

HCP Sentiment Series Part 7

# What Physicians Really Want, from Clinical Trials to Personalization

Published October 2021

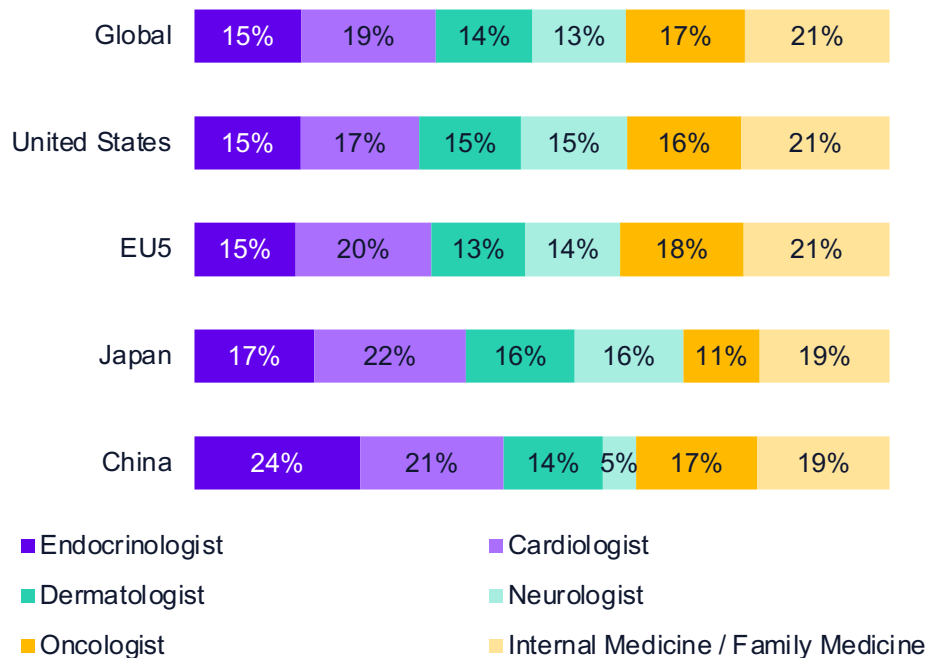


# Sermo's HCP Sentiment Study: Part 7 research overview

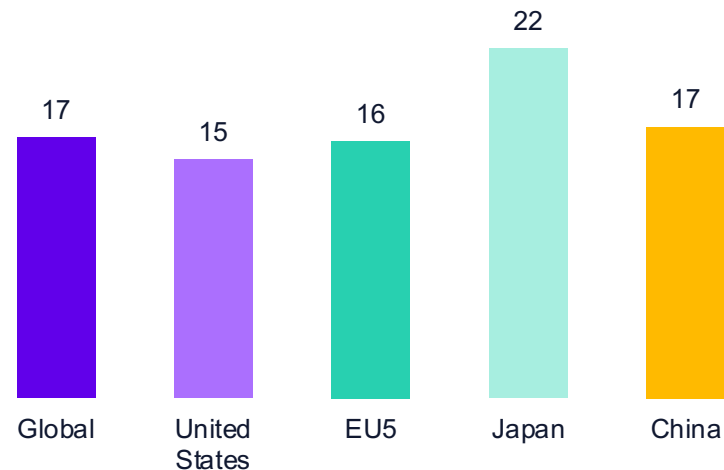
- Questions were solicited from Sermo clients and fielded between August 26 – September 9, 2021
- Sermo invited physicians to participate among a list of six specialties across eight countries
- Screener requirements:
  - Between 3 and 35 years in practice
  - Spending 3-7 days per week speaking/meeting with patients
- Total sample: 1,062

Country	Sample
Spain	165
United States	164
Italy	154
Germany	152
United Kingdom	151
France	149
Japan	64
China	63
Specialty	Sample
Internal Medicine / Family Medicine	221
Cardiology	206
Oncology	182
Endocrinology	163
Dermatology	147
Neurology	143

# Respondent Profile: Specialty & Years of Experience



## Average Years of Experience

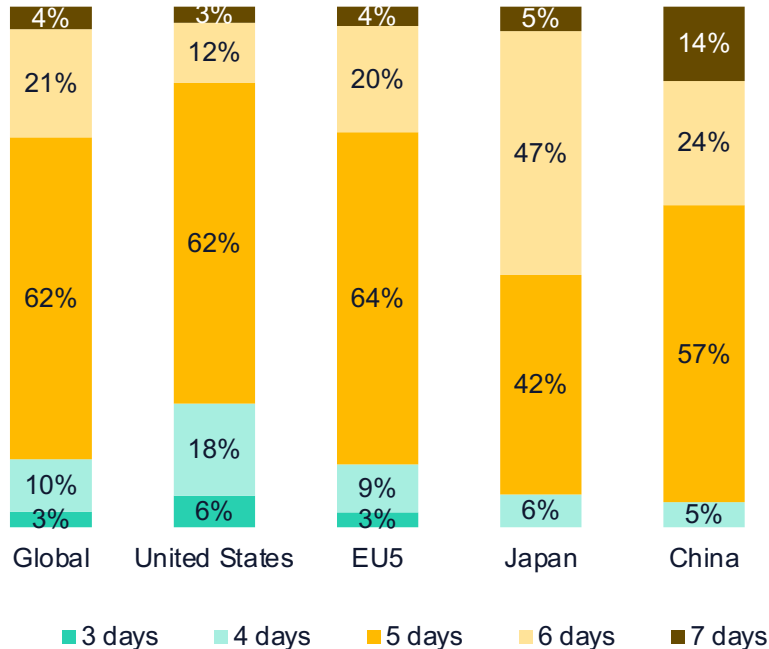


	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63

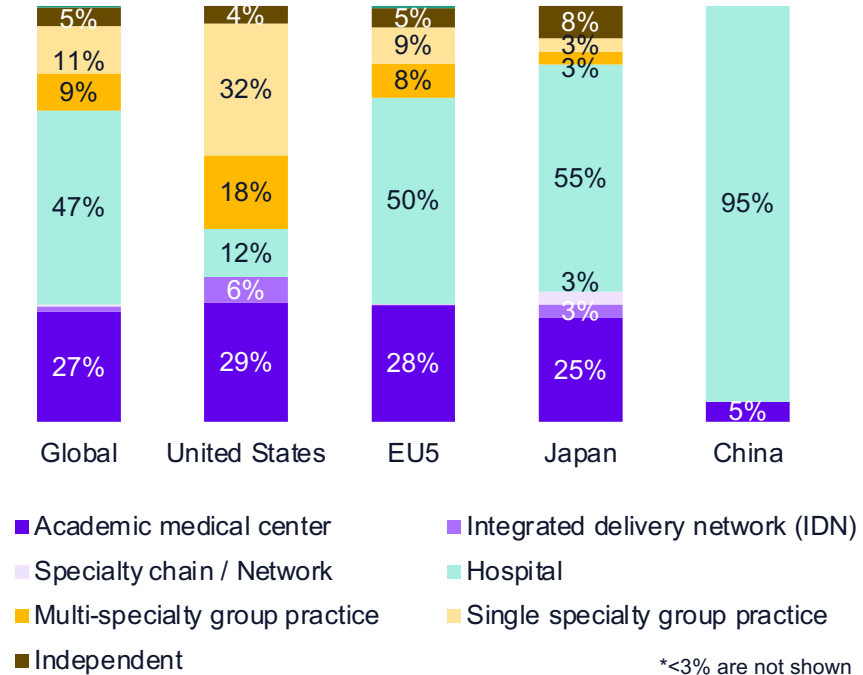
S1. What is your primary specialty?  
S2. How many years have you been practicing your primary specialty?

