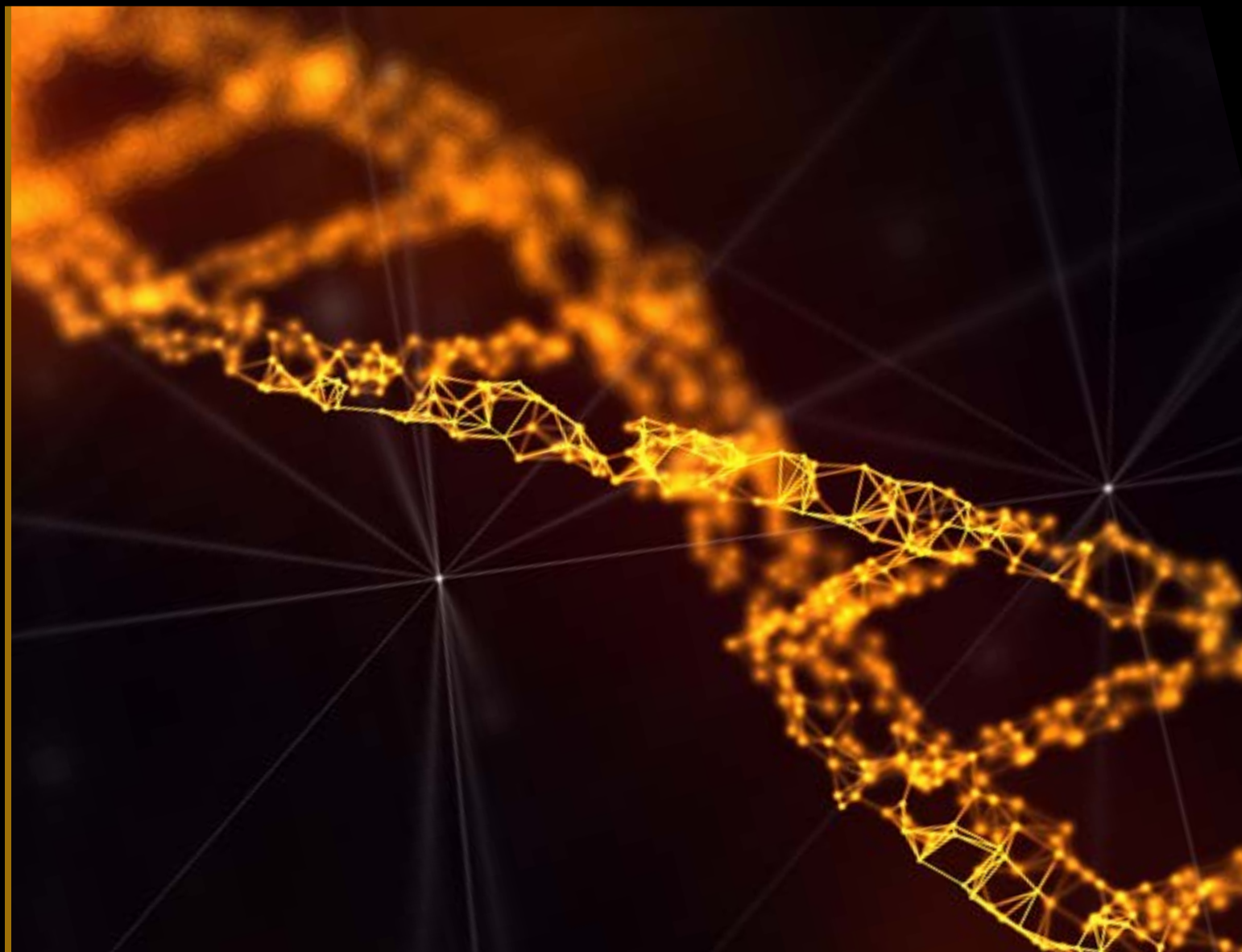


# KANTAR



## 2020 Professional Health Syndicated Studies

Kantar's syndicated research and data offerings are the industry standard. Reach and market to your healthcare professional audiences more effectively by understanding their attitudes, behaviors and media preferences.

Updates to study content in 2020 are noted in **blue** text.

**UNDERSTAND PEOPLE. INSPIRE GROWTH**

# Kantar's Professional Health Studies for a 360° understanding of healthcare professionals

Advertising, media and marketing professionals use Kantar data to optimize marketing strategies and allocate budgets to reach healthcare professionals from 24 physician and nine other healthcare professionals specialties.

Kantar combines expertise in strategic insight, advertising intelligence, and media and audience measurement to provide a 360-degree view of healthcare professional media interactions.



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Content covered in this directory comes from the *Sources & Interactions Studies*, the *Digital Insights Studies* and the *Media Measurement Studies*.

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# Specialties Measured

## PHYSICIANS

- ◆ Family Medicine
- ◆ Internal Medicine
- ◆ Cardiology
  - Echocardiography
  - Interventional Cardiology
  - Nuclear Cardiology
- ◆ Allergy/Immunology
- ◆ Anesthesiology
- ◆ Dermatology
  - Cosmetic Dermatologic Surgery
  - Mohs Micrographic Surgery
  - Procedural Dermatology
- ◆ Diabetes/Endocrinology
- ◆ Emergency Medicine
- ◆ Gastroenterology
- ◆ General Surgery
- ◆ Infectious Diseases
- ◆ Neurology
  - Headache
  - Neuromuscular Medicine
- ◆ Nephrology
- ◆ Obstetrics/Gynecology
- ◆ Oncology and Hematology/Oncology
- ◆ \*Ophthalmology
  - Cataract
  - Retina
  - Refractive/Corneal
  - Glaucoma
- ◆ Orthopedic Surgery
  - Adult Reconstructive
  - Foot and Ankle Surgery
  - Hand and Wrist Surgery
  - Orthopedic Surgery of the Spine
  - Orthopedic Trauma Surgery
  - Sports Medicine
  - Total Joint Reconstruction
- ◆ Otolaryngology
- ◆ \*Pain Medicine
- ◆ Pediatrics
- ◆ Plastic Surgery
- ◆ Psychiatry
- ◆ Pulmonary Disease
- ◆ \*Radiology and Radiation Oncology
- ◆ Rheumatology
- ◆ Urology

## OTHER HEALTH CARE PROFESSIONALS

- ◆ Dentistry
- ◆ Eyecare
  - Ophthalmologists
  - Optometrists
  - Opticians
- ◆ Hospital Management
  - Senior Executives
  - Financial Executives
  - Information Executives
- ◆ Managed Care
  - HMO/PPO/PBM/IDN Clinical Decision Makers
  - HMO/PPO/PBM General Executives
  - Hospital/Nursing Home Managed Care Directors
  - Hospital/Nursing Home Medical Directors
  - Hospital/Nursing Home Pharmacy/Formulary Directors
- ◆ Oncology Nursing
- ◆ Physician Assistants and Nurse Practitioners
- ◆ Pain Medicine
- ◆ Pharmacy
  - Retail: Chain
  - Retail: Independent
  - Hospital/Health-System
- ◆ Radiology and Radiation Oncology

