Identifying High Flyers

**Experimental:**
- Uses Higher Doses
- First among their peers to try medications when they first enter the market
- First among their peers to try new uses of medications

**Trust Info:**
- Anxiously awaits for new information from pharmaceutical companies
- Willing to try something new to get a patient better

\[=\]

High Flyer
High Flyer Profile

**Who are they?**
Earliest adopters of new medications & new uses of medications

**How do they approach treating patients?**
Willing to try new things to move patients forward
- Not bound by the label
- Willing to push the dose of medications
- Willing to use adjunctive therapy
- Typically they are treating symptoms rather than a diagnosis
- More patient focused than other physicians

**What do they like from a pharmaceutical company?**
Keep them connected with the up-to-date information
- Prefer to learn from “experts” about new information
- Consulting Conferences
- Interventions tailored to their interests
High Flyer Quotes

**Disease State Views:**
- If you take the time to look you will see a depressed patient every day.
- I think a lot of Bipolar is under diagnoses
- I rarely refer a patient to a psych, I can treat most of them myself

**Treatment Views:**
- Best part of primary care is the rapport with patients
- Leave the heavy duty meds to the psychs like mellaril... but I feel pretty comfortable using A-typical anti-psychotics like Zyprexa.
- I heard a talk by a UCLA psych talking about these combinations and so I tried it. As long as they are not suicidal, I will try it.

**Representative Views:**
- I like to talk to psychs... I likes reps, they are very important. My first priority is treating patients, but I will try to talk to reps when I can.
- Reps need to help us stay out of trouble, tell us the good and the bad!
- I appreciate what they do... I want information quick, but don't over do it if you need more time make an appointment.
I FIGHT BECAUSE THE STAKES ARE HIGH

Too many times I've seen how quickly the devastating effects of bipolar disorder can impact my patients' lives—and the damage that each episode can cause.

Families torn apart.
Careers ravaged.
Relationships destroyed.

The stakes are high.

As a doctor, I fight every day to make sure that bipolar disorder will not win out.
Identifying Skeptical Experimenters

**Experimental:**
- Uses Higher Doses
- First among their peers to try medications when they first enter the market
- First among their peers to try new uses of medications

**Confirm with Experience:**
- Chooses treatments based on personal experience and mechanism of action
- Choosy about where they obtain new information
- Experiments to prove/disprove new information

= Skeptical Experimenter
Skeptical Experimenter Profile

Who are they?
Moderate/High volume and adoption in diseases/population treat

How do they approach treating patients?
Tailor medications to needs of each individual patient
• Personal experience determines drug choice
• Not indication/label driven
• Willing to push dose beyond label
• They are in control of patient treatment
• Experiments to prove/disprove information

What do they like from a pharmaceutical company?
Provide data and a forum for them to share expertise
• Interactive sessions with colleagues (round table, Q&A, thought leaders)
• 3rd party information
Systematic Conservative Quotes

**Disease State Views:**
- I won’t write for Bipolar and Schizophrenia... I’m not an expert and it’s not my forte
- My patients have been pretty well studied

**Treatment Views:**
- I’m more comfortable with other diseases that have an objective measurement to them
- I’m not willing to treat all depression either, some patients deserve an expert

**Representative Views:**
- Reps are the only people I see all day without a complaint
- Reps are biased but they can bring you reprints and data
Identifying Rule Bounds

Follows the Crowd:
- Tries new treatments or approaches once their peers are comfortable
- Restricts treatments to the medication label or follows what "everyone" else is doing

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Rigorous Approach:
- Diagnosis is an important part of determining treatment
- Follows the rules of the system/facility (formulary, etc.)
- Concerned with safety

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Rule Bound
Rule Bound Profile

Who are they?
Moderate volume and adopters of our portfolio products
High APS volume (within specialty).