# Most respondents are affiliated with hospitals or academic medical centers and spend 5+ days speaking/meeting with patients

Average days/week spent speaking / meeting with patients



Primary Affiliation



	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63

PART 1

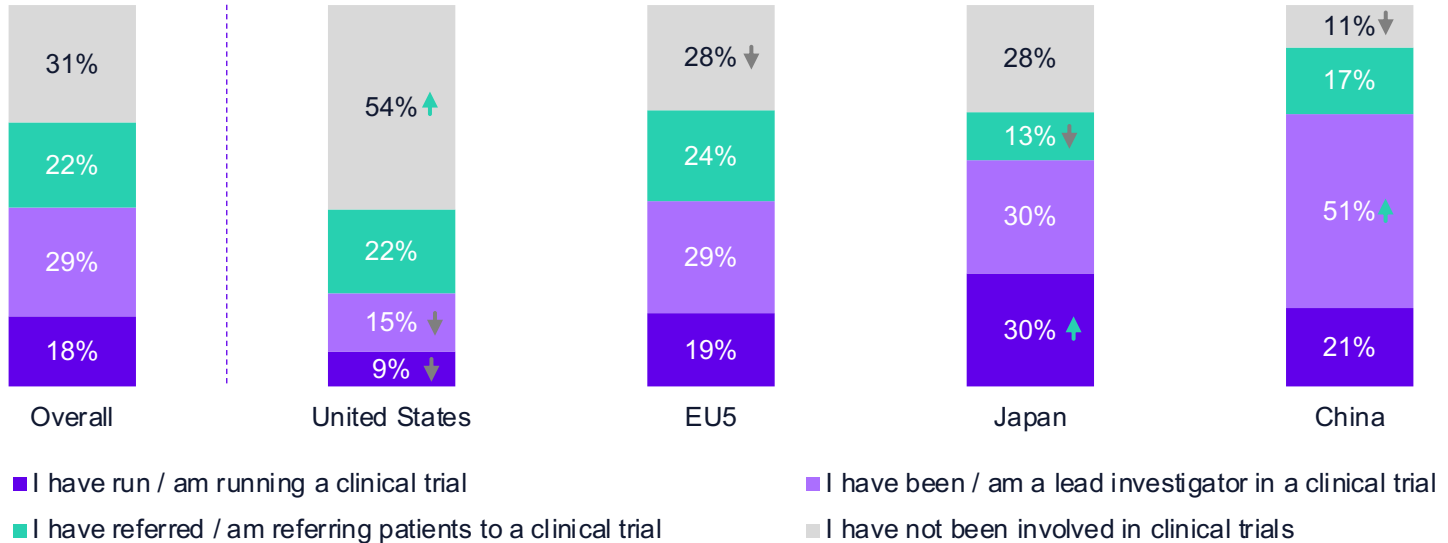
# Clinical Trials

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# Majority of surveyed physicians have been involved in clinical trials

## INVOLVEMENT IN CLINICAL TRIALS IN THE PAST 5 YEARS



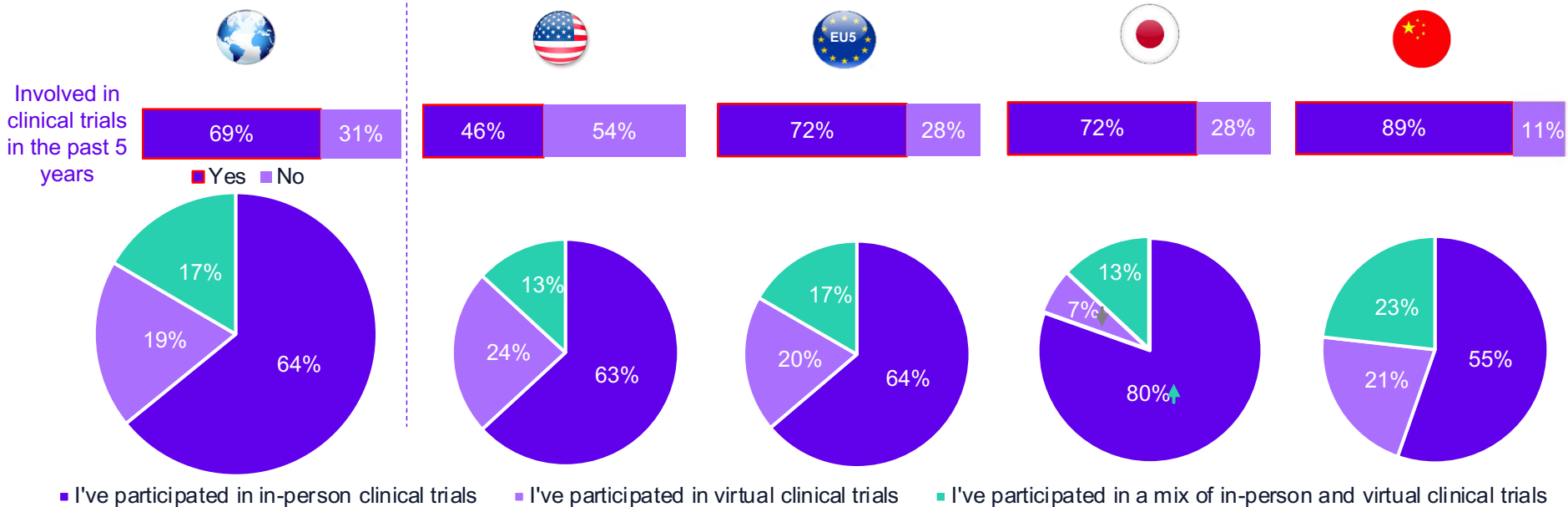
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Q16. Which of the following best describes your involvement in clinical trials in the past 5 years?

	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63

# In-person clinical trials remains the most popular format in the past 5 years. Good adoption of virtual and hybrid trials in US, EU5 and China, but more reserved in Japan

## FORMAT OF THE CLINICAL TRIALS HCPs HAVE PARTICIPATED IN

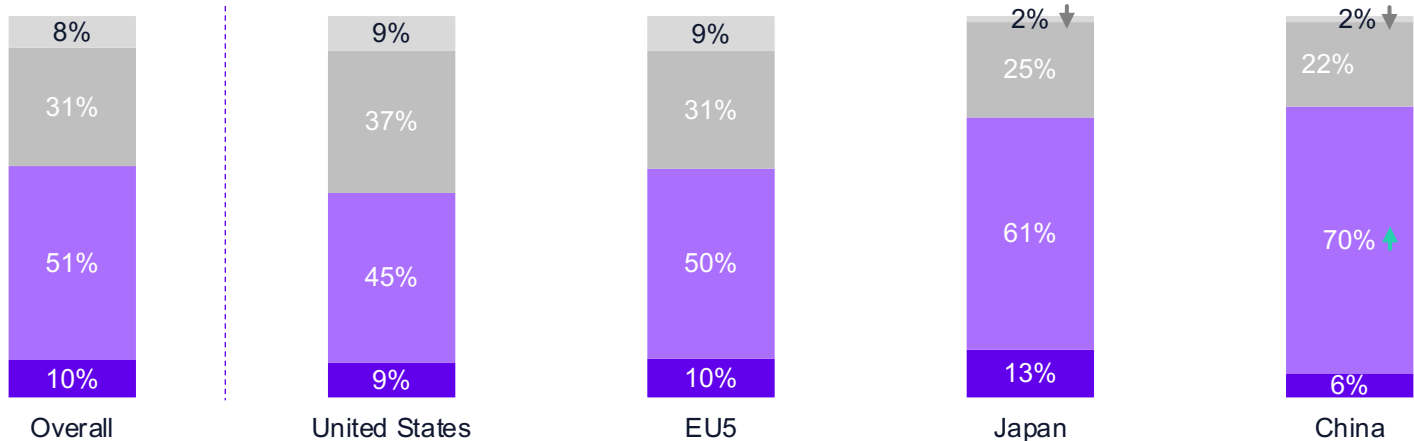


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	Total	USA	EU5	JPN	CHN
Base Sizes, n=	736	76	558	46	56

