Top Story

ThinkTPP℠: Rethinking Target Product Profile Testing and the Customer's "Path to Purchase"

Why Identifying the Barriers to Adoption Is More Critical than Identifying Utilization Drivers in New Product Assessments

By Noah M. Pines and William Leopold, ThinkGen

Conducting Reliable TPP Testing is Much Harder than It Appears

Today's pharmaceutical companies are sitting on an unprecedented, robust pipeline of potential treatments. As a result, we are being asked to conduct more target product profile (TPP) research than ever before. TPP testing through primary research often seems like a straightforward exercise but is fraught with biases, challenges, and pitfalls that can cause the results to be misleading or completely wrong. The most obvious bias is that survey participants – whether health care providers or health care consumers – will spend more time reviewing a TPP in a one-hour interview than they ever would in a real-world promotional environment.

In a marketing research setting, HCPs and consumers frequently overstate their interest in a new product. They will typically strive to 'help' the moderator by expressing positivity towards the new product even when in the back of their minds, they are ambivalent or aren't the least bit interested in it. More importantly, most haven't thoroughly processed the myriad of challenges to adopting it and making it a part of their habitual behaviors – nor does the standard research process invite them to do so.

Whether it's a start-up biotech venture or a big pharma manufacturer, decision-makers relying on an accurate assessment of likely future utilization of a product need to gain a clearer understanding of what they are up against when launching a new product. Typical approaches to TPP testing often yield overly optimistic appraisals that reflect an unrealistic portrayal of actual customer adoption in the real world.

At ThinkGen, we are advising pharma brand teams that the focus of TPP testing should be on elucidating the true "Path to Purchase" as opposed to simply identifying and prioritizing the features and benefits customers find appealing. In today's market environment, experienced marketers know that the path to purchase is extremely challenging because of multiple factors – but most importantly, the barriers created by payers and administrators to the adoption of new products and technology.

About the Authors

Noah M. Pines is the Founder & CEO of ThinkGen, a global marketing research and brand strategy consultancy dedicated to helping life science companies develop and commercialize life-improving treatments. With 30+ years of experience, Noah leads a team of all-star researchers at ThinkGen. He has authored over 50 publications on therapeutic topics and research methodologies, and has spearheaded the development of several proprietary methods. Noah was the 2020 Intellus Clement-Fordyce recipient and named to the PharmaVOICE List of 2019's 100 Most Inspiring People.

Will Leopold, Senior Vice President, has 15 years of experience designing and executing market research that guides pharmaceutical brand strategy across the product lifecycle. He is a thought partner to his clients and enjoys tackling complex business issues and developing novel methodologies. Will is the winner of the PMRC Award of the Year (2018) as well as the recipient of the PMRG Excellence in Health Literacy Award (2017).

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The Role and Criticality of Reliable TPP Testing

Target product profile testing can inform a range of decisions, from go-no go to investment and resource allocation towards a new drug launch. Companies traditionally utilize these insights to inform a forecast or demand assessment, as well as early-stage promotional activities, such as a scientific narrative or unbranded disease education efforts.

Typically, TPP testing is conducted using a mix of qualitative and quantitative data collection methods, where respondents are queried about:

- Current treatment approaches/algorithm
- Perceptions of unmet needs
- Reactions to the product candidate
  - Perceived advantages and disadvantages
  - Likely position in the treatment algorithm
  - Expected future adoption
- In-depth review of individual components of the TPP
  - Mechanism of action
  - Efficacy data and/or clinical endpoints
  - Safety and tolerability
  - Dosing and administration
  - Likely coverage (if applicable)

Oftentimes, the research will include a "priming" slide at the beginning to set context and give the participant a view into new treatment trends or other future products entering the marketplace. This helps the respondent react more accurately to an investigational candidate since it may not be the only new entrant; and/or to react more authentically to the clinical data. The exercise often features a pre- and post-profile review allocation exercise to gain insight into current utilization, extent of expected future usage of the new product, and the impact on treatment decisions. Companies can test a single TPP, multiple TPP's, or a single TPP where attributes are varied to understand the impact of alternative profile variations.

While such research can be conducted in as little as a week to two weeks, notwithstanding sample size or schedule considerations, the typical duration of such a study is 3-4 weeks for the qualitative component and 6-10 weeks for an optional quantitative phase. Quantitative research serves as a validation to the qualitative phase as well as providing more robust data which can be projected to the broader population of HCPs and patients.

ThinkTPP[SM]: Getting Customers into a Real-World Mindset

While we have enumerated the benefits of conducting standard TPP research, there are important considerations that have been addressed with our development of ThinkTPP[SM].

When we conduct a ThinkTPP[SM] study, we take multiple steps to reduce the natural bias that occurs in TPP testing. Our moderators tell research participants at the outset to "speak their mind," and that "there are no right or wrong answers." Further, we encourage study respondents to provide their candid opinions, and we "want to get an honest appraisal of the prospects for this product." Our goal is to give them permission up-front to be honest, and to "reward" that candor. From a stylistic perspective, the moderator needs to continually reinforce this lens of honesty by saying "again, if you aren't interested, don't see a benefit to you or your patients, and/or have criticism, all of that is welcome – and valued!"

