

Fingerpaint Medical

Innovative solutions that shape clinical practice

Our Agency Offerings and Interconnected Solutions



We empower pharmaceutical and biotech companies with bold, innovative Medical Affairs and medical communications that transform complex data into impactful solutions, driving product adoption and advancing patient care.

Communication Strategy
Publications
Medical Education and Resources
Medical Information
Opinion Leader Engagement
Digital Execution
Strategy & Innovation
Medical & Disease State Education
Medical & Digital Engagement
HCP & Patient Promotional Communications



Pharmaceutical Branding
Clinical Trial Branding
Nonproprietary Naming
Corporate/Product Branding



Global Launch Expertise
Marketing
Media & Activation
Medical Communications
Medical Affairs
Naming & Branding
Multicultural



Strategic Planning and Launch Optimization
Patient and Provider Support Services
Insights Gathering
Market Access Training Programs
Value Proposition Development



Creative
Digital Customer Activation
Strategy
Media Strategy
Data & Analytics
Science



Cross-Cultural Analytics
Cultural Content Strategy
Cultural Marketing Mix



Customer Insights
Content Planning
Media Planning
Activation Ecosystem
Analytics & Optimization

SOLUTIONS

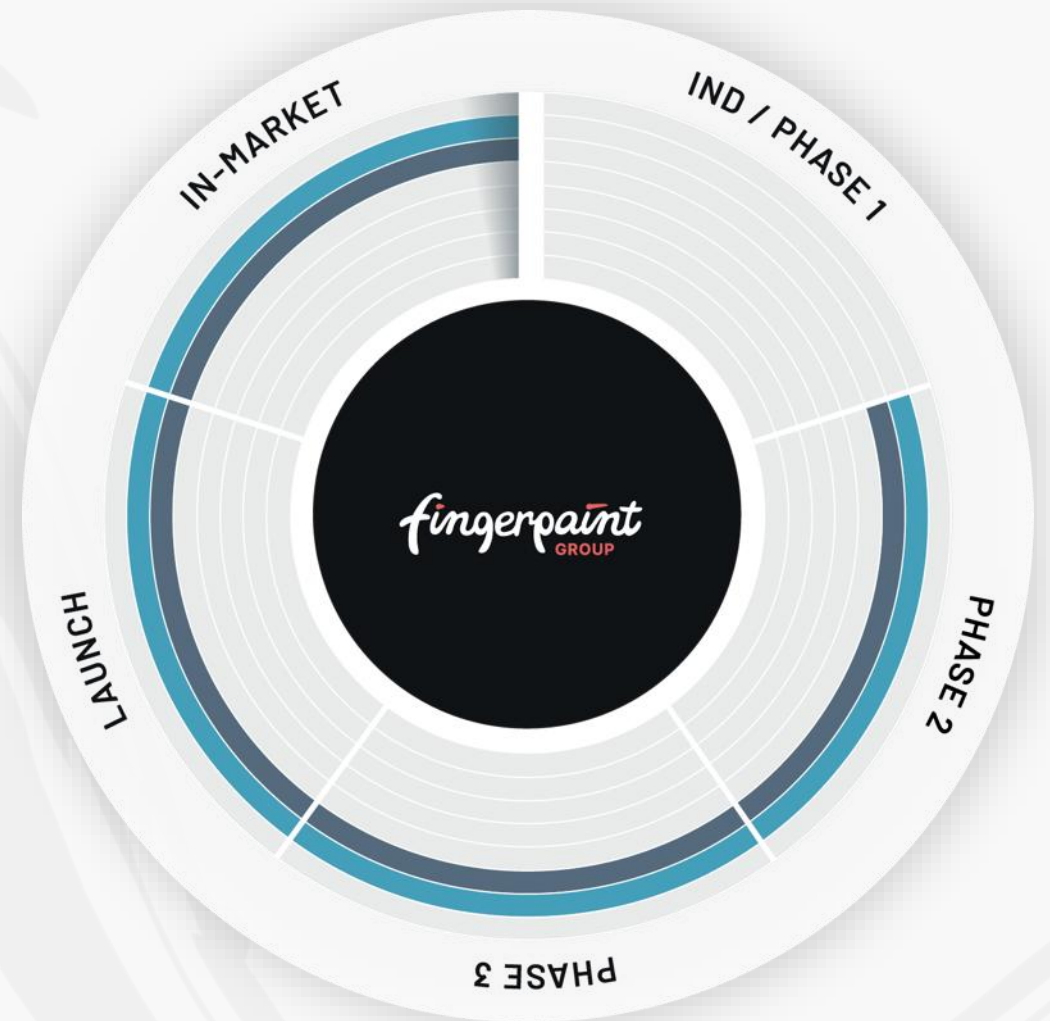
Medical

We combine innovative solutions with deep scientific expertise to elevate your data. Through strategic consulting and cutting-edge delivery, we deliver the insights and results that drive meaningful scientific exchange.

LEADERSHIP



Javeria Shahab
President



SOLUTIONS

Medical Affairs

Our team brings together bold thinkers and proven innovators who are pushing the boundaries of what Medical Affairs can achieve. With a commitment to fresh ideas and strategic insights, they empower our teams to redefine what's possible. Their vision empowers us to deliver transformative results for our clients and, ultimately, for patients.

LEADERSHIP



Todd Parker
Managing Director,
Medical Affairs



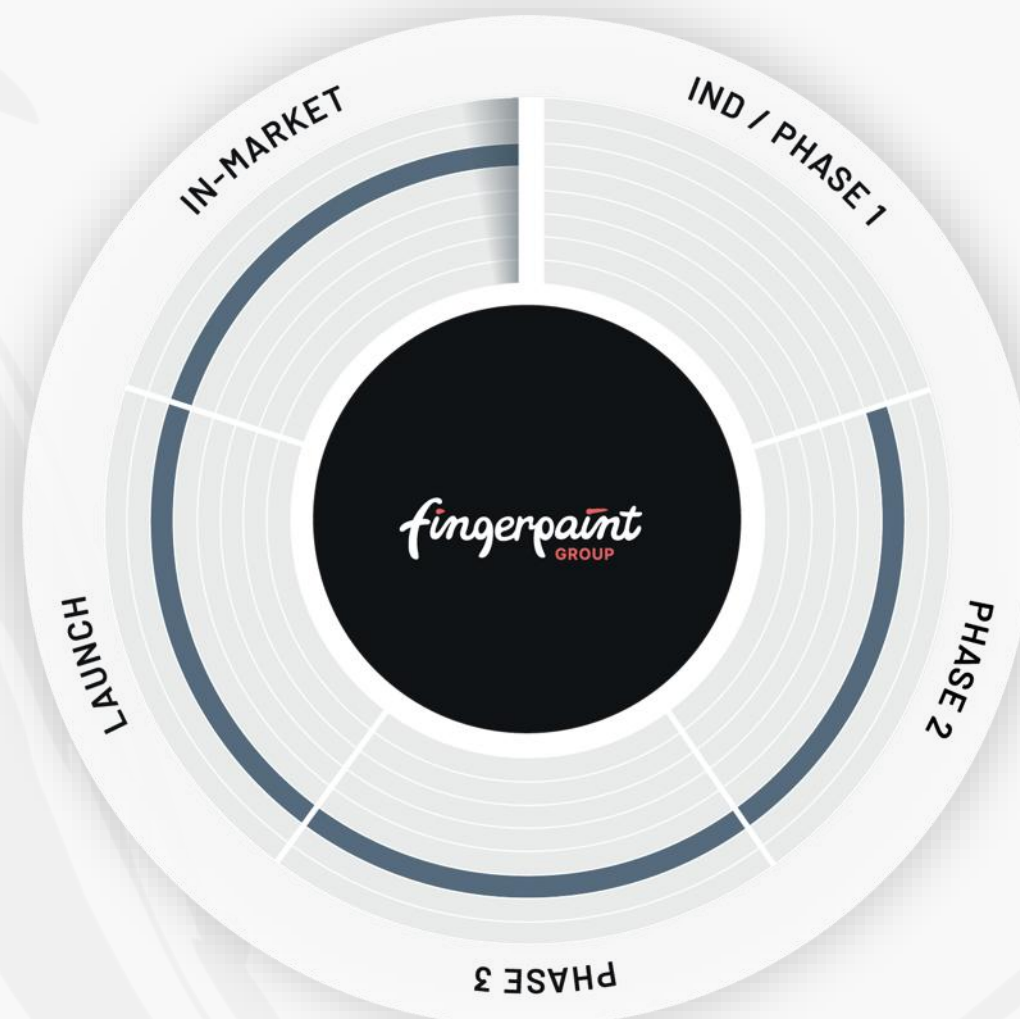
Ken Truman
SVP, Insights &
Connections



Leslie Rotz
VP, Digital Strategy



Cassie Stox
VP, Media Strategy &
Audience Insights



Thought Leadership in Medical Affairs

LEADERSHIP POSITIONS

Past Chairperson



Co-lead, Medical Communications Working Group and Deputy Lead, Customer Engagement and Scientific Communications Domain

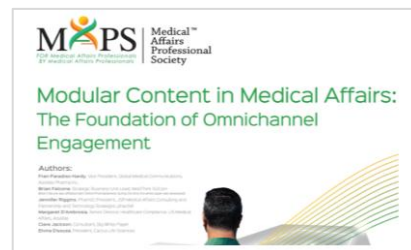


INDUSTRY GUIDANCE

Best practices



White papers



EDUCATING OUR PEERS

Leading MasterClasses



Publishing on key topics



DRIVING INNOVATION

Leadership in omnichannel



Leadership in AI



Medical Affairs Capabilities That Engage, Educate, and Drive Results

COMMUNICATION STRATEGY



- Scientific platform, medical narrative, and lexicon
- Landscape and gap analyses
- Launch readiness support
- Evidence generation plans
- Audience personas, including channel and format preferences
- Omnichannel planning and modular content strategy

PUBLICATIONS



- Publication planning, management, and execution
- Enhanced publication content
- Publication amplification
- Plain language summaries
- Social media
- HEOR/RWE publications

MEDICAL EDUCATION



- Live and virtual events (symposia, webinars, broadcasts)
- DSE content and campaigns
- Medical websites and social media content
- Clinical case-based content
- Medical booth content
- Infographics
- Animations and OL videos
- Patient material
- Internal education

MSL TRAINING AND RESOURCES



- Competitor and landscape slide decks
- Disease state slide decks/libraries
- Product and competitor data decks/libraries
- Infographic handouts
- Mobile apps
- Field medical training (digital modules, self-study, workshops)

DIGITAL ENGAGEMENT AND EXECUTION



- Social media planning and engagement
- Website development and interactive tools
- Search Engine Optimization (SEO)
- Interactive patient cases
- Live program innovation and gamification
- Augmented reality
- Animations and videos
- Podcasts
- Enhanced drivers to content and/or programs

HCP INSIGHTS AND ENGAGEMENT



- OL identification, segmentation, and engagement
- Competitive intelligence
- Live and virtual advisory boards/steering committees
- Asynchronous platforms and surveys
- Congress coverage
- Social listening
- Society partnerships/patient engagement

