

NPS+ Non-Small Cell Lung Cancer (NSCLC) (US)

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Abstracts

In our satisfaction survey, one drug leaves the rest in the dust. How does your brand compare?

We interviewed 100 US oncologists to find out how satisfied they are with non-small cell lung cancer (NSCLC) drugs. Which brand outscored its nearest rival by almost 20 points to take a commanding lead? Which two are neck and neck for 2nd place? Which treatment prompted one enthusiastic respondent to say, "The more I use it, the more I like it?"

Building on the respected net promoter score (NPS), this report compares brand loyalty for 10 major NSCLC treatments, and gives you easy-to-use KPIs that highlight ways to improve your brand's health, and boost your market share.

Get Answers to Key Questions about NSCLC Treatments

Avastin (bevacizumab; Roche): How many Detractors or Passives would Avastin need to win over to move ahead of rival Keytruda?

Cyramza (ramucirumab; Eli Lilly): Do more Promoters associate Cyramza with a good risk/benefits profile or slowing disease progression?

Gilotrif (afatinib; Boehringer Ingelheim): Are Xalkori's or Zykadia's Promoters more likely to also recommend Gilotrif?

Iressa (gefitinib; AstraZeneca): Which brand has replaced Iressa in the treatment paradigm, according to some of the oncologists interviewed?

Keytruda (pembrolizumab; Merck & Co.): Which other brand is recommended by



nearly all of Keytruda's Promoters?

Opdivo (nivolumab; Bristol-Myers Squibb): Which brand attribute makes for a more effective marketing message for Opdivo, long-term efficacy or novel mechanism of action?

Portrazza (necitumumab; Eli Lilly): What are the only two brand messages that resonate with more than half of Portrazza Promoters?

Tarceva (erlotinib; Roche): What side effect of Tarceva use did one Promoter express concern about?

Xalkori (crizotinib; Pfizer/EMD Serono): Xalkori and Tarceva' satisfaction scores are nearly tied. Which brand has more Promoters?

Zykadia (ceritinib; Novartis): What's the one brand message that Zykadia Promoters, Detractors, and Passives agree on?

TOP TAKEAWAYS

Commanding lead for 1st place brand: While seven of the ten surveyed brands have a positive NPS, the leading brand scores almost 20 points higher than its 2nd place competitor.

Last place brand is way behind: With an NPS deep in negative territory, due largely to a high number of Detractors, the lowest brand trails its closest competitor by more than ten points.

No qualms about switching: While overall satisfaction with the drugs surveyed is high, loyalty scores are low, and few oncologists promote one brand exclusively

Struggling to differentiate: Some brands' promoters recommend up to almost 8 other brands, suggesting that differentiation is an issue.

Cost concerns: Cost effectiveness is a top-5 driver of recommendations for nearly half of the surveyed brands. Brand DNA comments also reveal concerns about some brands' high costs.



One brand poised for a massive share gain: 700% if it can turn its Detractors into Promoters. Several other brands are positioned for gains of 200% or more.

Passives offer help for low-ranking brands: Several low-ranking brands have a large number of Passives, who may be easier to win over than Detractors.

Top brands are the same in US, EU5: The same three brands earn the highest satisfaction and loyalty scores in both regions.

Explore Important Brand Loyalty Issues

NPS+ NSCLC (US) explores key issues affecting brand loyalty for drug manufacturers. You'll learn:

How satisfied the NSCLC market is.

How loyal doctors are to your brand.

How many other brands your Promoters recommend.

Which other brands your Promoters and Detractors recommend.

How much market share your brand has among Promoters and Detractors.

How much market share you stand to gain by converting Detractors into Promoters.

Which messages Promoters, Passives and Detractors associate with your brand.

Your brand DNA: what doctors really think of your brand—in their own words.

A Report Based on Expert Knowledge

We surveyed 100 US Medical Oncologists chosen from the largest community of validated physicians in the world. The same community that pharma market researchers trust for reliable, fast intelligence.



We conducted the survey between July 3rd and 7th, 2016.

What is Net Promoter Score?

NPS is a customer loyalty metric developed by (and a registered trademark of) Fred Reichheld, Bain & Company, and Satmetrix. It was introduced by Reichheld in his 2003 Harvard Business Review article One Number You Need to Grow.

How does NPS work?

NPS measures overall brand satisfaction and loyalty by asking one simple question:

'How likely are you to recommend this brand to a colleague?'

Responses - given on a scale of 0 (not at all likely) to 10 (extremely likely)—are used to classify respondents into 3 categories:

Detractors are those who answer 0 - 6.

Passives are those who answer 7 - 8.

Promoters are those who answer 9 - 10.

How is NPS calculated?

The percentage of detractors - the percentage of promoters = NPS.

For example, 25% Promoters, 55% Passives and 20% Detractors give you an NPS of +5.

NPS can range from -100 (everybody is a Detractor) to +100 (everybody is a Promoter). The higher the score the healthier the brand.

What is FirstView NPS+?

NPS+ turns your Net Promoter Score into actionable information by answering key questions about brand loyalty.

Each NPS+ report examines doctors' relationships with the brands used to treat a major disease area—measuring brand loyalty and showing you how it affects your



market share. NPS+ also examines "brand DNA", revealing in doctors' own words what brands mean to them.

Instead of one simple metric, NPS+ gives you a detailed picture of brand health that highlights areas for improvement, and helps you see exactly what steps you need to take next.

Money Back Guarantee!

At FirstWord, we stand behind our reports. If you're not completely satisfied, we'll refund your money. Guaranteed.

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Contents

- 1. CHART 1: NET PROMOTER SCORE?
- 2. CHART 2: HOW LOYAL ARE DOCTORS TO MY BRAND?
- 3. CHART 3: HOW SATISFIED IS THE MARKET?
- 4. CHART 4: HOW MANY OTHER BRANDS ARE PROMOTED BY MY PROMOTERS?
- 5. CHART 5: WHICH OTHER BRAND IS MOST PROMOTED BY MY PROMOTERS?
- 6. CHART 6: WHICH OTHER BRANDS ARE PROMOTED BY MY DETRACTORS?
- 7. CHART 7: WHAT IS MY BRAND'S MARKET SHARE AMONG PROMOTERS AND DETRACTORS?
- 8. CHART 8: WHAT BRAND MESSAGES ARE ASSOCIATED WITH PROMOTERS, PASSIVES AND DETRACTORS (BY BRAND)?
- 9. CHART 9: WHAT DOES MY BRAND REPRESENT TO PROMOTERS AND DETRACTORS (BY BRAND)?
- 10.APPENDIX



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