

Medical Affairs Reputations (EU5) [HIV]

https://marketpublishers.com/r/M9732BC7242EN.html

Date: April 2017

Pages: 0

Price: US\$ 6,175.00 (Single User License)

ID: M9732BC7242EN

Abstracts

Targeted improvements could help your medical affairs team win over doctors

The infectious disease specialists we surveyed say medical affairs teams for 9 major HIV treatments could be doing a better job. They identified specific medical affairs services where teams are not up to par, and recommended several ways teams can improve both the information they provide, and the way they provide it. That kind of feedback can help your team build better relationships with doctors.

Find out what your team gets right, and where it's going wrong in Medical Affairs Reputations: HIV (EU5).

Comparing 9 major HIV treatments from Bristol-Myers Squibb, Gilead, Janssen Cilag, Merck Sharp & Dohme and ViiV Healthcare, this report reveals:

How infectious disease specialists rate your team overall, and on 12 key medical affairs services.

Which medical affairs services are most important, and what you can do to improve them.

How, and how often doctors want to meet with your team.

That's actionable information you can use to turn your team into one that doctors rely on.

Top Takeaways



All teams need specific improvements: Doctors are unsatisfied with every team's performance on as many as 4 medical affairs services.

Doctors aren't getting all the information they need: They identified 3 ways teams can improve information provision, and highlighted 2 specific types of information they want more of.

Attitude adjustment needed: Nearly a quarter of surveyed doctors said teams needed a better medical affairs attitude, and pointed to two specific improvements.

Zeroing in on the right frequency: The surveyed teams tend to be interacting with doctors about as often as doctors would like, but they could reach out a little more often.

X factor: Which team earned a top-3 overall quality rating despite low performance and satisfaction scores on most individual services?

"Don't call us...": Less than 5% for surveyed doctors prefer to be contacted by phone. Find out how you should get in touch when face-to-face meetings aren't possible.

Insight into Medical Affairs Teams for These HIV Treatments

Descovy (emtricitabine/tenofovir alafenamide; Gilead)

Genvoya (cobicistat/elvitegravir/emtricitabine/tenofovir alafenamide; Gilead)

Isentress (raltegravir; Merck Sharp & Dohme)

Prezista (darunavir; Janssen Cilag)

Reyataz (atazanavir; Bristol-Myers Squibb)

Stribild (cobicistat/elvitegravir/emtricitabine/tenofovir disoproxil fumarate; Gilead)

Triumeq (abacavir/dolutegravir/lamivudine; ViiV Healthcare)



Truvada (emtricitabine/tenofovir disoproxil fumarate; Gilead)

Viread (tenofovir disoproxil fumarate; Gilead)

An Expert-designed Competitive View of Your Medical Affairs Team

Developed with the help of medical affairs specialists, this report gives you an in-depth comparison of 9 medical affairs teams—answering important questions like:

What do doctors need?

How, and how often are they using your medical affairs team?

What services do they consider most important?

How often should you contact them? What channels are best?

Does your medical affairs team deliver?

How memorable are your team's interactions with doctors?

How do doctors rank your team for performance and satisfaction in 12 key areas?

How does your team compare to the competition—in each area, and overall?

What needs improvement?

Are you delivering the services that are most important to doctors?

Where do you need to improve?

How can your team enhance its services?

Based on Interviews with Practicing Doctors



We surveyed 150 infectious disease specialists from the EU5 (France, Italy, Germany, Spain, UK)—chosen from the largest community of validated physicians in the world.

All respondents:

Have been practicing for between 3 and 35 years

See at least 5 patients with HIV in a typical month

Devote at least 50% of their time to direct patient care

Have interacted with at least one listed product's medical affairs team in the past 6 months.

We conducted the survey between April 3rd and 18th, 2017.

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