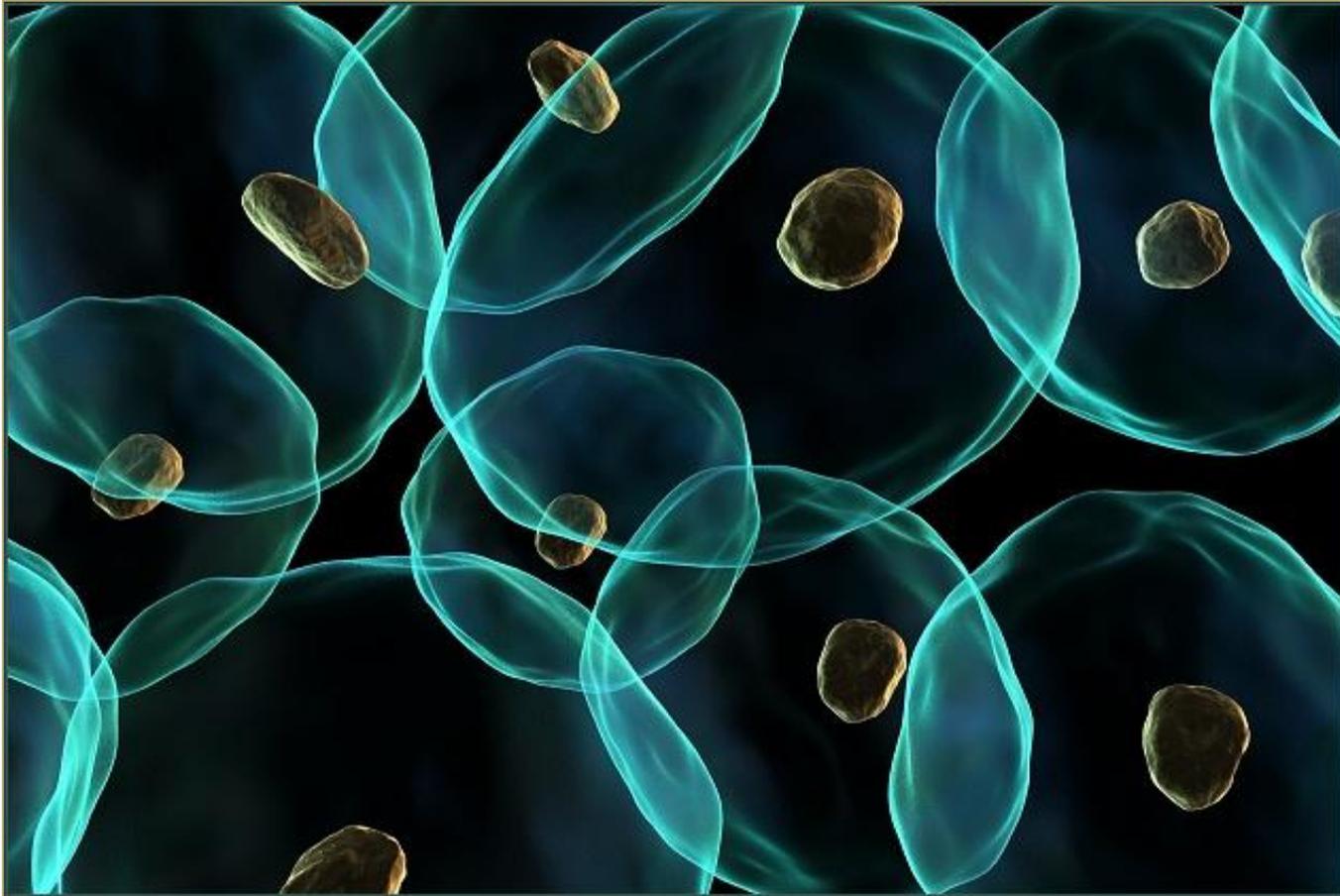


For Pharma and Healthcare Marketers

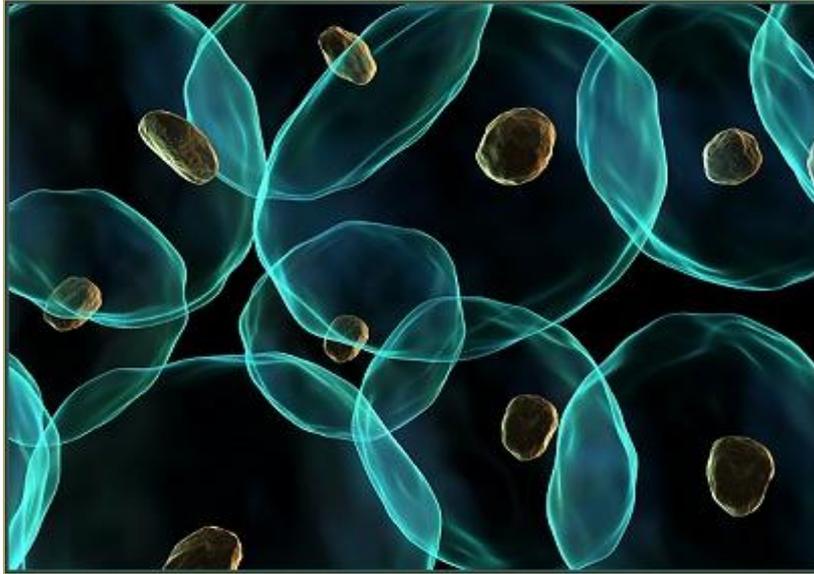
# Best Strategic Learning Investment in 2010?



*The illiterate of the 21<sup>st</sup> century will not be those who cannot read or write, but those who cannot learn, unlearn, and relearn.*

-Alvin Toffler, Rethinking the Future 1999

# Best Strategic Learning Investment in 2010?



John Donne's famous words from 1624 ...  
*'No man is an island' could be modernized to express the idea that Every man is a planet. And that every man and woman has his or her own gravitation, orbit, weather system and sun. No man or woman exists as a section apart from the world. All is necessarily connected and responsive, interrelated and communicative. We exchange information to that which surrounds us and that which we surround...*

- Adapted from Sophie Ward  
[My Theory of the Universe 2009](#)

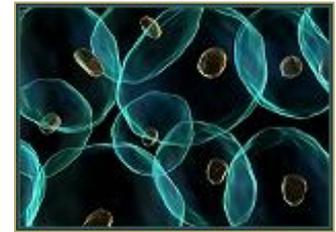
We asked 11 leading bloggers and thought leaders to share their reflections: *what would they recommend as top learning strategies for Pharma and Healthcare marketers in 2010?*

For the context of this eBook, we chose an old quote and a very modern photograph to depict the challenges of the coming year—the leveraging and mixing of old and new.

We look forward to learning with you in 2010.

If you find this eBook valuable, share it!

# Best Strategic Learning Investment in 2010?



## Order of Contributions

**Ellen Hoenig Carlson**, Editor, AdvanceMarketWoRx, Notes From The Back of The Book blog  
[Ask, Embrace, and Act: A 21<sup>st</sup> Century Marketing Cycle](#)

**Marsha Shenk**, Thriving Enterprise blog, The Bestwork People  
[Brain Work: A Business Anthropologist's View](#)

**Dave deBronkart**, The New Life of e-Patient Dave blog, Society for Participatory Medicine  
[Engage Authentically in e-Patient Conversations](#)

**Andrew Spong**, STweM blog and Consultancy  
[The ROI of Authenticity](#)

**Steve Woodruff**, Impactiviti blog and Consultancy  
[ePatients, An Important Group of Emerging Influencers](#)

**Susannah Fox**, Health Research and Digital Strategy, Pew Research Center Internet and American Life Project  
[Missing an Opportunity](#)

**Jonathan Richman**, Dose of Digital blog, Bridge Worldwide  
[Where To Spend Your First Marketing Dollar](#)

**Adam Cohen**, A Thousand Cuts blog, Rosetta Interactive  
[Fitting Social Media into Marketing Strategy](#)

**Wendy Blackburn**, ePharma Rx blog, Intouch Solutions Digital Agency  
[Digital Back-to-Basics](#)

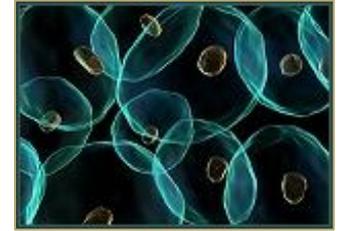
**Fard Johnmar**, Founder of the Path of the Blue Eye Project and blog, Healthcare Vox, Envision 2.0  
[Measure the ROI of Compassion](#)

**Phil Baumann**, Phil Baumann Online blog, Nurse  
[The Marketing Circle of Life](#)

**John Mack**, Pharma Marketing blog, Editor-in-Chief of Pharma Marketing News  
[The New Pharma Marketing Paradigm](#)

**Angela Dunn**, Odom Lewis blog and Executive Search in Healthcare Marketing  
[Building Pharma's New Dream Team](#)

# Where might Pharma and Healthcare best focus learning in 2010?



## Introduction:

## Ask, Embrace, and Act: a 21<sup>st</sup> Century Marketing Cycle

**Entering the 2nd decade of the 21<sup>st</sup> century, the imperative to take a Human-centered approach in everything we do rings loud.** This means getting inspired by people; especially those who share the condition which you seek to improve. 'Human-centered' requires looking at the world through their eyes and not our own or our businesses'. That in turn requires authentically engaging: a theme you'll find in many of the posts on these pages. Reading [Change by Design](#) by Tim Brown, CEO and President of IDEO, ranked among the ten most innovative companies in the world, I was struck by "Good design thinkers observe. Great design thinkers observe the ordinary." To operationalize his advice in 2010: get out and observe the ordinary things customers and patients are doing or not doing.

