

NPS+ (US) [NSCLC]

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Abstracts

Which two US NSCLC brands are streets ahead of the competition?

There are various options available to US medical oncologists to treat non-small cell lung cancer (NSCLC). Clearly some of these options are achieving greater levels of loyalty and satisfaction than others – but why? What are the key factors driving physician choice and how does each of the leading brands compare to its competitors?

NPS+ NSCLC (US) gives a unique insight into the overall brand health of 12 leading treatments for NSCLC currently being used in the US. 100 medical oncologists were surveyed on key issues including brand messaging, prescribing behaviour and satisfaction levels. The results provide valuable insight for brand marketers seeking new ways to stand out.

Interested in the European market? [Click here](#) to see the EU5 Edition.

Top Takeaways

Two brands are streets ahead of the competition. And one of these brands has hardly any detractors. Which one is it, and why is it trouncing the competition?

Loyalty for the leading brand bucks the trend. Loyalty scores of 4 or more are what brands are aiming for, and the leading brand is clearly doing something right. But why is loyalty so low at the other end of the league table?

High levels of satisfaction, but at what cost? Medical oncologists in the US seem to be a satisfied bunch, but is that due to one particular treatment option, or because they have a wide range of choices? And what could improve satisfaction rates even further?

Winning over detractors could drive significant market share growth for some brands. But which ones? Old, established therapies or the new kids on the block?

Marketing messages for some brands will be key. Are any brands associated with key product attributes such as slowing progression, good efficacy and a positive risk/benefit profile? If not, what could be done to drive better brand association?

In their own words. What do doctors say each brand means to them? For example, which brand is described as the 'new, easy to use, but very expensive' and which brand 'has no role in the treatment of NSCLC'?

Insight into 12 leading treatments for NSCLC

Alecensa (alectinib; Roche)

Cyramza (ramucirumab; Eli Lilly)

Gilotrif (afatinib; Boehringer Ingelheim)

Iressa (gefitinib; AstraZeneca)

Keytruda (pembrolizumab; Merck & Co.)

Opdivo (nivolumab; Bristol-Myers Squibb)

Portrazza (necitumumab; Eli Lilly)

Tagrisso (osimertinib; AstraZeneca)

Tarceva (erlotinib; Roche)

Tecentriq (atezolizumab; Roche)

Xalkori (crizotinib; Pfizer)

Zykadia (ceritinib; Novartis)

A Report Based on Expert Knowledge

We surveyed 100 US medical oncologists chosen from the largest community of validated physicians in the world.

We conducted the survey between 3rd and 13th July 2017.

Explore Important Brand Loyalty Issues

NPS+ NSCLC (US) offers valuable insight into brand loyalty from the perspective of those currently prescribing small molecule and biologic treatments to patients with NSCLC. You'll discover:

How satisfied doctors are with available treatments.

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.

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.

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