

Kirk Shepard, MD CMO & Head of Global Medical Affairs OBG

April 2022



#### **Disclaimer**

The views I express today are my own and do not necessarily reflect the position or views of my current employer, Eisai Inc, or past employers.

#### **Transformation in Medical Affairs**

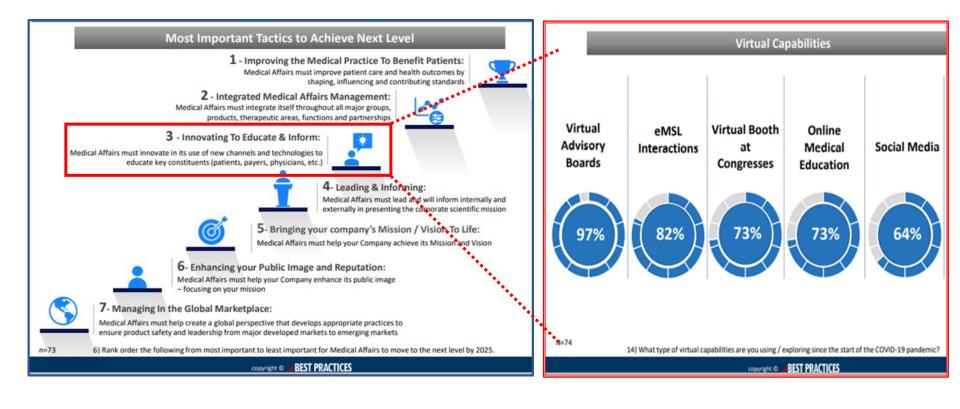
A Vision For Medical Affairs in 2025 – McKinsey Report Transform and personalize medical engagement:

Best-in-class Medical engagement will look very different from today. The future will see a broad expansion of medical engagement across providers, patients, and others—and across a range of touchpoints that will be increasingly digital, and designed to provide tailored information focused on improving outcome...

**Already we are seeing Medical transitioning to a personalized approach** that seeks to understand **physician preferences** across their entire journeys, and **tailors interactions** to the individual doctor...."

Medical can lead the digital transformation now....no need to wait until 2025!

#### **Medical Affairs: 2025 And Beyond**



# If you don't like change, you're going to like irrelevance even less

GENERAL ERIC SHINSEKI, US ARMY



# US Healthcare Landscape Continues to Evolve and COVID-19 Has Accelerated Demand for Digital Content and Engagement

Global COVID-19 driven digital adoption rates have covered decades in days

Physicians are evolving the way they access information and are embracing the convenience of digital channels that provide education on demand.



HCPs spend 180 min/week online for education and use mobile devices for information 10X day



3 billion people active on social media, including >80% of HCPs. (†13% per year)



Of medical professionals complain about generic digital content and want

- Personalized,
- Clear, &
- Bite size content

#### Content Development & Communication

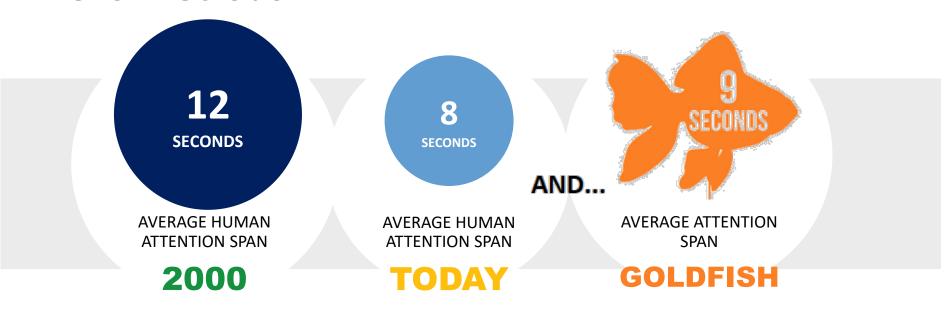
### Time Is Precious ("Bite size" attention span)



March 2015 Times Article Science:

#### Content Development & Communication

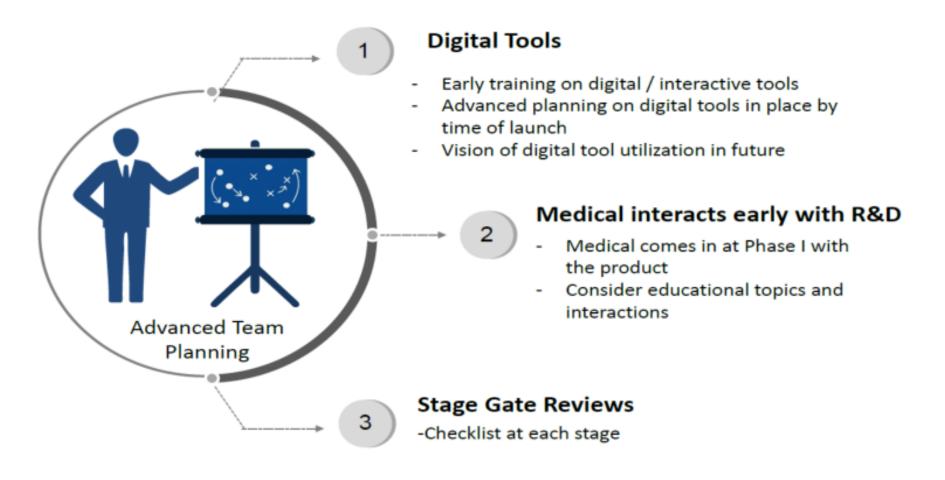
#### **Time Is Precious**



March 2015 Times Article Science:

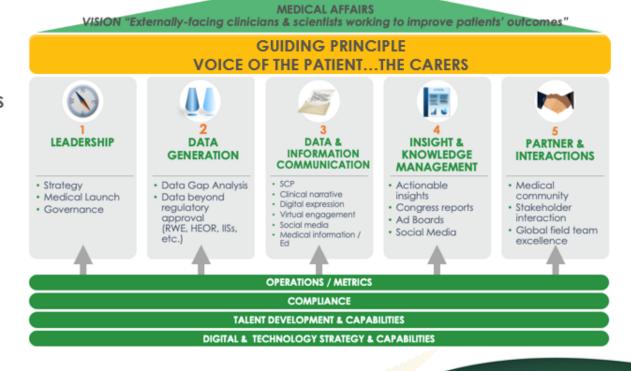
YOU NOW HAVE A SHORTER ATTENTION SPAN THAN A GOLDFISH OR ???

#### Early Team Planning: 3 areas where advanced planning is key



### **Medical Affairs Guiding Principles**

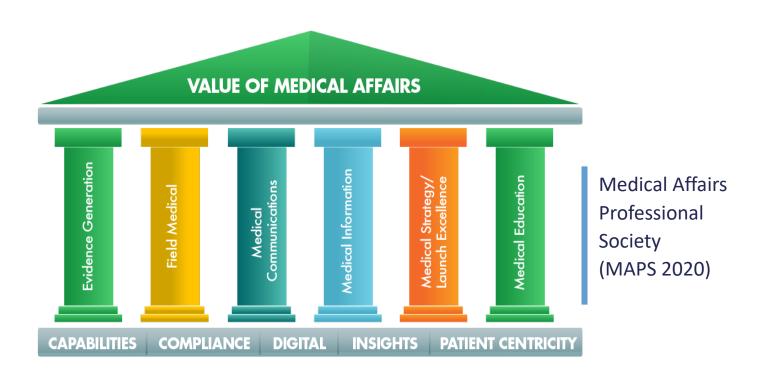
CAPABILITIES & DELIVERABLES
CATEGORIES &
VALUE BUILDING DRIVEN BY
THE MA ORGANIZATIONAL
VISION &
GUIDING PRINCIPLE
SUPPORTING THE PATIENT &
CARER IN PARTNERSHIP WITH
OTHER DEPARTMENTS



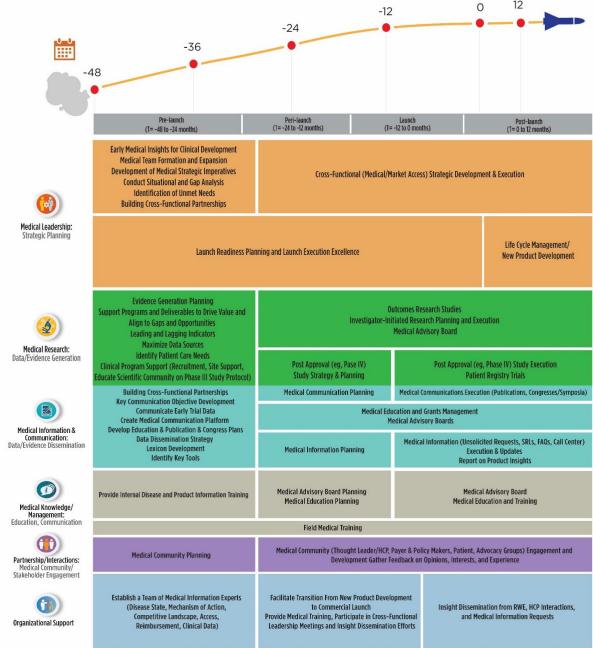
The medical affairs mission and value proposition in the current oncology environment