# Physician and Practice Profile

## DEMOGRAPHICS

Age  
Gender  
Census Region (Northeast, South, Midwest, West)  
Division (New England, Middle Atlantic, East North Central, West North Central, South Atlantic, East South Central, West South Central, Mountain, Pacific)

## PROFESSIONAL DESIGNATION

Formulary committee member  
Association member  
Key Opinion Leaders

## PURCHASING INFLUENCE

Typical degree of involvement in the purchase of devices, equipment, and/or service contracts  
See Sales Representatives

## PROFESSIONAL ACTIVITIES IN PAST 12 MONTHS

- ◆ Author a blog
- ◆ Author an article for a publication
- ◆ Review articles for a peer-reviewed publication
- ◆ Member of publication advisory board
- ◆ Teach at a medical school
- ◆ Speak at a local professional association meeting
- ◆ Speak at a national conference
- ◆ Speak at a medical-oriented dinner meeting
- ◆ Board membership of a local medical association
- ◆ Board membership of a national medical association

Number of Patients Seen in an Average Week (in-person or remotely)

Practice location - Urban, Suburban, Rural

## TYPE OF PRACTICE

Hospital/Health-System  
Solo Practice  
Group Practice (Single Specialty)  
Group Practice (Multi-Specialty)  
Ambulatory Surgical Center  
Urgent Care Facility

## SPECIALTY SPECIFIC

Surgical procedures per week (asked to Cardiology, Dermatology, Gastroenterology, Neurology, Oncology, Ophthalmology and Urology only)

Bariatric procedures per week (asked to General Surgeons and Plastic Surgeons only)

\*Separate study from Medical/Surgical



# Prescribing Profile



## NEW DRUG, DEVICE OR PROCEDURE ADOPTION

Adoption preferences:

- ◆ Early Adopters – As soon as it is released/available
- ◆ Early Majority – After a few others have tried it successfully
- ◆ Late Majority – Once it is in fairly common use
- ◆ Traditionalist – After it becomes a standard drug, device, or procedure

## PRESCRIBING A SPECIFIC DRUG BRAND OVER COMPETING BRANDS — IMPORTANCE (Five-point scale)

- ◆ Covered by my patient's health plan
- ◆ Manufacturer is a leader in research and development
- ◆ Patient education materials available
- ◆ Patient financial support available
- ◆ Patient requests it
- ◆ Previous experience with product
- ◆ Quality scientific data is available to review
- ◆ Recommendations from colleagues
- ◆ Relationship with sales rep

## PRESCRIBING DATA APPENDS

Drug class/clusters

Rx Prescribing – Any, high, very high

- ◆ Allergy
- ◆ Antibiotic
- ◆ Antiviral
- ◆ Asthma
- ◆ Autoimmune
- ◆ Birth Control
- ◆ Bone Density
- ◆ Benign Prostate Hypertrophy
- ◆ Cardiology
- ◆ Dermatology
- ◆ Diabetes
- ◆ Gastroenterology
- ◆ Hepatitis
- ◆ HIV
- ◆ Hormone
- ◆ Migraine
- ◆ Neurology
- ◆ Obesity
- ◆ Oncology
- ◆ Pain
- ◆ Psychiatry
- ◆ Sleep
- ◆ Smoking

Prescribing data provided by DMD Marketing includes the total number of weekly scripts written for 100 highly advertised drug categories and 15 category rollups.

## DIAGNOSIS DATA APPENDS (COMING IN 2020)

ICD-10 claims data for conditions treated and procedures available across select specialties

# Media Usage/Day in the Life

## TIME SPENT ON PROFESSIONAL ACTIVITIES

Number of hours spent in average week engaged in professional activities (at work locations and non-work locations)

Number of hours spent engaged in specific professional activities, in most recent typical work week

- ◆ Reading medical content in print
- ◆ Reading/viewing medical content online
- ◆ Reading/writing emails
- ◆ Reading/entering patient data in EHR
- ◆ Interactions with patients
- ◆ Interactions with colleagues and staff
- ◆ In-person interactions with sales reps
- ◆ Completing CME
- ◆ Other professional activities

## TIME SPENT READING MEDICAL CONTENT

(Either print or online) compared to last year

- ◆ More now than a year ago
- ◆ Same time reading now as a year ago
- ◆ Less time now than a year ago

## PUBLICATION READERSHIP HABITS

Versions Read

Version Most Read

- ◆ Print edition
- ◆ Full digital reproduction of the print edition (e.g., PDF, e-magazine, Flip View)
- ◆ The publication's website
- ◆ Smartphone/tablet application

## MOBILE DEVICE USE

Use for Professional and/or Personal Purposes

- ◆ Smartphone (e.g., Android, iPhone, etc.)
- ◆ Tablet (e.g., iPad, Galaxy Tab, Kindle Fire, etc.)

Mobile OS used for professional purposes

Percent of work time spent online using mobile device

## DIGITAL SEGMENTS

- ◆ Connected: Mobile - go online for professional purposes at least twice a day, with at least 50% done using a mobile device
- ◆ Connected: Computer - go online for professional purposes at least twice a day, with less than 50% done using a mobile device
- ◆ Less Connected - go online for professional purposes once per day (or less frequently)

## HOW RESEARCH IS STARTED

General search tool

Specific professional publication, website or portal

- ◆ Clinical topics
- ◆ Medical products and services

# Information Sources: Exposure and Importance

## Compare channels by:

**Frequency and Reach**—How often is the source used? Daily/Weekly/Monthly/Annually

**Importance**—How important is the source for keeping a physician well-informed about new medical developments? Five-point scale

## SOURCES MEASURED:

### WEBSITES

- ◆ Medical Society (Local & National)
- ◆ Consumer News
- ◆ Disease-Specific (Professional & Consumer)
- ◆ Non-CME Medical Podcasts, Webcasts & Webinars
- ◆ Professional Portals (Subscription-Based & Free to Use)

### VIDEO

- ◆ Instructional Videos

### SOCIAL NETWORKS/COMMUNITIES

- ◆ Personal & Professional

### MOBILE APPS

- ◆ Diagnostic Tools
- ◆ Drug Reference

### PUBLICATIONS — PRINT AND ONLINE

- ◆ Current or past issues of Medical Journals
- ◆ Reference Publications
- ◆ Medical Journal Websites