Another of Brown's points is: "Don't think. Look". (Originally from [Ludwig Wittgenstein](#), 20<sup>th</sup> century philosopher.) Being visual allows us to look at a problem differently than if we rely only on words or numbers.

*Get out and observe the ordinary things customers and patients are doing or not doing*

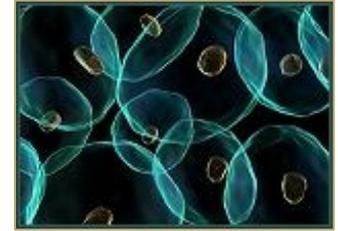
## What does it mean to be a fit marketer in this environment?

My heartfelt appreciation for the 11 contributors to this ebook: yet another example of the power of the community.

Overall, these 6 themes come to life:

1. E-Patients are at the center of healthcare communications and critical to learning and design.
2. Authenticity isn't a 'nice-to-do', but a 'must have'.
3. Don't get distracted by 'bells and whistles'; remember the basics: keep your brand core strong.
4. New marketing requires new ROI thinking: the ROI of Connection, Authenticity and Compassion.
5. The Marketing Cycle of Life: change is a given; change is constant...means we all have a fair amount of unlearning to do...What worked in the past, may well not work now or in the future.

## Where might Pharma and Healthcare best focus learning in 2010?



### Introduction:

## Ask, Embrace, and Act: a 21<sup>st</sup> Century Marketing Cycle p2

Embrace our economic reality and the limits of what people can absorb. *Deepen your knowledge and widen your impact.* Consumers don't want to be 'sold' or 'talked at': this requires a huge change in the way we think about communicating... a movement from paid marketing to earned marketing, and it requires a fresh mindset...You can't make someone talk about you or advocate on your behalf; you have to earn it by being authentic and doing something meaningful and relevant.

6. Effective engagement will require new kinds of leadership and skills. Marketers are challenged to take responsibility for their own learning and to help customers learn. Spark curiosity: questions are what get people to engage.

At the heart of change are the people that will make it happen: leadership is essential.

Given the imperative human element, the first post starts with the brain, followed by the importance of e-Patients, authenticity, sticking with the basics, ROI, the new marketing cycle of life, and comes full circle with new kinds of leadership and skills.

*No one can afford to risk becoming obsolete.* Our mettle will be tested personally ([here's](#) an interesting post from Amber Naslund of Radian 6) as well as through our brands.

2010 is certain to be challenging. From all of us on these pages, we hope these posts will give you a step up in the New Year.

*Ellen Hoenig Carlson, Editor*



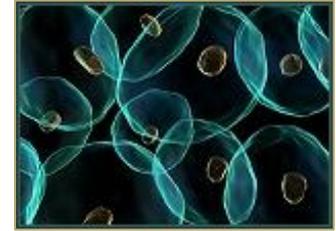
Ellen is founder of AdvanceMarketWoRx, a consulting firm known for elegant prescriptions powering consumer and healthcare brand growth, and writes the consumer marketing and healthcare blog *Notes from the Back of the Book*.

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Where might Pharma and Healthcare best focus learning in 2010?



## Brain Work: A Business Anthropologist's View

Like the phrase I often heard growing up, “The first 3 principles of real estate are location, location, and location,” recent insights from Neuroscience illuminate the first 3 drivers of the human brain to be ‘belonging, belonging, and belonging.’

That hard-wiring has huge implications for consumer, physician and care-giver behavior. Employing its influence does demand a bit of learning - I’d make that top priority for healthcare marketers in 2010.

### **Learn to use mirror neurons**

The human brain is well-endowed with these clever cells that tell us whether we belong, how to fit in (have you ever noticed yourself mimicking the accents of people you’re speaking with?) and whether other people know and appreciate us.

The short version is: people can tell whether you’ve ‘walked a mile in their moccasins’, and they remember it for a long time. It gives their brains the message that you’re one of theirs – part of their community.

Your entire team can step into the shoes of various customer segments.

Try it for 5 minutes each: walk around feeling how you imagine they feel, speaking in their voices, telling each other what’s on your mind, asking each other questions. It turns out to be fun as well as highly informative: a quick way to learn how to show up as relevant to consumers, physicians and caregivers.

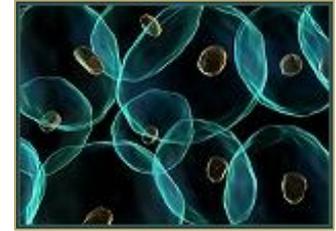
### **Learn to share status**

All social mammals – and especially our close primate cousins – are highly sensitive to their standing with others: above or below on the hierarchy? (In a primate troop, this determines whether an individual will eat, mate, get beaten or groomed...)

Among humans, it translates to, “Who are you to me?... Will I listen to you?... Will you listen to me?...”

What’s really important to marketers is that when people are concerned with status – with how others might be wielding power – their brains cannot do anything new.

Where might Pharma and Healthcare best focus learning in 2010?



## Brain Work: A Business Anthropologist's View p2

They can't consider a new question, a new benefit, or a new choice. It's a big lesson for Pharma and Healthcare: people will not take in what you say if you hold yourself above them. This applies inside and outside your organization. So... if it's important that audiences listen to your messages, learn to neutralize status.

The fastest way to do that is active listening. Demonstrate that you are learning *with* people. But, don't try to fake it – those mirror neurons will quickly suss you out.

*... Don't try to fake it – those mirror neurons will quickly suss you out.*

### **Learn to spark curiosity**

The human brain retains plasticity into adulthood. When not stressed, people can learn, design and

innovate, consider new questions and choices, make new decisions.

Marketers depend on plasticity, and plasticity depends on reducing stress and provoking curiosity. The former is no mean feat in our world, but it turns out to be mission critical. Neutralizing concerns for status is a great start. Laughter is a huge help. And for you and your team, regular exercise – changing routines often – is invaluable.

Curiosity is not fueled by pain or fear. It's sparked by pleasure and novelty - new terms and labels, new distinctions, new questions, new images – and by peeking into what others are up to (that drive to belong...) Learning to spark curiosity is my #1 learning choice for marketers in 2010.

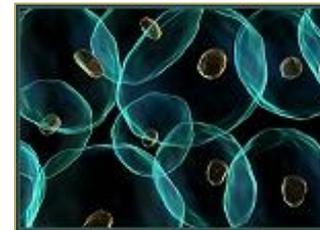
The brain's natural wiring just might be the most powerful force your brand can use.



Marsha Shenk is a veteran consultant, one of the pioneers of Business Anthropology. Her syntheses of the cultural, biological, and historical influences that impact modern commerce have empowered business leaders for 3 decades.

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Where might Pharma and Healthcare best focus learning in 2010?



## Engage Authentically in e-Patient Conversations

In 2009 “e-Patient” got hot, and by year end it’s being formalized as “participatory medicine.” Look: in 2009...

- The [Society for Participatory Medicine](#) incorporated, with a doctor and a patient as co-chairs.
- In October its new [Journal of Participatory Medicine](#) launched, with a doctor and a patient as co-Editors in Chief. (This is no fad: contributors to the first issue include eminent editors George Lundberg and Richard Smith.)
- Engaged patients came to the fore: In September I was honored to deliver the opening keynote at Dr. Gunther Eysenbach’s Medicine 2.0 conference in Toronto, and in October numerous e-patients spoke at Kevin Kruse’s “[e-Patient Connections](#)” conference.