Section Menu

Integrated Medical
Communication Plan

Innovative solutions that shape clinical practice

Scientific
Platforms

Innovative solutions that shape clinical practice

Publication
Excellence

Innovative solutions that shape clinical practice

Advisory
Boards

Innovative solutions that shape clinical practice

HEOR & RWE

Innovative solutions that shape clinical practice

Training

Innovative solutions that shape clinical practice

Medical
Social Media

Innovative solutions that shape clinical practice

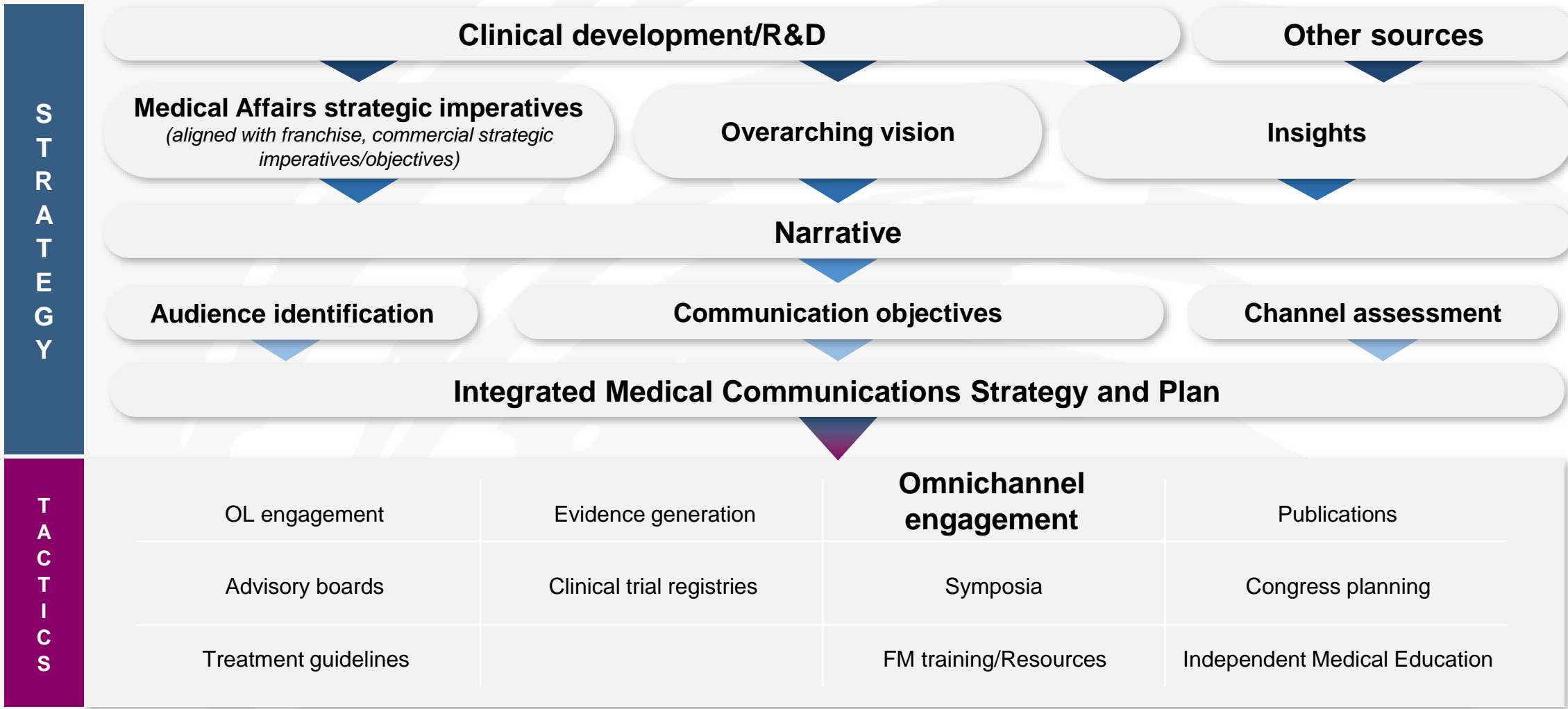
What Does the Future
Hold in Store?

Innovative solutions that shape clinical practice

Integrated Medical Communication Plan

Innovative solutions that shape clinical practice

Integrated Medical Communications Strategy and Plan

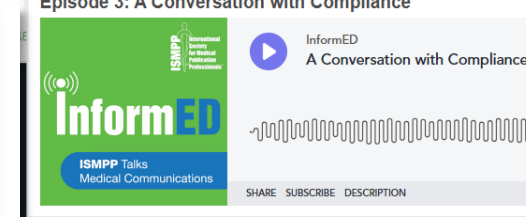
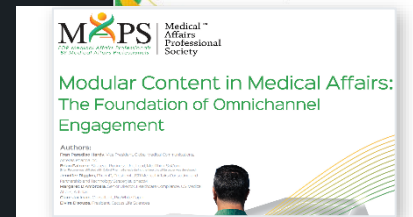
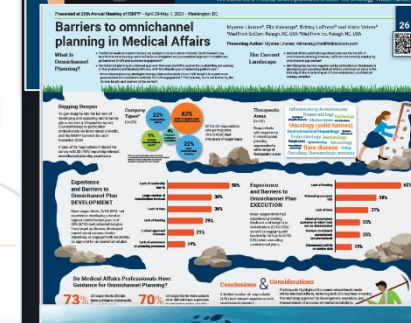
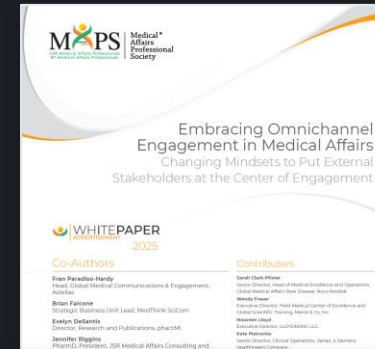


OMNICHANNEL ENGAGEMENT

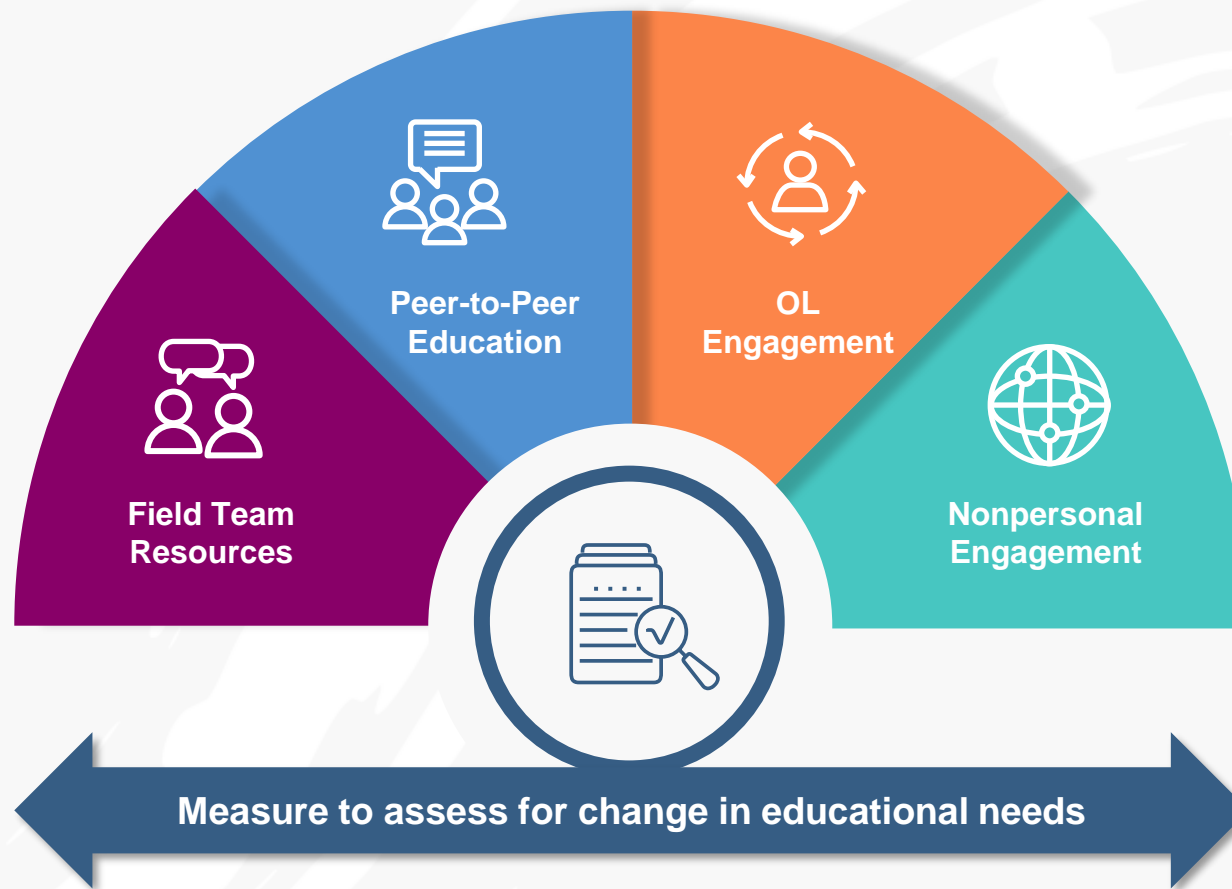
Leading Our Field in the Shift to Medical Omnichannel Engagement

“Their understanding of the scientific lens through which content is created and the Medical Affairs regulations through which channel selection, targeting strategies and how we will define medical value, is critical to this project.” – Director, Medical Communications Engagement & Impact (E&I), Medical Affairs – Global Medical Communications (GMC)

“Their understanding of Medical Affairs is clear based on the lexicon they use and the way they speak. Other agencies I have worked with primarily approach our challenges through an advertising lens.” – Senior Omnichannel Engagement Manager



An Omnichannel Approach Engages Prioritized Audiences With the Right Content at the Right Time



Purposeful

Goal-oriented approach focused on closing educational gaps among prioritized audiences

Multifaceted

Interrelated content dissemination via preferred formats and channels

Coordinated

Synergistic delivery of educational content based on audience insights, with the right message at the right time

Measured

Shifts in knowledge/beliefs and educational needs are measured for progress and insights

Building an Omnichannel Engagement Plan

1

SET COMMUNICATION STRATEGY

- Build key communication objectives based on data milestones and Medical strategy
- Identify and prioritize audiences
- Prioritize audience-specific educational goals to execute on Medical strategy

2

GAIN AUDIENCE INSIGHTS

- Understand channel and information preferences
- Perform audience segmentation
- Build personas that account for audience pain points
- Map the audience journey and identify educational needs at specific decision points

3

BASE TACTICS ON INSIGHTS

- Define tactics aligned with communication strategy, channel, and audience insights
- Integrate with traditional approaches to build holistic engagement

4

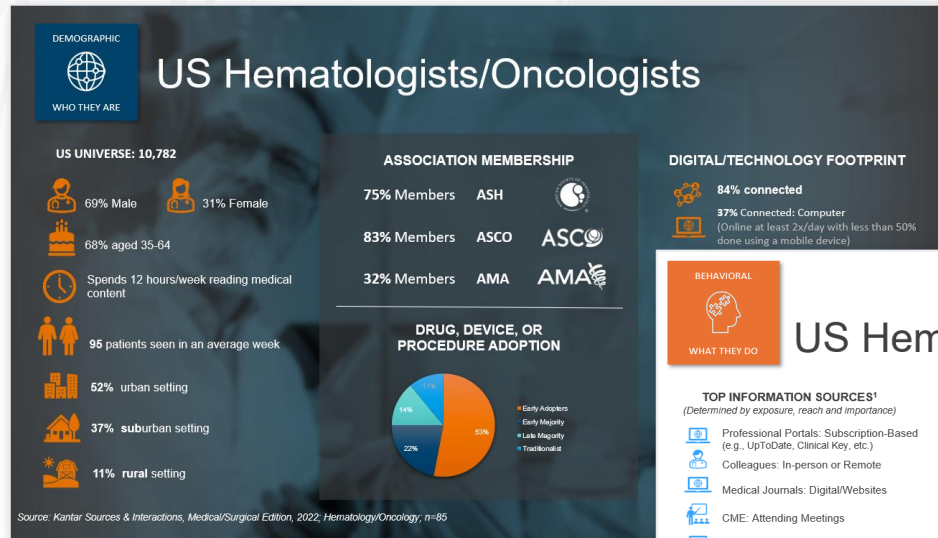
TRACK, MEASURE, ITERATE

- Define metrics for success
- Measure
- Refine approach to optimize outcome

Omnichannel engagement **incorporates traditional, in-person, and MSL activities with digital tactics** and considers novel channels for inclusion **based on insights**

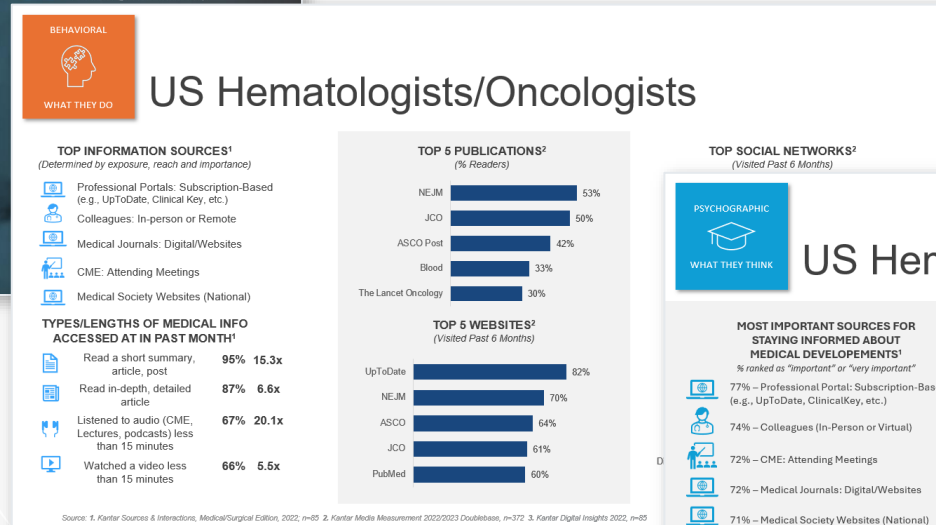
Each **Medical objective is aligned with the right channel and content type** for the audience to **address educational needs**