# Physicians have positive view of virtual clinical trials: over 60% agree that virtual are the future or even as good as traditional in-person clinical trials

VIEW TOWARDS VIRTUAL CLINICAL TRIALS



- I will only rely on results from traditional, in-person clinical trials
- Virtual clinical trials have a lot of unknowns and risks associated with them
- Virtual clinical trials have some challenges, but are the future
- Virtual clinical trials are just as good as traditional, in-person clinical trials

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 ↓ Significantly lower than Global at 95% confidence level

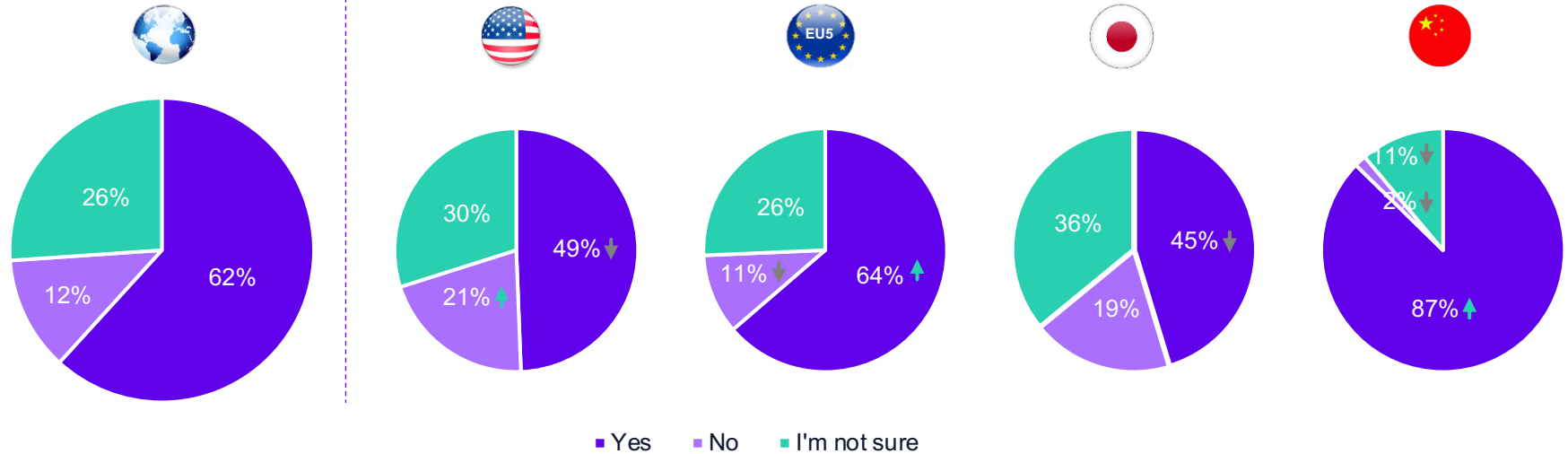
Q20. Which statement best describes your view towards virtual clinical trials?

	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63



# Nearly 2/3 of physicians express interest in participating in virtual clinical trials, with those in EU and China being most enthusiastic

## INTEREST IN PARTICIPATING IN A VIRTUAL CLINICAL TRIAL IN THE FUTURE

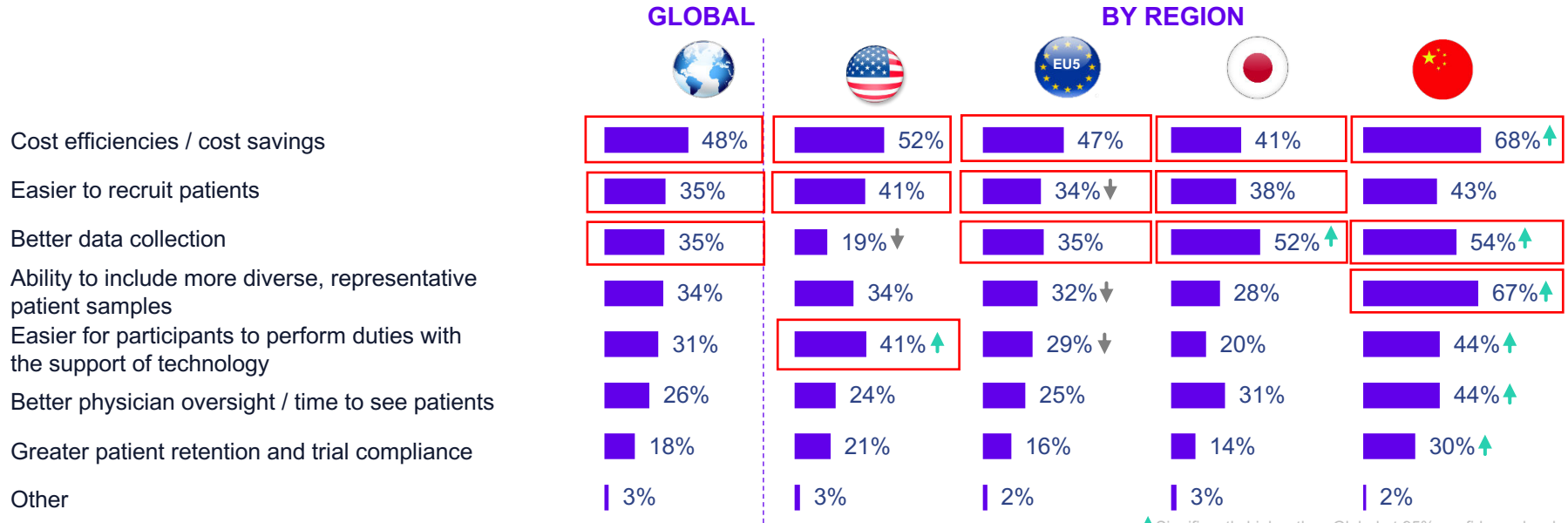


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	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63

# Around half of physicians perceive cost savings as the greatest benefit of conducting clinical trials virtually, other reasons slightly differ across regions

## BENEFITS OF CONDUCTING CINICAL TRIALS VIRTUALLY



↑ Significantly higher than Global at 95% confidence level  
 ↓ Significantly lower than Global at 95% confidence level

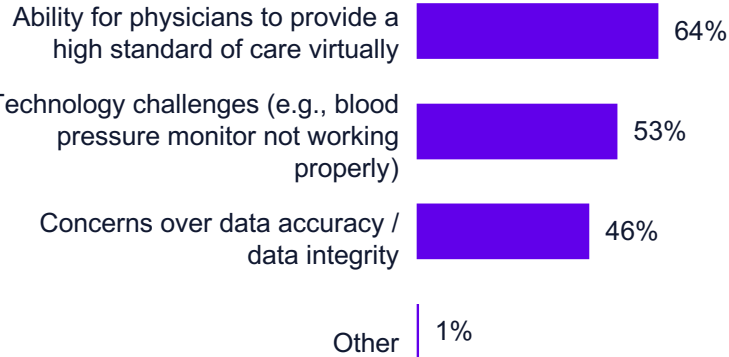
Q18. Which of the following statements describe the perceived benefits of conducting clinical trials virtually?

