Medical education in a medcomms agency

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Abstract
Medcomms agencies provide services and counselling to pharmaceutical clients in many ways. Medcomms are currently strengthening medical education as a form of indirect communication strategy, which focuses on educating health professionals on specific therapeutic areas of a given product. This article describes the activities in a medcomms agency, why indirect communication fits in with the client's commercialisation goals and how it may match with the writer's professional interests or career prospects.

Medical communication, also medcomms, agencies provide pharma companies with strategic counsel and solutions: 1. to increase awareness of their relevant targets about new drug products and their benefits and risks to patients, and 2. how to disseminate this information at a large scale through a variety of formats and media. Thus, medcomms agencies produce promotional documents or programmes, which are later delivered to the pharma companies' targets through the pharma sales representatives taskforce or its own medical department.

Many are not aware of the activities in a medcomms agency, especially its role in medical education. The following are typical areas in which medcomms agency can provide services to their clients and describe how their role fits in with pharma sales representatives objectives.

Meetings and conferences

Activities related to meetings such as advisory board meetings, conferences and symposia, and other professional meetings are venues in which medcomms agencies provide multiple services to pharmaceutical companies. Services range from planning to execution of these meetings including producing written materials related to such meetings.

- For example, pharmaceutical clients may ask medcomms agencies to cover conferences as latest developments in therapeutic areas are presented and discussed here. Thus medcomms agencies attend conferences and produce reports synthesising the conference's main outcome, sometimes with the help of medical experts. The highlights of the conferences are presented in form of slides, video interviews, online newsletters, etc. This information may be later distributed and discussed during other professional meetings or activities, thus benefiting doctors who were not able to attend the conference.
- Agencies themselves may organise a symposium which includes planning contents and schedules of the symposium, arranging speakers and other contributors, and producing symposium-related slide kits, leaflets, posters, or advertising banners.
- Advisory boards are composed of medical experts, whose views can be used to fine-tune a clinical research programme or a medical communication strategy. These boards conduct regular meetings, which are mostly confidential. Medcomms agencies are often involved in organising them including preparing the agenda. During the meeting, a medcomms agency personnel may be responsible for chairing the meeting and may be asked to provide the pharmaceutical client with a comprehensive report including minutes of the meeting and strategic recommendations.
- Medcomms agencies carry out other professional meetings and programmes intended for physicians, pharmacists, nurses, or other health care practitioners (HCPs). These may include slide shows, videos, i-Pad applications, websites, web conferences, live broadcasts, etc. Medcomms agencies conceive, set up, and execute these programmes, which involve a lot of brainstorming, copywriting the scientific content, coordinating activities, and managing the logistics. Most of the time, the pharma sales representatives take charge of setting up the meetings (with or without the support of the medcomms agency staff) using the materials provided by the agency.

Best practice surveys

Best practice surveys are a means to assess the general practices of physicians and compare physician and patient perceptions. Knowledge of patient perception may bring interesting views and offers opportunities to improve disease management and treatment. Surveys may be carried out at a national level or may be addressed to all physicians of one or more specialities. The role of medcomms agencies in such surveys includes creating questionnaires (generally with the help of key opinion leaders), promoting survey participation, data collection and data processing. Activities involved with surveys provide pharma sales representatives with opportunities to visit medical experts and set up professional meetings.

Editing and writing promotional materials and scientific publications

Despite the actual trend for interactive media, publication is still an inescapable channel of communication, be it product- or therapeutic area-oriented. Brochures, literature reviews, patient booklets, and information leaflets are classical examples of tools that are handed over to doctors or medical institutions visited by the sales representatives. Medcomms agencies produce such materials, which involves extensive literature research, writing of innovative scientific/medical content, and sometimes editing materials written by other medical experts.

Working in a medcomms agency does not necessarily mean leaving traditional writing tasks aside. Pharmaceutical clients regularly require medcomms agencies to submit manuscripts for journal publication as well as abstracts and posters for scientific meetings. Sometimes, programmes carried out by the agency generate important results (e.g. the results of a national survey, or the successful set up of a patient-centred programme). It is the task of the agency to propose their client a structured, high-impact, and financially acceptable plan for data dissemination including publication. Thus, sometimes results are submitted in journals for publication or for presentation in a symposium. It is very rewarding and challenging for the agency personnel to submit posters or papers related to the projects he/she has personally contributed to.