### NEWSLETTERS — PRINT AND ONLINE

- ◆ Government Bulletins/Literature
- ◆ Medical Center/University Newsletters
- ◆ Newsletters from Medical Associations [and Their Publications](#)
- ◆ Newsletters from [Publications/Websites Not Affiliated with an Association](#)
- ◆ Mailings/Newsletters from Pharma/Device Companies

### PHYSICIAN EDUCATION (CME)

- ◆ Attending Meetings
- ◆ Digital Format (Webcasts, Podcasts, Webinars, Mobile Apps, DVDs, Online Learning, etc.)
- ◆ Printed Courses

### CONFERENCES/MEETINGS/SPEAKERS

- ◆ Colleagues
- ◆ Attending Conferences/Symposia on a Product or Therapy: In-Person
- ◆ Attending Conferences/Symposia on a Product or Therapy: via E-Conference
- ◆ Conventions
- ◆ Dinner Meetings
- ◆ Grand Rounds/Speaker Programs

### SALES REPS AND COMPANY INFO

- ◆ Pharma Medical Liaisons
- ◆ Sales Representatives: Pharma – In-Person & Online
- ◆ Sales Representatives: Device/Equipment – In-Person & Online
- ◆ Company/Product Information Website
- ◆ Promotional Videos

# Internet Use for Professional Purposes



## ONLINE ACTIVITIES BY DEVICE (COMPUTER OR MOBILE DEVICE) PAST 30 DAYS

### Patient/Prescribing Focused

- ◆ Access/maintain medical records
- ◆ Reference drug data
- ◆ Find disease state codes
- ◆ Find/perform clinical calculations
- ◆ Look up information on procedures
- ◆ Find/review patient education materials
- ◆ Write prescriptions
- ◆ Look up prescription-related financial assistance programs for patients

### Pharma/Medical Devices, Supplies, and Sales Related

- ◆ Look up information on medical equipment/devices
- ◆ Attend pharma or device sponsored webinars
- ◆ View medically oriented webcasts/webinars
- ◆ Listen to medically oriented podcasts
- ◆ Purchase pharma or device supplies

### Physician Education

- ◆ Complete CME credits/units
- ◆ [Job searches](#)
- ◆ Read papers/information from key opinion leaders/experts in my field
- ◆ Read abstracts
- ◆ Read professional news updates
- ◆ Look up meeting/conference information

### Social Media

- ◆ Use physician social networks
- ◆ Use personal social networks for professional purposes

## INTERNET USAGE — FREQUENCY FOR WORK

- ◆ 8+ times per day
- ◆ 4-7 times per day
- ◆ 2-3 times per day
- ◆ Once per day
- ◆ 1-3 times per week
- ◆ Less than weekly

## USE OF SEARCH AND OTHER CONSUMER SITES FOR PROFESSIONAL PURPOSES

- ◆ Get a quick overview of a [drug or device](#)
- ◆ [Get a quick overview of a condition or procedure](#)
- ◆ Confirm the spelling or [ICD/CPT code](#) of a drug, device, or procedure
- ◆ Determine what company produces a drug or device
- ◆ Find out what information my patients are seeing online about a drug, device, or procedure
- ◆ Find out what information my patients or colleagues are seeing about me or my practice
- ◆ Look up contact information for colleagues or institutions

## SOCIAL NETWORKS USED FOR WORK

### Physician

- ◆ [ACS Communities](#)
- ◆ Doximity
- ◆ Medscape Consult
- ◆ Sermo
- ◆ [theMednet](#)

### Personal

- ◆ Facebook
- ◆ Instagram
- ◆ LinkedIn
- ◆ Twitter
- ◆ YouTube

Devices used to access social networks

Percent of time spent on social media by device

Time spent per session

[Network used most for breaking medical news](#)

## SOCIAL NETWORKS (ANY) — FREQUENCY OF USE FOR WORK

- ◆ 10+ times per day
- ◆ A few times per day
- ◆ Once or twice per day
- ◆ A few times per week
- ◆ Less often
- ◆ Never

## TYPES OF CONNECTIONS IN NETWORK

- ◆ Associations: International/National
- ◆ Associations: State/Local
- ◆ Colleagues
- ◆ Key Opinion Leaders
- ◆ Conferences/Meetings
- ◆ Companies: Device/Equipment
- ◆ Companies: Pharmaceutical
- ◆ Government Departments (Medical-Related)
- ◆ Hospitals/Health Systems
- ◆ Insurance Companies
- ◆ Medical Publications/Journals
- ◆ Medical Schools/Universities
- ◆ [Patients](#)

## HOW USE PERSONAL SOCIAL NETWORKS FOR WORK

- ◆ Only to promote my practice
- ◆ Mostly to promote my practice, but also to gather/share medical info with colleagues
- ◆ Split equally between promoting my practice and gathering/sharing medical info with colleagues
- ◆ Mostly to gather/share medical info with colleagues, but also to promote my practice
- ◆ Only to gather/share medical info with colleagues

## ACTIONS TAKEN AFTER READING MEDICAL-RELATED SOCIAL MEDIA POSTS

Click a link to

- ◆ An advertiser's website
- ◆ Read the full contents of an article/paper on another website
- ◆ View a full video

Search for more information on a topic on Google, Bing, etc.

Discuss information with a

- ◆ Sales rep
- ◆ Patient
- ◆ Colleague off of your social network (email, phone, in-person)

Read responses of others on a post

Post a response (direct message, public response)

Like/favorite/upvote/downvote a post

Forward/share/retweet a post to others in your network you

- ◆ Agree with
- ◆ Disagree with

Invite/follow someone new on your network

## REASONS FOR STAYING ACTIVE ON SOCIAL MEDIA (five-point scale)

- ◆ CME opportunities
- ◆ Connections personally with like-minded professionals
- ◆ Content is customized to be relevant
- ◆ Follow upcoming conference or events
- ◆ Information and tips that help me run my practice
- ◆ Job opportunities/recruiting
- ◆ Link to other doctors dealing with similar patient issues
- ◆ Overall self-improvement
- ◆ Posts from Key Opinion Leaders in my field
- ◆ Receiving breaking medical news
- ◆ Staying current on efficacy and safety updates

## REASONS PREVENTING DOCTORS FROM BEING MORE ACTIVE ON SOCIAL MEDIA (five-point scale)

- ◆ Believe it is unethical to share any patient-related data
- ◆ Concern that a post can be shared and spread outside my network/my reputation could be impacted
- ◆ Concern that a post may be misinterpreted
- ◆ Concern that patients may read
- ◆ I am not tech-savvy
- ◆ Not enough time
- ◆ [Practice/employer does not allow it](#)
- ◆ Too many ads or other promotion posts
- ◆ Too much unqualified/non-research-based information being spread

# Online Video

## TYPES OF LIVE OR PRE-RECORDED VIDEO EVENTS WATCHED IN PAST 6 MONTHS

(Computer, Smartphone, Tablet)

