

# Issues Focus Team

August, 2003

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# Issues Focus Team Deliverables

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- Define the problem – confront and agree upon the facts (see issues)
- Define what we want our customers to think and feel about the issue
- State and determine the approach to do this. Create the “story” that we will tell/live/etc.
  - Must be credible/on brand/right for patients
- Define how we will ensure total integrated saturation of market with “story”
  - All channels in the market / appropriate marketing mix

# The Issues Focus Team

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## Core Team:

- Mike Magdycz (Manager - Marketplace Management - Chair)
- Tom Hardy (U.S. Medical)
- Vince Truax (Brand Manager – Institution)
- Mike Yost (Brand Manager – Retail)
- Mike Bandick (Director – Marketplace Management)
- Kelly Copes-Anderson (Market Research)
- Jill Welch (Director – Strategy and Alignment)
- Chuck Feehan (Sales Director – Neuro Retail)
- Dr. Richard Petty (Customer – Endo+Psych)

Many others were also involved on an ad-hoc basis

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# Timeline of Events

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- June 23<sup>rd</sup> – Approval for formation of Issues Focus Team at Jack Jordan Staff meeting.
- July – Market Research to better understand the nature of the problem and what we want our customers to believe about the issues of weight gain and diabetes.
- July 28<sup>th</sup> – Marketing plan delivered to U.S. Affiliate for issues management consistent with new belief statements.
- August and beyond – Implementation of tactics per U.S. Affiliate issues management business plan.

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# Problem Statement

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As a result of concerns about weight gain and fear of diabetes, an increasing number of physicians are either avoiding Zyprexa in the acute phase or switching longer term. These actions are depriving patients of the benefits of Zyprexa.

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# Market Research Key Learnings

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- Physicians perceptions of weight gain and increased risk of diabetes are inextricably linked, which makes diabetes more of an issue for Zyprexa than other brands.
- Physicians believe the real problem is weight gain and that it is Zyprexa's issue as its key liability.
- Physicians perceive that if you can address weight gain you will reduce the risk of diabetes and other consequences. They are looking for tools to address weight gain that will enable them to continue to use Zyprexa due to its efficacy.
- Scientific data surrounding weight gain / diabetes coming from Lilly or supported by Lilly will be discounted by our customers
- The tone and approach of our current weight gain and diabetes messages are not connecting with our physicians

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# Implications

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- Physician perception of Zyprexa's link with weight gain and downstream consequences resulting in avoidance/switching behaviors dictates the need for a significant event to "shake the market".
- A major change in tone and approach is required (empathetic with conviction) to restore confidence in our ability to realistically help our physicians handle these concerns
- Weight gain will no longer be handled as an objection. Instead, weight gain will be discussed up front, integrated in to the brand promise.
- Significant investment and senior management commitment to actions is required beginning Q3, 2003 through 2004.

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# Strategy: Belief Statements

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- **I sense a change in Lilly's tone and approach – they have demonstrated that they understand the weight gain challenges I face when I choose Zyprexa. They now acknowledge that weight gain is very difficult to manage and can have potentially serious consequences.**
- **That said, Lilly is providing me with options that help me address weight gain in some of my patients and enable me to keep those patients on Zyprexa longer. This enables me to focus on treating the core psychiatric illness with the medication I deem most appropriate.**
- **I believe that diabetes is pervasive in my patients with severe mental illness. I am increasingly convinced that it has little, if anything, to do with which medication I choose. However, I am confident that I can assess, counsel, and refer patients at risk for diabetes.**
- **I now feel more confident addressing the challenges my patients face, and can depend on Zyprexa to help me help my patients.**

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# Situational Analysis:

## Where we were vs. Where we are going

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- **From:**

- Weight gain is manageable
- Weight gain is predictable
- Weight gain is not the only predictor of diabetes
- Diabetes risk is a class effect with comparable rates across all products
- Diabetes is mainly a patient population issue
- Handling diabetes and weight gain as an objection

- **To**

- Lilly understands the challenges physicians face in treating this population
- Lilly acknowledges weight gain challenges and potential consequences.
- Lilly is providing me with options to address weight gain in some of my patients
- External entities provide me with the facts related to diabetes
- Lilly is providing help regarding how to assess, counsel, and refer patients at risk for diabetes

**Result: A fundamental change in the way we interact with customers!**

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# Proposed Tactics

## (across audience and timing of impact)

Target audience	0 to 3 months	3 to 6 months	6 to 12 months	>12 months
<b>Patients</b>	<ul style="list-style-type: none"> <li>Expanded Solutions for Wellness</li> </ul>	<ul style="list-style-type: none"> <li>Group programs for CMHC</li> <li>Starter kits</li> </ul>	<ul style="list-style-type: none"> <li>Co-marketing which pharmacies (sending retention letters)</li> </ul>	
<b>Physicians – product specific</b>	<ul style="list-style-type: none"> <li>Announcement of initiative (e.g., Satellite Symposia)</li> <li>Thought leader development</li> </ul>	<ul style="list-style-type: none"> <li>“Visualize success” promotional program</li> <li>Treatment Team Advisory Board</li> </ul>	<ul style="list-style-type: none"> <li>Publication strategy</li> <li>Therapeutic alliances specialists expansion</li> </ul>	
<b>Physicians – general patient population</b>		<ul style="list-style-type: none"> <li>CME programs/dinners</li> </ul>		<ul style="list-style-type: none"> <li>Funding guideline development at the APA</li> </ul>
<b>Payors</b>		<ul style="list-style-type: none"> <li>Outreach to key payors</li> </ul>	<ul style="list-style-type: none"> <li>Retrospective data analysis</li> </ul>	

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## How do our tactics fit with our belief statements?

<b>Tactic:</b>	<b>#1</b>	<b>#2</b>	<b>#3</b>	<b>#4</b>
Expanded SFW	X	X		X
Group CMHC Programs	X	X		X
Starter Kits	X	X		X
Expanded CDE Program			X	X
Thought Leader Dev	X	X	X	X
Visualize Success Program	X	X		X
Retrospective Data Analysis			X	X
Pharmacy Wellness		X		X
Therapeutic Alliance Spec	X	X	X	X
APA/ADA Guideline Dev			X	X
Ongoing Program/Dinners	X	X	X	X
Publication Strategy			X	X
Lilly Advocacy Strategy	X	X		X
Satellite Symposia Initiative	X	X	X	X

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