

## The social media super market: Pharma still plays safe

With the US FDA now making moves to formulate a policy on the proper use and regulation of new age media, **Viveka Roychowdhury** reviews the dilemma facing pharmaceutical companies

From sending smoke signals to telephones to new age tools like Facebook and YouTube, the human race has always found ways to communicate. As per a 2009 Nielsen survey of Social Media (SM), two thirds of the world's internet population visits online communities and spends at least 10 minutes on them every day. And the time spent on these websites has increased three times the rate of overall internet growth. SM seems to have caught the fancy of both young and 'old' in equal measure, going by the fact that according to the same Nielsen survey, people aged 35-49 may have been the fastest growing segment on Facebook but in the last year, Facebook has added twice as many 50-60 year old visitors (14 million) as it has 18 year olds. One third of Facebook audience is in the 35-49 age group.



These large electronic communities are, in fact, taking the place of traditional support systems, and it is no wonder that today, most people sign up on e-communities for health information rather than turn to family and friends. Examples of pharma companies in the US using social media tools abound. Merck uses Facebook to promote Gardasil, its cervical cancer vaccine; Bayer Aspirin has a Facebook page for women; McNeil has an adults-with-ADHD awareness page; YouTube has hosted promotional videos such as GlaxoSmithKline's restless-legs awareness film and spots for AstraZeneca's asthma medicine Symbicort; Reckitt Benckiser has used MySpace to distribute advice on kicking the prescription painkiller habit and Pfizer has a Chantix Support Group on drug.com, for tobacco patch users who are trying to quit smoking.

"A social media marketing consultancy: Pharma companies are not promoting anything (since) laws are not very clear if they can promote medicinal products on SM platforms. Companies are only proactively listening to what consumers are saying and talking about their product, they are not reacting to the conversations"



- **Daksh Juneja**  
Director  
Avignyata

As Tapan Ray, Director General, Organization of Pharmaceutical Producers of India (OPPI) points out companies like, Pfizer, GSK, Merck, Bayer, J&J, AstraZeneca etc are also now joining these communities to initiate a meaningful dialogue with important stakeholders. Some of these companies have already created un-branded sites like, [silenceyourrooster.com](http://silenceyourrooster.com) or [iwalkbecause.org](http://iwalkbecause.org), to foster relationship with patients' group through online activity, the contents of which have been generated by the users themselves of the respective social medium. With the help of click-through links these sites lead to the branded sites of the concerned companies.

Ray quotes from TNS Media Intelligence, saying that internet media spending of global pharma companies had increased by 36 percent to \$137 million, in 2008, which is significantly higher than their spending on television advertisements. This gives an indication of how seriously pharma companies take new age media tools.

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- **Gowree Gokhale**  
Partner & Co-Head  
Pharma Practice

SM tools ranked third (at 34 percent) among online tools to locate health information in the Seventh ePharma Consumer Survey of 2008, says Dr Raja B Smarta, Managing Director, Interlink Marketing Consultancy, and he opines that e-health will throw up new forms of patient-physician interaction and pose new challenges and threats to ethical issues such as online professional practice, informed consent, privacy and equity issues.

Analyzing the online presence of pharma companies, Daksh Juneja, Director, Avignyata a SM marketing consultancy observes that, "Pharma companies are not promoting anything (since) laws are not very clear if they can promote medicinal products on SM platforms. Companies are only proactively listening to what consumers are saying and talking about their product, they are not

reacting to the conversations."

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Also, companies are using SM to highlight the Corporate Social Responsibility (CSR) initiatives that they have been doing on video sharing sites (eg. YouTube channel) and photo sharing sites (example: Flickr photostream). Company websites generally have OTC products and the company details which are purely investor and investor relations driven. In Juneja's opinion, these companies should actually create awareness about preventive measures that can be undertaken as an individual against diseases.

### The bitter pill?

But there are also examples of misleading/ incorrect health information on the Internet. In fact the US Food and Drug Administration (FDA) has, in the recent past, cracked down on 14 such companies, as their online ads did not contain enough safety information.

This has led to the US FDA again making moves (after its first attempt in 1996) to formulate a policy on the proper use and regulation of new age media. In November 2009, the US FDA had a two day Public Hearing on 'Promotion of FDA-Regulated Medical Products Using the Internet and Social Media Tools. The agency is now collecting public comments on the same upto February 28, this year.

The tricky part will be how does the US FDA control the medium and protect the consumer, while at the same time empowering the customer to use his freedom of choice? And how do the regulators and industry ensure that the consumer is 'educated' enough to make the correct choices?

Ray agrees that not only in the US, Europe and Japan, but in most countries, there are no specific regulatory guidelines to promote a pharma brand or create brand awareness through such media. In this much uncharted territory, there are not enough footsteps to follow, and pharma companies are now just 'testing the water' and are, therefore, slow to use SM to the fullest extent, he says. Only robust regulatory guidelines can prevent the misuse of the social media by the unscrupulous elements, he stresses.