*Genuine value is being generated outside our perceived ‘Pharma and Healthcare’ ecosystem. Ignore this shift in the ecosystem at your peril.*

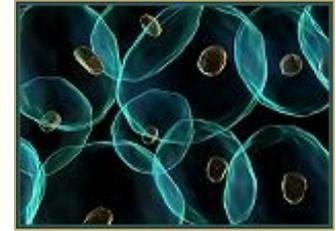
- After Medicine 2.0, Cleveland Clinic’s John Sharp said “If you haven’t read [the e-Patient White Paper](#), you don’t understand the future of healthcare.” He was talking about participatory medicine.

I view this industry’s turmoil through the lens of a high tech marketer / data geek who’s watched industries transform. So, I asked, what to say in my speech at “Krusefest ’09”, a marketing conference in this turbulent industry?

I said “**Engage Authentically.**”

I cited the [The Cluetrain Manifesto](#) – a visionary classic in Internet and marketing circles – and learned that most of the audience *hadn’t heard of it*. In an industry with reputation issues, that’s a problem, because the first Cluetrain thesis is “Markets are conversations.” Gone is the marketing funnel of old. Fail to see that, and you’ll shoot yourself in the foot over and over.

Where might Pharma and Healthcare best focus learning in 2010?



## Engage Authentically in e-Patient Conversations p2

But I also said that's an opportunity: this industry creates enormous value, and should be known for it – and those conversations should be a medium for spreading the word.

Hell, the industry *saved my life*. During my speech I called out, "Anyone from Novartis here? ... I love you!"

And somebody in the audience tweeted, "I guess that answers any question about whether patients can love pharma." (btw, that tweet's an example of people talking to each other in real time: a conversation spreading with no editor involved.)

**Patients want and need reliable, useful information. Provide it.** But indulge in trickery and you'll get ratted out.

The future of healthcare marketing is being invented as we speak: "e-Patient Rising." Engaged, informed patients can be your best partners: they know something good when they see it, and they tell their peers. The trick is to contribute genuine value in the conversation – and **be known** for that value, **be known** for authenticity.

Don't screw it up! As I said in the talk, "It's DTC, without the spend."



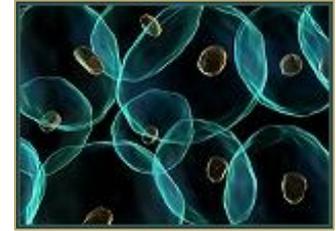
"e-Patient Dave" deBronkart writes the New Life of e-Patient Dave blog and is founding Co-chair, Society for Participatory Medicine

Web: [www.ePatientDave.com](http://www.ePatientDave.com)

Blog: [The New Life of e-Patient Dave](#); Author on the [e-Patient.net Scholars Working Group](#)

Twitter: <http://twitter.com/ePatientDave>

Where might Pharma and Healthcare best focus learning in 2010?



## The ROI of Authenticity

[Pharmafocus](#) published a mini-series in the middle of December entitled 'A Year in Digital'. The sequence featured reviews of 2009 from the publication's own [Dominic Tyer](#), GSK's [Kai Gait](#), Roche's [Sabine Kostevc](#), [Len Starnes](#) of Bayer Schering, and Boehringer's [John Pugh](#). Not one of the contributors failed to draw attention to the impact that a certain status updating platform is having upon pharmaceutical industry communications.

### **Learn about Twitter**

The legions of new Twitter users who continue to sign up for the service on a daily basis can learn everything they need from the numerous guides that are available on the web. Pharma marketers exploring the potential of Twitter should start by reviewing [Shwen Gwee](#) of Vertex Pharma's [SlideShare](#) presentations which offer synoptic insights especially tailored to industry users' needs.

Once you have considered the above, from one learning perspective you have the 'what, why and how' of social media for pharma pretty much covered.

From another perspective, however, you have yet to begin to address the most difficult thing of all to learn within social media environments: *how to be you*.

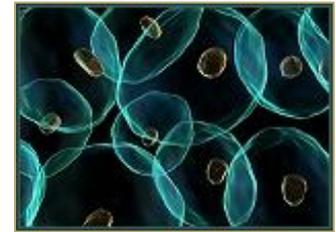
### **Learn the value of authenticity**

In order to explain why I deem learning the value of authenticity to be important above all other things for this constituency, I am going to defer to a voice infinitely more powerful than my own.

[Martin Heidegger](#), an influential German philosopher, considered authenticity to be a state of being attainable only to those who fully understand the existential structure of their lives. Whilst our identities are conditioned by the ideas, people, and experiences we are exposed to, if we merely absorb experiential states without reflecting critically upon them in order to own and understand their value to us, they only remain 'ours' in an inauthentic manner.

\*Footnote: Heidegger asks in [Being and Time](#) 'what if resoluteness, in accordance with its own meaning, should bring itself into its authenticity only when it projects itself, not upon any random possibilities which just lie closest, but upon that uttermost possibility which lies ahead of every [potential outcome's existence]?' (para. 61)

Where might Pharma and Healthcare best focus learning in 2010?



## The ROI of Authenticity p2

In order to be an authentic pharma marketer it is necessary, to liberally paraphrase the great thinker, to understand that doing the easiest thing is seldom also the most appropriate, most progressive, or most effective.

I believe that there is an unresolved tension throughout the pharma industry between the ways in which marketers are expected to expound the virtues of trust, authenticity, reciprocity and the other markers of transparent, open communication within social media whilst at the same time participating in parallel discussions concerning measures and metrics in these environments.

The former is characteristic of a commitment to authentic, transparent interaction. The latter could easily be construed as a practice tantamount to vandalism, intent on nothing other than cynically manipulating communities in order to attempt to revivify stale, alienating practices best left in disintegrating broadcast media settings.

*... Redefine ROI... within the context of the emerging relational economy rather than the diminishing transactional economy.*

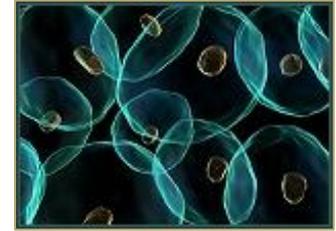
There can be no enduring value in inauthenticity. Are you planning on using Twitter to relate, or to recite?

I would counsel pharma marketers not to prepare to thank followers for retweets and to espouse the values of the communities they participate in during 2010 on one screen on their desktop , whilst monitoring a sentiment analysis dashboard on another as they copy statistics into a new column in a monthly report for their managers.

If your company has a clearly stated social media governance policy, as a pharma marketer, it is within your power not to contravene it whilst also making a series of small, steady, authentic contributions through your activities with the aim of reorienting your industry's conception of what constitutes marketing best practice.

With whom do you think of yourself as conversing? A target customer group? An objective to attain? A number? Or a person who happens to be a patient, or a health care professional?

Where might Pharma and Healthcare best focus learning in 2010?



## The ROI of Authenticity p3

### Learn to challenge measurement

Begin your quest to learn the meaning of authenticity in pharma marketing by encouraging colleagues to redefine the return on investment (ROI) that drives the measurement-obsessed within the context of the emerging relational economy rather than the diminishing transactional economy.

Challenge them to think of ROI as a return on interest, involvement, or interaction. If they insist on viewing it as a return on investment, persuade them to do so in terms of a potential return on an investment of time, that most valuable of all assets.

What could be worth more in terms of what the giver may bestow and receive in abundance in return in due course than the brand or company - enhancing, advocacy-generating engagement that accompanies prolonged engagement with interlocutors over a period of time, rather than a cursory exchange focusing upon a single, transitory transaction, and nothing more?

2010 will be a year of big challenges for pharma marketers. It will also be a great year to start to make big changes: to be resolute, to be resourceful, but above all other things, to be authentic.

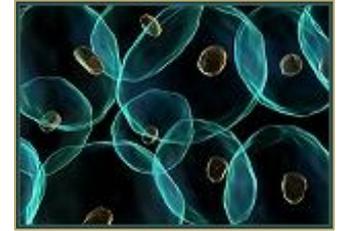


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Where might Pharma and Healthcare best focus learning in 2010?



## ePatients, An Important Group of Emerging Influencers

### **What is an ePatient?**

Here is [Wikipedia's definition](#): ePatients are health consumers who use the Internet to gather information about a medical condition of particular interest to them. The term encompasses both those who seek online guidance for their own ailments and the friends and family members (e-Caregivers) who go online on their behalf.

### **Why are ePatients important?**

There are at least 3 reasons:

**They are patients.** They are the end users. And they share information. These folks are a goldmine of on-the-street information about what matters, with their condition and with your drug(s). The "voice of the patient" is now increasingly accessible on-line.

*Some of your best feedback, and potential strategic direction, may only be a few mouse clicks away*

### **They are heavy users of social networking tools.**

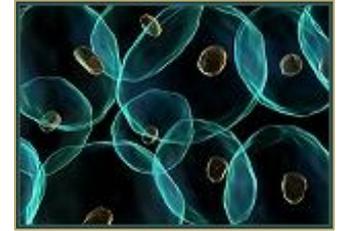
Communications is rapidly evolving, and at the forefront of the changes is the booming use of social media. It is still "early days" for Pharma in the use of social media, which means that wise executives will begin to get their arms around how to effectively participate in it.