We Know Where and How to Reach Our Audiences

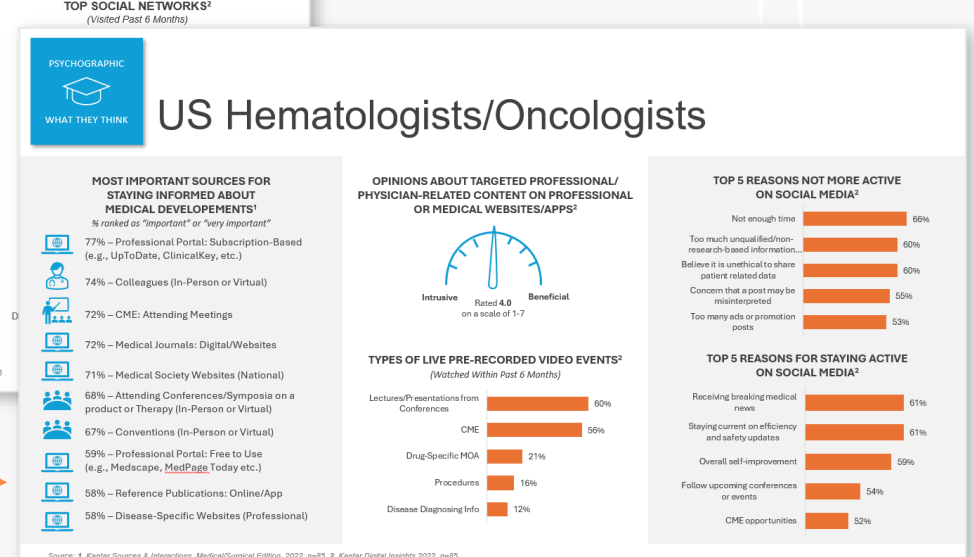


Demographic information tells us who they are

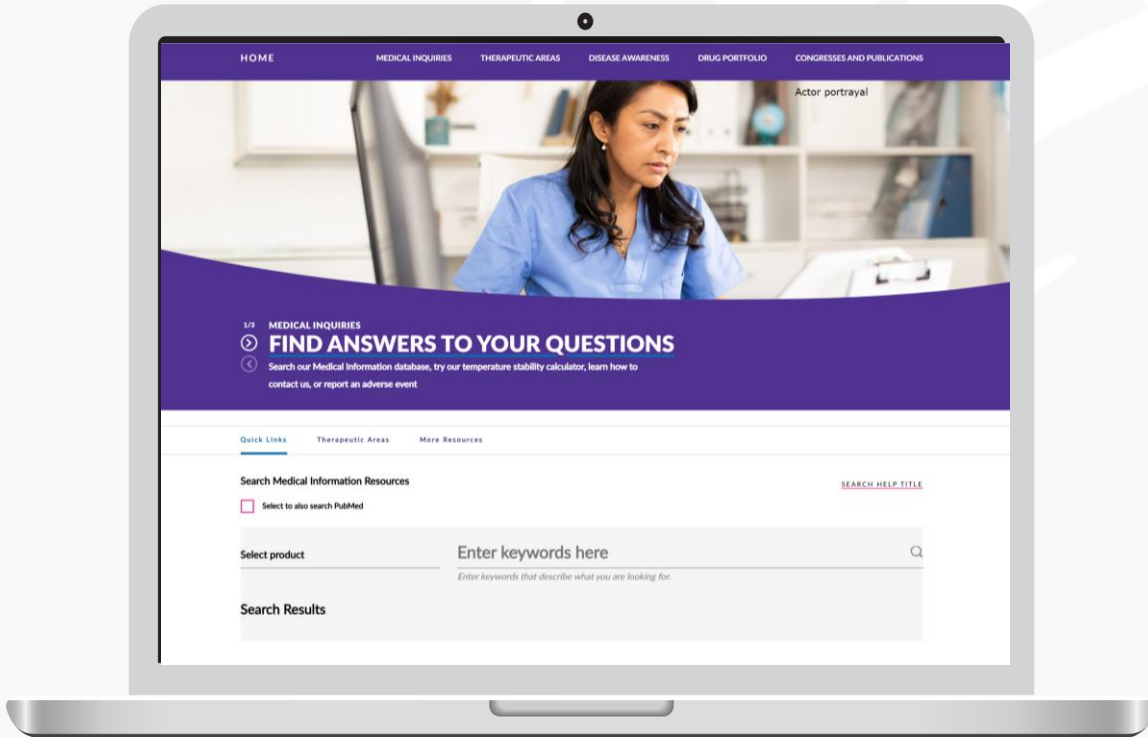
Behavioral information tells us what they do



Psychographic information tells us what they think



Insights Identify the Most Effective Formats and Channels for Each Audience



Social media



Congresses



Mobile apps



Company platforms



Journal websites



Enhanced pub content



Slide content



Email



Closed platforms



F2F/Virtual meetings



Publications

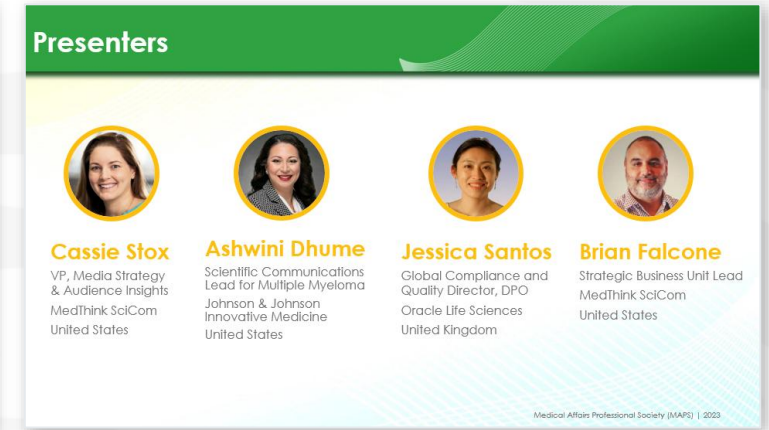


Patient materials

Partner With Compliance to Execute Novel Solutions

Our team has pioneered pathways to **working effectively with Compliance** to help implement a fully integrated omnichannel communication plan

- Launching novel channels
- Pioneering modular solutions



Episode 3: A Conversation with Compliance



InformED

A Conversation with Compliance

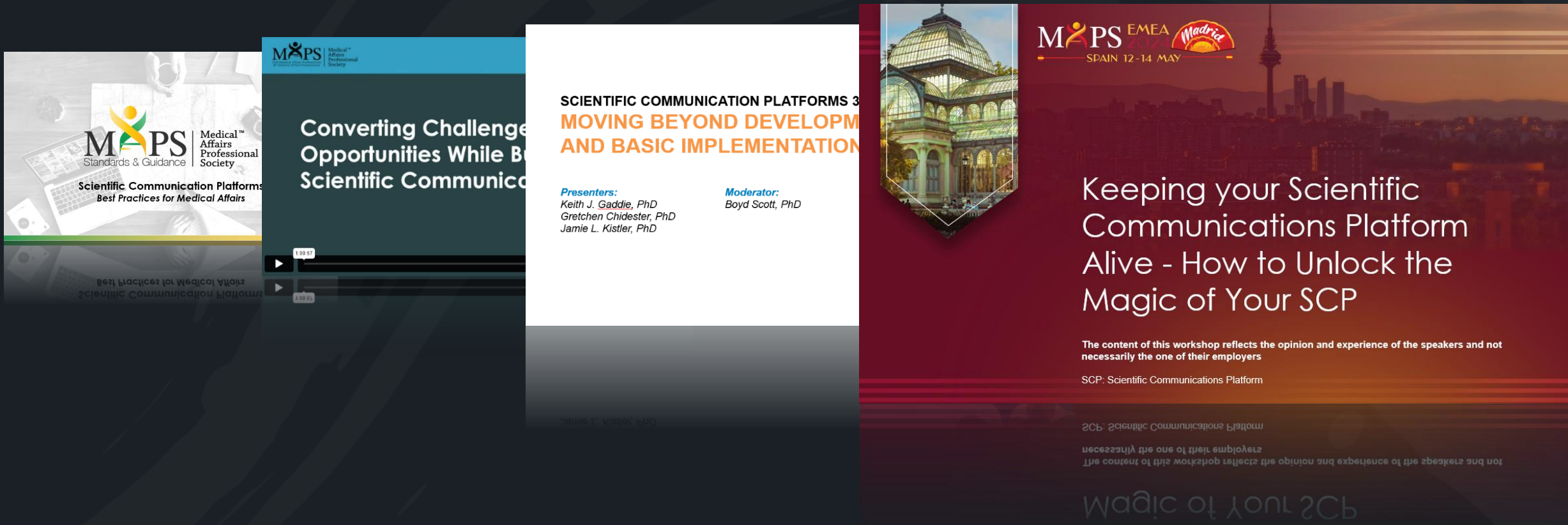


SHARE SUBSCRIBE DESCRIPTION

Scientific Platforms

Innovative solutions that shape clinical practice

Leading the Industry on Best Practices for Scientific Communication Platforms



Scientific Communication Platform Supports Daily Needs Across Functional Teams



CLINICAL

- Scientific statements
- Evidence-generation priorities
- Clinical trial development plan
- Investigator meetings



MEDICAL AFFAIRS

- Publication planning and conference activities
- Standard response documents
- Educational resources
- Field Medical resources



HEOR

- Health outcome development plan
- Publication planning
- Value messages



COMMERCIAL

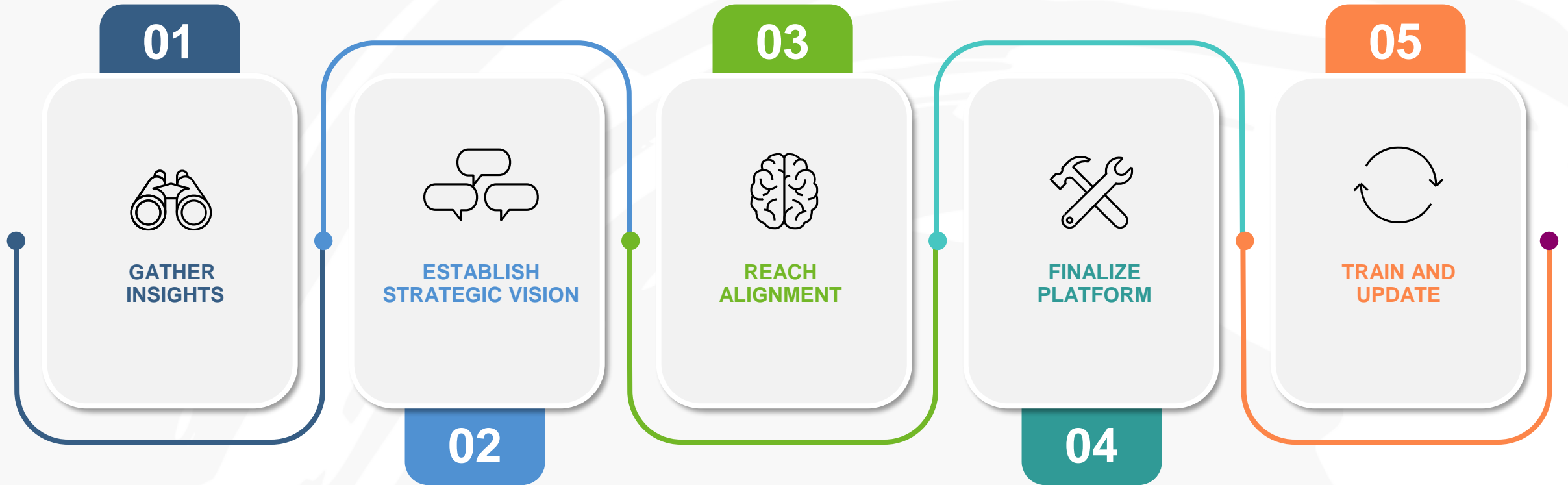
- Brand message platform
- Supporting evidence
- Thought leader and HCP engagement plans
- Speaker training



CORPORATE COMMUNICATIONS

- Press release planning and key topics
- Investor presentations
- Digital and social media

Flexible, Phased Development Process



Core Components of a Scientific Communication Platform

1

COMMUNICATION OBJECTIVES

Prioritized set of objectives that address key educational gaps and opportunities

2

SCIENTIFIC STATEMENTS

Hierarchically organized, standardized, scientifically accurate statements that describe the disease state and product

