

Medical Affairs Reputations (US) [HIV]

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Abstracts

Survey shows medical affairs teams must be more active and provide better information

Doctors say medical affairs teams for 10 major HIV treatments could be doing a better job. In the past 6 months, only one of those teams reached out to more than 70% of the infectious disease specialists we surveyed. Survey respondents also had a lot to say about how teams can improve the information they provide, and the way they provide it—feedback that can help teams build better relationships with doctors.

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

Comparing 10 major HIV treatments from Bristol-Myers Squibb, Gilead, Janssen, Merck & Co., 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.

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Top Takeaways

Teams could be more active: Half of the surveyed teams interacted with less than 60% of the surveyed doctors in the past 6 months.

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

Four teams have the same weakness: Find out which specific medical affairs service they all need to improve.

On the right frequency: The surveyed teams tend to be reaching out to doctors about as often as doctors would like. Just how often is that?

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 10% for surveyed doctors prefer to be contacted by phone. So how should you 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 & Co.)

Prezcobix (darunavir/cobicistat; Janssen)

Prezista (darunavir; Janssen)

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 10 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 100 US infectious disease specialists, 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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