**They have outsized influence.** Well-connected and thoughtful ePatients are influencing thousands in their networks, and the more complete and accurate information they have about any particular company or product, the better.

### **How can healthcare professionals be active participants in their e-world?**

Learn to tune in to ePatient networks: where they get information and derive influence.

Where might Pharma and Healthcare best focus learning in 2010?



## ePatients, An Important Group of Emerging Influencers p2

Join ePatient communities around specific medical conditions and just “listen.” Glean mission-critical factors for building relationships they will take seriously.

- How do they use your product and how do they feel about it?
- How do they feel about their condition?
- What are their expectations for dialogue and network-based relationship?
- What might they like to learn from you?
- How can you add value to their health learning and living?

Here is an example of how Roche invited a bunch of prominent diabetes bloggers in for a get-together, which was a builder of good will and a great way to provide learning on both sides, (<http://www.bernardfarrell.com/blog/2009/07/diabetes-social-media-summit.htm>).

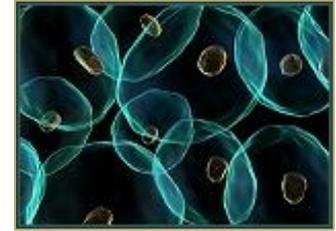
By all means, educational material, outreach, and market research should occur at all professional and corporate levels in the healthcare industry. But this is a good time to focus learning on the grassroots. Some of your best feedback, and potential strategic direction, may only be a few mouse clicks away.



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Where might Pharma and Healthcare best focus learning in 2010?



## Missing an Opportunity

Connected patients spread new ideas, new treatments, and new ways of approaching a condition. Patient networks can help you anticipate change and innovate in the right direction. Social media can be a window into their world.

Pew Internet surveys show that 8 in 10 Americans have access to the internet. Social media use is trending up. Health is holding steady as one of the most popular activities online. E-patients are listening to each other, consulting hospital reviews and doctor reviews, and posting which treatments work for them.

People living with chronic disease, your best customers, are less likely to go online. But their loved ones may fill in the gap. One-third of American adults care for a loved one and eight in ten of those caregivers go online.

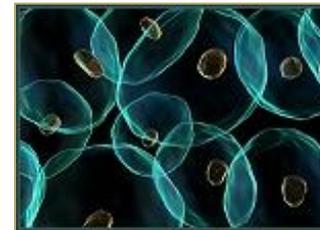
*A medical crisis flips a switch in people... The internet has become a popular weapon of choice.*

One-third of adults experienced a medical emergency in the past year, either their own or someone else's. They are online too. **A medical crisis flips a switch in people. It makes them want to become superheroes and save a life if they can. The internet has become a popular weapon of choice.**

What happens when you treat patients and the people who love them as not just your target audience, but your colleagues? They become a resource for innovation and knowledge. And their rapid-learning system already exists: social media.

In October, I had the opportunity to address an Institute of Medicine workshop that brought top cancer researchers together to share insights on how to better use data in their work. When it was my turn at the podium, I talked about Flickr, YouTube, Facebook, MySpace, and how people use each one of these tools to create, gather, and share health information. And I told them that I'd been using Twitter all day to bring my network into the room.

## Where might Pharma and Healthcare best focus learning in 2010?



### Missing an Opportunity p2

The discussion was not limited to this assembly, but potentially thousands of people who were learning about their plans.

As I returned to my seat I was surprised to hear Paul Wallace's advice to the audience, "If all of this sounds scary, remember your oncology training: denial, anger, bargaining, acceptance."

Scary? My data? This is normal, everyday internet use, especially compared to what they were about to hear from Gilles Frydman of ACOR.org, Simone Sommer and Josh Sommer of the Chordoma Foundation, and Jamie Heywood of PatientsLikeMe.com. Patients telling each other where to go for treatment, tracking drug side effects for post-marketing surveillance, owning their own data, refuting their doctors' advice, raising money to direct their own experiments.

They are the radicals, the superheroes, the wild-eyed optimists who believe they can transform medicine from the bottom up.

But there was no denial, anger, or bargaining by anyone in the workshop. There was listening. There were smart questions. There was learning. I was dazzled by the minds which were so open, curious, and, well, rapidly learning.

Social media is simply the current expression of patient activation and engagement. But this time e-patients are part of a larger cultural change that assumes access to information, enables communication among disparate groups, and expects progress.

If you don't have patients and caregivers on your team, you're doing it wrong.



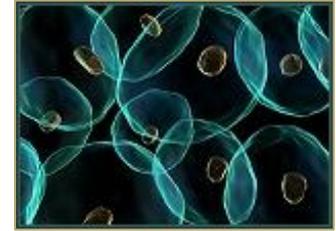
Susannah Fox leads health research for the Pew Research Center's Internet & American Life Project and oversees the Project's digital strategy. She is the principal author of the Project's survey reports on e-patients and online health.

Web: <http://www.pewinternet.org>

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Twitter: <http://twitter.com/susannahfox>

Where might Pharma and Healthcare best focus learning in 2010?



## Where To Spend Your First Marketing Dollar

I get this question at every conference I attend and every time I speak with a new client. It's a simple question really and one that I think has a simple answer. The answer isn't what you think it is. It's not the popular or "hot" topic. It's practical. It's basic. If we're using marketing clichés, it's "blocking and tackling."

The question?

"If I can only spend my marketing dollars on one thing, what should it be?"

Simple, right?

However, there are a bunch of potential answers to this and it depends on who you ask.

- Marketing guru: social media
- "Traditional" agency: more DTC TV
- Sales team: bigger, local budgets
- Media buying agency: more journal magazine ads and banners

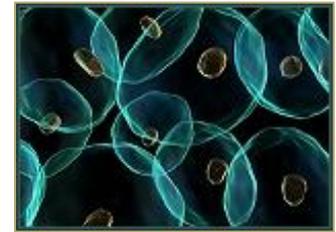
*...top Pharma brands consistently perform poorly on organic search - thus missing MILLIONS of visitors who are looking for their chief benefits.*

- Digital agency: more websites...and mini-sites
- Legal and regulatory teams: nothing (just kidding, sorry, couldn't resist)

The correct answer is, of course, none of the above. If you can spend your money on only one thing, it should be organic search optimization. Not paid search; organic search. You know, organic search, the harder one. The one you can't just throw money at and fix. It requires a bit more work and strategy.

I think everyone by now knows all the benefits of search marketing and why it's important. In case you don't, here's why search marketing is so important and why it works: Many people go online with a problem. Problems need solutions. This is what Google's results, both paid and organic, are supposed to be. Solutions. If you search for "hotel in San Juan," we can reasonably assume your "problem" is that you need to find a hotel in San Juan. The solutions might be organic results of some major hotels in the area and the paid results that might include something as simple as "Cheap hotels in San Juan." Consumers are looking for Google to provide a solution and Google is letting you help them provide it.

Where might Pharma and Healthcare best focus learning in 2010?



## Where To Spend Your First Marketing Dollar p2

Clearly this is how patients use the Internet as well. They have a problem (e.g., a condition they are managing) and they want solutions. These solutions can come in many forms and you need to be sure that you're part of the list. Here's an analogy for you: search is similar to someone who goes to a grocery store looking for diapers. They already know their problem (out of diapers...a major problem), but they may not know their solution. This person gets to the "shelf" (i.e., Google's search results page) and then picks out a solution (a specific brand of diapers). If your brand is not appearing in search results **on the first page**, then you're not "on the shelf." It's hard to be selected when you aren't on the shelf.

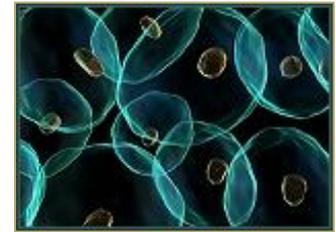
I've shown before how the top pharma brands consistently perform poorly when it comes to organic search.

For example, here's how Lipitor.com performs opposite some important keywords. (A dash (-) indicates that the main website URL does not rank in the top 500 results.)

KEYWORD	Google	Yahoo	MSN Live
Lipitor	1	1	1
atorvastatin	6	24	11
Cholesterol-lowering medication	5	5	5
high cholesterol	63	37	-
heart disease risk	44	80	21
cholesterol	66	186	-
heart health	-	92	-
lower cholesterol	57	146	-
LDL	-	-	-

Not good. By not appearing on the front page of results, Lipitor is missing MILLIONS of visitors. Instead, they, like many other brands, pay for these visitors. They spend a fortune buying banner ads or using paid search and even TV. They try anything to drive traffic, but traffic isn't cheap unless you're not paying for it. With organic search, you aren't paying for it. At least, you aren't paying for it every day. You pay once to do it right and then a small amount from time to time to maintain your position. I'm not going to get into how to do this today, but I am going to share a bit more about the value of organic search. When I say value, I'm talking dollars. That should make every brand manager sit up and listen.

