



## SEEKING GAIN OR AVOIDING PAIN?

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**R**ecently, together with ACNielsen HCI, we sponsored research to establish Campaign Tracking System (CTS) norms for Canada. CTS helps marketers to show how their promotional mix is getting their brand's message across to prescribers.

Two of the 20 brands evaluated (10%) enjoyed above-average message retention, elevated by both detailing frequency and support promotion. That means the more powerful and more expensive sales force efforts are being successfully leveraged by the more efficient and less-expensive journal advertising. Five brands (25%) are having serious message performance issues and their marketers should seriously consider overhauling their campaign and message. For the remaining 12 brands, the marketers have the opportunity to manage their existing campaign for improved brand performance.

### *ACNielsen HCI's prospective, controlled experiment*

The benefit of an optimized campaign was shown by a prospective, controlled experiment conducted last year by ACNielsen HCI.

Two medium-sized brands (Product A and Product B) ranging in annual sales from \$100 million US to \$500 million US, in annual sales, were selected that had not advertised for two years or more. In Canada, sales of \$100 million US would be analogous to a \$6 million to \$10 million brand, after adjusting for market size and price.

Change of key CTS parameters and new prescriptions were measured over six months amongst four groups of physicians. Each group of 16,000 doctors was exposed to one of four

levels of journal advertising, 0%, 50%, 100% and 200% of the class average media spend. The proportion of physicians detailed was the same in each group.

Prior to placing the advertisements, ACNielsen HCI quantitatively pretested both products' messages and ads via the internet using CTS-PreTest.

### *Product A promotional campaign*

Product A's ad had minor adjustments based on the CTS-PreTest results. At 50% of the class average media spend (T1), some awareness of the campaign and product recall was established (Table 1).

Product recall was again increased (statistically significant vs. T1 at 95% level of confidence) at the second spending level (T2), the average class spend per product.

However, it was not until the third and highest level (T3) of spending that the correct message retention jumped. Along with increased correct message retention rose first-choice therapy, new prescriptions (+10%) and a positive ROI.

Interestingly, the proportion of MDs detailed (as perceived by the MD) also increased and was even greater than the company's detailing data at the T3 level.

Advertising continued for another six months and the new prescriptions continued to grow at the same rate. Six months after the advertising had been withdrawn, prescription growth was maintained.

### *Product B promotional campaign*

CTS-PreTest demonstrated that physicians responded favourably to the main message.



## Seeking Greater Sales & Marketing Efficiency

Table I Results of product A promotional campaign				
CTS parameter	Control (0%)	T1 (50%)	T2 (100%)	T3 (200%)
Ad recognition	21%	44%	45%	58%
Product recall	11%	16%	23%	44%
Correct message retention	32%	29%	26%	44%
Per cent detailed (actual)	40%	40%	41%	42%
Per cent detailed (MD reported)	43%	38%	46%	52%
First-choice therapy	31%	30%	32%	38%
NRx percent increase	Basis	No change	No change	+9.79%

: Statistically significant at 95% level of confidence vs. control

CTS: Campaign Tracking System  
 T2: Second spending level

T1: Class average media spend  
 T3: Third and highest spending level

However, more than half (57%) were unsure or negative about the visual, with comments such as:

- “too busy,”
- “too much,”
- “too crowded” and
- “way too busy for an ad... the small print at the bottom of the page looks terrible.”

Changes were recommended to remedy the overcrowding, but these were not followed. The Campaign Tracking System showed that awareness of the ad, the product it promoted, correct message retention and first-choice therapy did not increase with additional ad spending.

### Research conclusions

First, Canadian research has shown that most brands have the opportunity to adjust the implementation of their sales and marketing efforts for greater results.

Second, other research discussed here illustrates the progression from campaign awareness

to first-choice therapy and new prescriptions.

Third, it shows that ads (and sales aids) should be quantitatively pretested to identify and address any reader issues.

Fourth, not all medical advertising is effective in leveraging the sales force’s effort. If it does not work, it can be due to an insufficient media spend, a problem ad campaign or inconsistent messaging, not the medium.

Fifth, this experiment demonstrates the benefit of using a validated and integrated survey instrument to measure the individual and combined impact of the sales and marketing effort.

In conclusion, there are many medium-sized brands, which, if optimally promoted, would improve the overall-company bottom line and reduce its dependency on mega-brands. **CPM**

*For more information about these survey results or methods used, please contact Graham Davies at (416) 467-7005 or at [g@davies-strategic.com](mailto:g@davies-strategic.com).*