- ◆ CME
- ◆ Disease diagnosing info
- ◆ Drug-specific/mechanism of action
- ◆ Info to share with patients
- ◆ Lectures/presentations from conferences
- ◆ Procedures

Device used to watch live or pre-recorded video containing professional content

Percent of time spent watching live or pre-recorded online videos by device

## HOW LIVE OR PRE-RECORDED VIDEO EVENTS ARE FOUND — ALLOCATED BY PERCENT

- ◆ Seeking out specific videos or videos about a specific topic (via a search engine or by going to a specific website)
- ◆ Being invited to watch a video (via email newsletter or an article/ad on a website you are reading)
- ◆ Seeing it on a social media newsfeed (via autoplay or a link to a video)

## WHY WATCH MEDICAL VIDEOS INSTEAD OF USING OTHER INFORMATION SOURCES

- ◆ I can find topics and content that is up-to-date
- ◆ It is easy to search and find exactly what I'm looking for
- ◆ Most videos are high quality and easy to watch
- ◆ I can watch them on my mobile device
- ◆ It is convenient when links are placed in ads or articles
- ◆ I find them engaging and will watch to the end
- ◆ They are easy to share with patients
- ◆ They are easy to share with colleagues
- ◆ [Attend a meeting/presentation without having to travel](#)



# App Usage

## TYPES OF APPS INSTALLED ON SMARTPHONE/TABLET

- ◆ Access for EMR/EHR
- ◆ Diagnostic reference
- ◆ Drug reference
- ◆ Medical calculator
- ◆ Medical journal/publication apps
- ◆ [Online meetings/video conferencing \(e.g., Zoom, Skype\)](#)
- ◆ [Telemedicine](#)

## IMPORTANCE AND FREQUENCY OF USE AMONG THOSE INSTALLED

- ◆ 4+ times per day
- ◆ 2-3 times per day
- ◆ Daily
- ◆ 2-3 times per week
- ◆ Weekly
- ◆ 2-3 times per month
- ◆ Monthly
- ◆ Less often

## SPECIFIC APPS — ASKED TO ALL SPECIALTIES

Used in the past six months (and frequency used)  
Downloaded but not used in past six months  
Have not downloaded

- ◆ Calculate by QxMD
- ◆ Doximity
- ◆ Drugs.com
- ◆ Epocrates
- ◆ Figure 1
- ◆ Lexicomp
- ◆ Mayo Clinic
- ◆ MDCalc Medical Calculator
- ◆ MedCalX
- ◆ Medscape
- ◆ Merck Manual
- ◆ mobilePDR
- ◆ MPR Monthly Prescribing Reference
- ◆ myCME
- ◆ New England Journal of Medicine
- ◆ Physician's Weekly
- ◆ PubMed On Tap
- ◆ ReachMD
- ◆ Read by QxMD
- ◆ Sermo
- ◆ Univadis (Quantia MD)
- ◆ UpToDate

MANY ADDITIONAL APPS ASKED BY SPECIALTY —  
PLEASE SEE APPENDIX FOR LIST OF APPS BY SPECIALTY



# Newsletters

## NUMBER OF PROFESSIONAL EMAIL NEWSLETTERS RECEIVED AND READ IN AN AVERAGE WEEK

### WHEN READ PROFESSIONAL EMAIL NEWSLETTERS OF PARTICULAR INTEREST

- ◆ At time of receipt
- ◆ Within a day
- ◆ Within a week
- ◆ Longer than a week

### PART OF DAY TYPICALLY READ NEWSLETTERS

- ◆ Before work, at home
- ◆ Before work, at the office/hospital
- ◆ Breaks/mealtimes while on duty
- ◆ In between examinations/consultations
- ◆ In the exam room/patient bedside
- ◆ After work, at home
- ◆ After work, at the office/hospital
- ◆ While commuting/travelling
- ◆ Off-hours while out of the home
- ◆ Weekends/days off

### TYPE OF EMAIL NEWSLETTER PREFERENCE

- ◆ Breaking news
- ◆ Daily updates
- ◆ Weekly recaps/digest of main articles
- ◆ Curated articles based on my interests/specialty

### IMPORTANT FACTORS IN DECISION TO READ THROUGH EMAIL NEWSLETTER

- ◆ Brief (contains mostly headlines and links)
- ◆ Detailed (contains paragraphs and stories)
- ◆ Written by physicians or researchers I am aware of
- ◆ Local information is included
- ◆ Focuses on recent scientific articles

### REQUESTED VISITS FROM SALES REPRESENTATIVES IN PAST 12 MONTHS

- ◆ Pharma reps
- ◆ Device/Equipment reps
- ◆ Both
- ◆ Neither

### EXPOSURE AND EFFECTIVENESS OF SALES TOOLS/TECHNIQUES

- ◆ In-person demonstrations
- ◆ Online presentations
- ◆ Leave-behind print materials
- ◆ Virtual reality videos
- ◆ Interactive visual aids (IVAs) via demonstrations on a tablet
- ◆ Interactive online surveys or quizzes
- ◆ Tools to help with patient adherence

# Sales Representatives

# Conferences/ Meetings

## MEETINGS/CONFERENCES/CONVENTIONS

Number attended per year

Time spent visiting exhibit hall at meetings/conferences/conventions

### PRIMARY REASON ATTEND MEETINGS/CONFERENCES/CONVENTIONS

- ◆ CME requirement
- ◆ Involvement with the association leadership
- ◆ Learn about new products/procedures that I was not previously aware of
- ◆ Learn about products/procedures that I was already aware of
- ◆ Market my practice to potential partners/employees
- ◆ Meet with specific company representatives that I have met before
- ◆ Speak or present
- ◆ Spend time socializing with colleagues

### REASONS FOR VISITING EXHIBIT HALL AT MEETINGS/CONFERENCES/CONVENTIONS

- ◆ Collect handouts/materials to bring back to my practice
- ◆ Learn about new products/procedures that I was not previously aware of
- ◆ Meet with specific company representatives that I have met before
- ◆ Seek out more information about products/procedures that I was already aware of
- ◆ Spend time socializing with colleagues

### LIKELIHOOD TO ATTEND CONFERENCES

- ◆ Attend a rescheduled conference in-person later this year
- ◆ Attend a conference digitally that you originally planned to attend in-person
- ◆ Attend a conference digitally that you did not originally plan to attend

### ATTITUDES ABOUT CONFERENCES

- ◆ Without interaction with other doctors, conferences are not as valuable to me
- ◆ The time and cost savings to attend digital/virtual conferences makes them more appealing than in-person conferences
- ◆ For the same presentations and other content, I would be willing to pay the same registration fee for virtual as in-person conferences
- ◆ I expect digital/virtual conferences to make the full recording available to access post-event