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- Hitesh Gajaria  
Executive Director  
KPMG India

Susan Josi, Managing Partner, Sorento Healthcare Communications, too makes the same point when she comments that most companies are yet to understand the digital media opportunity and this is more so in pharma where we are still living with closed door strategies with our doctors. For instance, most of the consumer led SM are used by young and old, but the way youngsters use it is far different from how others use it. Therefore she reasons that even while targeting strategies we need to thoroughly understand the target audience psyche and then suggest appropriate ways to maneuver the dialogue.

As Bindu Menon, CEO, Point Blank Advertising analyses, "On the face of it, this appears to be an exciting media for the pharma industry, otherwise starved of novel media. Considering the reach of the so called SM supermarket, one cannot ignore its potential to create awareness and influence opinions in the marketer's favour and aid brand recall, when it comes to brands that can be directly promoted to the consumer. It can also be used effectively where patient education plays an important role like vaccination, health and nutrition, chronic diseases like diabetes, hypertension etc. However, one has to look into this trend a little more discerningly; weighing the consequences before taking this step."

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- Ruchelle Dias  
Project Manager - Operations and  
Corporate Communications,  
Point Blank Advertising

In a similar vein, Ruchelle Dias, Project Manager - Operations and Corporate Communications, Point Blank Advertising opines that, "Instead of brand advertisements, social networking sites should be used as a good forum for appropriate dialogue to get quick borderless responses on topics related to the therapy or healthcare. The topics could or should be restricted to patient awareness or education only. Facebook could be a great place of gauging responses to address the unmet medical conditions or doubts in the healthcare domain."

In a way, Josi says, it is really about who will bell the cat and do things differently, as slowly and steadily the patient is getting more and more empowered with knowledge and wisdom to make informed choices. To support these endeavors we need to have clients who will experiment and think out of

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- Prerak Hora

Associate

TMT Law Practice,

Nishith Desai Associates,

Legal & Tax Counseling Worldwide

the box and even if it is possibly reaching a smaller audience at least it is targeted to the ones who matter to your brand. Interestingly, she points out even though most pharma marketing guys are heavy users of professional SM like LinkedIn, and almost everyone is connected through groups and discussion threads on marketing and other issues, they have not been able to extend the same for their brands.

### Better safe than sorry

Speaking in favour of using SM tools, Josi opines that it is the best media to create a buzz for your brand. It is one of the most favorable media to encourage experiential discussion which is a very effective tool to get early adopters on the brand. But in the same breath, she echoes the thinking within most pharma companies when she says, "The biggest worry is misuse and abuse of comments made. Unlike other products, pharma products are very individual and can have different responses with patients and that is why the doctor involvement and influence matters", she points out. Therefore this media needs to be scientifically managed with someone knowledgeable moderating the conversation, says Josi.

Hitesh Gajaria, Executive Director, KPMG India opines that even though the US FDA currently does not have any stringent policies for an evolving media like the Internet, resulting in a grey area regarding provision of adequate and appropriate drug information which could sometimes mislead the consumer, "it is nevertheless, the natural ethical responsibility of pharma companies to be prudent so as not to endanger public safety, due to lack of adequate disclosures or clarity".

Putting forward some suggestions, Gajaria says, "Customers must be educated prominently on social media to follow the principle of "Caveat Emptor" - Buyer Beware! Secondly, Government authorities should step-up the process of issuing regulatory guidelines. Thirdly, there should be voluntary ownership of responsibility and self-discipline by pharma companies." Lastly he suggests the use of symbols / logos that can help in differentiating authorized information from unauthorized ones.

According to Gajaria, most pharma manufacturers agree that they are accountable for online content that they create or control, or that which is paid for by them. However, as there is limited scope for manufacturers to constantly be on a look out for independent communications over which they have no influence or control, a strong mechanism should be put in place so as to differentiate such content from the authorized contents.

Many may argue that health information and access is a fundamental right of every citizen, but Dias points out that one cannot discount the fact that safety of the end consumer ie. patients is the ultimate priority, and also the fundamental right of every citizen. This holds true especially when the participants themselves could be a camouflaged group, she avers.

### Some major pharma companies on social media platforms

- Novartis - 144 updates, 4183 followers, following 11. <http://twitter.com/Novartis>
- Vertex - 7 updates, 41 followers, following 13. [http://twitter.com/Vertex\\_Intl](http://twitter.com/Vertex_Intl)
- Boehringer Ingelheim - 396 updates, 3467 followers, following 2281. <http://twitter.com/Boehringer>
- AZ - 310 updates, 2447 followers, 344 following. <http://twitter.com/AstraZenecaUS>

(Source: Daksh Juneja, Director, Avignyata)

### India's cyber law

In India, the Information Technology (Amendment) Act, 2008 ("ITAA") is regarded as India's cyber law. Some of the important sections of ITAA are as under:

- Section 43A - provides for compensation for failure to protect any sensitive personal data or

information in a computer resource.