How do they approach treating patients?
Treats patients efficiently by following the rules
• Diagnosis driven
• Most are very knowledgeable about new information, but do not necessarily act on it until it is widely accepted
• Practices according to the “standard of care”
• Doesn’t have enough time, looks for efficiencies

What do they like from a pharmaceutical company?
Provide the rules and the standard of care
• For Standard of Care keep them up-to-date on the treatment standards and side effect information
• CME, textbooks, PDR, etc.
Rule Bound Quotes

Disease State Views:
- Commonness brings comfort, I see so few Bipolar I'm reluctant to diagnosis and treat

Treatment Views:
- I have 30 formularies to work with. You have to know the common veins, the ones you can prescribe and hit most of the formularies.
- I need to control symptoms with minimal side effects so a patient doesn't need to come back

Representative Views:
- I use all of my resources to treat a patient and reps are a resource!
- The best reps know their product and respect my time
- Patient Education saves me time
NICE recommended
Identifying Selective Majority

Follows the Crowd:
- Tries new treatments or approach once their peers are comfortable
- Restricts treatments to the medication label or follows what “everyone” else is doing

Simplistic Approach:
- Niche products based on symptoms or side effects
- Uses fewer medications than their peers
- If Psych, may prefer to use psychotherapy in their office

= Selective Majority
Selective Majority Profile

Who are they?
Slower adopters of new products and new uses of products
As a drug & disease become mainstream, these customers become more important

How do they approach treating patients?
Keep it simple and straightforward
• Disease and treatment should be simple
• Symptom focused
• Doesn’t necessarily follow rules, but keep it simple
• Psychotherapy is an important part of my practice

What do they like from a pharmaceutical company?
Remind me of your niche
• Simple message from a rep
• Rep relationship is very important! They like it when a rep knows and acts on their personal likes and dislikes
Selective Majority Quotes

**Disease State Views:**

- Can’t enforce good health, only recommend it
- I have to know a little bit about a lot of things, therefore I need to keep it simple

**Treatment Views:**

- I see so many different types of patient that I usually don’t try to learn about small populations

Redacted

**Representative Views:**

- Define symptoms better for the doctor
- I need a rep to say, Hi, don’t forget about my drug and here are some samples... easy"
- The best reps develop a personal relationship with you
<table>
<thead>
<tr>
<th>Segment</th>
<th>Segment Theme</th>
<th>Segment Strategy</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Flyer</td>
<td><em>I eagerly seek out new ways to treat my patients</em></td>
<td>Lilly is the best at providing new treatment information</td>
</tr>
<tr>
<td>Skeptical</td>
<td><em>I decide how to use medications based on personal experience</em></td>
<td>Lilly is the preferred medium for these customers to share experiences</td>
</tr>
<tr>
<td>Experimenters</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rule Bound</td>
<td><em>I follow the rules when treating my patients</em></td>
<td>Lilly is the best at updating customers on the “rules” for treatment</td>
</tr>
<tr>
<td>Selective</td>
<td><em>I prefer to keep treatment simple and straightforward</em></td>
<td>Lilly provides simple, consistent information</td>
</tr>
<tr>
<td>Majority</td>
<td></td>
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</tbody>
</table>
**Physician Segment Observations**

- **High Flyers**: most important segment in terms of Zyprexa scripts written; have heard the most competitive messaging around diabetes; more likely to attribute diabetes as being caused by Zyprexa; most concerned about PT satisfaction and interested in services to help improve patient wellness
- **Rule Bound**: second most important segment in terms of scripts written; least likely to attribute diabetes as being caused by Zyprexa; only segment that wanted more data in DMT piece, but not likely to use it
- **Selective Treaters**: not a big segment for Zyprexa; least likely to treat medical illness not caused by meds
- **Skeptical Experts**: important segment and highly detailed - very aware of the Lilly Janssen battles; like other groups, SEs were confused about the audience of DMT - it was above patients and beneath MDs
An Introduction to Bipolar Disorder and Manic Depression
Medication is an essential component in the treatment of mental illness. But it isn't the only answer. The right medication can enable a strong therapeutic alliance, to help the physician and the patient establish a solid-treatment foundation and stay on course. That's why we believe a reliable medication can give you both a better chance to reach your goals - together.