The second thing that we do differently in a ThinkTPP[SM] study is that while we do get a detailed enumeration of the respondents' perceived drivers and barriers to adoption, we focus significantly on the barriers and challenges that constitute the customer's path to purchase. Indeed, we feel that all marketers need to think about a path to purchase as a journey a customer must make, and a set of hurdles they must surpass, to take them from awareness and interest to adoption and

routine usage. While we look at the different drivers of adoption, unmet needs, product advantages, we also systematically break down the barriers and review them by category.

- Access/insurance/ financial barriers: Actual cost to the patient, or cost to the system, is the #1 factor that gives today's respondents pause about a potential new medication. Most new products require some administrative legwork on the part of HCPs and their office staff. A critical consideration in determining the value of the brand is whether the product advantages are sufficient for an HCP to "fight" – i.e., make efforts in the face of operational or administrative barriers – to get the medication for their patient.

- Office barriers: As much as an HCP may want to adopt a new product, it is critical to understand how the product will be implemented and operationalized within the context of the office or hospital setting. If it is IV, who will administer it? Where will it be administered? If it is a vaccine, how will it be procured and stored? Who will administer it? This often means that interviewing other members of the office staff will be essential to understanding how a product will actually fit into the routine rhythm and flow of a medical office.

- Communication barriers: If a product is based upon advanced, new technology, the question arises: as much as an HCP might be dazzled by its promise, how will it get discussed with patients? Also, how open are HCPs to sitting down with reps to better understand the product features?

- Disease-related barriers: As part of TPP testing in rare conditions, we often strive to understand the extent to which a disease is sufficiently well-diagnosed and well-understood by the HCP. We often find that HCPs and patients alike are under-educated about certain conditions, and that unbranded disease education is required simply to help them recognize the need or usage occasion for a new product.

- Patient barriers: While an HCP may be very excited about a new medication, there may be barriers to usage on the part of the patient. Patients are more informed and educated then ever. HCPs tend to put more weight on the efficacy profile of a new product, and the risk benefit ratio. Challenges with either the safety profile, or administration that patients might find objectionable or even unacceptable can scuttle a new product's prospects,

- Habit barriers: Are there reasons why what the HCP or patient is doing today is "good enough," and while it might be nice to switch, this product isn't impressive enough to replace what they are doing today. This is a challenge that a lot of new pharmaceutical brands face. HCPs and patients favor the 'devil they know' despite its downsides and/or are averse to change for a variety of rational and irrational reasons. Both the rational and irrational reasons need to be well-understood so that they can be addressed. We have written previously about Habit Lens[SM], a proprietary ThinkGen methodology designed to specifically unpack the habitual component of customer behavior and to identify opportunities for behavioral change.

- Fear barriers: Prior negative experiences can be among the most powerful forces that prevent HCPs and patients from trying a new product. Perhaps the patient community has been 'burned' in the past by a previous product that had safety issues; or HCPs were over-promised something that ultimately didn't pan out. In certain therapeutic areas customers are naturally creating additional barriers a new product needs to address and overcome. Understanding this customer mindset and psychology are an important part of building a realistic Path to Purchase.

- Competitor barriers: In looking at the potential for a new product, it is important to test it in a realistic future environment where there may be competitors

- (cont.) gunning for the same patients. As noted above an effective TPP test should include a set of 'priming' slides that help the respondent envision other new products that will be available concurrently and their attributes, as well as expected changes in treatment trends.

By breaking it down in this manner, the respondent is truly able to assess the large number of factors that we believe could get in the way of a successful launch. And after considering these barriers, the team will have a realistic read on their adoption. We assess their interest and likely adoption immediately after an initial review of the profile and then get another gauge of adoption after they have walked us through all the barrier categories.

While such research can be conducted in as little as a week to two weeks, notwithstanding sample size or schedule considerations, the typical duration of such a study is 3-4 weeks for the qualitative component and 6-10 weeks for an optional quantitative phase. Quantitative research serves as a validation to the qualitative phase as well as providing more robust data which can be projected to the broader population of HCPs and patients.

Visualizing the Path to Purchase

In addition to a detailed assessment of the product's profile, a very helpful and distinctive output from a ThinkTPP[SM] study is a detailed path to purchase map. Similar to a visualized patient journey, the ThinkGen Path to Purchase helps to lay out a realistic journey that a prospective customer is likely to take. It identifies the real challenges ranging from the administrative and operational to the psychological. Incorporated into the Path to Purchase are the critical challenges customers may face temporally along their voyage of adoption. Insights around educational and promotional opportunities such as unbranded disease education, development of an effective scientific narrative, advisory boards, and other tactics are overlayed at the critical milestones along the journey.

Conclusion

Evaluating customer reactions to a TPP has major downstream implications for product commercialization. Thus, getting a real-world read on the potential for a new product – both its advantages, and more importantly, a sense of "what it will take" to make it a routine customer habit, is a critical primary marketing research initiative.

Due to the biases that we have identified and seen in our extensive experience, such research can often result in the wrong conclusion.

ThinkTPP[SM] can give business development, new products, or early-stage commercial team members a more accurate view of expected uptake and deeper insights into the efforts needed to overcome many of the known barriers in today's corporatized medicine environment. ThinkGen has extensive experience helping all types of companies – from early venture-backed start-ups to big pharma companies – in navigating the implicit biases and producing a real world understanding of commercial considerations that govern new product demand.