3

SCIENTIFIC NARRATIVE

Short, high-level summary of scientific statements that provides a clear overview of key narrative elements

4

LEXICON

Common vocabulary for communications that maintains accuracy and integrity while providing guidance on specific language and terminology

Scientific Platforms Organize Scientific Statements Under Key Sections

1 Example Pillars



2 1. Primary statements

Define the overarching direction of each section

1.1. Secondary statements

Make up the individual components of the story for each primary statement

1.1.1 Tertiary statements

Support each secondary statement with scientific data
Serve as a reference tool and a mechanism for gap identification

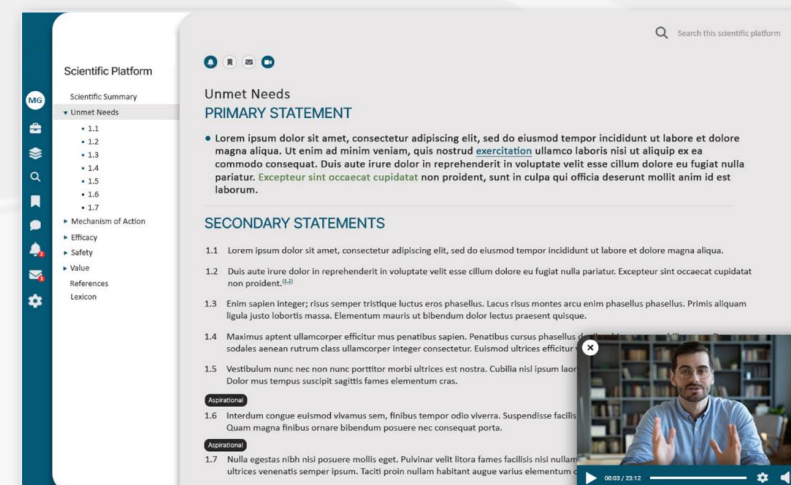
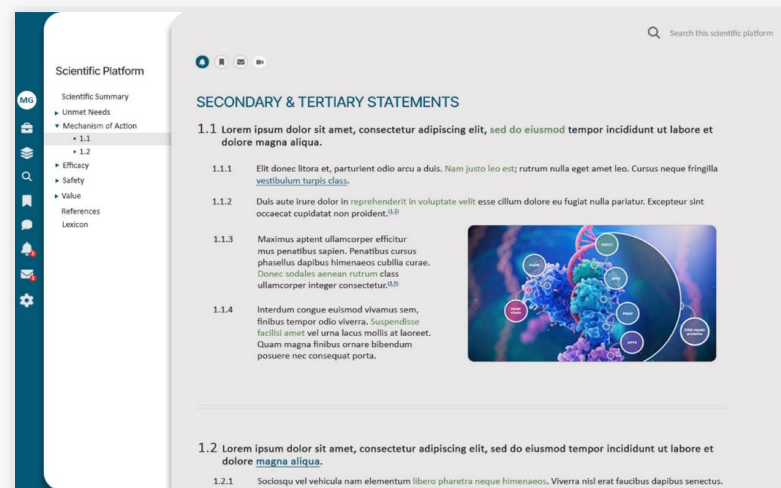
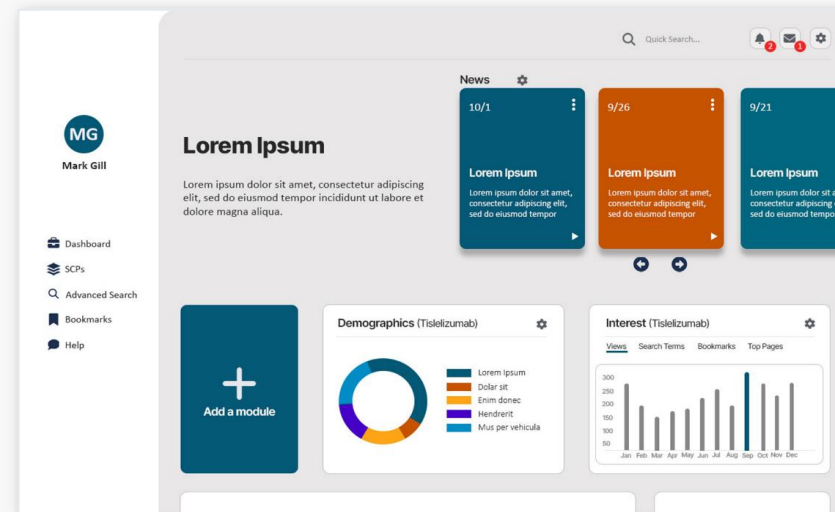
3

“Aspirational” statements in the platform

- Are based on hypotheses and analyses from ongoing or planned clinical trials (ie, it is anticipated that these statements will be supportable in the future)
- Should be modified as necessary as associated data become available
- Should be clearly marked (eg, with an [ASPIRATIONAL] tag instead of a reference) at every appearance

Platform Hosting

- Scientific platforms can be hosted on custom-built frameworks that allow for greater usability and engagement
- Individual logins allow for platforms to have customizable features (eg, bookmarking, alerts)
- Metrics on access and page views (among others) can be collected



Publication Excellence

Innovative solutions that shape clinical practice

Thought Leadership Across Publications

CURRENT MEDICAL RESEARCH AND OPINION
2022, VOL. 18, NO. 4, 875-880
<https://doi.org/10.1080/13637995.2022.2078102>
Article ST-0275/11/2078102
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COMMENTARY

Parallel publication of articles and congress presentations for industry-sponsored research: strategies for success

Kristine Wilhelm Schuler^a, Meera I. Kodukulla^b, Charles I. Rosenblum^c, Natalie Meinhardt^c, Rhyomi C. Sellnow^d and Todd Parker^e

^aGlobal Scientific Communications, Pfizer, Inc, Collegeville, PA, USA; ^bScientific Publications, AstraZeneca, Gaithersburg, MD, USA; ^cGlobal Scientific & Publications Management, Merck & Co., Inc, Rahway, NJ, USA; ^dScientific Services, MedThink SciCom, Cary, NC, USA

ABSTRACT
Recent increases in the practice of parallel publication, during which a peer-reviewed manuscript is published concurrently with the first dissemination of the same key data at a medical congress as a late-breaking abstract, have highlighted substantial value for this method of publication. Parallel publication can increase access to new clinical information for healthcare providers and patients, as well as promote engagement and reach of the publication and presentation. As the practice becomes more common, there is a need for strategies to address the multiple challenges involved in the development process, such as shortened timelines, journal and congress policies, and stakeholder alignment. We surveyed journals, congresses, and publication professionals on the challenges of parallel publication and recommendations for success. Recommendations from journal editors and congress officials included the importance of adhering to timelines and early communication. Insights from a community of publication professionals showed that timelines and the author review process were among the key challenges of parallel publication development and stressed the importance of clear roles and expectations for authors. To provide real-world insights, we present 3 case studies of successful parallel publication development, highlighting the crucial role of journal selection, planning around data

ARTICLE HISTORY
Received 11 April 2022
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KEYWORDS
Parallel publication; simultaneous publication; medical affairs publishing; late-breaking

Check for updates

ISMPP
International Society for Medical Publication Professionals

18TH ANNUAL MEETING OF ISMPP
May 9-11, 2022 | Washington, DC

FUTURE-READY MEDICAL COMMUNICATIONS

Defining Metrics That Matter

Todd Parker
SVP, Managing Director, MedThink SciCom

Jenny Ghihi
Senior Director, Omnichannel Strategy and Innovations, Global Scientific Communications, Pfizer

Neil Adams
Manager, Industry Solutions, North America, Karger Publishers

Content for this presentation reflects the collective experience and opinions of the presenters. It is not intended to represent the past or current views of their companies.

CURRENT MEDICAL RESEARCH AND OPINION
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COMMENTARY

Measuring the impact of scientific publications and publication extenders: examples of novel approaches

Avishhek Pal^a, Wesley Portegies^b, Jennifer Schwin^c, Michael Taylor^d, Tomas J. Rees^e, Sarah Thomas^f, Kim Brown^g, Gareth Morrell^h, Josh Nicholsonⁱ, Brian Falcone^j and Renu Juneja^k

^aNovartis Pharma AG, Basel, Switzerland; ^bMedComms Experts, New York, NY, USA; ^cImmunovant Inc., New York, NY, USA; ^dDigital Science, University of Wolverhampton, Wolverhampton, UK; ^eOxford PharmaGenesis, Oxford, UK; ^fIpsen, Wrexham, UK; ^gNovo Nordisk, Zurich, Switzerland; ^hMadano, London, UK; ⁱScite, Brooklyn, NY, USA; ^jMedThink SciCom, Cary, NC, USA; ^kJanssen, Horsham, PA, USA

ABSTRACT
Different stakeholders, such as authors, research institutions, and healthcare professionals (HCPs) may determine the impact of peer-reviewed publications in different ways. Commonly-used measures of research impact, such as the Journal Impact Factor or the H-index, are not designed to evaluate the impact of individual articles. They are heavily dependent on citations, and therefore only measure impact of the overall journal or researcher respectively, taking months or years to accrue. The past decade has seen the development of article-level metrics (ALMs), that measure the online attention received by an individual publication in contexts including social media platforms, news media, citation activity, and policy and patent citations. These new tools can complement traditional bibliometric data and provide a more holistic evaluation of the impact of a publication. This commentary discusses the need for ALMs, and summarizes several examples – PlumX Metrics, Altmetric, the Better Article Metrics score, the EMPIRE Index, and scite. We also discuss how metrics may be used to evaluate the value of “publication extenders” – educational microcontent such as animations, videos and plain-language summaries that are often hosted on HCP education platforms. Publication extenders adapt a publication’s key data to audience needs and thereby extend a publication’s reach. These new approaches have the potential to address the limitations of traditional metrics, but the diversity of

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Accepted 15 February 2024

KEYWORDS
Altmetrics; article-level metrics; bibliometric indicators; journal impact factor; peer-reviewed publication; publication extender metrics

Check for updates

Optimizing Medical Communications for Rare Diseases

Click to add subtitle

Release Date: June 17, 2020 | Expiration Date: June 18, 2020 (Live); August 31, 2020 (Enduring)
Estimated time to complete activity: 40 minutes

Jointly provided by Postgraduate Institute for Medicine (www.pimed.com) and ISMPP (www.ismpp.org)

16TH ANNUAL MEETING OF ISMPP

Why is data visualization and design so important?

The brain values visual information most of all^{1,2}

90% of the information transmitted to the brain is visual
Human brains process visuals 60,000 times faster than they do text
Infographics are 30 times more likely to be read than plain text

Visuals add credibility²

A University of Cornell study found that if a scientific claim is presented in pure words or numbers, 68% of people will believe that the information is accurate and truthful; however, if you put a simple graph with the claim, the number rises to 97%

¹ Alkhaila S. Machine Learning in Biotechnology and Life Sciences: Build Machine Learning Models Using Python and Deploy Them on the Cloud. Birmingham, UK: Packt Publishing Limited; 2022.
² Johnson JH, Gluck M. Encyclopedia: The Information Revolution in the Little Data You Consume Every Day. Brookline, MA: Bibliomotion; 2016.

Utilizing open social media channels to expand publication reach

Deepa Chari^a, Jenny Ghihi^b, Raj Patel^c, Tony Volkman^d, Scott House^e and Leslie Rose^f
^aPfizer Oncology, New York, NY, USA; ^bMedThink SciCom Inc, Cary, NC, USA

INSIGHTS
A global survey of oncologists and an audit of social media handles suggested that physicians are increasingly utilizing social media to find medical content, including publications; however, medical organizations in pharmaceutical companies are not broadly using social media to highlight company-sponsored publications.

PROJECT OVERVIEW
We launched a medical affairs publications team-led oncology Twitter handle (@PfizerOncMed) with the primary goal of highlighting company sponsored journal articles and conference presentations. Since its inception, the handle has seen a steady organic growth in followers and was associated with a measurable increase in journal article page views despite an ongoing pandemic.

CONCLUSIONS
Social media use by publications teams within medical affairs can help disseminate data to key audiences and expand the reach of sponsored publications.

Presented at 17th Annual Meeting of ISMPP - April 12-14, 2021 - Virtual

Insights Generation Differ Across Development Stages

PRECLINICAL

PHASE 1/2

PHASE 3

PRE-LAUNCH



LANDSCAPE ANALYSIS

How do our data fit into the field?



ANALOGUE ANALYSIS

How have other products addressed similar challenges?



INFORMATION SOURCES AUDIT

How will our target audience find our publications?



COMPETITOR ANALYSIS

What is being published about other products in this therapeutic area?



INTERNAL INSIGHT ANALYSIS

Are all applicable data being published?

