



Patient Advocacy – An Emerging Challenge for Innovative Market Research

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ABSTRACT

Patients – both individually and collectively – have a direct decision-making impact on pharmaceutical revenues.

Evidence suggests that prescription decisions and clinical strategies are increasingly influenced by patients. Patients perform a proactive role in prescription decisions and collectively have influence on healthcare resource and clinical decisions that impact upon the revenue of pharmaceutical brands.

Understanding patient needs, presenting behaviors, and patient-reported outcomes is accepted as a critical success factor in pharmaceutical marketing. The research tools available to assess these factors are in their infancy. To offer an opportunity to advance research thinking in patient understanding, Adelphi has explored the alignment of three separate, but complementary, data sources.

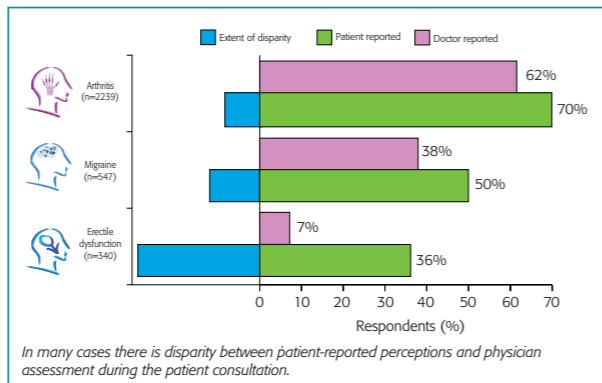
In 2004, the American Society for Clinical Oncology (ASCO) dedicated 13 hours of its conference program (total duration 4 days) to disease-management subjects where patients drive decisions or demonstrate leadership. As a demonstration of their commitment to influence the oncology community, patient organizations accounted for 1 in every 10 exhibitors. The growing influence of patient advocacy demands that business intelligence focuses on understanding patient issues – and on patient groups in particular – as an influential force in market dynamics.

Adelphi has reviewed a number of its research-based initiatives to understand and demonstrate insight into the needs, drivers, and clinical and economic impact of patient advocacy. Adelphi has compelling data from its Disease Specific Programmes™ using matched patient/doctor information to demonstrate the importance of informed communication between patients and doctors. In many cases, there is disparity between patient-reported perceptions and the physician's assessment during the patient consultation. In arthritis, there is a small disparity when comparing patient and physician recordings of acute episodes. In migraine, there is a greater disparity in the reported impact and incidence of vomiting. An example of a remarkable disparity is found in the compared recollections of the influence of the partner as a reason for consulting the physician for erectile dysfunction problems.

Understanding these issues of physician versus patient perceptions is a valuable input to the design of patient education programs, typically delivered by patient groups. The positive impact that these education programs – working with patient groups – can have to improve access to healthcare, including innovative therapy, is captured in Adelphi data measuring the impact of tailored patient education.

Patient needs directly impact on finite healthcare resources. To define market-access needs that are interrelated to patient-driven perspectives, Adelphi is able to assess provider realities alongside patient demands by interrogating its proprietary Payor Platform™. As a consequence of this, the justification for resource allocation can be based on data demonstrating patient need and patient-determined priorities.

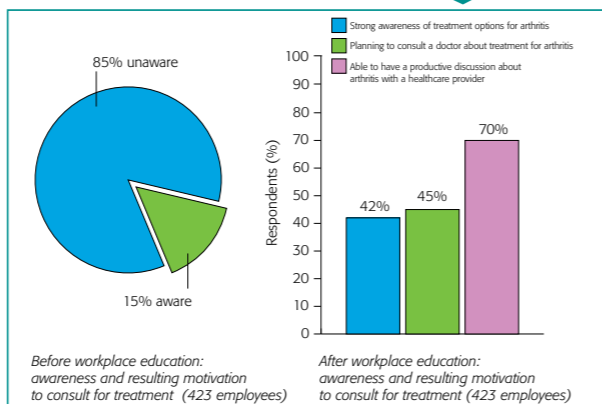
Research that defines the disparity between doctors and patients in assessment of disease severity and treatment outcomes can be combined with data defining the education-driven demands of patients. The combination of patient insight and resource realities provides an innovative technique for achieving appropriate prescribing, informed by patient needs.



- Among rheumatoid arthritis patients in Europe, there is fairly close agreement between the proportions of patients who indicate that they have experienced an acute episode (70%) and those for whom the physician records this event (62%). However, for many other parameters the Arthritis DSP highlights greater disagreement.
- Among migraine patients, neurologists have a greater tendency to underestimate the proportion of patients for whom vomiting is a current symptom (38% versus 50%), as the patient is perhaps less likely to report this to the doctor.
- Similarly in erectile dysfunction, 36% of patients record that their partner was a key driver in their consultation regarding impotence, whereas the doctor is aware of the partner's influence for only 7% of patients.