Where might Pharma and Healthcare best focus learning in 2010?



## Where To Spend Your First Marketing Dollar p3

Using a site called [SEMRush](#), I compared Lipitor.com with another heart-related site, [Healthy Heart Guide](#). Healthy Heart Guide is mainly a site about alternative treatments for heart disease, but it ranks very well for many keywords that pharma brands should own. Healthy Heart Guide has about one quarter of the monthly traffic of Lipitor.com (<http://siteanalytics.compete.com/healthy-heart-guide.com+lipitor.com/>) and does zero paid search (or any other paid media).

Here's some data from SEMRush for Healthy Heart Guide:

SEMRush rank	?	56396
Google SE Traffic	?	18k
SE Traffic Price	?	\$31k
AdWords Traffic	?	54
AdW. Traffic Price	?	\$81

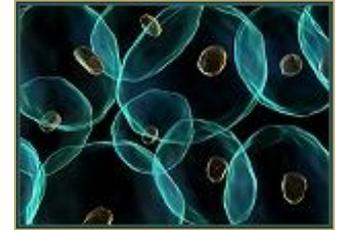
Two things I want to call your attention to. First, "Google SE Traffic." This is the estimated number of visitors per month coming to the site from the first 20 search results, for any keyword, in Google search (i.e., the first two pages of results).

For Healthy Heart Guide, it's 18,000. This tells me that they're doing a good job ensuring that their site shows up in organic search results. So, how does Lipitor.com do?

SEMRush rank	?	704553
Google SE Traffic	?	572
SE Traffic Price	?	\$1.7k
AdWords Traffic	?	0
AdW. Traffic Price	?	\$0

You can see here that only 572 visitors come to Lipitor.com from the first 20 search results in Google. 572. 572 compared to 18,000. What's worse is that 18,000 is almost half of the overall monthly traffic to Healthy Heart Guide (~35,000 per month according to Compete.com). 572 is about 0.4% of the traffic to Lipitor.com (~130k per month according to Compete.com).

Where might Pharma and Healthcare best focus learning in 2010?



## Where To Spend Your First Marketing Dollar p4

The rest of Lipitor.com's has to come either from direct visitors (i.e., those who type "Lipitor.com" into their browsers) or paid media, whether it be paid search or banner advertising in the online space or direct TV (which includes a mention of the website). In other words, most traffic has been paid for. How much is this traffic worth?

SEMRush tells us that too with the "SE Traffic price." To "buy" those 18,000 visitors to Healthy Heart Guide, it would cost about \$31,000 a month (\$372,000 a year). Basically, quick math, it's about \$2 a visitor. That can get pricy pretty quickly depending on how many visitors you think you need.

So, before making big investments anywhere else, spend some money to improve your organic search results. It's an investment that will continue to give results versus a one-time media buy that runs once and it's done.

Being highly ranked for important keywords is something that is enduring (until someone knocks you out) and relatively easy to maintain.

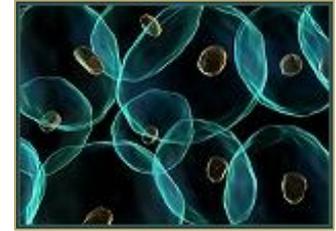
It's hard to avoid the latest fad, but before starting up that brand Twitter feed, get your search marketing in order...and you can tweet that.



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Where might Pharma and Healthcare best focus learning in 2010?



## Fitting Social Media Into Marketing Strategy

Social media brings the biggest shift in consumer behavior and is the most transformational technology to hit marketing in twenty years. While the Pharmaceutical and Healthcare industries wrestle with the challenges of working through FDA guidance (or lack thereof), other industries are plowing ahead.

As techniques to build lasting customer relationships improve, and the pressure from the marketing industry pushes them into uncharted waters, my advice for marketing learning in 2010 is two-fold: Preserve the Core and Apply Consistent Standards.

### **Preserve the Core**

I like to think of the core as the strategy, fundamentals and base tools marketers have always relied on. Websites, ads, paid search, and direct marketing tactics all are still relevant and effective when driven with the proper strategy.

Segmentation still provides a baseline understanding of the different needs, attitudes and behaviors for your target customers.

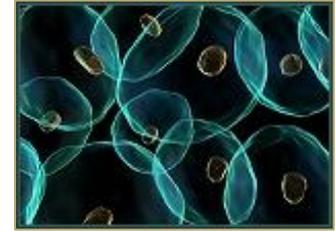
This baseline understanding should fuel all initiatives, regardless of whether they can be defined as “traditional” or “disruptive” marketing tactics. Just because a new technology is out there doesn’t mean it will resonate or be effective at building relationships with those segments.

Take a deep breath – all of the new technologies and techniques creating buzz don’t mean you need to abandon more basic marketing techniques. Rather, do those well at the same time you explore ways to leverage social media.

Here are some questions to marketers to illustrate the point.

- Do you know the value of a doctor’s office locator on your website?
- If you are using display advertising, have you optimized your CPA driving people to it?
- Do people find it easy to find your website and easy to use once they find it?
- Can people find the locator in search engines?
- People are searching for health information online like never before. How relevant and easy to consume is your content?

Where might Pharma and Healthcare best focus learning in 2010?



## Fitting Social Media Into Marketing Strategy p2

Some would brush these off as basic, vanilla online marketing techniques that don't have the sizzle of Facebook. They won't get the press coverage of an innovative patient advocacy community. They won't win [Groundswell awards](#). But when done properly they are an effective foundation to creating a measurable, actionable customer experience that achieves business results – and social media can build upon and enhance that impact.

A recent [comScore study](#) showed that consumers exposed to social media are far more likely to search for a brand, and they'd have a 50% increase in CTR for paid search. This is hugely impactful. I hope to see more studies showing the correlation of social media to other techniques. Only those who are doing paid search in the first place will benefit from this uplift. (Yes, there are ways to still execute paid search successfully without getting a warning letter from the FDA, but that's another post.)

*The successful...will navigate the uncharted waters without leaving behind the map, compass and boat that got them there.*

I still see pharma brand teams sitting on the sidelines waiting for something like social media to solve all of their problems. It won't, but it will be more effective if you have the fundamentals in place to start.

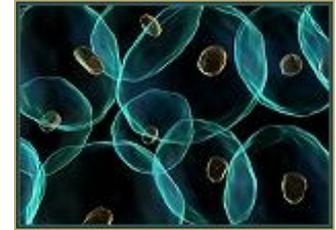
### **Apply Consistent Standards**

How do you measure the return on investment (ROI) of your marketing efforts? Too often I see a double standard where companies apply more scrutiny to social media, often because the techniques are new. How can you measure the ROI of a billboard? A magazine ad? It's often more art than science, and there is a lot of estimation involved to determine the impact to sales.

There are lots of wasted views, and it can be difficult to attribute actual revenue to specific ads. At the other end of the spectrum, the return on ad spend (ROAS) of an online display ad unit can be calculated to a few decimal points.

Social media is a broad array of techniques, but many of them fall in the middle of that scale. There is a brand awareness and favorability side to measure, along with the actual business results achieved.

Where might Pharma and Healthcare best focus learning in 2010?



## Fitting Social Media Into Marketing Strategy p3

Building customer relationships in this way is more targeted and can be a way to achieve lasting impact. Does it need to have the same scrutiny as paid search or display ads? No, but neither did the billboard. Or that \$10 million sports complex sponsorship.

Social media will continue to open new doors, enabling companies to build relationship with customers in ways they hadn't been able to before. As more marketers explore this territory in 2010, the successful ones will take a balanced approach to leveraging these tactics and measuring them. They will have learned to navigate the uncharted waters without leaving behind the map, compass and boat that got them there.



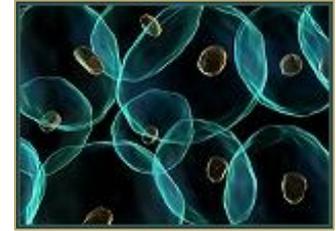
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Where might Pharma and Healthcare best focus learning in 2010?



## Digital Back-to-Basics

Because I am a digital marketer that specializes in pharma, my recommendations fall within this arena. It's a little bit of "back-to-digital-basics" (if there is such a thing), but don't dismiss it as such. I've been doing digital marketing for over six years, and I honestly learn something new every single day. In digital marketing, there's something new under the sun for everyone.