# Digital Advertising

## HOW CLICKED ON ADS WHILE ONLINE FOR PROFESSIONAL PURPOSES IN THE PAST WEEK

- ◆ Intentionally
- ◆ Accidentally
- ◆ Did not click any ads

## OPINIONS ABOUT TARGETED ADVERTISING ON:

- ◆ Professional or medical websites or apps
- ◆ Consumer (non-medical) website or apps

Measured on a 7 point sliding scale

- ◆ Beneficial (making content and ads relevant)
- ◆ No opinion
- ◆ Intrusive (crossing the privacy line)

## ACTIONS TAKEN IN PAST MONTH AS A RESULT OF VIEWING ADVERTISING – PRINT, DIGITAL AND IN-PERSON FORMATS

- ◆ Learn something new (or recall facts) about the advertised product
- ◆ Go to an advertised brand's website
- ◆ Research the product on another website or offline resource
- ◆ Discuss the product with a sales rep
- ◆ Discuss the product with colleagues
- ◆ Start using the product

## AD BLOCKING OR ANTI-TRACKING SOFTWARE

- ◆ Currently Use
- ◆ Plan to Use
- ◆ Do not Plan to Use
- ◆ Not Familiar

## ACTIONS WILLING TO TAKE TO VIEW BLOCKED CONTENT

- ◆ Pay a one-time or small fee
- ◆ Paid subscription fee (monthly or annually)
- ◆ Register with personal info
- ◆ Disable ad blocker for this site

# Ad Blocking

# Advertising and Subscription Services

## OPINIONS ABOUT PROFESSIONAL ADVERTISING

(pharma, device, etc.)

- ◆ Ads are useful, and I read/watch/notice those that apply to my practice
- ◆ Ads are useful, although I typically only pay attention to ones for new products
- ◆ Ads neither bother me nor do I pay much attention to them
- ◆ Advertising is a necessary compromise that allows me access to content without having to pay for it
- ◆ Advertising interferes with my ability to gather medical information
- ◆ Advertising unduly influences my treatment and prescribing decisions
- ◆ Professional sources of information should not allow pharmaceutical advertising
- ◆ I prefer to use sources of information that do not carry advertising, even if I have to pay for them

## WILLINGNESS TO PAY FOR ACCESS TO TYPES OF PROFESSIONAL INFORMATION:

Would pay an annual or monthly subscription fee  
Would pay a one time fee for limited access  
Would never pay for

- ◆ Case studies related to treatments I am considering
- ◆ Connecting with other physicians online with similar cases
- ◆ Content from an association I am not a member of
- ◆ Continuing education that fits my schedule
- ◆ Decision/diagnosis support tools
- ◆ Latest clinical trial studies
- ◆ Online videos of procedures I do/am scheduled to do
- ◆ Presentations of speakers who are KOLs in my specialty
- ◆ Webcasts from conferences I can't attend in-person

# Patient Interaction and Education



## HOW DIGITALLY SHARED PATIENT DATA IN PAST 30 DAYS

- ◆ Other physicians within my practice, hospital or health system
- ◆ Other physicians outside my practice, hospital or health system
- ◆ Non-physicians at hospitals or medical centers
- ◆ Pharmacies
- ◆ Insurance companies
- ◆ Home health services
- ◆ Nursing homes
- ◆ Urgent care centers
- ◆ Other medical facilities
- ◆ Patients, via email
- ◆ Patients, via a patient portal
- ◆ Other (specify)
- ◆ I share patient data, but not digitally
- ◆ I do not share patient data, but my practice has implemented an EHR/EMR
- ◆ I do not share patient data, and my practice has not implemented an EHR/EMR

## PATIENT EDUCATION/DISEASE MAINTENANCE

Useful in your Practice (five point scale)

- ◆ Health-related television programs in the waiting room
- ◆ Print materials (magazines, brochures) in the waiting room
- ◆ Print materials (brochures, wallboards) in the exam room
- ◆ Video or other interactive information in the exam room
- ◆ Materials available at check-out specific to a condition or treatment
- ◆ Website information for patient to reference

## DRUG PRICES AND DISCOUNT PROGRAMS

Should pharma ads to consumers include list price of drugs

Discount drug program information available to patients

- ◆ Yes, I frequently initiate the conversation
- ◆ Yes, but only if patients ask
- ◆ No, because my practice/facility does not allow it
- ◆ No, because I choose not to

Types of discount drug programs offered to patients

- ◆ Prescription assistance program from a drug brand
- ◆ Brand-specific coupons or rebates
- ◆ Pharmacy discount cards/websites (e.g., GoodRx, SingleCare, RxSaver, etc.)

# Emerging Technology

## USE IN PRACTICE

- ◆ Already doing this pre-COVID
- ◆ Recently started this (Since COVID)
- ◆ Will start soon/in-progress
- ◆ Might start within 1-2 years
- ◆ No current plans
  
- ◆ Online Meetings With Colleagues
- ◆ Prescription Management Apps to Aid Patient Adherence
- ◆ Remote Monitoring of My Patients' Vitals
- ◆ Remote Patient Consultation
- ◆ Smart Speakers (ex: Alexa, Siri, Google, etc.)
- ◆ Virtual/Augmented Reality (for Training)
- ◆ Wearable Devices for Patient Self-Monitoring

## REASONS USED SMART SPEAKERS IN PRACTICE

- ◆ Communicate with colleagues in other locations
- ◆ Communicate with staff elsewhere in office/hospital
- ◆ Ask info about a drug or procedure
- ◆ Create or confirm schedule/appointments
- ◆ Listen to music
- ◆ Record/set task reminders
- ◆ Enhance the patient experience

# Telemedicine



## PARTICIPATION IN TELEMEDICINE

- ◆ Yes, frequently
- ◆ Yes, occasionally
- ◆ Yes, but only a few times
- ◆ Not yet, but I plan to in the next year
- ◆ No, because my practice/facility does not allow it
- ◆ No, and I have no plans to

## PARTICIPATION LEVEL

- ◆ Part of primary practice/position
- ◆ In addition to primary practice/position
- ◆ Both