General project schedule and stakeholders

No matter how complex projects can be, they are scheduled in a similar way (Figure 1). Once the project is handed over to an agency and stakeholders have agreed on a course of action, budget and deadline, medical experts are recruited as needed (as writers, consultants or members of a scientific committee). The next step is the production of the scientific content (in form of video, publication, etc.) and the creation of a visual identity. The contents and the visual identity are reviewed by the client's medico-marketing and regulatory departments. After this, the agency executes the format, layout and all other technical details with the help of its internal and/or external partners: such as design studio, video team, event agency, logistics team, professional translators, IT developers, publishing houses, etc. After the content of communication product/programme is validated by all of the stakeholders, the product is delivered (Figure 1).

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Tasks during a project

Medcomms agencies have different structures as well as ways of assigning tasks during a project. However, similarities exist and we may distinguish three general categories of tasks, which sometimes overlap according to the size and the structure of each agency.

Client-related tasks

These tasks involve direct contact with the

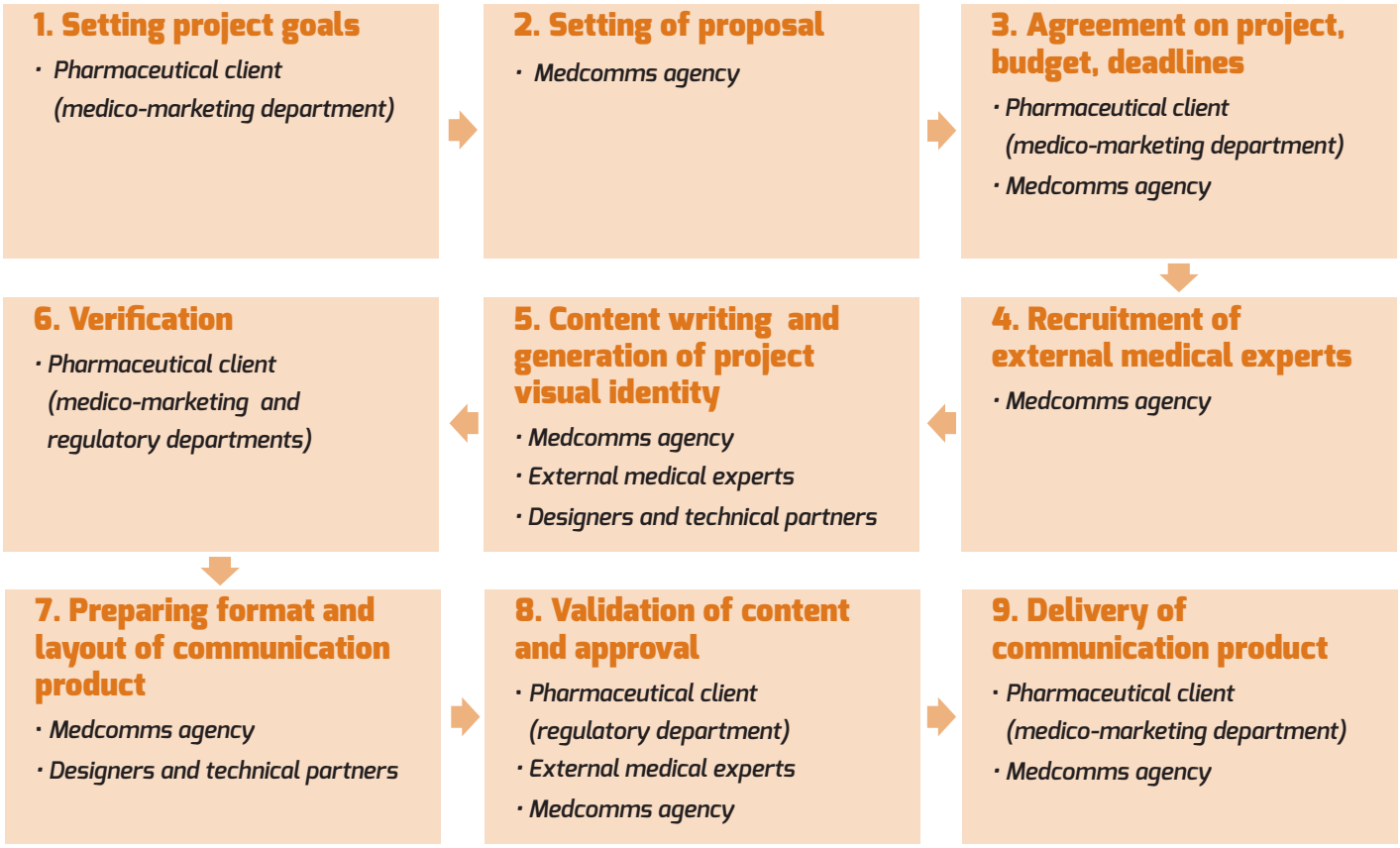

Figure 1. Stages of a project in a medcomms agency showing stakeholders (in italics)