40

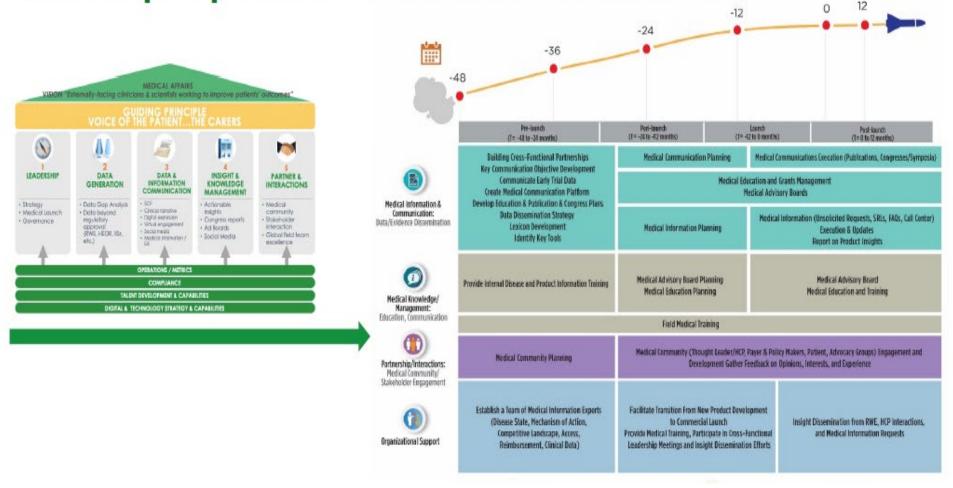
#### THE MEDICAL AFFAIRS 'HOUSE'



#### MEDICAL AFFAIRS KEY ACTIVITIES TO DEVELOP CONTENT FOR PIPELINE PRODUCTS



# Medical Affairs Key Activities & "Stage Gates" to develop Pipeline for Launch Excellence

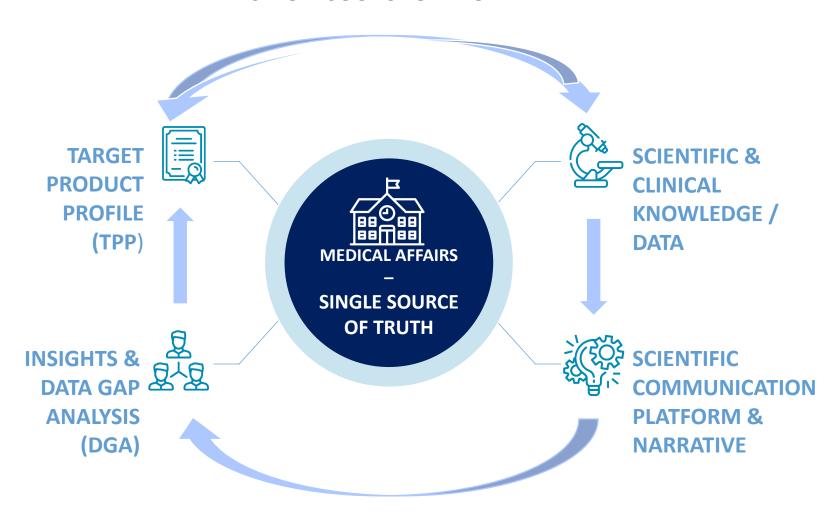


# The future calls for a change in the way we approach Product Development, Launch, & Content Leadership

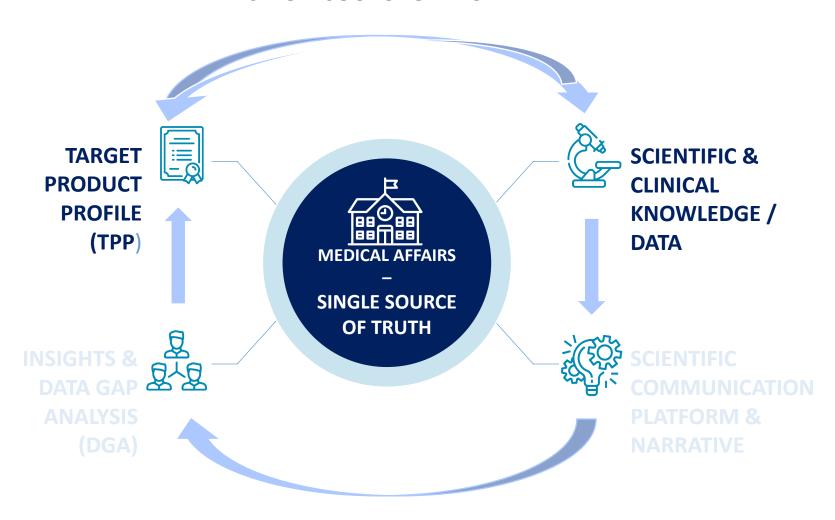


Medical Affairs Functions are positioned to serve our patients by communicating about scientific relevant information with KOLs & our stakeholders and helping enable improved outcomes