	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63

# Greatest challenge perceived by physicians of conducting virtual clinical trials is the ability to provide a high standard of care virtually, especially in China

## CHALLENGES OF CONDUCTING CLINICAL TRIALS VIRTUALLY

### GLOBAL



### BY REGION



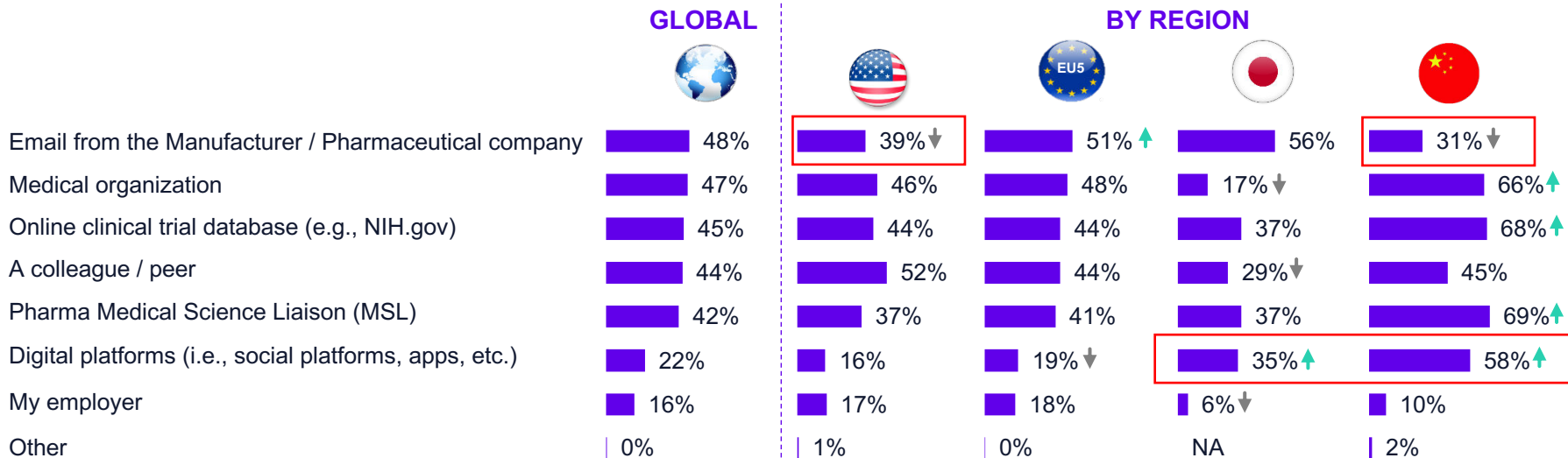
	USA	EU5	JPN	CHN
Ability for physicians to provide a high standard of care virtually	62%	64%	56%	84%
Technology challenges (e.g., blood pressure monitor not working properly)	63%	51%	48%	57%
Concerns over data accuracy / data integrity	43%	45%	50%	59%
Other	1%	1%	NA	NA

■ Significantly higher than Global at 95% confidence level  
■ Significantly lower than Global at 95% confidence level

	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63

# Physicians are open to learning about virtual clinical trials from a variety of sources; HCPs from China/Japan more open to learning on digital platforms and in US/China less receptive to manufacturer directly

## PREFERRED CHANNELS TO LEARN ABOUT VIRTUAL CLINICAL TRIALS



↑ Significantly higher than Global at 95% confidence level  
 ↓ Significantly lower than Global at 95% confidence level

Q22. How would you like to learn about virtual clinical trials?

	Total	USA	EU5	JPN	CHN
Base Sizes, n=	933	130	689	52	62

# What does this mean for the healthcare industry?

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## Key findings

- On average, 7 in 10 physicians were at some level involved in clinical trials in the past 5 years.
- Although in-person trials is still the most common, 1 in 4 physicians have participated in virtual clinical trials in the past 5 years, and the popularity of this format is likely to significantly grow over the next 5 years, with more than 60% of HCPs expressing their interest to participate in virtual trials.
- Cost saving are perceived as the greatest benefit of virtual clinical trials, and greatest challenge is the ability to provide a high standard of care virtually, especially in China.

## Implications for industry

- There is already great optimism for virtual clinical trials by physicians, and pharma companies should continue to communicate benefits and provide solutions for overcoming challenges, particularly for those HCPs who are undecided.
- When communicating about virtual clinical trials, it is important to focus on different channels across regions due to distinct preferences. In Japan and China, there is greater acceptance of learning about virtual clinical trials from digital platforms

PART 2

# Educational Resources

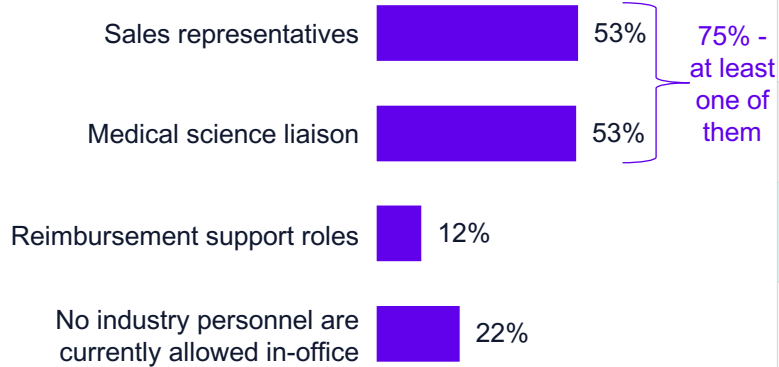
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# Sales reps and/or MSLs have access for in-office meetings in 75% of practices, on average

## PHARMACEUTICAL PERSONNEL WITH ACCESS TO HCP PRACTICE

### GLOBAL



### BY REGION



	USA	EU5	JPN	CHN
Sales representatives	47%	54%	70%	51%
Medical science liaison	41%	56%	33%	67%
Reimbursement support roles	34%	19%	27%	19%
No industry personnel are currently allowed in-office	12%	11%	6%	24%

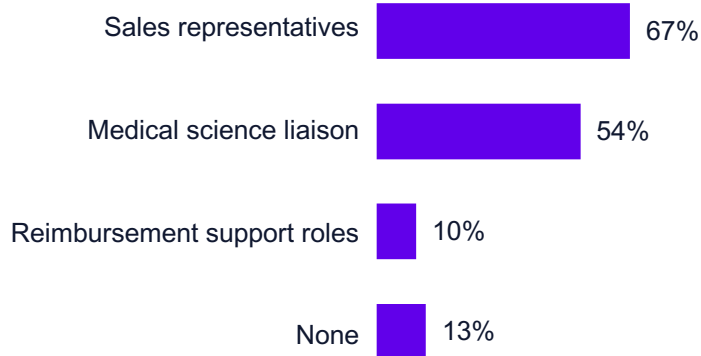
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	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63

# Despite some restricted access, most physicians have met with sales reps or MSLs in past 6 months either in person or virtually