### **Learn more about digital marketing and don't forget about the "traditional" digital basics.**

Even before the [FDA Hearing on the Internet and Social Media](#), there was a decent amount of interest by pharmaceutical companies in social media.

Following the hearing, there's even more. Call me a dissenter, but I'm not sure the current hyper-focus on social media is the best thing for today's pharma eMarketers.

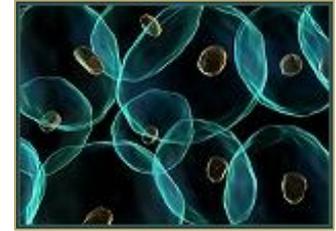
Don't get me wrong - I do believe there is value and opportunity for pharma in social media. Just look at some of the other entries in this collection for some great ideas there. But there's a chance everyone's so focused on social media that I fear they'll forget about "traditional" digital basics

Social media aside, there's still so much more pharma and healthcare marketers could be learning and doing online.

For example, many companies haven't even begun to tap the full potential of search engine marketing, not to mention the increasing intersection of search and social. Are you doing all you can with online CRM? Have you taken a good look at your Web site lately to ensure what you're offering is usable and valuable? Are you thinking about mobile ... apps, text messaging, mobile site optimization? Have you reviewed your site or program results reports lately and made adjustments to optimize? (For more on that, see #2) Are you considering multimedia such as video, podcasts, and flash animation within your online marketing mix?

These may be the more obvious areas of online focus, but it doesn't make them less important. You should be considering all of these, and they should be integrated with each other and your offline initiatives. And yes, they should be integrated with what you're doing in social as well.

Where might Pharma and Healthcare best focus learning in 2010?



## Digital Back-to-Basics p2

Online marketing is a broad, deep, vast ocean and no one person can know it all. My advice? Find an area that interests you and do a deep dive. Whether it's search engine marketing, usability, video, podcasting, online media, widgets, mobile, there is plenty of free information out there with which to educate yourself. Read blogs. Subscribe to RSS feeds and e-Newsletters. Ask your agencies for case studies and educational sessions with their experts. Network with other groups within your organization for knowledge and key learnings.

Whether you have a lot to learn or just a little to brush up on, make a commitment in 2010 to get smarter about the wider world of online marketing.

**Learn to embrace analytics.** I've observed that somewhere between strategizing, creative development, implementation and launch of online programs, often analytics tends to fall by the wayside.

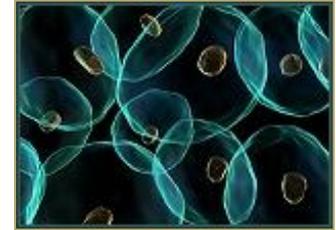
*Pharma marketers who truly apply the data to drive decisions are the ones getting the best results over the long haul.*

Sure we talk about key metrics and ROI, but do most pharma marketers REALLY look at reports and make adjustments based on them? Pharma marketers who truly apply the data to drive decisions are the ones getting the best results over the long haul.

Why aren't you using data to drive decisions? Is it out of ignorance of how to do so? Fear of what will be revealed? Even arrogance? Or, more likely, just plain old lack of time and energy? The smartest marketers I have observed are those that aren't afraid of the data, or of failure. They set aside any arrogance and if they're not comfortable with numbers, they say so.

They let their agency partner interpret the data and provide true analysis and insights. They take it a step further and apply prescription-level data to match programs back to true ROI. They recognize that often marketing is an experiment - try something, optimize it, try again.

Where might Pharma and Healthcare best focus learning in 2010?



## Digital Back-to-Basics p3

Even if you're not a numbers person, renew your focus on analytics in 2010. Lean on your partners to not only provide the numbers, but provide analysis and actionable insights. All those numbers don't mean squat unless you have a human weigh in on what it all means. And if you don't know the results, how are you justifying your programs?

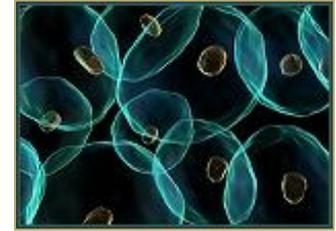
**Learn to listen.** Listen to your colleagues. Your management team. Your partner agencies. Your consumers. Your customers. Your healthcare professionals. The media. Listen to the perception of your reputation. And listen without blinders or bias. By listening openly to the people that surround you daily, you'll learn more than you'd ever imagine.



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Where might Pharma and Healthcare best focus learning in 2010?



## Measure the ROI of Compassion

**Editor's Note:** This essay is set in the fictional world of a comic developed especially for health marketing communications professionals, titled the "Path of the Blue Eye." The comic focuses on the efforts of a master health communicator, Specto Laurus, to protect and nurture creativity while helping health communicators excel.

### Ask The Health Marketing Guru

*Intrepid health marketers! We've come to the end of another year and you know what that means! Yes, it's time to dive deep into the Marketlyzer vault.*

Dear Specto:

I'm not sure if I can keep up. My boss is always pushing me to stay on top of the latest trends like transmedia storytelling, social media and mobile marketing. Honestly, I wish all this stuff would just go away. Things were easier earlier in my career. I knew what was coming and what to expect. Now, I don't know. What should I do? I'm going crazy here! Help!

- Frazzled and Insane in PO

*if you're serious about engaging patients on their terms, you'll have to redefine how you measure ...*

### Dear Frazzled:

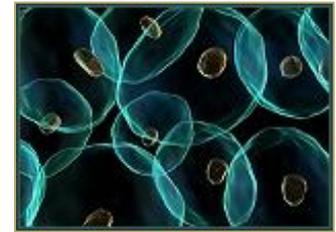
*I've got some tough love for you: It's not going to get easier anytime soon. For many years, we had a solid repeatable formula: create a campaign, launch it, watch it spread, measure the results. Now, old media's dead or dying and consumers aren't being forced to listen to us anymore. Here's some quick advice for how you can keep up with the digital Joneses:*

**Become an information sponge:** *I've found that the new microblogging service Chatter is a great way to stay ahead of the curve. Chatter will lead you to blogs and other useful resources.*

**Be proactive:** *Once you have a sense of what's coming, you can stay ahead of trends rather than behind them. YOU should be the one to tell the boss about new tools and technologies, not other way around. In this day and age, the quickest way to career suicide is to be viewed as a Digital Luddite.*

**Experiment:** *The best way to get used to a new technology is to use it. If (and ONLY if) it is aligned with your marketing objectives, go ahead and start experimenting with some small digital pilot programs.*

Where might Pharma and Healthcare best focus learning in 2010?



## Measure the ROI of Compassion p2

*Finally, you should consider yourself lucky. Many marketing leaders in the health industry aren't as forward-thinking as your boss about digital technologies. Take advantage of the situation you're in – I would.*

Dear Specto:

I'm a marketing manager for a major biopharmaceutical company. I'm under pressure to move the needle every quarter. I've heard a lot from my colleagues about how we need to focus on patients. I've been looking at patient-focused social media and corporate responsibility initiatives launched by companies in my industry. They look interesting, but I'm wondering how all this patient "engagement" stuff is going to help me hit my numbers?

- Show Me the Money, DM

**Dear Show Me the Money:**

*I truly believe that drug companies can be successful by being responsible, engaged corporate citizens. Study after study has shown that companies that do good, do well.*

*Now, to your question. Effective patient engagement is tough. Yes, if you do it correctly, people will feel good about your company.*

*Also, if you're serious about engaging patients on their terms, you'll have to redefine how you measure ROI. You'll need to build a different and better yardstick that will help you show your bosses that you are "moving the needle" – even when employing unique tactics and strategies.*

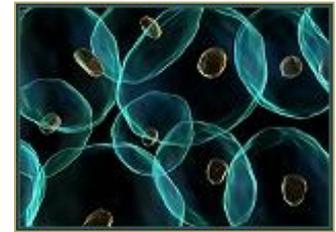
This column is sponsored by [DNArgus](#), which is leading us merrily into the post-human age. [Learn more](#)



Fard Johnmar is founder of healthcare marketing communications and research consultancy Envision Solutions. He is also the mind behind the Path of the Blue Eye Project, a global initiative designed to encourage greater collaboration and knowledge sharing among health marketing communications professionals

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Twitter: <http://twitter.com/blueeyepath>

Where might Pharma and Healthcare best focus learning in 2010?



## The Marketing Circle of Life

### **Is Pharma utilizing the Web as best as it can?**

Has Pharma missed opportunities to learn about how the Web changes the way we conduct business; how we relate to each other; how we accomplish our individual and mutual goals; and how to create and cultivate remarkable communities that foster the kinds of interactions which lead to appropriate actions?