## PERCENT OF CURRENT PATIENTS THAT COULD SUCCESSFULLY BE DIAGNOSED OR TREATED VIA TELEMEDICINE

## DRIVERS AND BARRIERS TO TELEMEDICINE PARTICIPATION

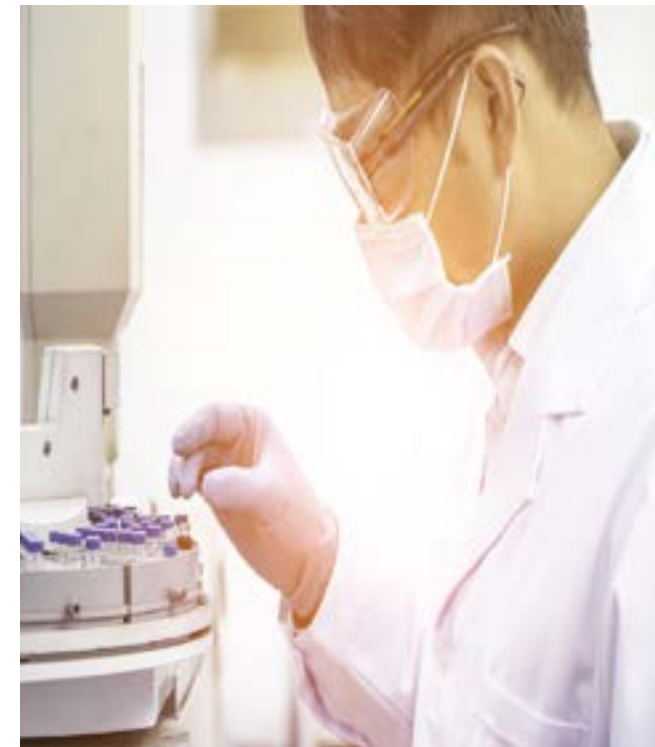
### Primary reasons you participate/plan to participate

- ◆ Easier for patients to reach out with questions or early warning signs
- ◆ Easier for patients who need to travel far or have difficulty traveling
- ◆ Efficient platform for follow-up appointments
- ◆ Expand my patient/market base (market practice to new patients or my expertise to other practices)
- ◆ Improve my own work-life balance
- ◆ Lets me compete with urgent care centers and minute clinics

### Primary reasons you do not participate/plan to participate

- ◆ Concern about security of patient data
- ◆ Not practical for most patients within my specialty
- ◆ Laws and policies dealing with telemedicine are too complicated or confusing
- ◆ Patient base has technological limitations
- ◆ Prefer in-person meeting with all patients to build trust and develop a relationship
- ◆ Requires too much technical training and expense to implement
- ◆ Sometimes difficult to collect patient history from other providers

# COVID-19



## NUMBER OF PATIENTS SEEN IN AN AVERAGE WEEK

- ◆ Earlier this year (pre-COVID)
- ◆ Currently

## MEAN CHANGE IN # PATIENTS SEEN

## CHANGE IN PATIENTS SEEN IN AN AVERAGE WEEK DUE TO COVID-19

- ◆ More patients now
- ◆ No change
- ◆ More patients pre-COVID

## ACCEPTING NEW PATIENTS SINCE OUTBREAK OF COVID-19

- ◆ More than before
- ◆ Same as before
- ◆ Less than before
- ◆ No

## PERCENT OF REGULAR PATIENTS THAT ARE HIGH RISK FOR SERIOUS COMPLICATIONS FROM COVID-19

## ACTIVELY INVOLVED IN TESTING AND/OR EMERGENCY CARE OF COVID-19 PATIENTS

## IMPLEMENTATION OF TELEMEDICINE

- ◆ Yes, prior to COVID-19
- ◆ Yes, as a result of COVID-19
- ◆ In progress/planning to
- ◆ No plans to

## IMPLEMENTATION OF TELEMEDICINE

- ◆ Yes, prior to COVID-19
- ◆ Yes, as a result of COVID-19
- ◆ In progress/planning to
- ◆ No plans to

## PERCENT OF REGULAR WEEKLY PATIENT CONSULTATIONS SEEN VIA VARIOUS METHODS AS A RESULT OF COVID-19

- ◆ Still seeing in person
- ◆ Seeing remotely via telemedicine
- ◆ Seeing remotely via phone/text/chat
- ◆ Rescheduled for post COVID-19
- ◆ No plans to

## HOW TELEMEDICINE WILL BE INCORPORATED IN PRACTICE AFTER COVID-19 CRISIS HAS SUBSIDED

- ◆ More often than it was used before
- ◆ Same amount as it was used before
- ◆ Less often than it was used before

## TIME CURRENTLY ABLE TO COMMIT SINCE COVID-19

- ◆ CME and Other General Education (non-COVID topics)
- ◆ Email Newsletters
- ◆ Interacting with Colleagues
- ◆ Interacting with Salespeople
- ◆ Journal Articles
- ◆ Online News
- ◆ Social Media

## LIKELIHOOD TO ATTEND CONFERENCES

- ◆ Attend a rescheduled conference in-person later this year
- ◆ Attend a conference digitally that you originally planned to attend in-person
- ◆ Attend a conference digitally that you did not originally plan to attend

## ATTITUDES ABOUT CONFERENCES

- ◆ Without interaction with other doctors, conferences are not as valuable to me
- ◆ The time and cost savings to attend digital/virtual conferences makes them more appealing than in-person conferences
- ◆ For the same presentations and other content, I would be willing to pay the same registration fee for virtual as in-person conferences
- ◆ I expect digital/virtual conferences to make the full recording available to access post-event

## ATTITUDES ABOUT COVID-19

- ◆ Being knowledgeable about COVID-19 is critical to my practice
- ◆ Telemedicine/virtual appointments will become much more commonplace after the COVID-19 outbreak
- ◆ COVID-19 has made me more worried about my practice and professional future
- ◆ Other countries are handling the COVID-19 outbreak better than my own
- ◆ I trust my government to make the right decisions for my country

## BIGGEST CONCERNS/FRUSTRATIONS

(open ends available)

## POTENTIAL POSITIVE OUTCOMES FOR THE FUTURE

(open ends available)

# Media Measurement — Physician and Other HCPs

Kantar's Media Measurement Studies examine the specific media (professional websites, social media, publications, newsletters) healthcare professionals view and read.

## PHYSICIANS

- ◆ Family Medicine
- ◆ Internal Medicine
- ◆ Cardiology
  - Echocardiography
  - Interventional Cardiology
  - Nuclear Cardiology
- ◆ Allergy/Immunology
- ◆ Anesthesiology
- ◆ Dermatology
  - Cosmetic Dermatologic Surgery
  - Mohs Micrographic Surgery
  - Procedural Dermatology
- ◆ Diabetes/Endocrinology
- ◆ Emergency Medicine
- ◆ Gastroenterology
- ◆ General Surgery
- ◆ Infectious Diseases
- ◆ Nephrology
- ◆ Neurology
  - Headache
  - Neuromuscular Medicine
- ◆ Obstetrics/Gynecology
- ◆ Oncology
- ◆ Hematology/Oncology
- ◆ \*Ophthalmology
  - Cataract
  - Retina
  - Refractive/Corneal
  - Glaucoma
- ◆ Orthopedic Surgery
  - Adult Reconstructive
  - Foot And Ankle Surgery
  - Hand and Wrist Surgery
  - Orthopedic Surgery Of The Spine
  - Orthopedic Trauma Surgery
  - Sports Medicine
  - Total Joint Reconstruction