Nontraditional analyses (eg, surveys, social listening, DOL identification)
can answer specific questions beyond peer-reviewed publications

Excellence in Publication Support From Preclinical to Real-world Evidence

- Clinical (primary, secondary)
- Trial design
- Review articles, including SLRs
- Delphi consensus papers
- HEOR/RWE
- Qualitative studies
- Pharmacology
- Preclinical and discovery



THE NEW ENGLAND JOURNAL OF MEDICINE

ORIGINAL ARTICLE

Axatilimab in Recurrent or Refractory Chronic Graft-versus-Host Disease

D. Wolff, C. Cutler, S. J. Lee, I. Pusic, H. Bittencourt, J. White, M. Hamada, S. Arai, A. Salhotra, J. A. Perez-Simon, A. Alousi, H. Choe, M. Kwon, A. Berni, I. Kim, G. Socie, S. Chhabra, V. Radojic, T. O'Toole, C. Tian, P. Ordentlich, Z. DeFilipp, and C. L. Kitko, for the AGAVE-201 Investigators*

ABSTRACT

BACKGROUND

Colony-stimulating factor 1 receptor (CSF1R)-dependent monocytes and N phages are key mediators of chronic graft-versus-host disease (GVHD), a long-term complication of allogeneic hematopoietic stem-cell transplantation. CSF1R-blocking antibody axatilimab has shown promising clinical activity in GVHD.

METHODS

In this phase 2, multinational, pivotal, randomized study, we evaluated axati at three different doses in patients with recurrent or refractory chronic GVH patients were randomly assigned to receive axatilimab, administered intravenously at a dose of 0.3 mg per kilogram of body weight every 2 weeks (0.3-mg dose group) or at a dose of 1 mg per kilogram every 2 weeks (1-mg dose group), or at a dose of 3 mg per kilogram every 4 weeks (3-mg dose group). The primary end point was all response (complete or partial response) in the first six cycles; the key secondary end point was a patient-reported decrease in chronic GVHD symptom burden assessed by a reduction of more than 5 points on the modified Lee Symptom Scale (range, 0 to 100, with higher scores indicating worse symptoms). The primary end point would be met if the lower bound of the 95% confidence interval exceeded 30%.

RESULTS

A total of 241 patients were enrolled (80 patients in the 0.3-mg dose group, 81 in the 1-mg dose group, and 80 in the 3-mg dose group). The primary end point was met in all the groups; an overall response was observed in 74% (95% confidence interval [CI], 63 to 83) of the patients in the 0.3-mg dose group, 67% (95% CI, 55 to 77) of the patients in the 1-mg dose group, and 50% (95% CI, 39 to 61) of the patients in the 3-mg dose group. A reduction of more than 5 points on the modified

Original Reports | Hematologic Malignancy

Menin Inhibition With Revumenib for KMT2A-Rearranged Relapsed or Refractory Acute Leukemia (AUGMENT-101)

Chayen C. Issa, MD, PhD, Ibrahim Abbasi, MD, Michael J. Thomas, MD, John DiPersio, MD, PhD, Martha Andronis, MD, James S. Blum, MD, PhD, Gabriel N. Mazarin, MD, Alexander Patel, MD, PhD, David S. Dickerson, MD, PhD, Christine M. McKinnon, MD, PhD, Elie Teicher, MD, PhD, C. Michel Zwaan, MD, PhD, Carolyn S. Grims, MBBS, PhD, FRACP, FRCPA, Richard Stone, MD, PhD, Paul J. Storer, MD, PhD, Ismael Martinez, MD, PhD, Matthew Greenman, MBBS, FRACP, FRCPA, Henna Shukla, MD, PhD, Daniela Cuguen, MD, PhD, Tibor Kovacs, MD, PhD, Yu Gu, PhD, Rebecca G. Bagley, MA, Kate Madigan, MD, PhD, Yelov Chudnovsky, PhD, Huy Van Nguyen, PhD, Nicole Molteni, MD, PhD, and Elyan M. Stein, MD, PhD

DOI: 10.1182/blood-2023-12-126000

ABSTRACT

PURPOSE Revumenib, an oral, small molecule inhibitor of the menin-lysine methyltransferase 2A (KMT2A) interaction, showed promising efficacy and safety in a phase 1 study of heavily pretreated patients with KMT2A-rearranged (KMT2Ar) acute leukemia. Here, we evaluated the activity of revumenib in individuals with relapsed/refractory (R/R) KMT2Ar acute leukemia.

METHODS AUGMENT-101 is a phase III, open-label, dose-escalation and expansion study of revumenib conducted across 22 clinical sites in five countries (ClinicalTrials.gov identifier: NCT04655599). We report results from the phase II, registration-enabling portion. Individuals age ≥ 18 years with R/R KMT2Ar acute leukemia or with AML and nucleophosmin 1 (NPM1) mutation were enrolled. Revumenib was administered once every 12 hours, at 161 mg (15 mg/m² if weight ≤ 60 kg) with a strong cytochrome P450 inhibitor, in 28-day cycles. The primary end points were the rate of complete remission (CR) or CR with partial hematologic recovery (CR + CRh) and safety. In a prespecified interim analysis, safety was assessed in all KMT2Ar-treated patients; efficacy was assessed in those with centrally confirmed KMT2Ar. The separate NPM1 cohort of the trial is ongoing.

RESULTS From October 1, 2021, to July 24, 2023, N = 94 patients (median [range] age, 57 [13–75] years) were treated. Grade 3 adverse events included febrile neutropenia (37.2%), differentiation syndrome (16.0%), and QTc prolongation (13.8%). In the efficacy-evaluable patients (n = 57), the CR + CRh rate was 22.8% (95% CI, 11.7 to 35.8), exceeding the null hypothesis of 10% (P = .0036). Overall response rate was 43.2% (95% CI, 31.6 to 55.6), with 15 of 12 patients (62.5%) having no detectable residual disease.

CONCLUSION Revumenib led to high remission rates with a predictable safety profile in R/R KMT2Ar acute leukemia. To our knowledge, this trial represents the largest evaluation of a targeted therapy for these patients.

INTRODUCTION

Acute leukemia arises from genetic alterations in hematopoietic cells that lead to a block in differentiation during hematopoiesis and unbridled cellular proliferation.¹ Rearrangements of the lysine methyltransferase 2A (KMT2A) gene, located on chromosome locus 11q23, occur in up to 10% of acute leukemias in children and adults, with higher incidence in certain types of infant and childhood acute leukemia.^{2–4} AML, ALL, or mixed phenotype acute leukemia (MPAL) with KMT2A rearrangements (KMT2Ar) are

associated with drug resistance and poor prognosis.^{5,6} The proportion of patients who achieve remission after three or more lines of therapy is <10% in adults.⁷

KMT2Ar lead to oncogenic fusion proteins that upregulate leukemogenic homeobox (HOX) genes and disrupt DNA-binding cofactor Meis homeobox 1 (MEIS1).^{8–11} The scaffolding protein menin is a critical mediator of the pathogenesis of KMT2Ar leukemia. Menin is essential for binding of the KMT2A protein complex to the HOX gene promoter.¹² In preclinical models, disruption of the menin-KMT2A interaction

ACCOMPANYING CONTENT

Understanding the Pathway, p 87

Appendix

Data Sharing Statement

Data Supplement

Protocol

Published May 1, 2024

Published August 9, 2024

J Clin Oncol 42:15-24

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DOI: 10.1200/JCO.2023.12.126000

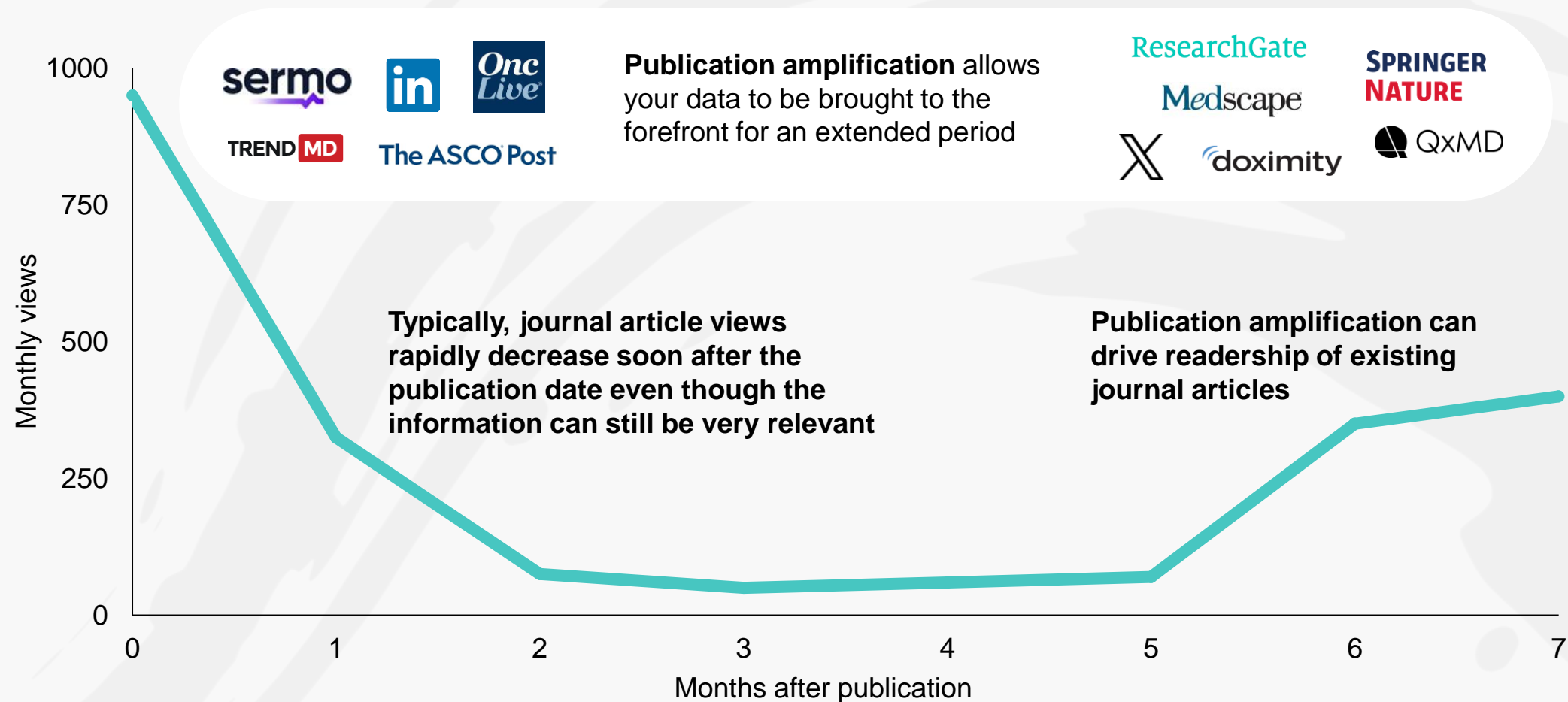
See Online Article

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ASCO Journal of Clinical Oncology

ascopubs.org/journal/jco | Volume 42, Issue 1 | 75

Publication Amplification Improves Impact and Reach



Novel Channels for Publication Amplification

Owned social channels

X (formerly Twitter), LinkedIn

Congress content,
publication enhancements,
publication amplification,
disease state information,
National Day posts

Janssen Oncology Medical Affairs

@JanssenUSOncMed

Pfizer Oncology Medical

@PfizerOncMed

Novartis US Medical

@NovartisUSMed

Eisai Oncology Medical

@EisaiGlobalOnc

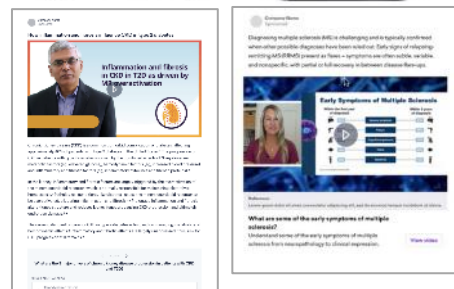
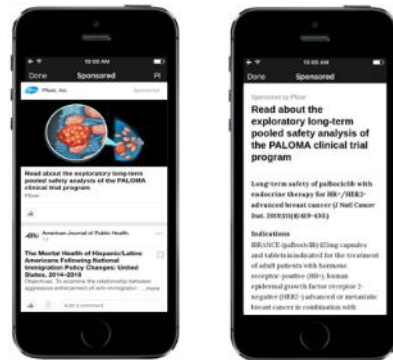
Lilly Medical US

