ZY 8115 23

Handling Hypergycemia/Diabetes



Based on:

- Market research with PCPs
- Field rides with Sigma representatives
- Learning's from Neuroscience DMs and representatives
- > Thought leaders perspectives

Learnings:

- 1. There is currently **not** a lot of competitive hype in PCP.
- 2. If competitive hype a given, their argument doesn't hold water because glucose elevation is within normal range (provided in sell sheet).
- 3. PCPs are currently using medications that are known to increase risk factors for diabetes (steroids, etc). Diabetes is a serious disease but they have lots of experience managing it.
- 4. Weight gain does not necessarily cause diabetes. If this were so, then MANY of the medications PCPs prescribe would "cause" diabetes.

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Market Research Critical observations

- Discussing diabetes last on the safety profile page actually **adds** to our safety profile! Stress Zyprexa's safety profile by comparing Zyprexa to competitors on each side-effect (EPS, prolactin, blood monitoring etc).
- Own weight gain but present it as a **manageable** side effect. (Most PCP's DO NOT see weight gain as a barrier to prescribing). Honest information helps them manage weight and may increase retention!
- Framing can make or break the call! Use the following **bridging verbatim** before discussing diabetes with targeted customers:

"Doctor, we have discussed Zyprexa's excellent safety profile. However, you may hear from certain competitors that Zyprexa causes diabetes. I want to assure you that Lilly is THE diabetes care company. We have looked at this issue thoroughly and have found that Zyprexa does not increase the risk of diabetes over other psychotropic agents. To reinforce Zyprexa's superior safety profile, I'd like to share these studies with you today."

Company Confidential Copyright © 2001 Eli Lilly and Company Our customers tell us today that diabetes is not an issue!

Therefore, with most customers we will address the diabetes concern only when it arises (as follows):

- 1. Have you seen it or heard it?
- 2. Share information in context of the overall safety profile and give the "comparable rates message" with the correct ordering of message elements and tone.
- 3. Probe for agreement and create action around efficacy & safety.
- 4. Probe on follow-up calls to make sure the objection is handled. "Last time we talked you asked if Zyprexa causes diabetes. I showed you information that the risk for Zyprexa patients is comparable to other agents. I want to check your confidence in Zyprexa's safety profile."

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However, due to competitive knowledge, we are also asking you to give this message proactively to your Top 20 Risperdal targets!

- To do this we ask that you give the "bridging verbatim" off the safety page and then give the diabetes data-on-demand message.
- Check for agreement and create action around efficacy and safety.
- On follow-up calls, ask the following question after the safety profile
 page "Are there any other questions I can answer today about
 Zyprexa's excellent safety profile." If yes, use the diabetes data-on
 demand sell sheet with the correct message ordering and tone.
- Remember to always probe. What may not be an issue today

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Practice the entire message and present the diabetes-on-demand sell sheet off the safety page **following** the bridging verbatim.

Message elements order and correct tone:

- 1. Stress that diabetes is common in the general population and is even 2-4 times more likely in the mentally ill.
- 2. Help the physician identify other risk factors for diabetes, including hyperprolactinmia.
- 3. Utilize the Diabetes Sell Sheet and stress the comparable rates data. "ZYPREXA patients can develop diabetes but at comparable rates to other agents." Glucose elevations are minimal and fall within the normal range.
- 4. Address the relationship between weight and diabetes. Stress that there is a relationship but its not 1:1. "Weight gain is one of many risk factors for diabetes"

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