\*Separate study from Medical/Surgical

- ◆ Otolaryngology
- ◆ Pediatrics
- ◆ \*Pain Medicine
- ◆ Plastic Surgery
- ◆ Psychiatry
- ◆ Pulmonary Disease
- ◆ \*Radiology and Radiation Oncology
- ◆ Rheumatology
- ◆ Urology

## OTHER HEALTHCARE PROFESSIONALS

- ◆ Dentistry
- ◆ Eyecare
  - Ophthalmologists
  - Optometrists
  - Opticians
- ◆ Hospital Management
  - Senior Executives
  - Financial Executives
  - Information Executives
- ◆ Managed Care
  - HMO/PPO/PBM/IDN Clinical Decision Makers
  - HMO/PPO/PBM General Executives
  - Hospital/Nursing Home Managed Care Directors
  - Hospital/Nursing Home Medical Directors
  - Hospital/Nursing Home Pharmacy/Formulary Directors
- ◆ Oncology Nursing
- ◆ Physician Assistants and Nurse Practitioners
- ◆ Pain Medicine
- ◆ Pharmacy
  - Retail: Chain
  - Retail: Independent
  - Hospital/Health-System
- ◆ Radiology and Radiation Oncology



# Measurement Includes:

SEE APPENDIX FOR LIST OF PUBLICATIONS ASKED OF ALL AND BY SPECIALTY

## 600+ PROFESSIONAL WEBSITES

- ◆ Visitation of websites within the past 6 months
- ◆ Average frequency visiting websites
- ◆ Average time spent per session
- ◆ Total time spent on each website per visit

## 20+ SOCIAL MEDIA — CONSUMER AND PROFESSIONAL

- ◆ Visitation within the last 6 months
- ◆ Average frequency visiting social sites
- ◆ Professional or personal use

## 450+ PUBLICATIONS

- ◆ Overall reach of a publication within a specialty
- ◆ The number of physicians reading an average issue of the publication
- ◆ The probability of a physician's exposure to an average page (editorial or advertising) in an average issue of a publication

## POSTAL AND EMAIL NEWSLETTERS

- ◆ Average frequency received
- ◆ Average thoroughness of reading

## ATTITUDES ABOUT ALL THE MEDIA THEY READ OR VISIT

Qualitative metrics include:

- ◆ Ratings of each medium as a source of quality content
- ◆ Information on drugs, devices or professional services
- ◆ Timely and relevant professional news

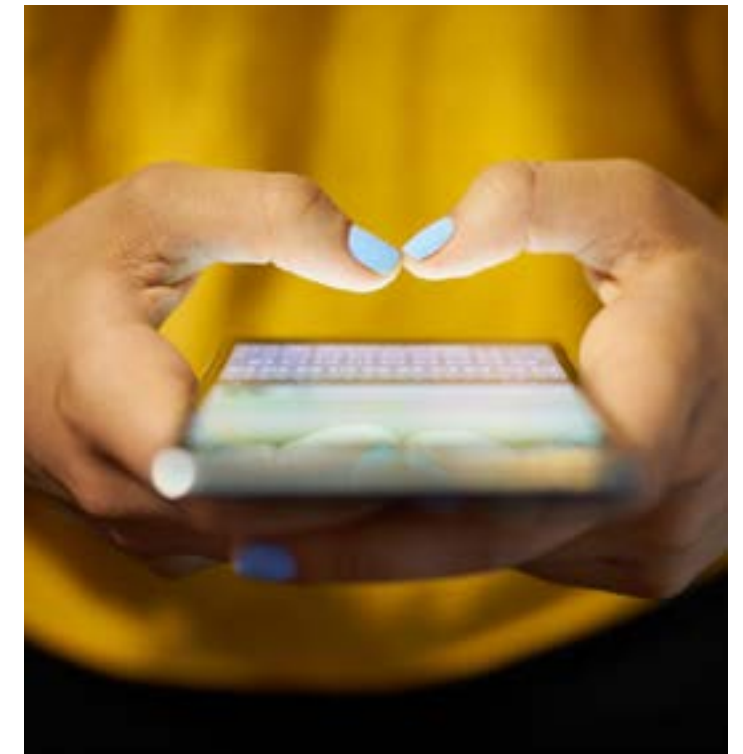
# Sources & Interactions Studies — Other HCPs

For other healthcare professionals vertical specialties, Kantar conducts a unique Sources & Interactions survey to measure preference and use of information sources.

## OTHER HEALTHCARE PROFESSIONALS SPECIALTIES

- ◆ Dentistry
- ◆ Eyecare
  - Ophthalmologists
  - Optometrists
  - Opticians
- ◆ Hospital Management
  - Senior Executives
  - Financial Executives
  - Information Executives
- ◆ Managed Care
  - HMO/PPO/PBM/IDN Clinical Decision Makers
  - HMO/PPO/PBM General Executives
  - Hospital/Nursing Home Managed Care Directors
  - Hospital/Nursing Home Medical Directors
  - Hospital/Nursing Home Pharmacy/Formulary Directors
- ◆ Oncology Nursing
- ◆ PA/NP
- ◆ Pain Medicine
- ◆ Pharmacy
  - Retail: Chain
  - Retail: Independent
  - Hospital/Health-System
- ◆ Radiology and Radiation Oncology

Note — Other Healthcare Professionals Sources and Interactions content may vary by vertical/study



# Sources & Interactions Studies – Other HCPs (continued)

## INFORMATION SOURCES — USE, FREQUENCY, IMPORTANCE

### Journals and Publications

- ◆ Current or past issues of Medical Journals
- ◆ Reference publications
- ◆ Medical Journal Websites

### Websites

- ◆ Company/Product sites
- ◆ Consumer News
- ◆ Professional publications
- ◆ Professional portals

### Webcast/Podcasts

### Social Networks — Consumer and Professional

### Mobile Apps

- ◆ Diagnostic Tools
- ◆ Drug Reference
- ◆ Publications/News Content

### Mailings and Newsletters — Print and Email

- ◆ Pharma company mailings
- ◆ Government bulletins/literature

### Physician Education

- ◆ Conferences/Symposia/Meetings
- ◆ Convention Attendance
- ◆ Colleagues
- ◆ Professional Associations/Study Clubs

### Sales Reps — Pharma and Device/Equipment

## PROFESSIONAL BEHAVIOR AND ATTITUDES

### Journal readership

- ◆ Types and versions of Journals and Publications/Platforms used
- ◆ Version read most

### Internet/Mobile usage

- ◆ Frequency for work
- ◆ Frequency consulting internet-based resources regarding a specific patient condition
- ◆ Mobile apps used by device/locations used by device
- ◆ Percent of time spend online is mobile

### Social Media

- ◆ Frequency using Social Networks in Past Six Months
- ◆ Activities performed when using for work
- ◆ Types of connections

### Advertising

- ◆ Actions taken after viewing print, digital and in-person ads and value of professional advertising

### Patient Communication

- ◆ Methods used to interact with patients (email, text message, social media, etc.)
- ◆ [Telemedicine](#)

# Sources & Interactions Studies – International

The International Study provides a cross section of content from our Sources & Interacton and Digital for five countries.