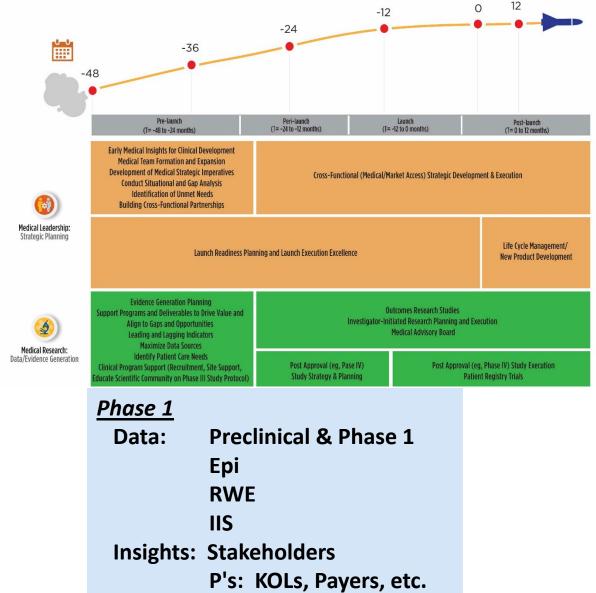
## Medical Affairs Created Content SINGLE SOURCE OF TRUTH



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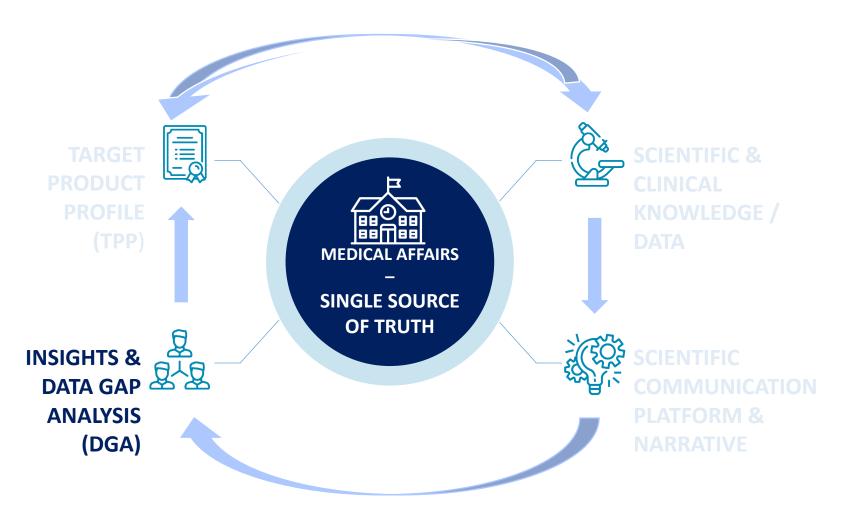
NOT DISTRIBUTE.

**Data Gap Analysis (DGA)** 

TPP +\- Added Value

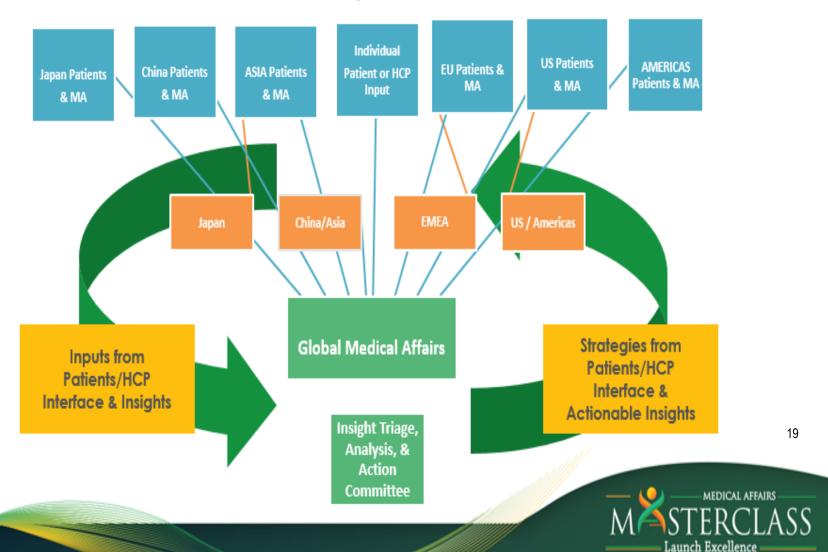
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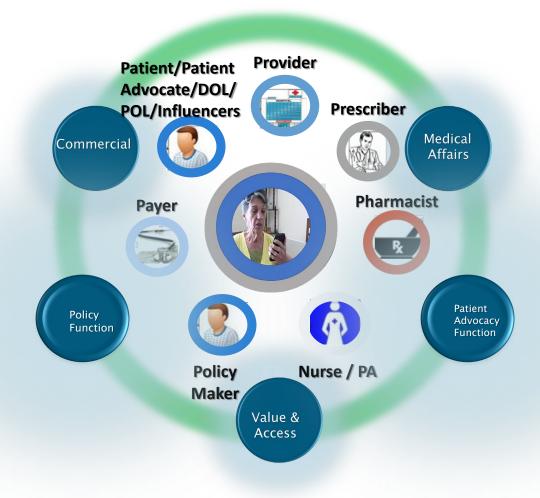
# Patient Centricity: A Top-Down Approach