No industry today is immune from the ramifying effects of the ever-expanding Web. A decade ago, the Web was primarily about machines communicating with each other. Now the Web is about people connecting in novel and disrupting ways. It's releasing social constructs and modes of communicating which we never realized existed.

It's important that industry leaders and managers: understand the nature of these changes. What threats is the Web posing? What opportunities does Social Media offer? What can Pharma learn? What can the industry do today to benefit from unlearning what it's learned from over fifty years of traditional media and marketing and collaborating?

### **What Pharma can do with Social Media today:**

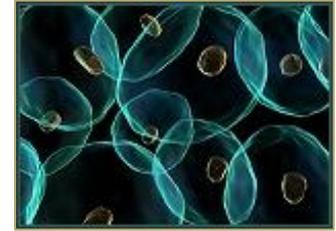
At first glance, Social Media may appear to be a trivial means to entertain ourselves. But social media are useful communications technologies. Pharma has unique challenges, including FDA and HIPAA regulation, but that doesn't mean the industry can't or shouldn't participate. Here are a few suggestions for beginning the process of becoming active online.

**Educate the public.** How are drugs made? Use [Youtube](#) to take the public on tours of facilities (protecting proprietary information of course). What's involved in clinical trial recruiting? What roles do doctors and nurses and life scientists play in getting a drug or device to market?

**Share Pharma's vision of the industry and health 2.0.** What does the future of pharma look like? Or the future of healthy living?

**Discuss how to respond to the dynamic nature of web 2.0.** What needs to be done to balance FDA's charge to protect the public from misleading statements with its need to give patients and physicians and Pharma freer ways to connect?

Where might Pharma and Healthcare best focus learning in 2010?



## The Marketing Circle of Life p2

### What Pharma marketers must *unlearn*:

**Unilateral Mass Broadcasting.** The Web is two-way now. The cost of publishing is practically free. I can talk as loudly as you if I learn how to use the Web. Social media isn't killing traditional marketing: it's completing it. But in the process of completing the other half of media, it's *upending* traditional models.

**Spaghetti on the Wall.** It used to be that you could invest money in advertising machinery and crank out returns. Attention could be purchased like a raw resource and processed into revenues. If you only reached 1% of your viewers you still could strike gold. But you wasted the valuable time of the other 99%. That 99% can now throw the spaghetti back at you.

**Negative Commentary Is Free Consulting.** It's human nature not to like negative feedback. But without negative feedback, learning is impossible. Unlearn fear of the negative.

*Negative Commentary Is Free Consulting.*

### What Pharma can *learn*:

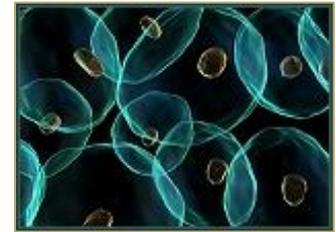
**Return on Investment.** It's a decision-making tool. But it's not the only one. Last century, the power of business was financial capital. It's still a form of power. The new economy, however, will be powered by more than the dollar. Social capital is becoming a powerful form of currency. Trust is the cornerstone of all forms of capital. If you don't have a voice, how can I trust you?

**How to Blog.** Blogging isn't just about publishing content on a web page. It's about understanding your audience, working with your community and keeping up-to-date with web technologies. It's both easy and hard, requiring discipline and a long-term commitment.

**The Real-time Web.** Twitter. Twitter. Twitter. It's all we hear about. But is it useful? In my view, it's just a simple way to communicate, listen and gather information. You can get business ideas for Twitter [here](#).

**Patients are citizens. Citizenry is based on community.** If you're not working hard to learn and enable storytelling, connection, feedback and access to reliable content, patients are left alone to figure things out on their own. That's a safety problem-one which the FDA must also recognize.

Where might Pharma and Healthcare best focus learning in 2010?



## The Marketing Circle of Life p3

**Talk to Nurses..** Ask them what they think about Pharma's reputation and what they would do to improve it. Encourage them to learn about social media. Nurses are the world's greatest marketers. Their hand-on experience with patients, their appreciation for subtle ethical dilemmas and their powerful intuition are often under-leveraged. Learn how to give them a voice. They listen.

Some say that traditional marketing is dead. I don't believe that's accurate. It's *incomplete*. Social media are completing marketing because it's enabling more direct connection between consumer and company. They're humanizing communications. They're reducing the cost of publishing, expressing and collaborating. Learn as much as you can, you're busy: but if your industry isn't staying current, one day it may not afford to keep you busy. If you're a sales representative or marketer or life scientist or nurse, you must make the investment of time and

effort in understanding the Seventh Kingdom of Life. You not only owe it to patients: you owe it to yourself .

### **Recommended reading and practices:**

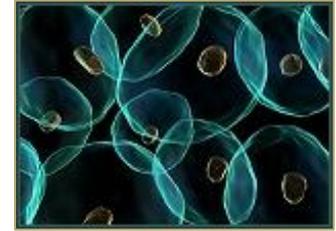
1. Kevin Kelly once called Technology the *Seventh Kingdom of Life*. In order to truly understand social media, you must understand how relationship with technology. Download New Rules for the New Economy which he wrote over a decade ago.
2. Read Dose of Digital. Jonathan Richman works hard to help Pharma overcome its fears of social media and provides unique and critical content. Bonus: if you follow him on Twitter, you'll find all the other active leaders in Pharma and social media.
3. Dip into Twitter every day to see what's being said about the industry. Here's one to watch. Real-time search is powerful. Why else would Google risk its own model by incorporating tweets in its search results?
4. Read 140 Health Care Uses of Twitter and Why a Registered Nurse Is Interested in Social Media.



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Where might Pharma and Healthcare best focus learning in 2010?



## The New Pharma Marketing Paradigm

What difference can a year make for pharmaceutical marketers? Most 2010 budgets are already planned, which are probably based on 2009's budget – maybe adding 5% or so just in case. Consequently, it's difficult for me to suggest anything to pharma marketers that could have an impact on 2010; all the major decisions have already been made. Besides, what I suggest would take a bit longer than one year to implement. So, allow me to extend my timeline out to 2019.

Pharma marketers, like all marketers, are obsessed with "getting the message out" to their "target audience" and measuring the "return on investment." All those things in quotes that consultants are hired to help pharma marketers achieve need to be unlearned and relearned in context of the products that drug companies will be developing in the next decade.

*Forget about "mass marketing." Your audience in the next decade will NOT be the masses, but a multitude of small communities that you build or that you join.*

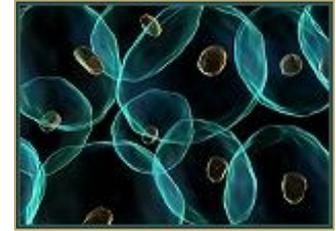
These products will be more complex than the pills that most marketers deal with today and marketing them will require a rethink of:

- The message
- The audience
- The ROI

The message cannot be separated from the audience and if that is the case, ROI will surely follow. Before I get into that, which is what pharma marketers need to most learn, let me discuss what needs to be *unlearned*.

There is not going to be a pill that cures cancer or Alzheimer's disease or many of the other health problems that remain to be addressed by the healthcare industry. Much more complicated products – eg, biologics – targeted to specific patients and having much more serious side effects will be needed. Can today's marketing maxims be used to promote such products? No.

Where might Pharma and Healthcare best focus learning in 2010?



## The New Pharma Marketing Paradigm p2

### **A new pharma marketing paradigm is required.**

*Pushing out well-crafted messages to a broad audience just won't be enough.* The 60-second TV commercial must be jettisoned and other channels that allow extended two-way dialogue with the right audience must take its place. Broadcast direct-to-consumer advertising (DTCA) may slowly wither and die because of anti-DTCA legislation or more restrictive FDA regulation. But it must QUICKLY be abandoned by pharma marketers (unlearned) to make way for the new pharma marketing paradigm.

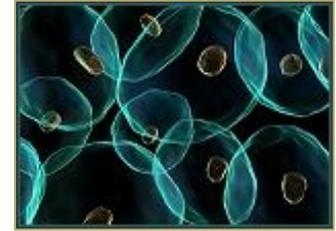
Perhaps TV itself will evolve to be more like the Internet as the two channels coalesce. More "on demand" than "in your face," is what I am thinking. Marketing must use channels that are more "on demand" and if TV evolves that way, then by all means use it.

If not, you know where to go. Yes, the Internet! Your audience is already leading the way. Marketers must follow them there, but for gosh sake DO NOT stalk them!

*Pharma marketers must unlearn their image of the audience.* Forget about "mass marketing." Your audience in the next decade will NOT be the masses. It will be a multitude of small communities that you build or that you join. I don't care if it's online or off, this is what social networking is all about. Instead of social media marketing, think "social network" marketing.