## PHARMACEUTICAL PERSONNEL MET PERSONALLY IN PAST 6 MONTHS

### GLOBAL



### BY REGION



	USA	EU5	JPN	CHN
Sales representatives	65%	66%	81%	76%
Medical science liaison	37%	57%	45%	65%
Reimbursement support roles	11%	10%	5%	19%
None	24%	11%	11%	10%

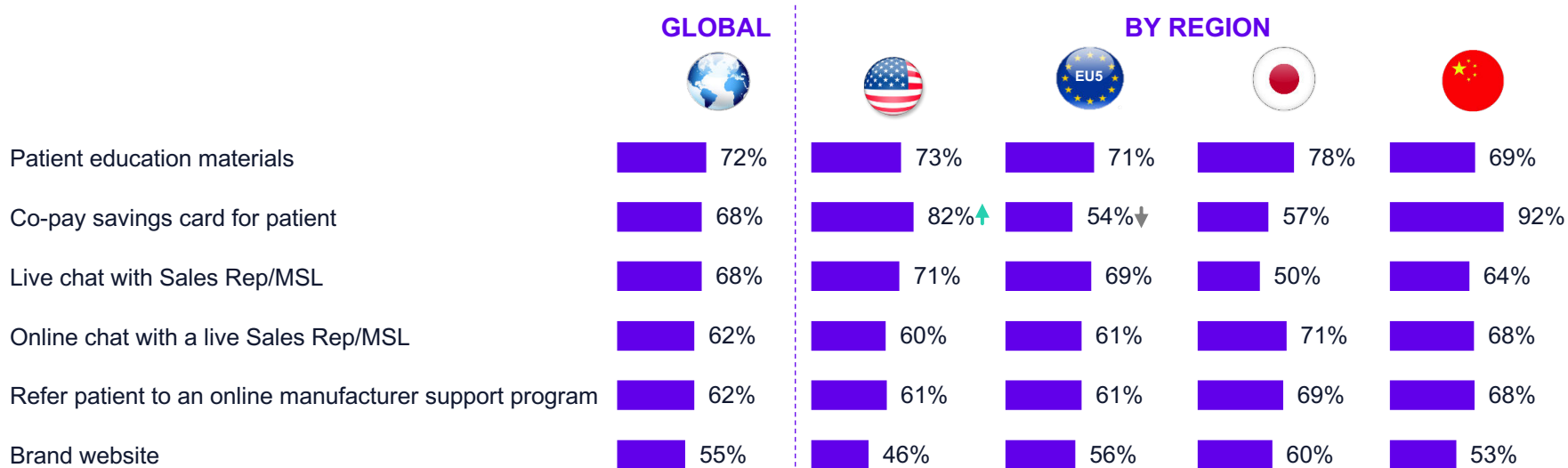
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	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63



# Even though only minority of HCPs leverage resources like live / online chat with sales reps/MSLs or co-pay saving cards for patients, overall, all patient care resources are perceived to be valuable by physicians

**% OF HCPs FINDING PATIENT CARE RESOURCES VALUABLE**  
(Top 2 Box Extremely Valuable and Very Valuable)



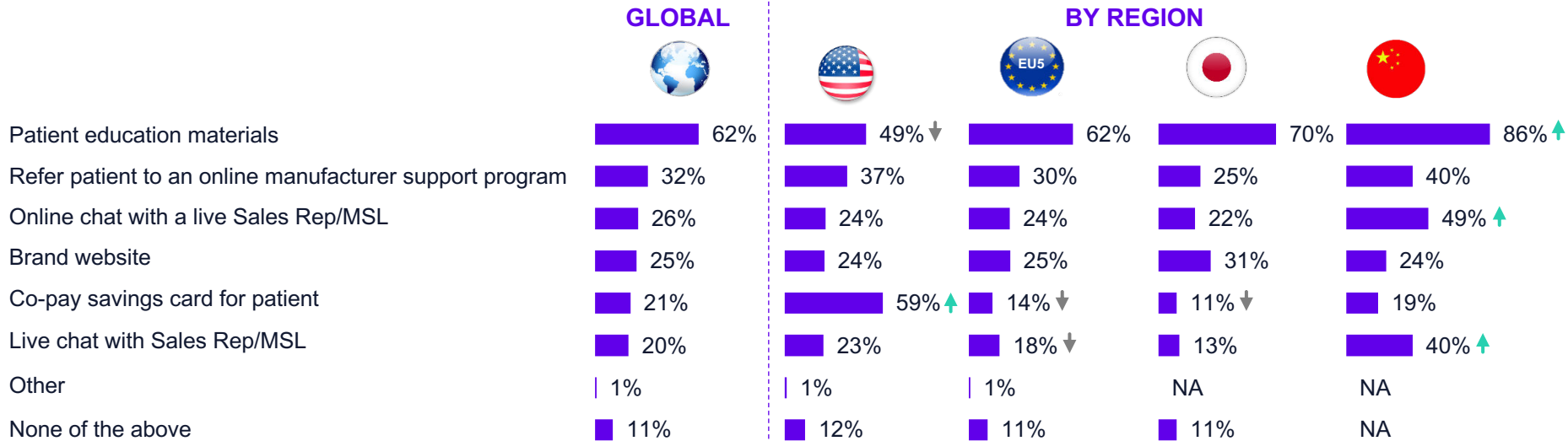
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Q11. How valuable do you find each of the following resources?

	Total	USA	EU5	JPN	CHN
Base Sizes, n=	948	144	684	57	63

# On average, 6 in 10 physicians leveraged patient education materials to support patient care in the past 12 months, other resources being considerably less used

## RESOURCES/ACTIONS LEVERAGED TO SUPPORT PATIENT CARE IN THE PAST 12 MONTHS



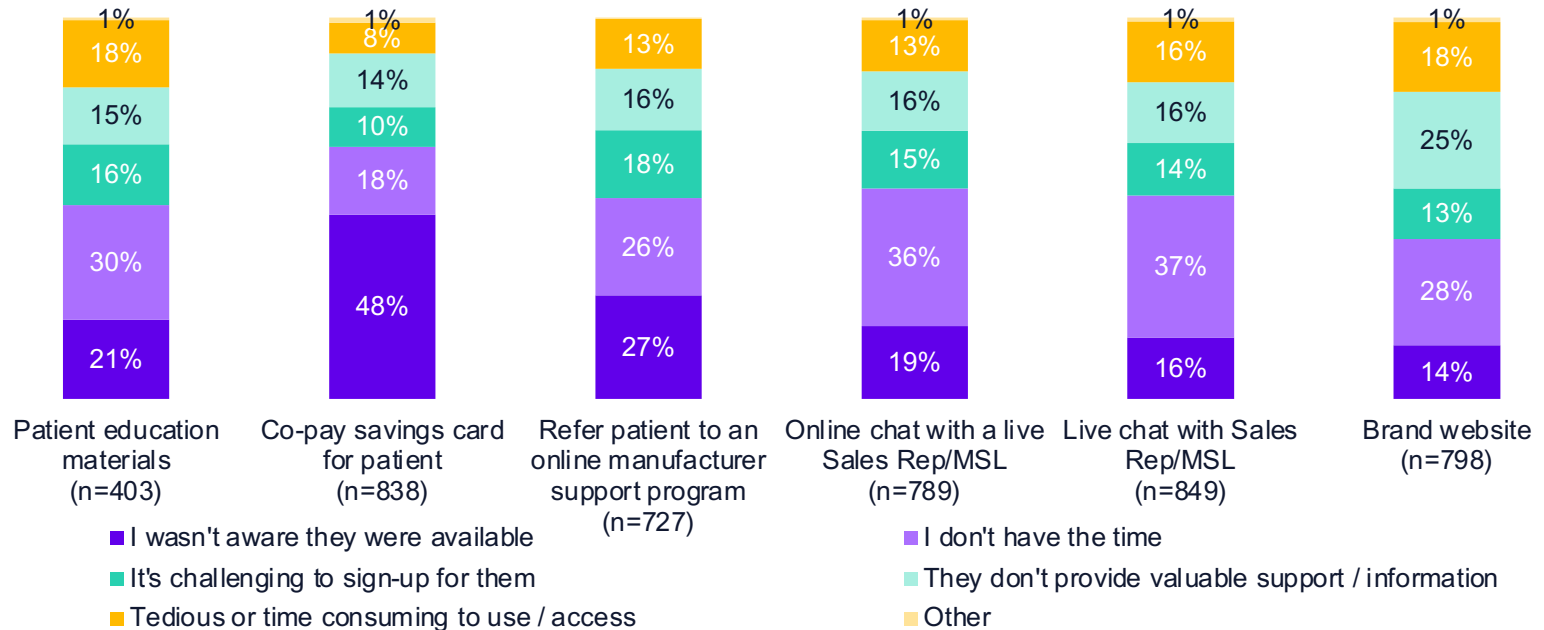
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Q10. Which of the following resources/actions have you leveraged to support patient care within the past 12 months?