PATIENT & CARER / HCP INTERFACE

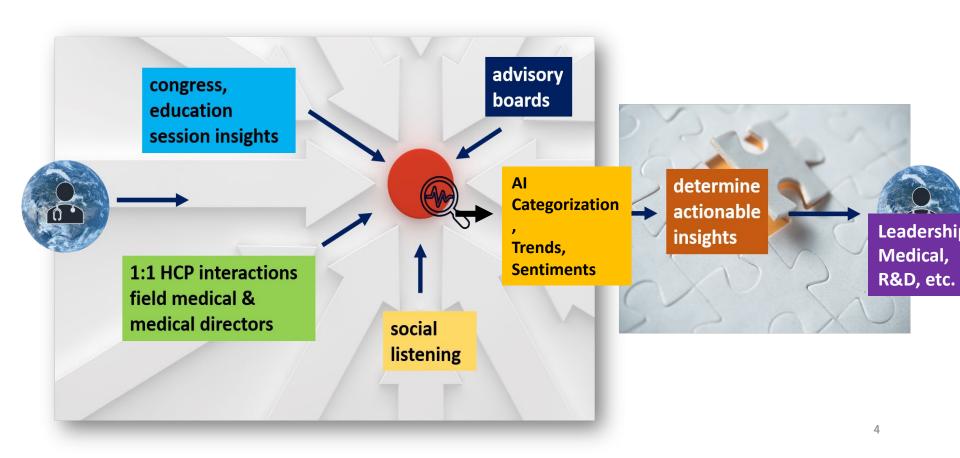


## Today's Diverse Stakeholders "7+ P's" (From 5 P's: Patient, Professional, Payer, Provider, Policy Maker)

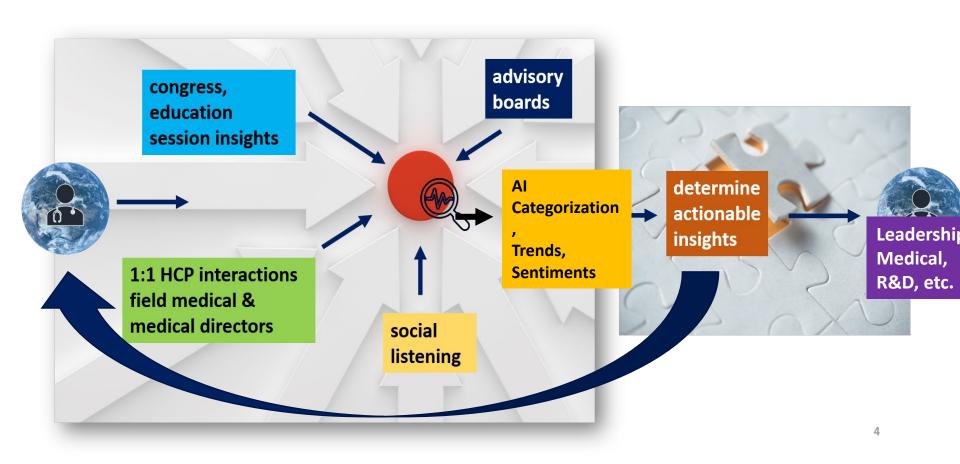
Our ability to impact a better outcome for patients requires a better understanding of our stakeholders for more targeted content development & communication.

