



Report: How AI Can Save Medical Affairs from Drowning in Data

Presented by



Report: How AI Can Save Medical Affairs from Drowning in Data

Gone are the days when the task of medical affairs was simply to disseminate clinical information to healthcare providers (HCPs). While this function remains central to the job description, multiple factors have converged in recent years to make the role encompass and be accountable for so much more.

A perfect storm

“The world has changed tremendously and medicine has changed tremendously over the past couple of decades,” explained Stacey Rivkin, Group Vice President of Strategic Insights at H1, a global healthcare data technology company whose mission is to create a healthier world by providing greater access to, and understanding of, the wealth of healthcare data.

As drugs have become increasingly complex, medical affairs teams have had to step up their game to meet the needs of HCPs in understanding and conveying information about these agents.

Adding to this is an explosion in the sheer amount of clinical research being conducted. According to ClinicalTrials.gov, 137,484 clinical studies were registered with the site at the start of 2013; a decade later at the start of this year, that number was 437,533.

With more research comes more data, making it next to impossible for physicians and other HCPs to keep track of it all, let alone mine it to find the most useful gems.

“They need the medical affairs teams of pharmaceutical companies to be able to educate them on what’s most important,” said Rivkin of the greater expectations placed on these experts. As a result of these expectations, pharmaceutical companies have seen the need to dedicate more resources to medical affairs, allowing medical science liaisons

As drugs have become increasingly complex, medical affairs teams have had to step up their game to meet the needs of HCPs in understanding and conveying information about these agents.

(MSLs) and others on the team to grow their positions from a supporting role to more of a leadership stance, from which they are able to effectively use advanced insights to intuit HCP needs and drive change to improve patient outcomes.

The COVID-19 pandemic accelerated this shift. As HCPs became increasingly overworked and burned out amid the daily challenges they faced, they became further pressed for time along with being inaccessible for the traditional face-to-face meetings field teams previously used to educate HCPs.

“People were really looking for more value from their interactions, and they got that from MSLs who were able to provide more insight into medical research,” Rivkin said.

Along with analyzing data to discern what is most important to the HCPs they support, medical affairs teams have also been tasked with tailoring the information they provide to ensure it is of the utmost relevance to the HCP at hand.

Measuring up in a scaled-up role

As more and more is being asked of medical affairs teams and their influence grows, the onus is also on these professionals to prove their value.

“With that elevation and significance of the role comes more scrutiny,” Rivkin observed. “If we are having a bigger role and size within our organization, we’re going to be asked more and more to be able to measure how our work is impacting the healthcare landscape.”

Considering that medical affairs can comprise up to 20% of a pharmaceutical company’s budget, according to Rivkin, the importance of using effective metrics to ensure results becomes clearer.

The right perspective

Part of the old paradigm, traditional ways of measuring the effectiveness of medical affairs just are not adequate for giving a true picture of the value now being provided by these individuals.

These traditional metrics sought to glean feedback from things like call counts, or how many times an MSL met with an HCP; insight counts, or how many insights an MSL delivered to an HCP; and blinded surveys that would ask HCPs how much they valued their interactions with a given MSL. These types of quantitative indicators only provided part of the story.

“Those are all really internal-facing metrics, and they aren’t necessarily sustainable,” Rivkin pointed out, adding, “Companies are looking for other ways to turn those insights outward.”

While these means of measurement still have their place, they are being enhanced by others that delve even deeper into the story. For example, “share of voice” remains an important barometer

“If we are having a bigger role and size within our organization, we’re going to be asked more and more to be able to measure how our work is impacting the healthcare landscape.”

Stacey Rivkin,
Group Vice President of Strategic Insights at H1

for pharmaceutical companies to consider. In the past, this would be determined simply by doing things like counting the poster presentations given by one company versus another at a given medical conference.

“But ... there’s so much more data now, so we can measure share of voice, not only on how many conference presentations there were, but how many times people are talking about you in social media, how many times people are publishing things about you that you are not publishing,” Rivkin said.

Even this advanced share-of-voice evaluation is considered a basic level of measurement in the newly disrupted medical affairs model. Kicking that up a notch, H1 then examines the content of what is being discussed. According to Rivkin, the theory behind this metric rests atop the scientific pillars on which medical affairs’ educational efforts are based.