	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63

# Lack of time as well as lack of awareness of resources were the top 2 reasons for not using each of the patient care resources

## REASONS FOR NOT USING PATIENT CARE RESOURCES



# What does this mean for the healthcare industry?

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## Key findings

- Most offices are accessible by sales reps and/or MSLs, with 75% of practices open to in-office meetings and ~2/3 of physicians report having met with sales reps and half of physicians report having met with MSLs in the past 6 months either virtually or in-person.
- Although physicians report the varied resources offered by pharma to be valuable like chat with sales reps/MSLs, online manufacturer support program, brand website or co-pay saving cards for patients, they use patient education materials most to support patient care, with other resources being used considerably less

## Implications for industry

- When deciding where to invest resources, pharma should focus on investing in developing patient education materials which are highly valued by physicians and are most often used over other resources
- A considerable share of physicians indicate being unaware of availability of some other patient care resources. Thus, another investment area for pharma could be marketing the *availability* of these other resources

PART 3

# Educational Events

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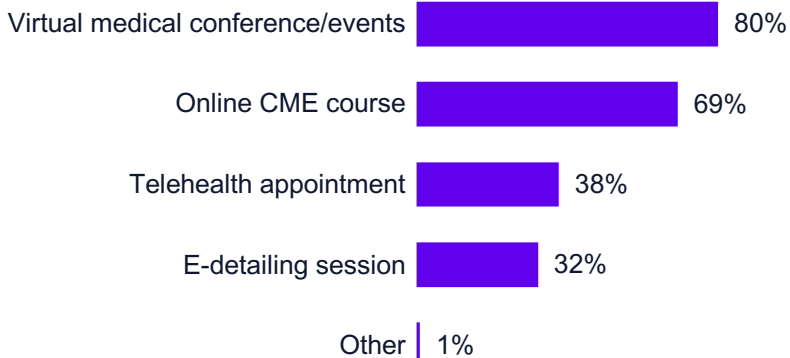
# There has been pervasive participation in **virtual conferences** and **online CME courses** in the past 12 months. Telehealth appointments were popular in US and e-detailing popular in Japan, but less prevalent in other markets

## PARTICIPATION IN VIRTUAL EVENT TYPES IN THE PAST 12 MONTHS

### GLOBAL



### BY REGION



	USA	EU5	JPN	CHN
Virtual medical conference/events	68%	82%	84%	79%
Online CME course	71%	70%	45%	83%
Telehealth appointment	70%	30%	36%	54%
E-detailing session	34%	27%	80%	40%
Other	1%	1%	2%	2%

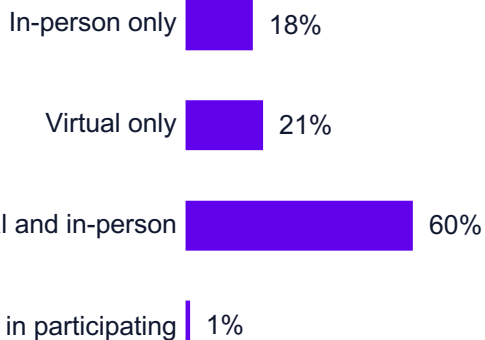
■ Significantly higher than Global at 95% confidence level  
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	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63

# Over the next 12 months **hybrid** virtual and in-person format is the most preferred approach for medical events across all regions, with limited interest in only in-person events globally

## PRERFERRED FORMAT FOR MEDICAL EVENTS/CONFERENCES OVER THE NEXT 12 MONTHS

### GLOBAL



### BY REGION



	USA	EU5	JPN	CHN
In-person only	23%	19%	5%	6%
Virtual only	29%	19%	36%	8%
Hybrid: virtual and in-person	46%	61%	59%	86%
I'm not interested in participating	2%	1%	NA	NA

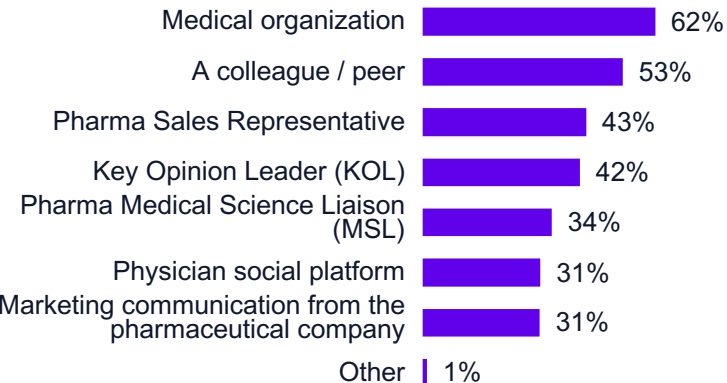
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	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63

# Physicians prefer to learn about new medical conferences or events from **medical organizations** in all regions except Japan, where physicians are more likely to lean towards sales reps. In China and Japan, openness to learning from social platforms

## PREFERRED WAYS TO LEARN ABOUT NEW MEDICAL CONFERENCES OR EVENTS

### GLOBAL



### BY REGION



	USA	EU5	JPN	CHN
Medical organization	67%	63%	31%	68%
A colleague / peer	57%	53%	36%	62%
Pharma Sales Representative	28%	44%	64%	54%
Key Opinion Leader (KOL)	43%	41%	38%	54%
Pharma Medical Science Liaison (MSL)	25%	35%	27%	63%
Physician social platform	28%	28%	52%	60%
Marketing communication from the pharmaceutical company	20%	34%	22%	35%
Other	1%	1%	2%	NA

■ Significantly higher than Global at 95% confidence level  
■ Significantly lower than Global at 95% confidence level