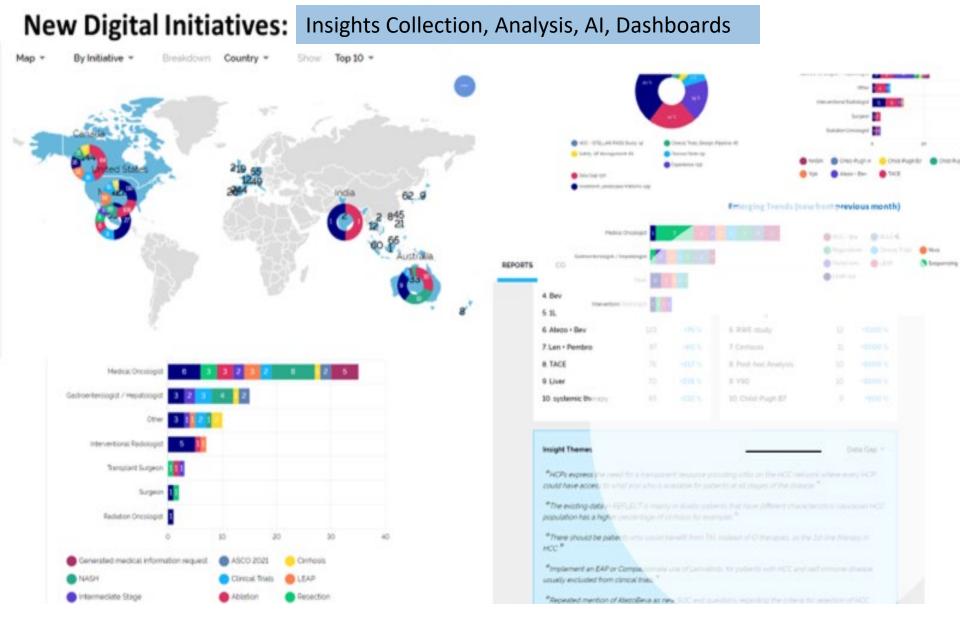


#### Insight centralization, AI data analysis, and Actionable Insight Tracking



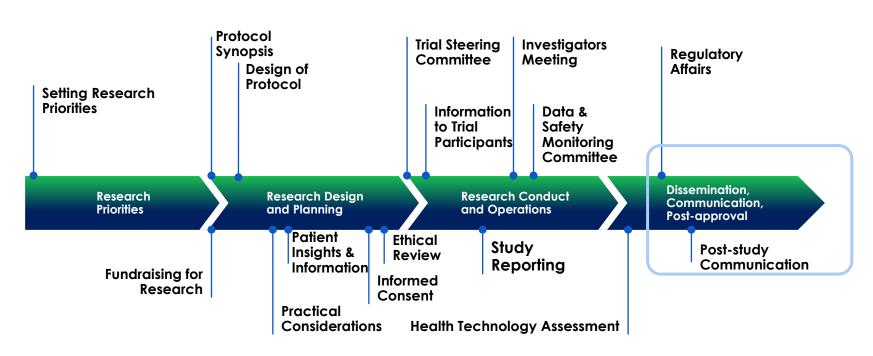
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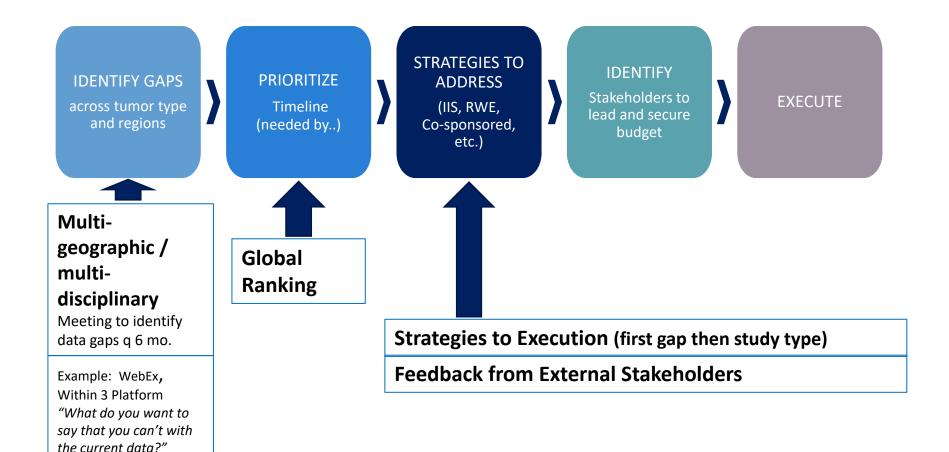
The end-game is to have insights available globally in real-time across the company.

# Patients can and should be involved throughout the medicine development life cycle – including content & data dissemination<sup>1</sup>

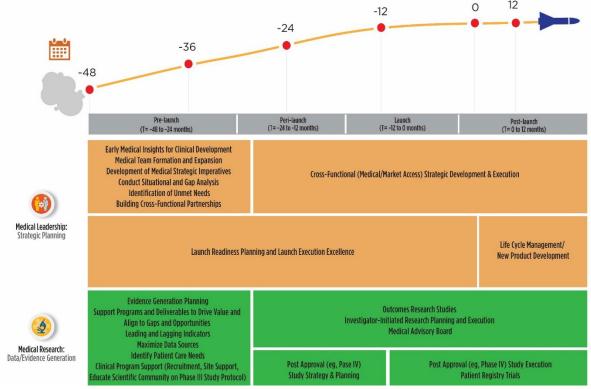


<sup>1</sup>Geissler J, Ryll B, di Priolo SL, Uhlenhopp M. Improving Patient Involvement in Medicines Research and Development: A Practical Roadmap. Ther Innov Regul Sci. 2017;51(5):612–619. doi:10.1177/2168479017706405, and at www.eupati.eu