@LillyMedical

Third-party social channels

Doximity, Sermo

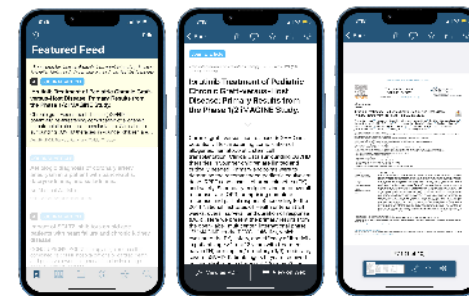
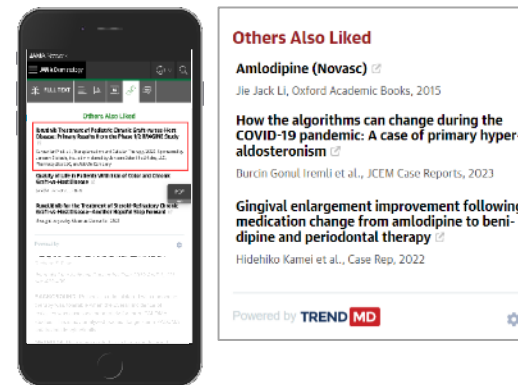
Publication summaries,
RWE summaries,
disease state information



Data dissemination channels

TrendMD, QxMD

Publication amplification



Association/Publisher partnerships

ASCO Post (Harborside), Medscape



Advisory Boards

Innovative solutions that shape clinical practice

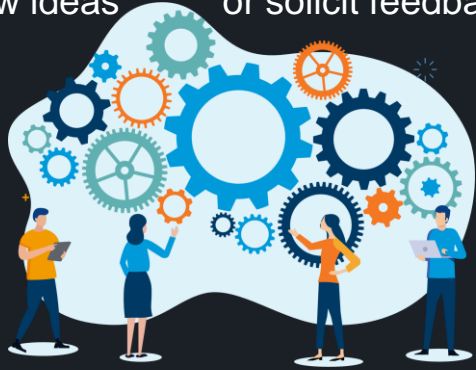
Full-service Meeting Support Provides Turnkey Solutions

MEETING OBJECTIVES AND FORMAT

START-UP	CONTENT	LOGISTICS	WRAP-UP
<ul style="list-style-type: none">• Rationale document• Opinion leader identification and recruitment• Agenda and premeeting materials	<ul style="list-style-type: none">• Discussion guide• Slide material, case studies, other graphics• Attendance and meeting notes• Session rehearsals• Breakout group facilitation	<ul style="list-style-type: none">• Coordination with logistics team (for large meetings)• Venue management and opinion leader travel and honoraria (for small meetings)• Opinion leader document completion and filing (eg, W-9s, CVs)	<ul style="list-style-type: none">• Executive summary• All paperwork, records, TOV reporting, and project financials brought to closure

Excellence in Advisory Boards: Using Multiple Mechanisms to Engage Thought Leaders

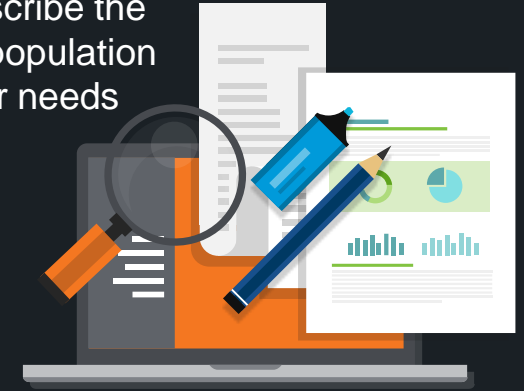
Custom-crafted breakouts can allow thought leaders to brainstorm new ideas or solicit feedback



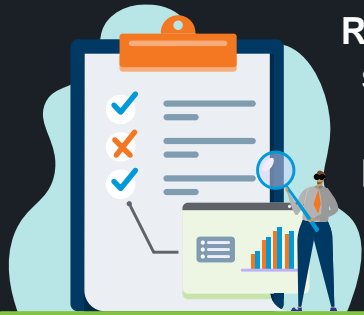
Patient journeys can be used as the basis for discussing clinical decision-making



Patient case studies can help describe the patient population and their needs



Ranking and scoring exercises can be used to prioritize needs (eg, data generation, communication themes)



Compare/Contrast assessments and “friendly debate” can help us understand both sides of a story

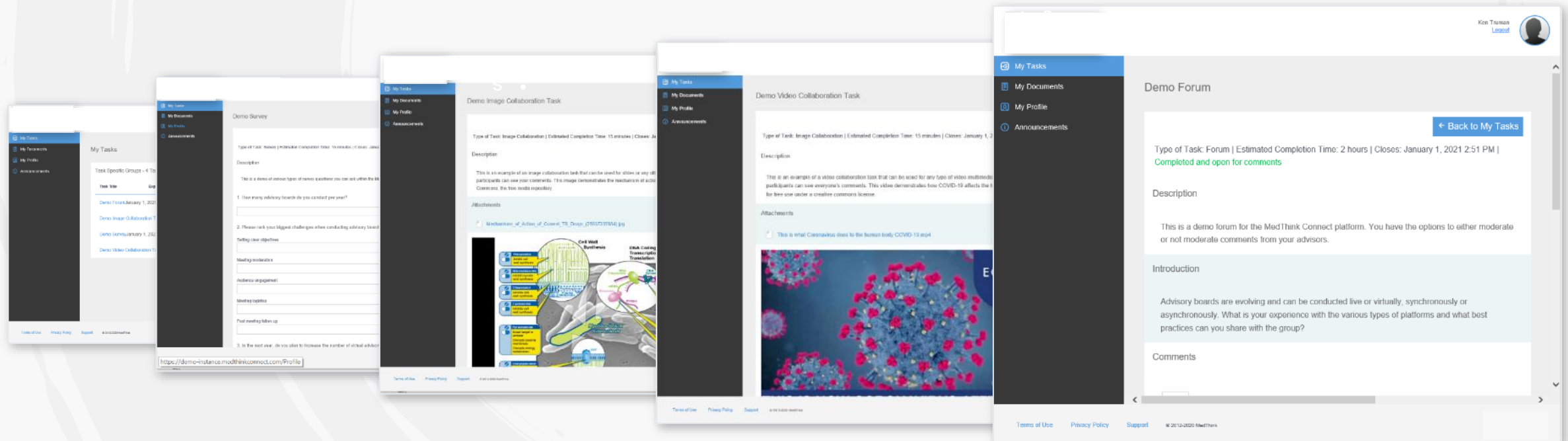


Delphi consensus meetings can be used to generate a citable peer-reviewed manuscript on a topic

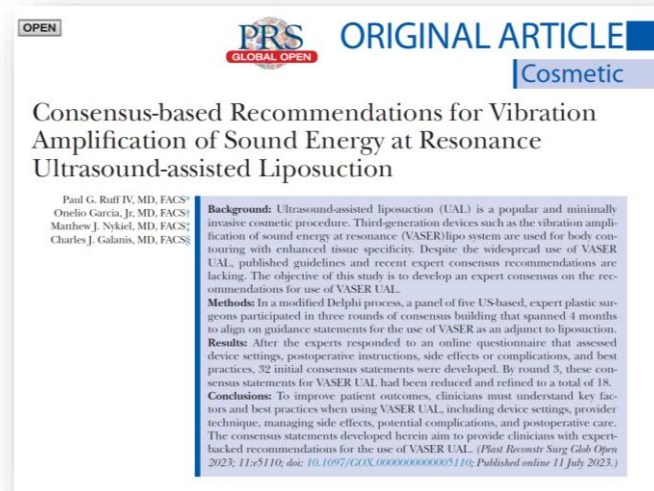


Asynchronous Tools for Flexible, Scalable Insight Generation

Fingerpaint Connect™ is a secure, password-protected, compliant, white-labeled, and turnkey solution to solicit feedback through multiple mechanisms (eg, surveys, image collaboration, forum discussions, videos)



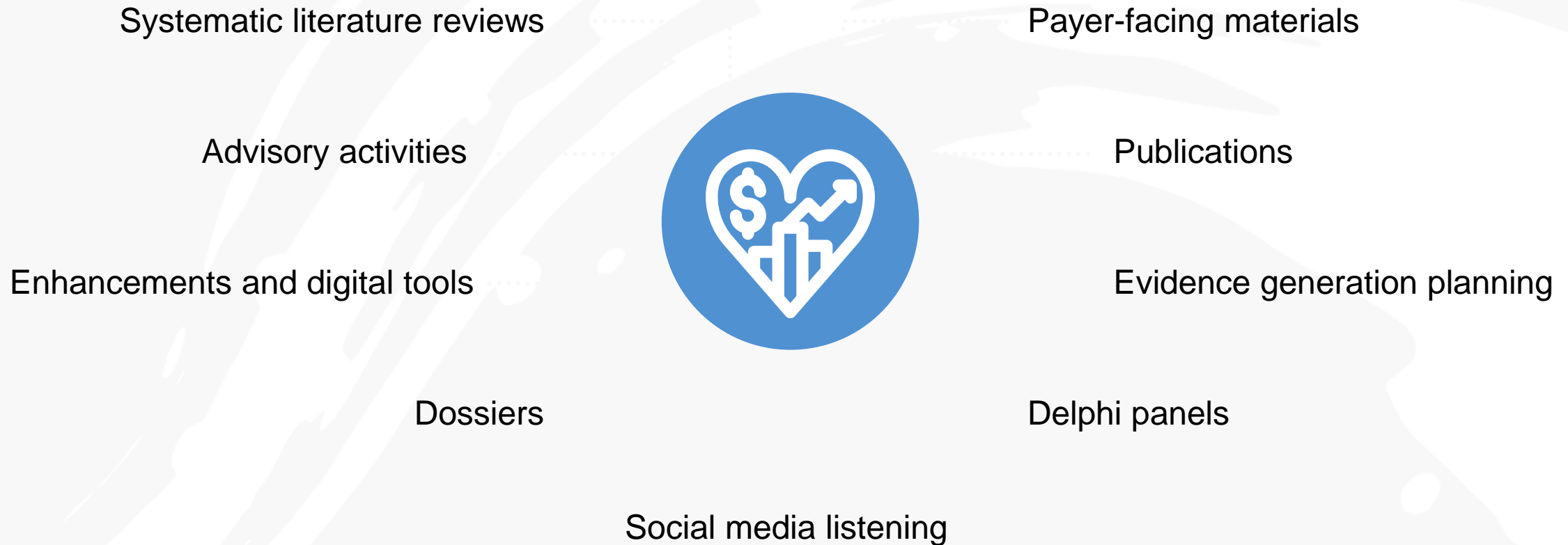
Delphi Consensus Panels Transform Expert Opinion Into a Citable Publication



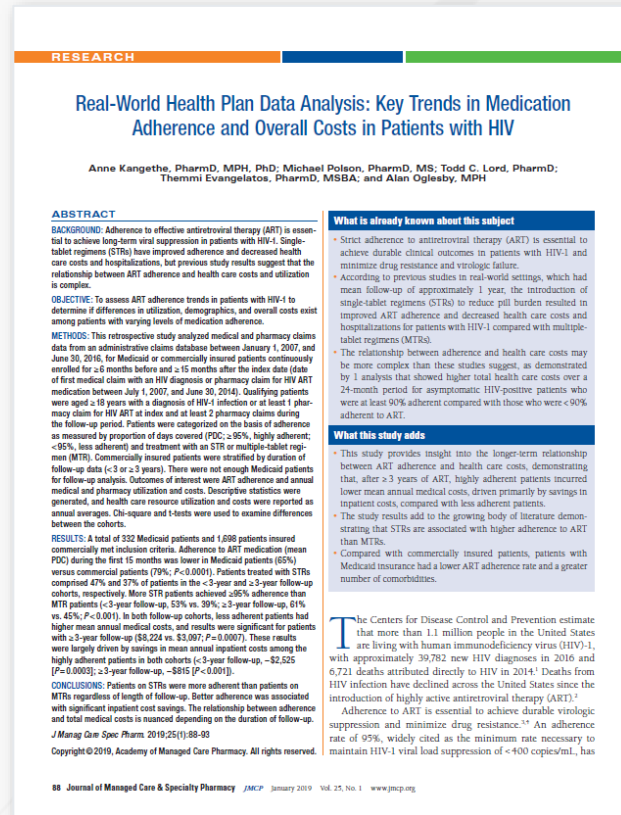
HEOR & RWE

Innovative solutions that shape clinical practice

Supporting Your HEOR/RWE Communications Needs to Provide a Complete Value Proposition



Breadth of Experience in HEOR and RWE Publications



*Journal of Managed Care and
Specialty Pharmacy*

Burden of illness/resource utilization

Claims database studies

Cost-effectiveness modeling

Large-scale surveys

Match-adjusted indirect comparison studies

Patient-reported outcomes

Registry studies

Systematic literature reviews

HEOR/RWE-Specific Infographics and Visual Abstracts Help Explain Key Topics to a Broader Audience



RCT Studies

Can the drug work?

