



## CASE STUDY

# Habit Engineering<sup>SM</sup> for a Biopharmaceutical Company Studying Parkinson's Disease



## Business Objective

Facing a complex and crowded market landscape, a biopharmaceutical client engaged ThinkGen to explore how to accelerate adoption of its medication for Parkinson's Disease (PD).

## The ThinkGen Solution

The ThinkGen research team focused on how to strengthen the “hook” for neurologists treating PD to initiate trial and usage of the client's brand. In partnership with the client, the research team developed a hybrid approach that combined ThinkGen's Habit Engineering<sup>SM</sup> framework with aspects of the [Nir Eyal “Hook Model”](#) (i.e., a user's interactions with a product as they pass through four phases: Triggers, Actions, Rewards, Investments), providing additional depth to the broader behavioral economics assessment of target HCPs.

ThinkGen recruited both prescriber neurologists and non-prescriber neurologists for the research. The engagement was divided into two waves of interviews that took place between January and March. A strategic topline read-out was provided in February that demonstrated findings within the formal Habit Engineering framework. The final report deck built on this framework to communicate similarities and differences between waves (findings that stayed steady vs. new learnings). The final workshop deck was streamlined based upon the Nir Eyal Hook Model to accommodate an effective discussion via breakout groups amongst nearly 30 client stakeholders.

After engaging in a detailed discussion with the client project lead about the study findings, the ThinkGen research team developed an actionable workshop deck to help lead a large cross-functional

### AT A GLANCE



#### Methodology

Qualitative; Habit Engineering<sup>SM</sup>



#### Stakeholders Recruited

Neurologists



#### Countries

United States



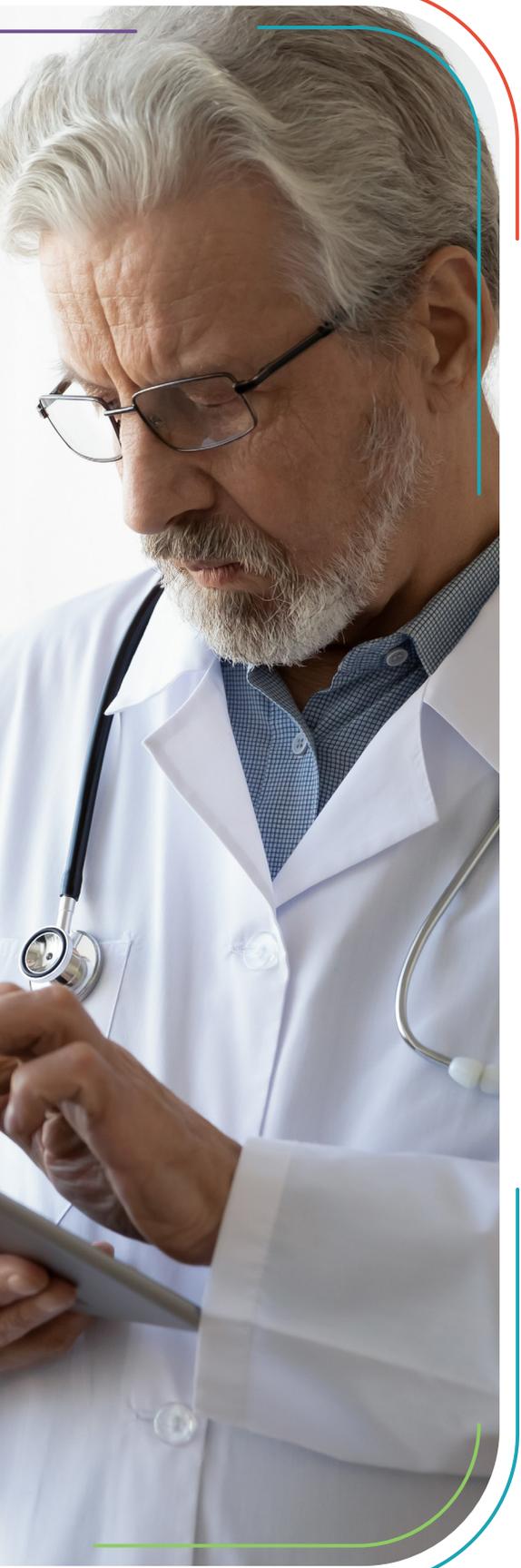
#### Therapeutic Area

Neurology



#### ThinkGen Client

Biopharmaceutical



team of internal stakeholders. In the workshop deck, ThinkGen used a three-pillar system to bucket the strategic priorities into how the brand is perceived, used, and accessed. Multiple, high-level, internal stakeholders across divisions—including marketing, market research, market access, and sales—actively participated in the workshop.

**This high-visibility project presented ThinkGen with several challenges:**

- Difficult-to-recruit “non-prescribers”—many neurologists had trialed patients but were not yet routine product users and were waiting for clinical feedback from infrequently seen patients.
- Multiple iterations of reporting were needed while moving through phases of the project (topline, detailed report, workshop, post-workshop findings).
- Multiple ThinkGen personnel were necessary to run the workshop.