#### DATA GAP ANALYSIS (DGA) STEPS



#### MEDICAL AFFAIRS KEY ACTIVITIES TO DEVELOP CONTENT FOR PIPELINE PRODUCTS



#### Phase 2

Data: Preclinical, Phase 1 & 2

Epi

**RWE & IIS** 

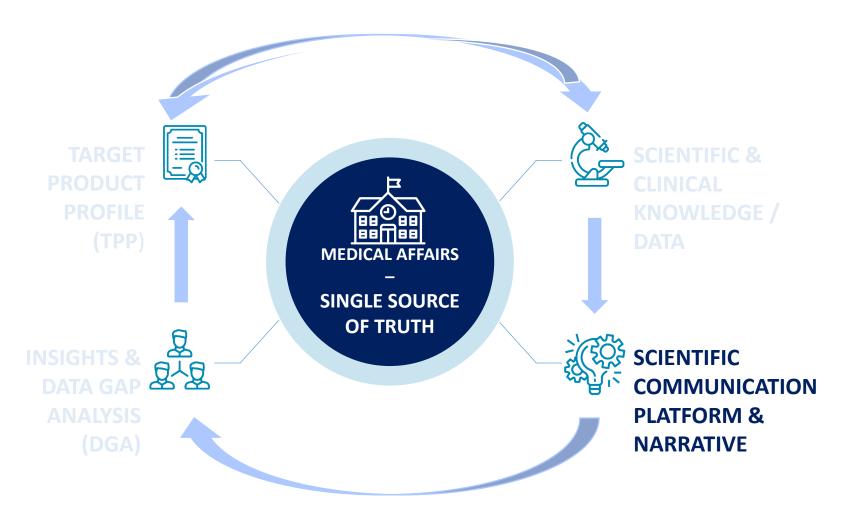
Insights - Stakeholders P's: KOLs, Payers, etc.

Data Gap Analysis (DGA)

#### TPP +\- Added Value

Scientific Communication Platform -> Scientific/Clinical Narrative

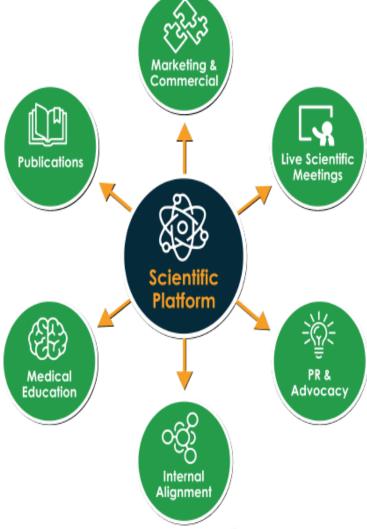
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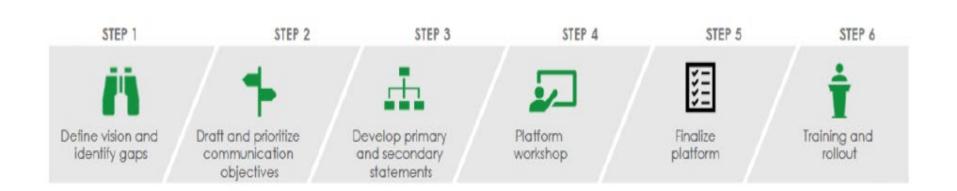
What is a Scientific Platform?

### The Scientific Platform is at the core of all communications channels

- A repository of scientific statements that creates a simple story with evidencebased support
- A strategic communications guide to help the internal teams ensure focused, clear, and consistent communications
- A content management tool providing a solid scientific foundation for internal and external communications that support product and disease awareness across all communication channels



# Collaborative Process for Development





Although platform development generally requires 5 months, training and rollout can require an additional 1 to 3 months depending on scope (eg, global vs single country) and size of extended team

## Scientific Platforms: Pillars or Themes

#### Platform pillars are composed of group information on key story elements

#### Unmet Diagnosis Pharmacological Clinical Real-world Mechanism Value characteristics and treatment need of disease evidence evidence story Diagnostic criteria Mechanism of action · Outcomes research Epidemiology Safety Health economic Anatomy and testing models Patient population Postapproval Physiology PK/PD Efficacy Clinical guidelines efficacy · Affordability Burden of disease Formulation · Patient-reported Pathogenesis and safety evidence Treatment outcomes Dosing and Noninterventional Comparative landscape administration effectiveness research Pipeline Patient registries

#### Stage in Life Cycle can inform focus on platform pillars

#### Early development

Emphasis on setting the stage (eg, mechanism of disease)