clients. In general, these positions (such as customer relationship managers along with their director) take charge of general project coordination. They directly liaise with the pharmaceutical client's medico-marketing and regulatory departments, set up the project according to the client's needs, and manage the project budget and timelines. They work very closely with the client from the beginning until the end of the project. Box 1 suggests tips on how to manage customer relationship and prevent stressful situations regarding deadlines. More experienced customer relationship managers are involved in strategic counselling. Most of the time, there are other personnel in a medcomms agency whose tasks are more involved in acquiring new customers and maintaining existing customers. They are referred to as commercial development officers.

Liaising with medical experts

The medical writing team usually liaises directly with medical experts involved in scientific committees or with project partner physicians for various tasks. Medical writers produce scientifically sound medical contents. Agencies usually recruit an internal medical services director but other agencies work with external medical experts only.

Medical writers have to have a strong background in medicine or other natural sciences as they have to be able to understand the medical literature and write or quality control many types of medical and scientific documents geared to different audiences (from the most to the least specialised) and in diverse media formats: slide kits, video, digital media.

Thus, medical writers have to familiarise themselves with various pathologies and be able to search for interesting and innovative related topics, which can meet with the client's strategic goals. This may not only involve doing literature search on the web and in medical libraries, but also identifying and interviewing specialised experts and attending related conferences.

Some agencies give medical writers the role similar to that of an editor-in-chief, which involves distributing writing tasks among external physicians and coordinating publication tasks for newsletters, brochures, etc. This role may not be the most rewarding part of the profession as there may be frustrating experience resulting from direct communication with

Box 1. Suggestions on managing relationships with client.

- Keep the client informed on the status of the project through regular reporting and follow-up.
- Formalise instructions and directives by email and phonecalls.
- Guide client in decision-making and give recommendations suited to the client's needs.
- Warn the client ahead of the project's launch regarding inevitable time lags and timeline constraints.
- Inform client as early as possible on obstacles and always come up with possible solutions.

Box 2. Tips how to liaise with medical experts professionally.

- Constant reminder of tasks and deadlines via email or phone calls. Get hold of their mobile phone numbers. Do not remind them only if the deadline is drawing near.
- Leave messages that are short but with complete and exact information.
- Be persistent but not forceful.
- Be personal. Conduct face-to-face meetings once in a while.

extremely occupied physicians, whose contributions are important from the beginning until the last stage of the project. Unwanted delays usually arise even if the medical writer reminds the physicians involved regarding deadlines. As project timelines are usually tight, the medical writer has to remain persistent. Being able to relate well with physicians in extremely difficult situations is a must for medical writers.

However, although stressful situations may come up, such situations are also an opportunity to build a close personal relationship with the physicians involved. Box 2 gives tips on how medical writers can deal with physicians.

Creative tasks

Advertising managers or project managers liaise with the studio designers, who may be external partners, on the format type (print, digital, video), and on the design and layout of a communication product.

An advertising manager or a project manager in a medcomms agency has to have knowledge of the graphic design chain aside from being flexible and interested in all types of multimedia support.

Status of and developments in medcomms

In France and in other EU countries, drug promotion legislation has been stricter thus making it increasingly harder for pharmaceutical companies to directly promote their products. Moreover, the current climate in the pharmaceutical drug industry, legislation on patent expiry, governmental pressure on physicians to decrease prescriptions, lower reimbursement prices for patients, and slower development pipeline have brought about the steady decrease in the the medical sales representative workforce. For example, there were 17,500 medical representatives in France in 2011 and only 21,900 in 2007[1]. As the actual need for medical sales representatives had started to be questioned in the last decade, a health scandal related to a weight-loss drug in France in 2010[2] reinforced suspicions. This led the French government to further regulate medical sales representatives' activities, such as the Bertrand Law (see Box 3).

As medical sales representatives deliver medical communication materials to doctors and other HCPs, these restrictions significantly influence flow and effectiveness of drug promotion.