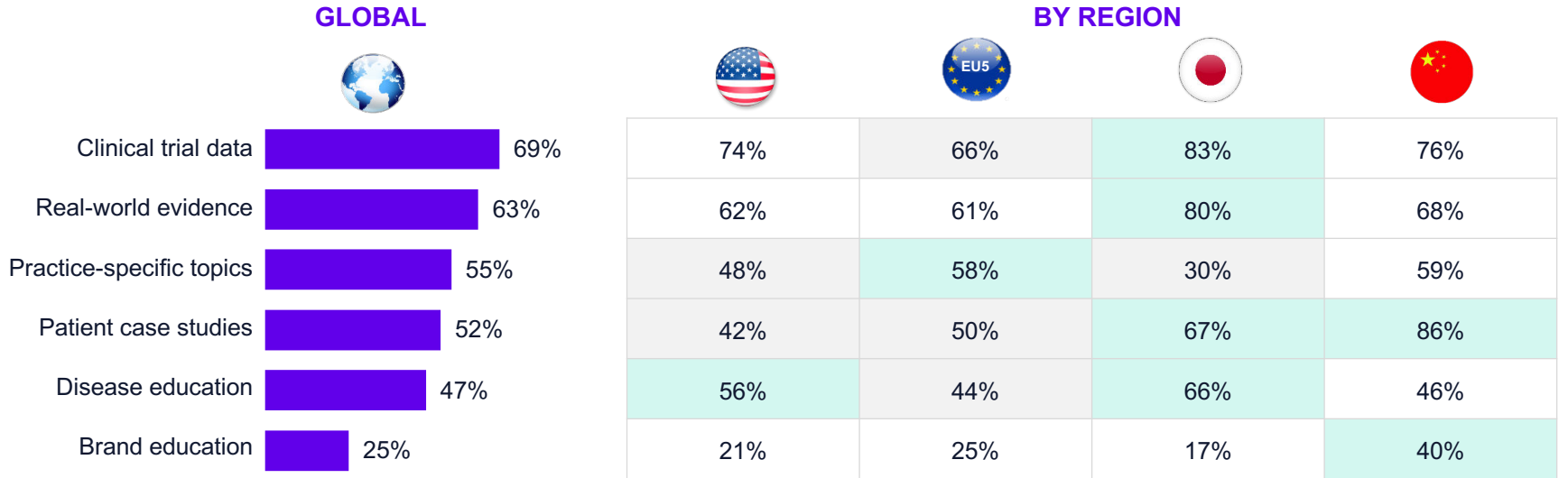
	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63

Q4. How would you like to learn about new medical conferences or events?



# HCPs are most interested in **clinical trial data** and **real-world evidence** when it comes to medical conferences or events

## CONTENT TOPICS MOST INTERESTED IN AT MEDICAL CONFERENCES OR EVENTS



■ Significantly higher than Global at 95% confidence level  
■ Significantly lower than Global at 95% confidence level

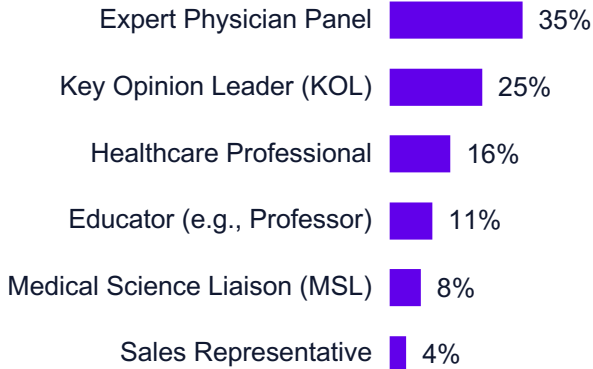
	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63

Q3. When attending a medical conference or event, what content topics are you most interested in learning about?

# Expert Physician Panels and KOLs are the most preferred speakers in medical events, favoured by 6 in 10 HCPs

## MOST PREFERRED SPEAKER IN MEDICAL EVENTS

### GLOBAL



### BY REGION



	USA	EU5	JPN	CHN
Expert Physician Panel	41%	35%	20%	44%
Key Opinion Leader (KOL)	27%	23%	42%	14%
Healthcare Professional	12%	16%	11%	30%
Educator (e.g., Professor)	13%	12%	9%	2%
Medical Science Liaison (MSL)	4%	9%	8%	8%
Sales Representative	3%	5%	9%	2%

■ Significantly higher than Global at 95% confidence level  
■ Significantly lower than Global at 95% confidence level

	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63

Q5. When thinking about attending a medical event (virtually or in-person), who would be your preferred speaker?

# What does this mean for the healthcare industry?

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## Key findings

- There has been pervasive participation in virtual conferences and online CME courses in the past 12 months
- Over the next 12 months hybrid virtual and in-person format is the most preferred approach for medical events across all regions, with only 2 in 10 physicians preferring only in-person events
- Physicians would like to hear from expert physician panels or KOLs as speakers on clinical trial data and real-world evidence topics in these events.

## Implications for industry

- COVID has established a new normal – hybrid virtual and in-person format are now the most preferred for events.
- Although exclusively in-person events are no longer preferred, pharma should continue to reach and interact with physicians incorporating some in-person interactions.

PART 4

# Personalization of Marketing Content

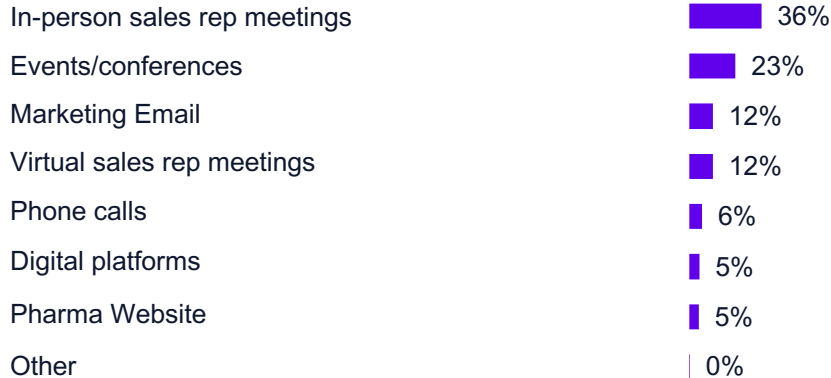
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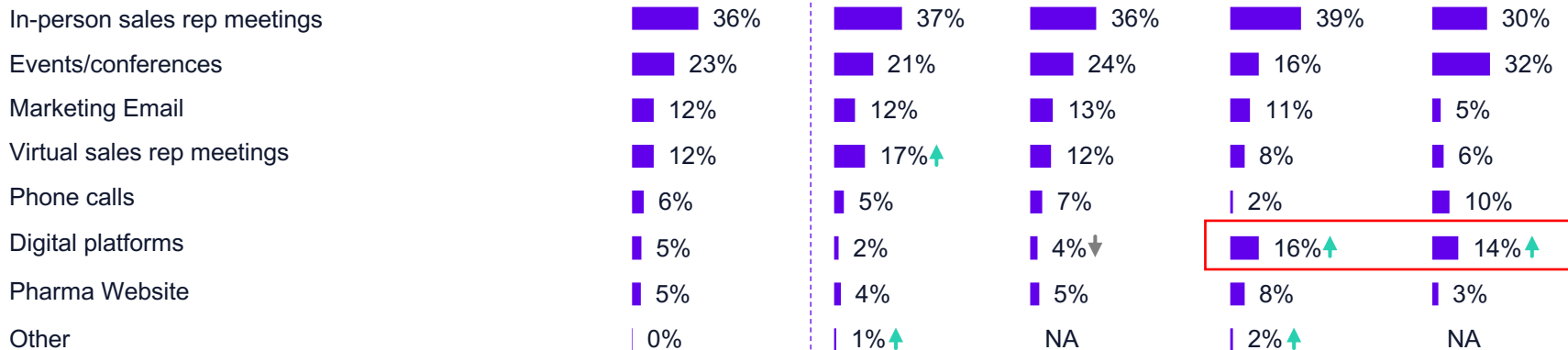
# In-person sales rep meetings remain the most preferred method of communicating with pharma. In Japan and China, digital platforms are highly preferred as well