RCTs provide information on the efficacy of a drug in a controlled setting^{1,2}



Designed to show causality

Patients are randomly assigned to treatment or comparator



Selected patient population with strict inclusion and exclusion criteria

Protocol-driven study with conduct specifications (eg, required follow-up visits, limited concomitant medications)



Prospective collection of data derived from prespecified, uniformly assessed variables and endpoints (eg, specific biomarkers or patient-reported outcomes at a specific time)

Significant differences between trial population and real-world population limit generalizability of trial results



Only 3.2% of breast cancer patients participate in RCTs³



RWE Studies

Does the drug work?

RWE provides information on the effectiveness of the drug in the everyday clinical setting^{4,5}



Can show associations, not determine causality

Patients are not randomized

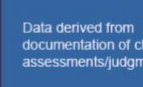


Heterogeneous patient populations

Broad set of clinical, patient-reported, and economic measures to assess real-world outcomes



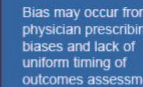
Routine clinical practice; intervention is at the discretion of treating physician



Data derived from documentation of clinical assessments/judgment



Treatment studied under conditions where there is variability in patient care and patient adherence



Bias may occur from physician prescribing biases and lack of uniform timing of outcomes assessment

RWE studies can be used to gather additional patient data (eg, those unable to be evaluated in RCTs)^{6,7}

Real-World Comparison of Time to Next Treatment for Patients With Chronic Lymphocytic Leukemia Initiated on First-line Treatment With Ibrutinib Versus Acalabrutinib

Ryan Jacobs,¹ Xiaoxiao Lu,² Bruno Emond,³ Laura Morrison,⁴ Frederic Kinkade,⁵ Patrick Lefebvre,⁶ Marie-Hélène Lefebvre,⁷ Wasilulla Khan,⁸ Linda Wu,⁹ Zaina P. Qureshi,¹⁰ Moshe Yair Levy¹¹

¹Astrum Health Levine Cancer Institute (Hematology), Charlotte, NC, USA; ²Janssen Scientific Affairs, LLC, Horsham, PA, USA; ³Analysis Group, Inc., Montreal, Quebec, Canada; ⁴Taylor Scott & White Research Institute, Dallas, TX, USA

BACKGROUND

The clinical benefit of ibrutinib as 1L treatment for CLL/SLL has been established in multiple clinical trials and 8+ years of comprehensive RW experience across all populations, including high-risk patients

Open-label comparative studies of ibrutinib vs acalabrutinib have been conducted only for patients with relapsed/refractory CLL/SLL

In the absence of clinical trial data, TTNT is a well-established measure in RW data and a clinically meaningful endpoint to determine progression in RW clinical practice

OBJECTIVE

To describe and compare TTNT among US patients with CLL/SLL initiated on 1L ibrutinib or acalabrutinib in RW clinical practice

RATIONALE

There are currently no head-to-head studies in the 1L setting comparing BTK inhibitors, highlighting the critical need to leverage RW clinical experience to support optimized treatment selection

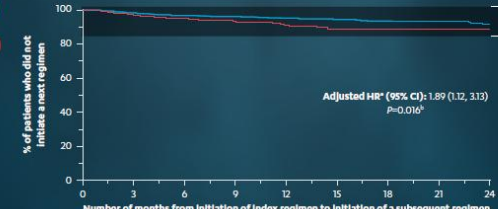
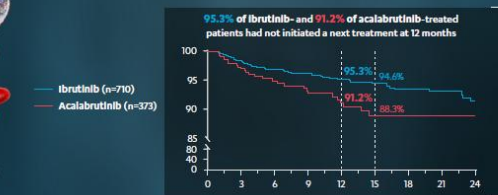
METHODS

Acentrus, a health systems solution used by 128,000 prescribers/physicians containing inpatient and outpatient data from 27 sites across 15 US states, was used to identify patients initiating 1L treatment with ibrutinib or acalabrutinib. TTNT was defined as the time from the initiation of ibrutinib or acalabrutinib to the initiation of the next treatment or addition of another treatment to the index regimen.

RESULTS

Baseline Characteristics

Ibrutinib (n=710)			Acalabrutinib (n=373)		
Mean age	71.5 years		Mean age	72.4 years	
Male	63.3%		Male	63.7%	
Female	36.7%		Female	36.3%	
Mean Quan-CCI + SD [median]			Mean Quan-CCI + SD [median]		
3.1 ± 1.7 [2.0]			3.0 ± 1.7 [2.0]		
Insured	73.8%		Insured	73.7%	
Unknown	26.2%		Unknown	26.3%	



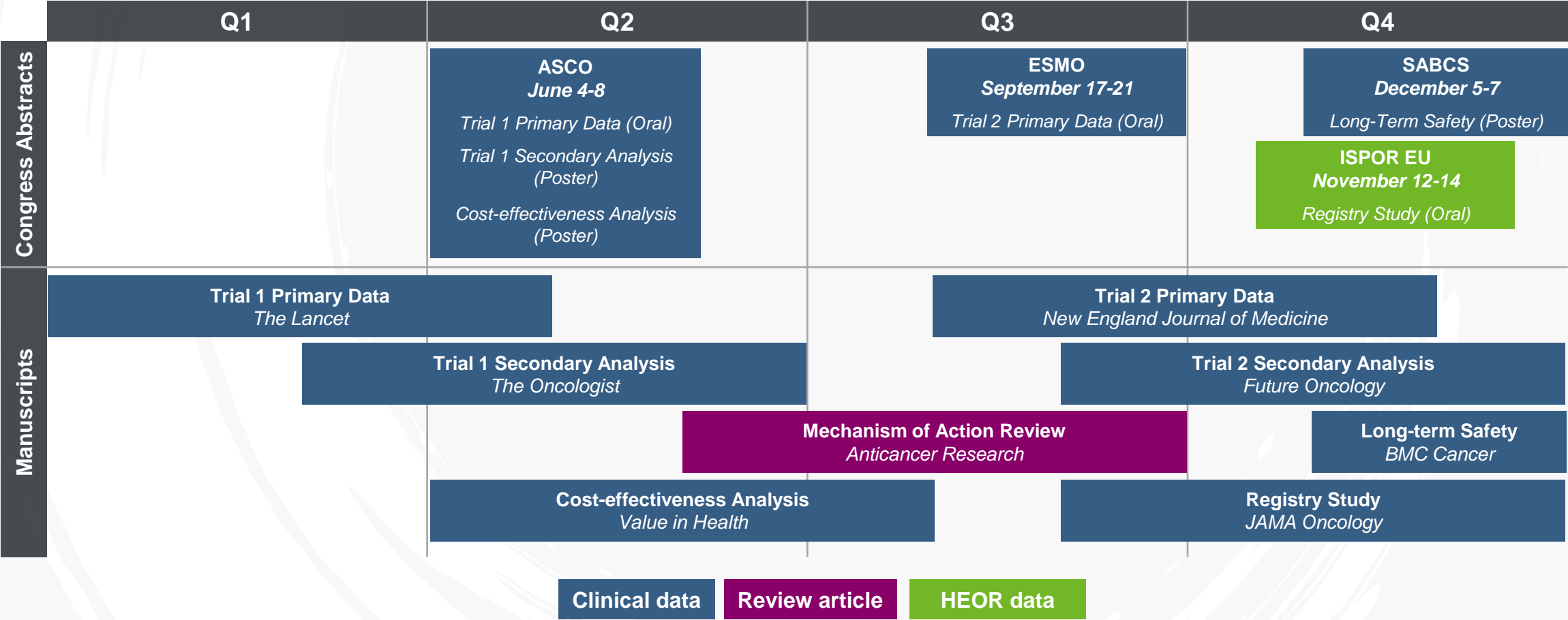
Patients at risk, n	0	3	6	9	12	15	18	21	24
Ibrutinib	710	640	576	521	461	385	304	255	144
Acalabrutinib	373	338	245	204	158	107	88	52	27

Among treatment-naïve patients with CLL/SLL, patients treated with 1L acalabrutinib were 89% more likely to start a next treatment than those treated with 1L ibrutinib[‡]

*1L, first-line BTK; BTK, B-cell tyrosine kinase; CCI, Charlson comorbidity index; CLL, chronic lymphocytic leukemia; HR, hazard ratio; HR, real-world; SLL, small lymphocytic leukemia; TTNT, time to next treatment.

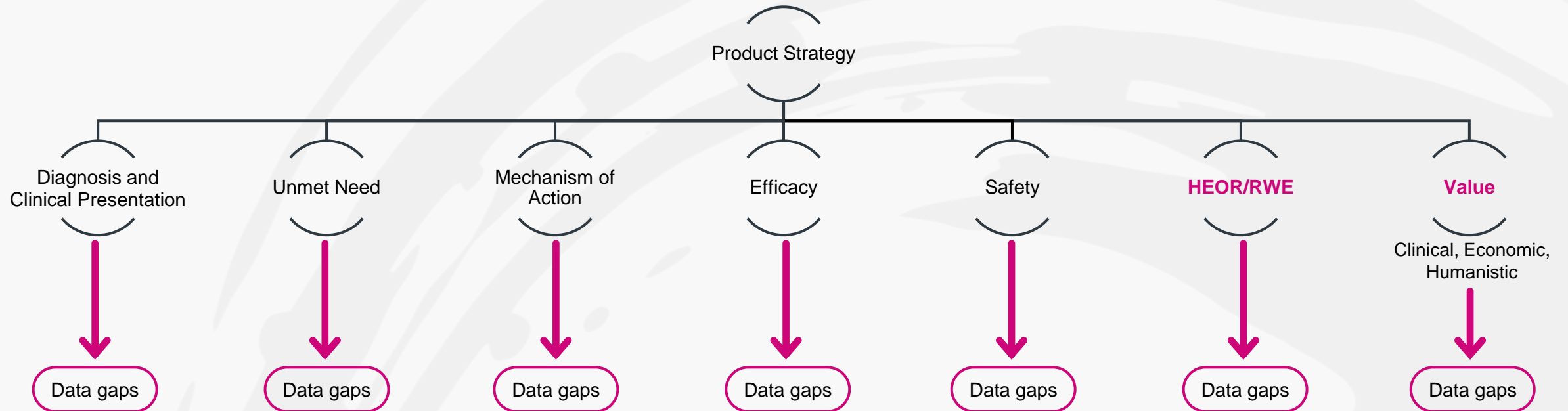
[†]Adjusted HR was calculated on a Cox proportional hazard model, was adjusted for age, gender, region, race, year of index date, Quan-CCI, chronic pulmonary disease, peripheral vascular disease, hypertension, atrial fibrillation, venous thromboembolism, use of immunosuppressants, and use of antiplatelets. [‡]Robinson 95% CI: 1.89 (1.12, 3.13) after adjusting for baseline characteristics. No statistically significant differences were found between ibrutinib and acalabrutinib cohorts for the baseline characteristics presented above. The comparison of baseline characteristics between cohorts was conducted using tests for continuous variables and chi-square tests for categorical variables.

Integration of HEOR Publications Into Overall Publication Planning Process



MEDTHINK CAPABILITIES

Integrated Communication Platforms and Evidence Generation Plans Illustrate the Existing and Emerging Data Landscape for an Asset




Invariably, gaps in the data are identified in the process of developing a scientific communications platform. These gaps can be noted for clinical and HEOR/RWE evidence generation activities and to show platform users how the brand strategy will evolve.