The developments in Box 3 compel most pharmaceutical companies to realign their communication strategy, away from traditional sales activities. To meet this need, medcomms agencies are now strengthening their activities on medical education as part of their communication offering. These medical education activities in forms of covering conferences and developing other professional programmes (see section on "Meetings and conferences") have traditionally been a part of the medcomms agencies' role. These, together with performing surveys (see section on "Best practice surveys") and medical edition (publishing books or brochures from medical information), provide ways by which the pharmaceutical companies' presence in a therapeutic area can be strengthened. The above activities are also an indirect communication strategy as long as a specific product is not mentioned. Instead, the focus is on the product's therapeutic area. Target audiences of this strategy include medical doctors, nurses and other HCPs, and are opening to patients and the general public.

Advantages of an indirect promotion

Indirect promotion, by developing related programmes on medical education, is a powerful tool to attract the interest of medical experts and develop partnerships with them. Medical experts obtain the advantage of broadening their knowledge on various topics about a disease or therapeutic area. Medical education programmes are also an opportunity to promote patient-centred initiatives.

Indirect promotion has also these other advantages:

- As therapeutic classes instead of brand name appear in medcomms documents, a prior approval from the French National Healthcare and Medicines Safety Agency (*Agence Nationale de Sécurité des Médicaments et des Produits de Santé*, ANSM) is not needed. This

Box 3. Historical development of restrictions in promoting medical products in France.

- 1993 – Anti-Gift Law (*Diverses Mesures d'Ordre Social*, DMOS Law)[3] was passed prohibiting giving gifts or anything that can influence decisions or opinions of healthcare professionals (HCPs).
- 2004 – A specific 'medical representative charter' was officially signed by the Pharmaceutical Companies Trade Association in France (*Les Entreprises du Médicament*, LEEM) and the French Healthcare Products Pricing Committee (*Comité Economique des Produits de Santé*, CEPS) to ensure transparency of information delivered by the companies on their products.[4] This charter provides measures to strengthen pharmacovigilance and marketing authorisation compliance, regulate the access of medical representatives to hospital and service areas, and prohibit giving anything that may influence HCPs including free samples, invitations to lunch, etc. Companies' compliance to this charter is directly certified by the French National Health Authority (*Haute Autorité de Santé*, HAS) and was updated in 2014.
- 2011 – The so-called Bertrand Law,[5-6] the French Sunshine Act, and subsequent decrees extended the Anti-Gift Law to include disclosure of all agreements concluded between HCPs and companies.
- June 2012 – A new legal requirement was imposed that all promotional documents should be submitted for approval from the French National Healthcare and Medicines Safety Agency (*Agence Nationale de Sécurité des Médicaments et des Produits de Santé*, ANSM)[7]. Submission dates are fixed and bring about a two-month delay in obtaining an approval (or a refusal) of any promotional document.

makes regulatory procedures quicker, simpler, and therefore more efficient, and makes timelines realisable.

- Indirect communication can be undertaken throughout the entire drug life cycle, from clinical research to marketing approval, in contrast to direct promotion, which is not allowed before drug launch. Pharmaceutical companies can assert their presence in a therapeutic area at any of the following phases: pre-launch, launch, early and late commercialisation, marketing authorisation extension.

What activities are expected to change?

Formats, media, and services provided by medcomms agencies using indirect communication strategies remain unchanged. However, the topics addressed by medical education programmes stand beyond the issues addressed by direct drug communication. Instead of talking about a drug, its efficacy, risk/benefit ratio, mechanism of action, etc., medcomms can enjoy a broader range of potential topics surrounding the disease or the therapeutic area. Projects related to the entire context of the therapeutic area can be put up exploring aspects of medical economics, molecular biology, healthcare organisation, etc. Patient-centred programmes such as those that will focus for instance on the impact of secondary disease related effects, psychological issues (e.g. depression at work), care support practices, or the patient's well-being throughout each treatment stage can be promoted.

Concluding remarks

Medcomms agency activities focusing on medical education are not only advantageous in the current status of pharmaceutical companies but are also rewarding for a medcomms medical writer. This is because the medical writer does not only learn new skills related to multimedia writing, editing, and graphic design, or develops skills in relating with people of different health-care backgrounds.

The medical writer also gets to conduct a wide-ranging variety of projects with a high scientific value, directly or indirectly related to the drug. It is also a chance to genuinely help patients as activities consider implications on general patient care and well-being.

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Author information

Elodie du Potet, PhD, has worked as medical writer and a customer relationship manager at Medical Education Corpus, a French medcomms agency dedicated to medical education. She is now a freelancer specialising in medical and scientific communication in Paris, France.

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