These new audiences are NOT interested in your well-crafted, one-size-fits-all messages pushed out by PR and interstitials or whatever. They are interested in messages that lead to conversations tailored to their interests. These conversations will be even more important for conveying the all important risk information that comes with the new therapies that will be developed. Marketers cannot continue to dream up new ways of cramming more risk information into small spaces like TV commercials, print ads, Tweets, and search engine ads. Only two-way conversation can (1) incorporate all the risk information and (2) put risks into context with benefits.

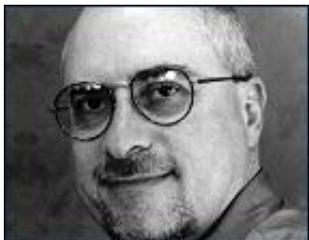
Where might Pharma and Healthcare best focus learning in 2010?



## The New Pharma Marketing Paradigm p3

Even though it may not cost much to broadcast your messages to everyone in all communities, you will be punished for doing it. The bean-counter ROI may be there, but not the real return you need – loyalty and the willingness to engage in conversation. These will be the new measures of marketing success in the new decade.

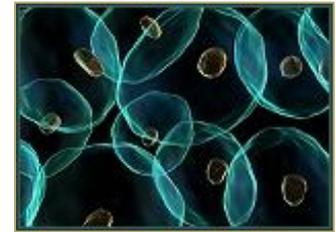
The audience for pharmaceutical marketing will be fragmented in the future due to social media technology and the new types of drugs targeted to specific patient populations. A new marketing paradigm must be developed to fit this new type of audience and the new drugs that will be developed. To do this, pharma marketers must *unlearn* what they have learned in the past 10 or more years. Who will be one of the first?



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Where might Pharma and Healthcare best focus learning in 2010?



## Building Pharma's New Dream Team

Radical shifts are taking place in leadership needs and business design. According to the International Futures Forum, we are in an era of conceptual emergency where "the world we have created has outstripped our capacity to understand it." According to The Idea Hive, *"We need a different vision of leadership to deal with this conceptual emergency. The role of the leader within this complex new world is not to know the answers, it is to ask the questions."*

The rules are not in place for how Pharma and Healthcare companies can engage in this new and "social" world. No one has the answers yet. However, the foundation can be built with people who are willing to ask questions, who are willing to learn about the needs and wants of their customers. Who will comprise this "Dream Team" and what questions can they be asking?

### **The Innovator - Social Business Design**

According to the Dachis group, "Social Business Design is the intentional creation of dynamic and socially calibrated systems, process and culture.

*Who will comprise this "Dream Team" and what questions can they be asking?*

The goal is improving value exchange among constituents."

The opportunity is at the intersection of technology, work and society. *How will your business model be redesigned? How can you improve customer participation, workforce collaboration and business partner optimization?*

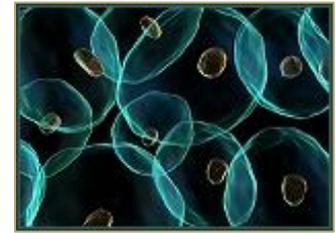
### **The Analyzer - Customer Intelligence**

Marketing is the new finance. The next generation of CMOs will need to master customer intelligence. "Transforming customer data into actionable intelligence and measuring the business impact of marketing will be key success imperatives for tomorrow's CMO," according to Dave Frankland of *Advertising Age*. Social media monitoring is transforming CRM, and even these tools are changing rapidly. *How will you use customer intelligence to strategically drive decisions across the enterprise?*

### **The Concierge - Real-time Customer Experience**

The companies who first differentiate themselves by having a process to deliver great real-time customer experiences will gain a competitive advantage. *How can you give your customers access to real-time solutions?*

Where might Pharma and Healthcare best focus learning in 2010?



## Building Pharma's New Dream Team p2

### **The Curator - Information as a Product**

Information is as much of a product as anything else you sell. It is not just about creating the content but linking to better sources of information and making sense of all that is available. Content "curation" is one of the [10 Top Web Trends of 2010](#). *How will you deliver the information your customers want?*

### **The Influencer - Social Capital**

According to Valdis Krebs of [orgnet.com](#), *social capital* is the key to success for the 21st century organization, "The human assets that an organization uses to reach its goals include full- and part-time employees, contractors, consultants, partners...suppliers and customers."

Those connected to innovators and thought leaders have valuable social capital. *How much social capital do you have? How will you build it? Who will be your [Social Media Strategist](#)?*

### **The Teacher - Visual Learning, Technology and Applications.**

With the flood of data that has become available, it is easy to understand why organizing this data in a visual form is an ongoing trend. Video has exploded, new mind-mapping systems are all the rage, and recently, Google launched [Google Goggles](#), a visual search application for the Android phone. The possibilities are astounding. *How can you simplify information for your customer visually? How will you use new visual technologies to transform the customer experience?*

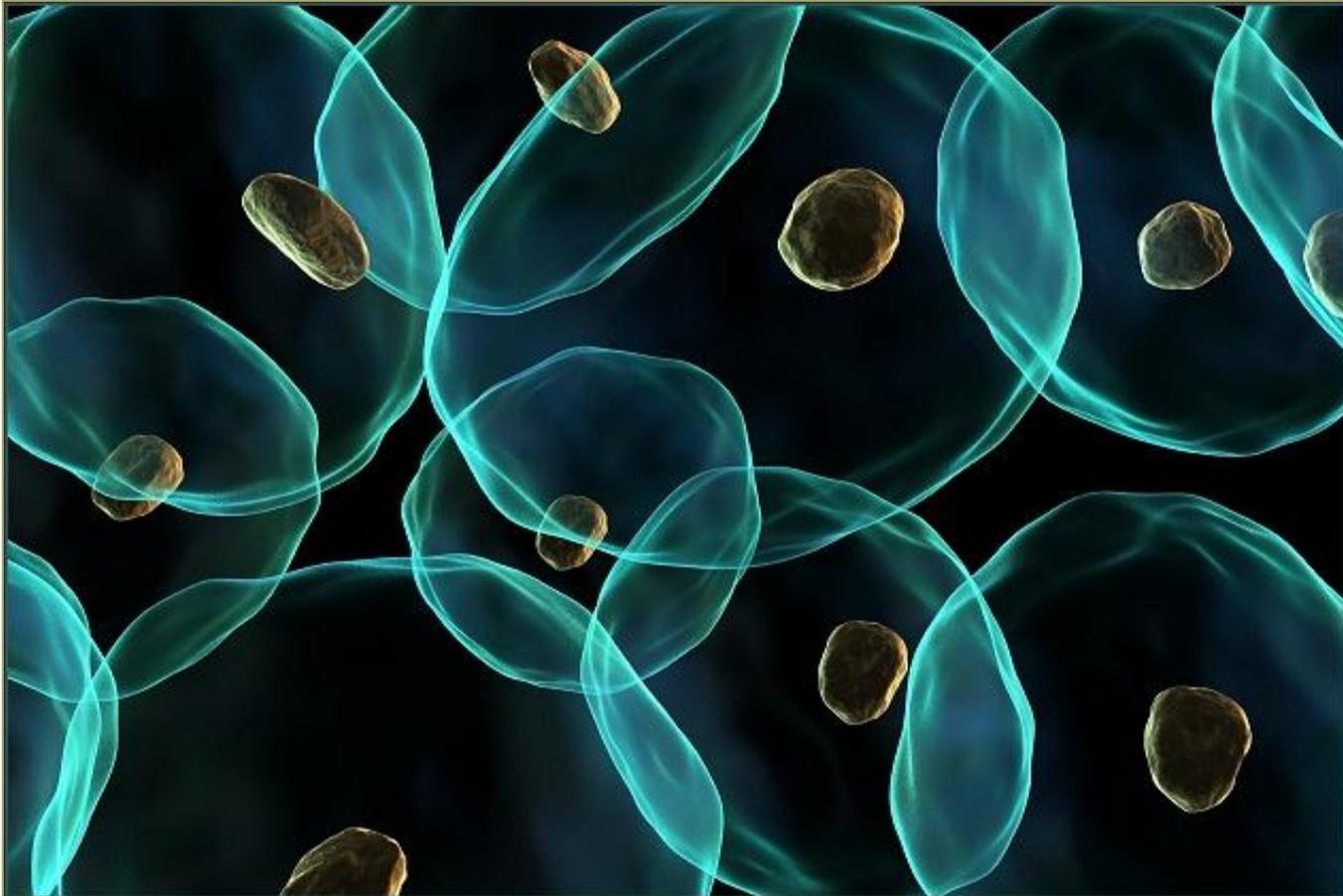
The biggest investment for this learning will be time and human capital resources. Do you have a "Dream Team?" *Are you ready for 2010?*



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Where will you focus your learning in 2010?



Thank you for reading!