This makes the platform less of a static “snapshot” in time and a more dynamic, forward-looking document

Training

Innovative solutions that shape clinical practice

OUR APPROACH TO TRAINING



Effective training
is a key driver of
business success

Improved Customer Satisfaction

Well-trained employees deliver better service, leading to a **20% increase in customer satisfaction rates**

Enhanced Employee Performance

Effective training programs lead to a **37% increase in productivity**

Fostering Innovation

Companies with a strong learning culture are **92% more likely to innovate**

Increased Employee Retention

94% of employees said they **would stay longer** at a company if it invested in their learning and development

Adaptability to Change

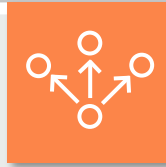
Training equips employees to **adapt to new technologies**, allowing businesses to respond to industry changes

Four Pillars Guide Our Training Philosophy



Process

- Training is an ongoing journey rather than a one-time event
- Clear expectations and accountability are fostered through collaboration with Marketing, Sales, Medical Affairs, and MSL teams
- Well-defined schedule makes self-guided learning easy



Delivery

- Must be interactive and engaging, aligned with adult learning principles
- Content is divided into digestible and modular sections for efficient microlearning implementation



Reinforcement

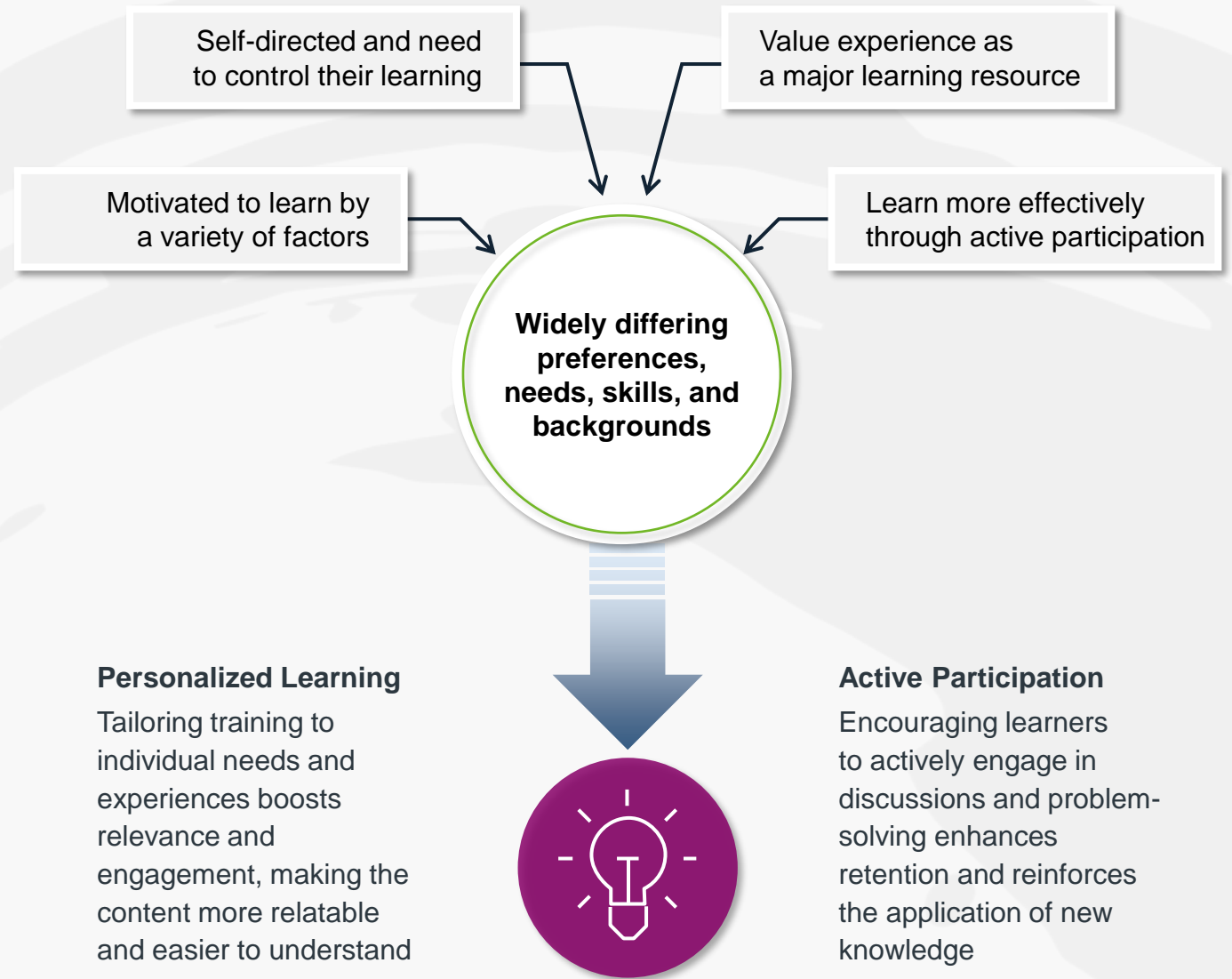
- Repurposing content strengthens retention and maximizes budget efficiency
- Managers are empowered and supported to coach effectively and drive the achievement of learning objectives



Measurement

- Assessment is based on Kirkpatrick's Four Levels of Evaluation, starting with reactions and learning outcomes
- Behavioral changes are evaluated to ensure practical application
- Tangible results and ROI are measured for business impact

Active Involvement



Adult Learning
Principles Increase
Engagement and
Reinforce Learning

Blended Learning Solutions: Aligns to How Adults Learn Best



Medical Social Media

Innovative solutions that shape clinical practice

Leading the Industry in Medical Social Media

Overview Gathering Insights Launching the Handle Measuring Success Conclusions #46

Utilizing open social media channels to expand publication reach

Dheepa Chari*, Jenny Ghil*, Raj Patel*, Torrey Volkman*, Scott House* and Leslie Rotz*
*Pfizer Oncology, New York, NY, USA; *MedThink SciCom Inc, Cary, NC, USA

INSIGHTS
A global survey of oncologists and an audit of social media handles suggested that physicians are increasingly utilizing social media to find medical content, including publications. However, medical organizations in pharmaceutical companies are not broadly using social media to highlight company-sponsored publications.

PROJECT OVERVIEW
We launched a medical affairs publications team-led oncology Twitter handle (@PfizerOncMed) with the primary goal of highlighting company-sponsored journal articles and conference presentations. Since its inception, this handle has seen a steady organic growth in followers and was associated with a measurable increase in journal article page views despite an ongoing pandemic.

CONCLUSIONS
Social media use by publications teams within medical affairs can help disseminate data to key audiences and expand the reach of sponsored publications.

Presented at 17th Annual Meeting of ISMPP • April 13-14, 2021 • Virtual

Previously live [Edit Video](#)

Are HCPs Leaving X? Exploring Shifts in the Medical Social Media Landscape

Event by MedThink SciCom

Thu, Jun 20, 2024, 11:00 AM - 12:00 PM (your local time)

Presented at 20th Annual Meeting of ISMPP • April 29-May 1, 2024 • Washington, DC

Are HCPs leaving X? Analyzing the evolving social media landscape

Ken Truman*, Leslie Rotz* and Brittney LoPresti*
*MedThink Inc, Raleigh, NC, USA
Presenting Author: Leslie Rotz; lrotz@medthink.com

INTRODUCTION

- Healthcare professional (HCP) channel preferences for clinical information are important for pharmaceutical companies to understand, as they inform where and how to engage with this audience.
- Although corporate communications and commercial colleagues have been leveraging X (formerly known as Twitter) for many years, Medical Affairs has just recently begun to adopt X as a platform for data dissemination and scientific exchange.

Number of Medical Affairs handles on X by year

Year	Number of handles
2020	9
2021	15
2022	19
2023	26

RESULTS

HCP Evolving Content-Generation Activities

Number of HCP X posts* per year

Year	Number of posts	% Change
2019	134,086	-
2022	164,926	+23%
2023	184,717	+12%

October 2023 (Formerly known as Twitter)

After annual X post increases from HCPs from 2019-2023, a shift occurred with post declines in 2022 and 2023.

Total posts by the GlobalData-curated list of 512 HCPs decreased from 134,086 in 2019 to 75,243 in 2023.

HCP Presence on Mastodon and Bluesky

Percentage of DOIs with open accounts (N=512)

Mastodon as of Q2 2023: 11%

Bluesky as of MAY 2024: 10%

A small percentage of the 512 HCPs included in the analysis had opened accounts on Mastodon (11%) and/or Bluesky (10%).

Platform presence comparison

When identifying which of these 512 HCPs were opening profiles on new platforms, there was a small percentage (5.2%) identified who created accounts on both Mastodon and Bluesky.

Platform presence comparison

Mastodon and Bluesky: 0.3%
Mastodon only: 0.6%
Bluesky only: 0.6%
X-only user: 85.5%

CONCLUSIONS

- While X post volume from HCPs declined by 59% in the past 2 years, only a small percentage have created accounts on Mastodon and/or Bluesky as an alternative.
- Qualitative feedback does not strongly indicate a preference for departing X, but instead, increased scrutiny on what content is shared on that channel and how often.
- This nuanced narrative emphasizes ongoing vigilance in monitoring dynamics to inform pharmaceutical communication strategies effectively, especially concerning channels not included in this analysis.
- The key to an informed channel mix strategy is to identify not just where HCPs have accounts but where they are actively consuming, sharing, and engaging with medical content.

DISCLAIMER: Information presented reflects the personal knowledge and opinions of the faculty and does not necessarily represent the position of their current or past employers.

DISCLOSURES: KY, LR, and BL are employees of MedThink Inc.

ACKNOWLEDGMENTS: Cultural assistance was provided by Eric Rietveld (MedThink SciCom); graphical support was provided by Amy Overman (MedThink SciCom).

MSPS Medical Social Presence Strategy

A Step-by-Step Guide to Maximizing Your Medical Affairs Social Media Presence

Moderator: Scott House, PhD
*Pfizer Oncology, New York, NY, USA

Speaker: Jennifer Galt, MS, CMP
*Pfizer Oncology, New York, NY, USA

Speaker: Leslie Rotz
*Pfizer Oncology, New York, NY, USA

Linked in

ELEVATE YOUR AVE CHANNELS

LinkedIn

Spotify

20 YEARS OF INDUSTRY LEADERSHIP

Mastering Social Media for Medical Affairs

May 17, 2023

Many pharmaceutical companies have benefited from social media, but not all. The key to an informed channel mix strategy is to identify not just where HCPs have accounts but where they are actively consuming, sharing, and engaging with medical content.

Gain Insights From Social Listening



EVENT-DRIVEN SOCIAL LISTENING

Determines the overall perceptions and topics of discussion around specific events (eg, a key conference presentation)



CONTINUOUS SOCIAL LISTENING

Identifies key topics of discussion over a given time window and how perceptions are changing over time



OL-TARGETED SOCIAL LISTENING

Identifies what known OLs are saying on social media in general or on a certain topic



DOL IDENTIFICATION

Determines who is driving the conversation around a device or therapeutic area on social media

Always assess channel relevance for a specific audience before conducting any social listening analyses

Social Media Channel Strategy and Engagement



LANDSCAPE ANALYSIS

Determines how your competitors use social media and how your audience interacts with content



CHANNEL STRATEGY & PROCESS

Defines campaign framework, editorial calendar planning, standard responses, and funnel for content creation and approval



COMPLIANCE CONSIDERATIONS

Packages FDA guidelines with proposed SOPs and example content to gain MLR alignment



ONGOING OPTIMIZATIONS

Aligns measurable data with key objectives and plans for future expansion

What Does the Future Hold in Store?

Innovative solutions that shape clinical practice

THE FUTURE

Redefining Healthcare Communications Through Continuous Learning

We don't just keep up with change—we anticipate it, immerse ourselves in it, and translate it into groundbreaking medical communications

Our Approach

1

AI-Powered Insight Engine

Continuously analyzing global health trends, patient behaviors, and HCP preferences

2

Predictive Analytics

Anticipating market shifts before they happen

3

Creative Amplification

Earning our audience's attention because our work truly gets them

What Does the Future Hold for Our Offerings?

Focus on Artificial Intelligence

Keeping pace
with new
developments in
artificial intelligence



Enhancing our existing proprietary, secure generative AI platform with the latest models and agentic solutions

Exploring new AI platforms that allow us to **create content faster and more cost-effectively**

Exploring how AI can **allow us to ask “bigger questions”**
(eg, more expansive systematic literature reviews, deeper gap analyses)

Creating novel AI-based solutions to meet specific client needs

Enhancing communication of data through AI platforms using generative engine optimization

THE FUTURE

What Does the Future Hold for Our Offerings?

Other New or Expanded Offerings



Communication Innovations

From manuscripts that adapt to emerging data to living graphics that unpack the story, the tools we use to communicate scientific information are transforming...with us in the lead



Modular Content

Medical Affairs will begin to be able to realize the true power of omnichannel communications when modular content creation and approval becomes the norm. Let us be your partner on that journey



True Expert Consulting

Existing consulting firms do not understand Medical Affairs, providing recommendations that need to be patched. We get it right the first time and are looking to expand that offering further



THE FUTURE

Join Us on the Journey!

Bring us your communications
challenge and let us partner with you!

Proven experience, future-focused: With 20+ years of experience solving complex challenges for companies of all sizes, we bring a legacy of innovation—now infused with the power of AI and emerging technologies

More than a partner—a co-creator: Whether as strategic thought partners, beta collaborators, or rapid prototypers, we tailor every solution to your evolving needs and vision

Always bringing what's next: We proactively reconnect with you throughout the year to share cutting-edge ideas, tools, and approaches—especially those aligned to your current and future communication goals