More than 80% of European doctors say they want to stay abreast of new developments about pharmaceutical products. But how do they want to receive this information?”
INTRODUCTION

New data from M3 Global Research shows EU doctors are optimistic about pharma’s ability to deliver new medicines, with 72% of them saying they are key to improving the outlook for their patients over the next three years (Figure 1).

Indeed, new medicines are considered more influential than ‘better management of chronic conditions’ and ‘more patient education’, which were respondents’ second and third top choices respectively.

In line with this, more than 80% of European doctors agree they are interested in staying up-to-date with new developments about pharmaceutical products. But what influences their choice of treatment and how do they prefer to receive product information?

M3 Global Research put these questions to 1,848 EU doctors mainly from the top five EU nations – Germany (332); France (380); Italy (266); Spain (293) and UK (318). We hope that their answers will prove useful to pharma marketers when deciding how best to engage with doctors in the EU.

“72% of EU doctors say pharma’s delivery of new medicines will be the main factor contributing to improving the outlook for their patients over the next three years”
Healthcare spending throughout Europe is highly politicised, coming as it does from an increasingly constrained public purse. National efforts to limit either the supply of, or demand for, medicines go some way therefore to explaining the marked differences in how doctors from the largest EU nations identify the three top influences on their choice of treatments.

Guidelines would seem to be the most pertinent influence in the UK. Figure 2 shows that national guidelines (for example, those published by the UK’s National Institute for Health and Care Excellence) were mentioned by 69% of UK doctors and local guidelines and availability on formulary by 56%. In contrast, national guidelines were only mentioned by 30% of Spanish doctors and local guidelines by as few as 5% of French doctors and 21% across the EU.

The influence of guidelines on treatment decisions is highlighted in Figure 2a, which shows the respective scores from the five major EU countries.
Europe is also host to various medical traditions and cultures, which may explain why international guidelines are so much more influential in treatment decisions in Italy, cited by 70% of respondents, in contrast to the UK’s 14%. It may also explain why medical education resonates so widely among Spanish doctors with 63% citing it as a leading influence in contrast to 27% among their British counterparts.

Overall, the picture is highly variable with the most consistent influence being the evidence presented in clinical papers. But even within this single leading factor, there are marked contrasts with 64% of French doctors, for example, citing this at one end of the spectrum and only 39% of UK doctors at the other.

Other sources of influence mentioned but not tabulated in Figure 2 include:

- Promotional information from pharma companies: Selected by 4% of respondents, rising to 8% in Spain and Italy and dipping to 3% in the UK and 2% in Germany.
- Key opinion leaders (KOLs): Selected by 8% of respondents.
- Peer advocacy / prescribing behaviour: Selected by 34% of respondents in France, 17% in the UK and 12% in Spain.

“Overall the picture is highly variable with the most consistent influence being the evidence presented in clinical papers.”
How do doctors want to engage with pharma on new products?

While promotional material from pharma companies is clearly not a top influence in treatment decisions (selected by an average of only 4% of doctors), understanding how EU doctors prefer to receive such material can help boost its impact.

In top place is the face-to-face visit from a sales rep, followed by information disseminated from an independent website (see Figure 3). For this question, the respondents were asked for their top three choices (a first scores 3, a second 2, a third 1 and no points if an option is not chosen at all).

Further analysis, depicted in Figure 3a, shows two options (downloadable content and emails from independent websites) are closely related with a much higher preference for independent website contact among doctors who do not see reps. The researchers looked specifically at how the doctors responded to the option regarding face-to-face rep visits, filtering out those who selected this as a first choice (569 or 30.8%), as one of three choices (1056 or 57.1%), and as no option (792 or 42.9%).

Those who close their doors to the sales force are shown to prefer to visit or receive communications from independent websites more than the average doctor. For downloading content, the ‘no reps’ group scored 63% versus a 50% average; for receiving emails, the figures are 49% versus a 34% average, and for researching independent sites, they are 61% versus 48%.

