whether companies are actively engaging patients via their CRM campaigns, outreach efforts and educational initiatives so that they are paying attention and tuned in to their Twitter efforts. I think that in some cases, especially adherence and compliance messages, SMS and e-mail have been proven to be more effective."

In order for any customer support channel—whether it be Twitter, email, or phone—to work, it must be promoted and require opt-in. Pharmaceutical companies already solicit visitors to drug.com Web sites to sign up for email messages, which are most often merely marketing messages. They could also solicit patients to sign up for Twitter support if they had a mind to do it.

Clinical Trial Recruitment via Twitter

Cannan said that "recruitment for clinical trials could be enhanced with the use of Twitter. America lags behind in patient recruitment [because] patients don't understand how trials are run or how they help and just feel like lab rats. This is very frustrating for pharma companies who are used to the European market, where trials can be run faster because of faster patient enrollment."

Patient Advocates Within Pharma

One fly in the "Twitter for patient support" ointment is the time necessary to build up a following on Twitter. It may take years to entice a significant number of patients to follow a branded Twitter account. Since the average product manager doesn't have years to show results to managers, it is not likely that Twitter will become an important tool for marketers within pharmaceutical companies.

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Virtually all pharma Twitter accounts are corporate accounts run by corporate communications personnel and not marketing personnel. All of these people are dedicated and competent, and have a long-term commitment to improving the reputation of their companies among investors, journalists, and the general public. But they are among the least trusted source of information as far as patients are concerned.

Perhaps pharmaceutical companies first need to hire consumer or patient advocates who can build the necessary trust before engaging patients via Twitter. These internal patient advocates should define

“engage” to mean something different than “market to” because it’s not likely many consumers would opt-in to engage in marketing conversations with pharma. But if something of more value to patients were offered, then pharma might succeed in gaining a lot of patient followers via Twitter.

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Some Data on Physician Use of Email & Instant Messaging to Communicate with Patients

According to Manhattan Research, 39% of physicians currently email, secure message, or instant message their patients—a 14% increase since 2006 (see “Physicians in 2012: The Outlook on Health Information Technology”; <http://bit.ly/afeNnL>). Neurologists, endocrinologists, and infectious disease specialists round out the top five specialist groups connecting with patients online.

The top activities include:

- Answering clinical questions
- Discussing symptoms and/or treatment options
- Determining whether an office visit is necessary

Another way to look at this data is that 60% of physicians are not using these tools to communicate with their patients. Also, it is not known how often physicians use these communication tools. Physicians have cited liability issues, privacy and doubts about benefits to their practices as reasons why they do not use the technology.