“Those scientific pillars support the platform that their drugs stand on, and the scientific pillars are usually about unmet need burdens, new disease information, new standards of care,” Rivkin noted.

With this in mind, once MSLs educate HCPs on these pillars, they can find out how effectively their message has been conveyed by analyzing the greater discussion taking place in a given area.

For example, if a disease has always been treated from one angle of its pathophysiology and a new

therapy treats it from another mechanism of action, finding out if HCPs are echoing the messages about the new treatment is a powerful way H1 uses to measure the impact of medical affairs' efforts in that area, she explained.

In another example, Rivkin cited endometriosis. The long-held belief that painful periods are just a fact of life that women must accept represents an area of unmet need.

Educating HCPs that such pain is not always “normal” and could signify a disease, as well as clinical developments so that they can then pass that message on to patients, is the job of the MSL in this scenario. If such messaging begins to resonate and makes its way into conversations outside the clinician's office — such as on social media — then it becomes clear that the MSL has achieved their goal, she said.

“There are so many diseases that people consider nuisances and MSL teams are out there talking about them as actual inflammatory burdens of disease,” Rivkin said. “If you can start quantifying that people are repeating back the messages that you're putting out there, you know you're having an impact in the space you want to be and you're setting up your scientific platform for success for the drugs that will follow and the data behind them.”

A unified vision

Disseminating the right messaging means little if the information is not being delivered to the right individuals. Clients of H1 come for the access to HCPs who are key opinion leaders in their respective fields, and they stay for the company's mission being in lockstep with their own.

“At the end of the day, we're trying to help the life science companies discover and meet their vision, which is that they also are looking to increase patient outcomes,” Rivkin emphasized.

This task is not a simple one. It requires understanding the healthcare ecosystem, monitoring where gaps exist in clinical practice, identifying the HCPs who are driving clinical decision-making and having an influence on their peers, determining how best to communicate with these clinicians and then measuring the impact of that communication.

“That is guidelines-based and evidenced by outcomes,” Rivkin posited. “To us, it's more of a holistic picture of supporting the entire objectives of an organization.”

AI provides rescue from drowning in data

A big part of this involves the use of artificial intelligence (AI) and machine learning. But benefiting from these trending technologies does not require medical affairs teams to be data scientists, Rivkin assured.

If an MSL is engaging with a certain physician, the AI will offer up insights by providing other doctors who are part of that physician's network, others who work with the physician and still others who behave similarly to the physician, like community caregivers — nurse practitioners and community clinics.

“If you can start quantifying that people are repeating back the messages that you're putting out there, you know you're having an impact in the space you want to be and you're setting up your scientific platform for success for the drugs that will follow and the data behind them.”

Stacey Rivkin,
Group Vice President of Strategic Insights at H1

Through these insights, the MSL gains a better understanding of how best to engage with the physician, as well as the physician's behaviors and the next best actions to take with that individual. By sifting through the mountain of data to distill it to a few major highlights, the technology provides invaluable perspectives, allowing medical affairs teams to allocate more time to their growing list of responsibilities.

"That has always been one of the biggest struggles of medical affairs and data in general — you get into this state of drowning in a sea of data. So you want a tool that can help you highlight the top few things that are going to be most relevant to you, and then you can act on those things," Rivkin shared, adding, "We've been doing it here since we started and we're just getting better all the time."

To learn more about how to measure the impact of medical affairs or to learn about H1, visit www.h1.co.

About

H1 connects the world to the right doctors. As the leading source of truth for global healthcare professionals, clinical and scientific information and analytics, H1 leverages next-gen analytics and AI to democratize access to HCP data, diversity insights, and groundbreaking research for life sciences, academic medical institutions, health systems, and payors.

The H1 data platform fuels a robust enterprise product suite that supports the advancement of healthcare innovation and equity. Today, more than 250 customers trust H1 to stay current with the latest information on HCPs everywhere, from clinical work and scholarly research to digital spheres of influence. H1 enables the meaningful connection with thought and treatment leaders to improve adherence to evidence-based medicine, inform inclusive clinical trial design, provide access to groundbreaking science, accelerate time to market, and ultimately, advance health equity.

Learn more at <https://www.h1.co>.