Disease Specific Programmes (DSPs)™ provide extensive customized research from large populations of doctors and patients incorporating doctor-completed patient diaries, matched patient self-completed diaries, and attitudinal data collected via face-to-face interviews with the same physicians. Outputs from DSPs are increasingly used in scientific publications, abstracts, posters, regulatory submissions, and detail aids to support brand development across a number of disease areas. DSP information is also routinely incorporated into health economic and patient-reported outcomes models, such as cost of illness and quality of life.



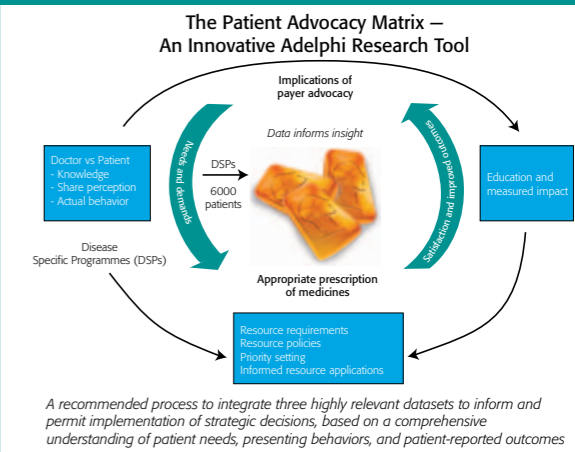
- Discoveries is a program that delivers education on arthritis and its treatment to the general population in workplace and community settings.
- The impact on knowledge and motivation to consult for arthritis conditions is measured through extensive program evaluation.
- The educational program is endorsed by the Arthritis Foundation and National Council On Aging.
- These results in 423 employees demonstrate the impact that education can achieve, particularly when designed to meet patient and prospective patient needs, which have been identified through physician/patient-based research.
- The results confirm the importance of measuring the impact of education.
- In this study, almost half the sample intend to present as de novo patients, with informed expectations of appropriate treatment options.
- Their intention to seek treatment will have implications for health resource allocation.



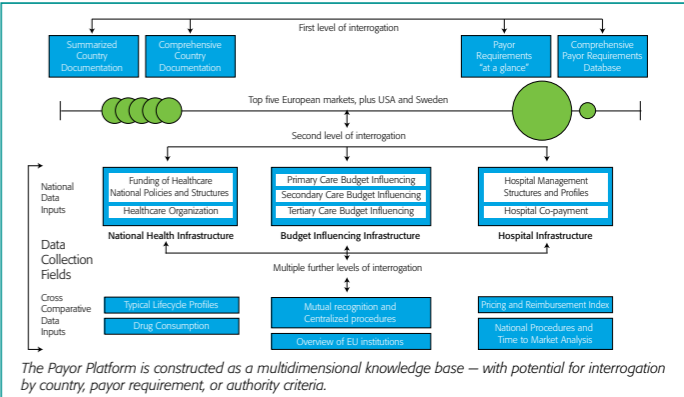
Discoveries is an educational program that includes a research arm to measure the impact of education in terms of enhanced knowledge and resulting behavior. The data collected in the program also predict increased health resource implications.

CONCLUSIONS

- Physician/patient behavior informs patient education, which modifies patient behavior.
- The implications of modified patient behavior impact on healthcare resources.
- Use of the Payor Platform in a research process builds understanding of patient impact, leading to enhanced market-access strategies.
- Patient insight influences appropriate prescribing.
- Patients – both individually and collectively – have a direct decision-making impact.
- Innovative research techniques that deliver increased understanding of the needs, behavior, and impact of patient advocacy are essential to inform strategic decisions in a changing, cost-sensitive healthcare environment.



- The Payor Platform is an expert system that provides the means to capture payor needs and expectations, either directly (within the platform) or indirectly (by the identification of suitable research respondents and questioning approaches). This includes the roles of patients as payors or influencers according to the functioning of the healthcare system. The Payor Platform is structured so as to allow cross-functional search by country, payor profile ("type of payor"), and information criteria.
- The Payor Platform is updated as requirements and procedures are modified. Updates also reflect recent experience and interpretation of payor decisions and requirements.
- Focused interrogation of the Payor Platform is informed by capturing and assessing patient/physician behaviors and the dynamics of continuing patient education and resulting behavior.



The Payor Platform is a dynamic expert system that describes Healthcare system structures and processes, and, in combination with primary research and other data sources, provides the means to inform payor focused strategies.