- Section 72 - provides for penalty for breach of confidentiality and privacy of data.
- Section 72A - provides for punishment for disclosure of information in breach of lawful contract and includes punishment for intermediaries.
- Section 79 - provides immunity / exemption from liability of intermediaries such as ISP's, web hosting service provider, network service providers, etc. in certain cases.

(Source: Nishiith Desai Associates)



## Legal position

Giving the legal perspective, Prerak Hora, Associate, TMT Law Practice at Nishiith Desai Associates, says, "Social network content is mainly in the form of user generated content or UGC. There is no regulation in the world which expressly deals with social networks or UGC. Hence there is no specific mode in which once can effectively address the problem of misleading / incorrect health information on the world wide web. It is more of self regulation that one needs to adopt when dealing over the social network."

Gowree Gokhale, Partner & Co-Head, Pharma Practice, Nishiith Desai Associates, adds, "However, if it is the pharma company that is going to post any material or any advertisement of its products on the social network, then the onus would certainly vest upon the pharma company for posting accurate material or the advertisement. Therefore she suggests that socially responsible pharma companies may prefer keeping a tab on social networks where their products are being depicted or discussed and may send a request to the website to take down/remove the false/misleading information/materials so depicted or the pharma company may further give/post true and correct picture of its product on such website."

Ray recalls that the first 'e-Health Code of Ethics' was prepared in the "e-Health Ethics Summit", organized by the Internet Healthcare Coalition and hosted by the World Health Organization/Pan-American Health Organization (WHO/PAHO) in Washington DC on 31 January 2000 - 2 February 2000.

Smarta quotes the goal of the e-Health Code of Ethics: to ensure that people worldwide can confidently and with full understanding of known risks realize the potential of the Internet in managing their own health and the health of those in their care."

The Summit ended with the formulation of the e-Health guiding principles, following eight main headings: candor; honesty; quality; informed consent;

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privacy; professionalism in online health care; responsible partnering; and accountability.

Indian regulators too should be thinking along the lines of the US FDA and moving towards monitoring of SM sites. Gokhale points us to Section 43A, Section 72, Section 72A, and Section 79 of India's Information Technology (Amendment) Act, 2008 ("ITAA") regarded as the country's cyber law which may be considered relevant in this case.

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For now, the industry is left to self regulate, while they work towards a more systematic approach. Josi cites OPPI's Advertising Code of Ethics which is mandated for any media and so that could apply to SM too. A Uniform Code of Pharmaceutical Marketing Practices (UCMP) was proposed at the behest of the Department of Pharmaceuticals by industry associations such as OPPI and Indian Drugs Manufacturers Association (IDMA). While OPPI adopted the code put out by the International Federation of Pharmaceutical Manufacturers & Associations (IFPMA), the global entity of which OPPI is an affiliate, smaller players in the business - combined under the Small Pharmaceutical Industries Confederation (SPIC) - raised objections to the proposed code citing various reasons.

### Pros, cons and best practices of social media

#### PROS:

- Provides a free / cheap social network media platform for networking, communicating and socializing amongst doctors and patients; doctors and doctors; and patients and patients.
- Provides patients with a wealth of information on various health disorders and its treatment and sharing of experiences.
- Provides a new advertising medium for increasing product brand awareness, improve existing products and services and increase marketing and promotion of products and services.
- May facilitate innovation through blogs.
- Helps to keep a tab on competition.

#### CONS:

- As much of the social network content is user generated, there are chances of libel and defamation by competing pharma companies especially when someone posts false information of any particular pharma product or posts false information about injuries caused by drugs' side effects, etc.
- Data confidentiality and breach of privacy rights, especially when a user posts his health problem/s on the social network.
- It may lead to copyright infringement or other form of IP infringement.
- Incorrect information or interpretation of information.

#### SOME BEST PRACTICES TO BE ADOPTED:

- Undertake apposite research and identify clear objective and have a proper social network plan and process in place before implementing it.
- Understand the target audience.
- Commit resources and time.
- Have transparency.
- Welcome the feedback from site users / bloggers, whether positive or negative.
- Listen to the users.
- Do not post fake or intimidating material.

(Source: Nishiith Desai Associates)

### Key takeaways

Dias concludes that one needs to understand that, if digital media is reducing distance over the globe, misuse of such social networking sites can shorten the life span of both your brand and patient. It's ultimately the credibility of your brand and the organisation you are representing at stake if such sites are misused.

SM could then actually be counterproductive, unless all stakeholders have the same ethical yardstick. Josi

avers that most MNC's and large Indian companies with global presence have their own internal code of ethics. And definitely adhere to it. Sometimes it is even more stringent than other laws as they don't want to land in any legal hassles later.

Looking ahead, Smarta believes that pharma companies need to now focus their business model on a "medical consumer centric model". They need to develop unique expertise in researching the usage, behavior, needs, and motivations of medical consumers. In order to do that, pharma companies will have to engage medical consumers in dialogue through SM. FDA guidelines, in his opinion will only serve to further facilitate this movement.

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