Figure 3: Preferences for receiving promotional material

Figure 3a: Use of independent sites analysed by propensity to see reps

All respondents (n=1848)
- All choosing face to face rep visits as first choice (n=569)
- All choosing face to face rep visits as one of three choices (n=1056)
- All choosing NOT choosing face to face rep visits as one of three choices (n=792)
When researching pharma products, doctors show a clear preference for scientific journals and independent websites, as shown in Figure 4. A massive 91% are keeping up with the latest science at least once a month.

The figure may well be higher if searching on the independent sites, which often post a summary of the most important studies, is included. Nearly three-quarters of all EU doctors say they visit such sites weekly or monthly. The professional bodies come in a close third as a source of information and these also cover the most pertinent research in their area of medicine.

Concise information suits the busy working lives of doctors. Figure 4a shows the top slots for usefulness of formats all go to summaries: of the medical guidelines, of information on individual drugs, of medical protocols or algorithms, of single-page rather than multiple-page details, and of clinical papers. For this question, the doctors were asked to rank their answers from most to least useful where, in the data processing, ‘most useful’ drew a score of 11 and ‘least useful’ a score of 1.

“Concise information suits the busy working lives of doctors”
European doctors spend a total of 21 hours a week online, 15.9 of which are for professional purposes, as shown in Figure 5. This average figure breaks down by country as follows:

- Germany: 16.5 hours online a week, 10.9 for professional purposes
- France: 16.1 hours online a week, 13 for professional purposes
- Italy: 24.7 hours online a week, 19.1 for professional purposes
- Spain: 26.8 hours online a week, 21.8 for professional purposes
- UK: 22.2 hours online a week, 15.8 for professional purposes

While these figures do not relate to how doctors prefer to receive product information, they do confirm that it should emanate from the web in some form because, to all practical intents and purposes, this is where the medical profession now works.

And the data is useful in other dimensions. It reveals, for example, that Spanish doctors spend more time than other Europeans using prescribing software, clocking up 12.7 hours a week. This is almost three times that of their German counterparts who registered only 4.8 hours and just short of 50% more than the European average figure of 8.6 hours a week. The Spanish also use the internet more than other Europeans in terms of searching professional information and are second only to Italy in terms of using it to stay in contact with other healthcare professionals.

Figure 5: Hours spent online by EU doctors per week
ATTITUDES TO ONLINE LEARNING

In terms of using the internet specifically to learn about medicine, the attitudes depicted in Figure 6 reveal a general consensus to keep up with new developments about drugs (1% in disagreement); that online information is easy and convenient to access (3% in disagreement) and that online resources are independent and objective (5% in disagreement). Nevertheless, it is interesting to note that almost a third of doctors prefer contact with a rep to learn about a new drug as this offers more interaction.

CONCLUSIONS

European doctors have more confidence in pharma’s ability to improve the outlook for their patients than any measures to improve either patient management or patient education. They therefore have a strong interest in wanting to stay up-to-date on the latest pharma developments.

While pharma’s promotional material may not score well as a top influencer of treatment, many doctors are open to receiving information via face-to-face visits from sales reps, independent websites and downloadable content such as documents, podcasts and webcasts.

“There’s a general consensus that … online information is easy and convenient to access.”
ABOUT THE AUTHOR

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Tim Ringrose trained in nephrology and intensive care in Oxford before joining Doctors.net.uk, part of M3, in 2000. Tim has led the development of services provided to doctors and has had considerable experience working with a wide variety of healthcare clients to deliver market research, targeted online communications and educational programmes to doctors.

About M3 Group

M3 is a trusted global provider of information and connections in healthcare, and has a reach of more than 3.5m physicians worldwide - making it the world’s largest network of physicians.

M3 helps healthcare organisations to access, connect and communicate more efficiently with physicians and other healthcare professionals in order to share knowledge and innovations. It also provides ongoing data-driven results and insights, so that it can continually improve its service.

For physicians, M3 provides dedicated and trusted community spaces in which they can connect with each other, as well as healthcare organisations - to learn, access new information, and share knowledge and experiences.

Through its commitment to progress and its investment in deepening connections, M3 will continue to break down the barriers that stand in the way of improvements and progress in healthcare.

Further information

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