## PREFERRED METHOD OF COMMUNICATION WITH PHARMA

### GLOBAL



### BY REGION



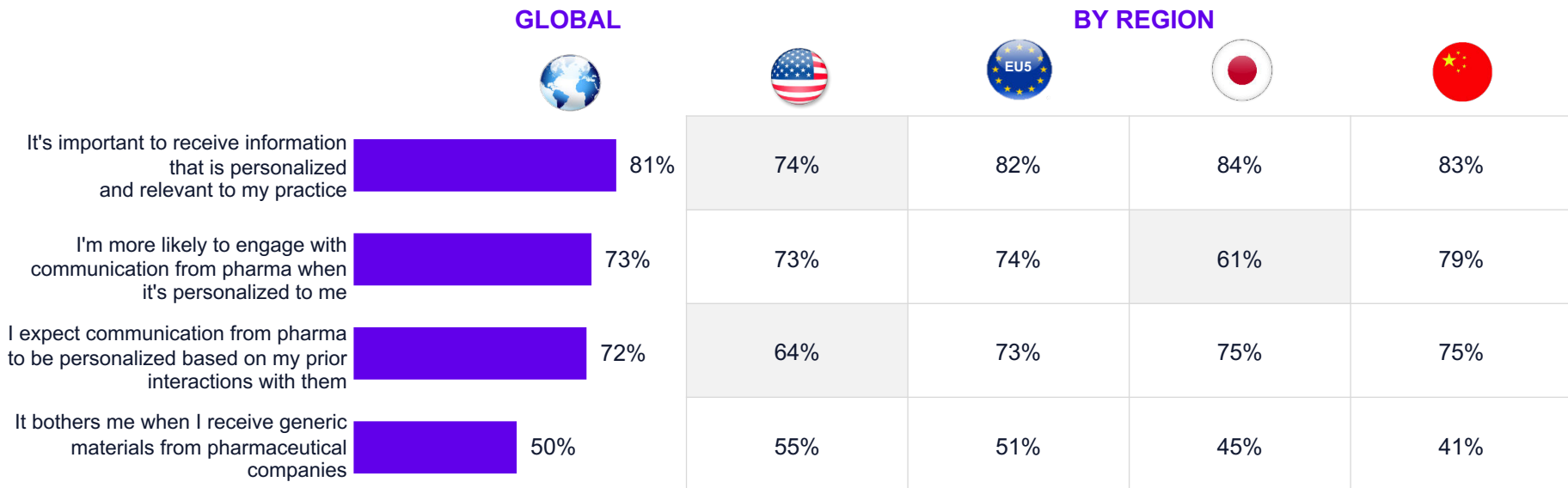
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Q13. What is your preferred method of communication with pharma?

	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63

# 8 in 10 physicians highly value personalized information when they receive it from pharma vs. generic materials, which 5 in 10 HCPs find bothersome

## % OF HCPs AGREEING WITH PERSONALIZATION-RELATED STATEMENTS



■ Significantly higher than Global at 95% confidence level  
■ Significantly lower than Global at 95% confidence level

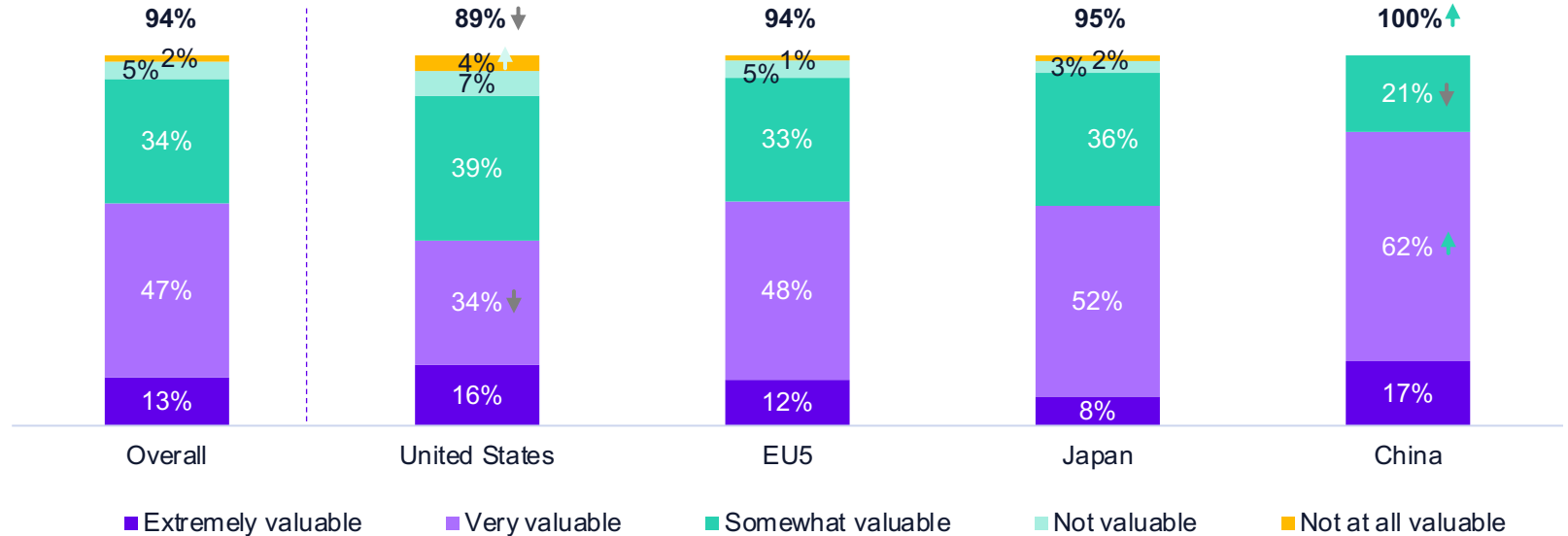
Q14. Please indicate your level of agreement with each of the following statements.

	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63

# Vast majority of physicians find it valuable to be able to personalize patient education materials to better match patients' needs

## VALUE OF BEING ABLE TO PERSONALIZE PATIENT EDUCATION MATERIALS

Top 3 Box



Q15. There are online platforms that allow you to customize educational treatment materials to share with patients in-office or via telehealth appointments, including customizing the treatment indication, patient images, graphics, and more. In your opinion, how valuable is it to be able to personalize patient education materials to better match your patient populations' needs?

↑ Significantly higher than Global at 95% confidence level  
↓ Significantly lower than Global at 95% confidence level

	Total	USA	EU5	JPN	CHN
Base Sizes, n=	1062	164	771	64	63

# What does this mean for the healthcare industry?

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## Key findings

- 8 in 10 physicians highly value personalized information when they receive it from pharma. 5 in 10 physicians find it bothersome to receive generic information from pharma and hence potentially ignore the materials obtained.
- Vast majority of physicians find it valuable to be able to personalize patient education materials to better match patients' needs.

## Implications for industry

- Personalization of materials is a must. Physicians expect personalization of materials for them and for their patients and are more likely to engage with personalized content.
- Consider partnering with platforms that also allow physicians to personalize content on their own, for their own patient population, to drive usage and impact.



# Thank you

To learn how Sermo can support your HCP insights and engagement goals, email us at [business@sermo.com](mailto:business@sermo.com)

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