#### Phase 3 and beyond

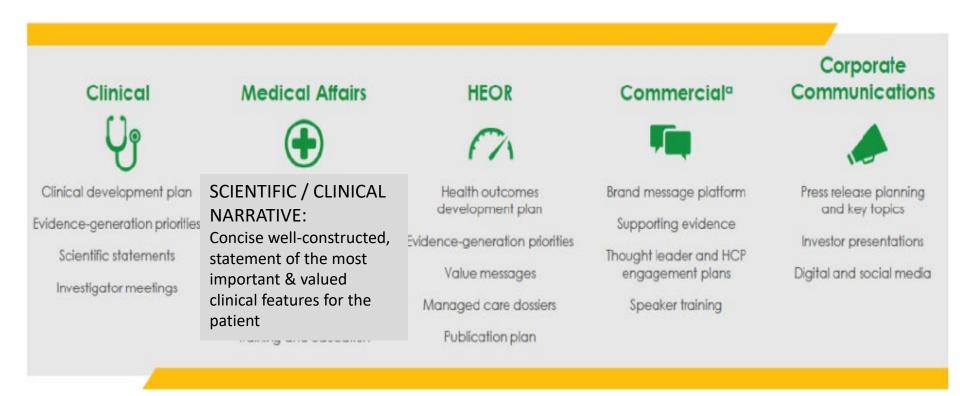
Emphasis on communicating the clinical benefit and value (eg, pivotal trials demonstrating efficacy and safety)

Certain pillars may evolve as data are acquired or as program needs change

# Scientific Platform and Lexicon can inform multiple workstreams

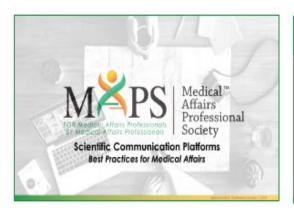


# Scientific Platform and Lexicon can inform multiple workstreams

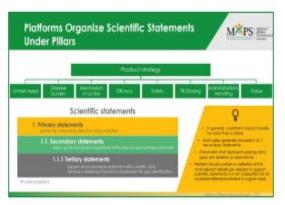


## **Existing MAPS Materials**

MAPS Scientific Communication Platforms – Best Practices for Medical Affairs was published in 2019

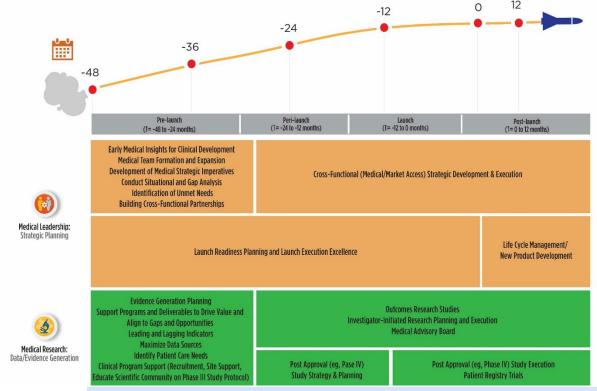






Available at: https://medicalaffairs.org/wp-content/uploads/2021/04/Download-Guidance-Document-Template.pdf

#### MEDICAL AFFAIRS KEY ACTIVITIES TO DEVELOP CONTENT FOR PIPELINE PRODUCTS



All Content should

come from CT Data ->

come from CT Data ->

scP -> Scientific

SCP -> Scientific

Narrative & led by TPP.

#### Phase 3

Data: Preclinical, Phase 1, 2, 3

Epi

**RWE & IIS** 

Insights - Stakeholders P's: KOLs, Payers, etc.

Data Gap Analysis (DGA)

**Above drives Marketing Message (1 way street)** 

TPP > Draft label

**Data Gap Analysis for gaps in content** 

**Education & Communication** 

Digital Omnichannal

#### **Transforming the External Stakeholders' Experience**

### SCIENTIFIC PLATFORM (SCP) & NARRATIVE Scientific

#### **EDUCATIONAL** CONTENT

#### **OMNICHANNEL ENGAGEMENT**

#### Value What is the latest **Patient** data?

science and clinical **Focus** 

Why is it relevant to the patient?

#### Clinical Value

How does this impact clinical practice?



**Supporting** evidence Diaital Content --Bite size. **Personalized** 



#### **Omnichannel**

Medical should partner in the company &/or be one of the leaders of omnichannel content development & communication

Best use of each channel based on analytic data and HCP personalization

Best use of each channel Email

Remote Virtual 1:1

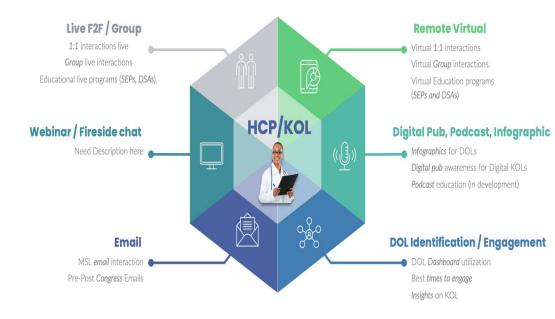
Remote Group/Webcasts

Digital Pub, Podcast, Infographics

DOL ID/Engagement

#### **Medical Omni-Channel Engagement**

Coordinated Overlap with Intended Relationships
Utilizing HCP Segmentation



A brand is no longer what we tell the consumer it is – it is what consumers tell each other it is. Scott D. Cook

# Thank you