## Results

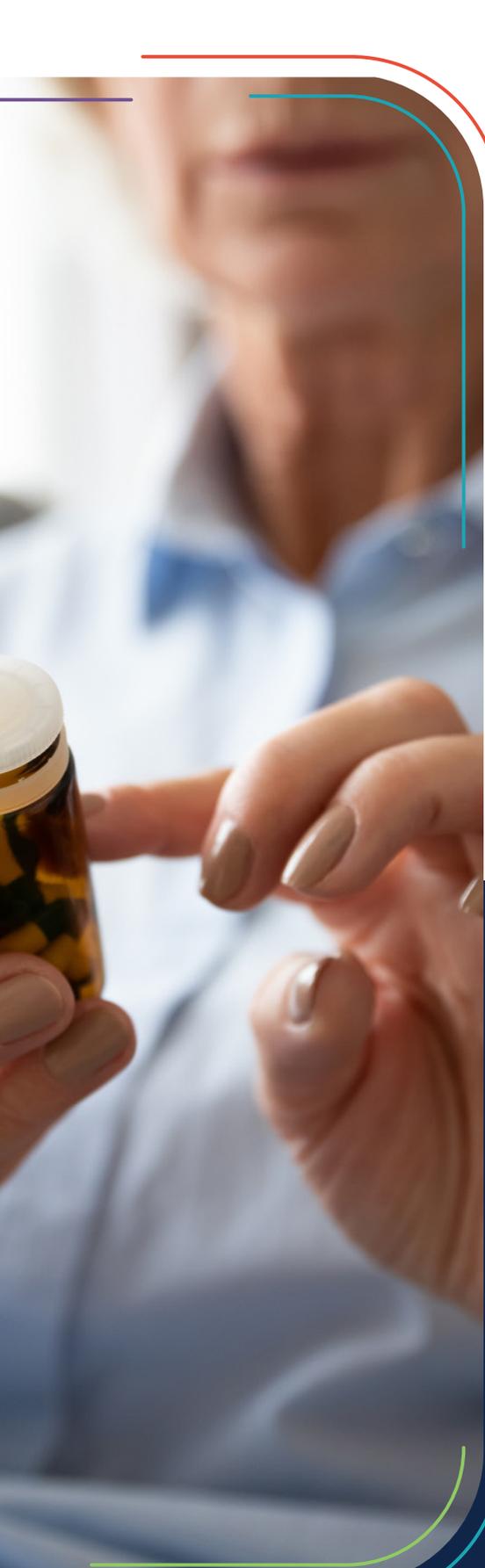
**ThinkGen was able to reveal several actionable insights for the client:**

**1. Messaging.** ThinkGen discovered the critical pillar in the research was that the client team was missing the mark in terms of brand perception. After rapid shifts occurred across the landscape in conjunction with COVID-19 derailing pharmaceutical rep detailing efforts, neurologists have limited mental bandwidth to keep track of all the new products that have recently come to market. The messaging goal of the brand team was initially to have the sales force communicate a more detailed, comprehensive narrative to Neurologists. However, given external constraints, neurologists were only taking away one key message from the brand story, which alone was not strong enough to disrupt prescribing behavior. This message instead inaccurately overshadowed perceptions of a more important point: the stronger efficacy of the product. The brand team realized that the combination of the dosing messaging with the medication class had limited health care providers’ (HCPs’) interest in prescribing the medication. The HCPs did not view it as a new, improved adjunctive therapy.

**2. Usage:** Neurologists were trialing usage in the wrong patient type (adjunctive failure patients) who may not demonstrate the full efficacy of the product.

**3. Access:** Given historical difficulties with gaining access to branded products, neurologists anticipate a challenging access fight via prior authorization and high costs to patients. Neurologists falsely assume they will need to “step-through” existing generics within class to gain access to branded medications.





**During the workshop, the brand teams were able to apply this information to develop strategic thought-starters and plan for future messaging research:**

- Looking to historical campaigns in both pharmaceuticals and consumer goods, the workshop group identified potential avenues to refine the message to focus more on the brand's efficacy. The brand team sought to communicate that they are a new and improved version of their class.

For example, the Apple Newton vs. the iPad: sometimes, products come to market but don't quite hit the mark, but later generations perfect earlier applications, such as the case of Apple continuing to innovate from its failed Newton to the beloved iPad today.

- Another action revealed was better clarifying the feedback and thus "rewards" when the brand is prescribed in the appropriate patient type. It was suggested to the client that they develop a simple questionnaire to help Neurology practices detect improvement that is specifically attributable to the client's brand.
- Finally, establishing a three-tiered "Fast, Memorable, Simple" messaging strategy that prioritizes stronger efficacy as an activator. This means accepting the new landscape of shorter engagements with HCPs in virtual settings—e.g., new messaging strategies should take into account the altered communication landscape.

## Summary

With primary client lead buy-in, ThinkGen made the critical decision to pivot the deep insights provided by Habit Engineering into the secondary lens "Hook Model" that allowed for clear delineation of strategic objectives into the 'hook quadrants' to provide a broader perspective for discussion amongst executive stakeholders during the workshop.

For example, improving brand perceptions is the first step in triggering HCP action and will ladder into two additional quadrants of the model: identifying appropriately the target patient and removing misconceptions around access barriers.

Combining Habit Engineering with the Hook Model provided for additional depth to the broader behavioral economics assessment of target HCPs, providing the deeper, more actionable insights ThinkGen is known for providing to its clients.

ThinkGen was an engaged partner throughout the research process of this high-visibility project. The team took into account evolving brand needs over the three-month engagement and constructed reporting and analyses to maximize the synthesis of results to a variety of stakeholders.