## COUNTRIES MEASURED:

- ◆ France
- ◆ Germany
- ◆ Italy
- ◆ Spain
- ◆ United Kingdom

## INTERNATIONAL SPECIALTIES:

- ◆ Cardiology
- ◆ Dermatology
- ◆ Diabetes/Endocrinology
- ◆ Family Medicine/General Practice
- ◆ Gastroenterology
- ◆ Infectious Diseases
- ◆ Internal Medicine
- ◆ Neurology
- ◆ Oncology & Hematology/Oncology
- ◆ Primary Care
- ◆ Pulmonary Diseases
- ◆ Rheumatology
- ◆ Surgery

## NUMBER OF PATIENTS SEEN IN AN AVERAGE WEEK

- ◆ Earlier this year (pre-COVID)
- ◆ Currently

## Mean Change in # Patients Seen

## CHANGE IN PATIENTS SEEN IN AN AVERAGE WEEK DUE TO COVID-19

- ◆ More patients now
- ◆ No change
- ◆ More patients pre-COVID

## ACCEPTING NEW PATIENTS SINCE OUTBREAK OF COVID-19

- ◆ More than before
- ◆ Same as before
- ◆ Less than before
- ◆ No

Actively involved in testing and/or emergency care of COVID-19 patients

## IMPLEMENTATION OF TELEMEDICINE

- ◆ Yes, prior to COVID-19
- ◆ Yes, as a result of COVID-19
- ◆ In progress/planning to
- ◆ No plans to

## PERCENT OF REGULAR WEEKLY PATIENT CONSULTATIONS SEEN VIA VARIOUS METHODS AS A RESULT OF COVID-19

- ◆ Still seeing in person
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- ◆ CME and Other General Education (non-COVID topics)
- ◆ Email Newsletters
- ◆ Interacting with Colleagues
- ◆ Interacting with Salespeople
- ◆ Journal Articles
- ◆ Online News
- ◆ Social Media

## ATTITUDES ABOUT COVID-19

- ◆ Being knowledgeable about COVID-19 is critical to my practice
- ◆ Telemedicine/virtual appointments will become much more commonplace after the COVID-19 outbreak
- ◆ COVID-19 has made me more worried about my practice and professional future
- ◆ Other countries are handling the COVID-19 outbreak better than my own
- ◆ I trust my government to make the right decisions for my country

## LIKELIHOOD TO ATTEND CONFERENCES

- ◆ Attend a rescheduled conference in-person later this year
- ◆ Attend a conference digitally that you originally planned to attend in-person
- ◆ Attend a conference digitally that you did not originally plan to attend

Biggest concerns/frustrations (open ends available)

Potential positive outcomes for the future (open ends available)

# Sources & Interactions Studies — International (continued)

## INFORMATION SOURCES — USE, FREQUENCY, IMPORTANCE

### Publications

- ◆ Current or past issues of medical journals
- ◆ Reference publications
- ◆ Medical publication websites

### Websites

- ◆ Medical society (local & international)
- ◆ Disease-specific (professional)
- ◆ Medical and CME webcasts/podcasts
- ◆ Professional portals: [Subscription-Based \(e.g., UpToDate, ClinicalKey, etc.\)](#)
- ◆ Professional portals: [Free to Use \(e.g., Medscape MedPage Today, etc.\)](#)

### Instructional videos

### Social communities/networks — consumer and professional

### Mobile apps

- ◆ Diagnostic tools and drug reference

### Mailings and newsletters — print and email

- ◆ Government bulletins/literature
- ◆ Medical center/university newsletters
- ◆ Medical associations [and their publications](#)
- ◆ [Publications/Websites not affiliated with an association](#)
- ◆ Pharma/device companies

### Physician education

- ◆ CME — attending meetings, printed courses, [digital format \(webcasts, podcasts, webinars, mobile apps, DVDs, online learning, etc.\)](#)
- ◆ Conferences/symposia on a product or Therapy-in-person or e-conference
- ◆ Dinner meetings
- ◆ Conventions
- ◆ Colleagues
- ◆ Grand rounds/speaker programs

### Sales reps and company websites/videos

- ◆ Pharma medical liaisons
- ◆ Sales reps: pharma and device/equipment-in-person and online meeting
- ◆ Company/product information website
- ◆ Promotional videos

## PROFESSIONAL BEHAVIOR AND ATTITUDES

### Publication readership

- ◆ Medical publications read/[received](#) in an average month

### Internet/mobile usage

- ◆ Internet — frequency for work
- ◆ Percent of time online that is mobile
- ◆ Online activities conducted on computer/smartphone/tablet in past month

## EMERGING TECHNOLOGY

### Use in practice

- ◆ Already doing this pre-COVID
- ◆ Recently started this (Since COVID)
- ◆ Will start soon/in-progress
- ◆ Might start within 1-2 years
- ◆ No current plans

- ◆ [Online Meetings With Colleagues](#)
- ◆ [Prescription Management Apps to Aid Patient Adherence](#)
- ◆ [Remote Monitoring of My Patients' Vitals](#)
- ◆ [Remote Patient Consultation](#)
- ◆ [Smart Speakers \(ex: Alexa, Siri, Google, etc.\)](#)
- ◆ [Virtual/Augmented Reality \(for Training\)](#)
- ◆ [Wearable Devices for Patient Self-Monitoring](#)

### Social media

- ◆ Frequency using social networks in past six months
- ◆ [Average time spent per session on social networks in past 6 months](#)
- ◆ Types of connections

### Network used most for breaking medical news

### Time spent

- ◆ Engaged in any professional activities during average 7-day week (including work locations and non-work locations)
- ◆ In past week engaged in various activities/total weekly time spent
- ◆ Change in past year of time spent reading any medical content (print or online)

### Activities attended in past year at

Meetings/conferences/congresses/conventions

# KANTAR

## Sources & Interactions Studies

Detailed data on healthcare professionals' preferences for keeping up-to-date on industry developments and how they interact with those sources of information. Includes measurement of online and offline media, meetings, sales rep interactions, and more.

## Digital Insights Studies

A comprehensive assessment of physicians' digital behaviors, including how they use specific mobile apps and social networks, and their attitudes and opinions about online video, social media, digital advertising, and emerging technology (telemedicine, smart speakers, and more).

## Sources and Interactions — International Studies

Essential insights into European healthcare professionals, drawn from the Sources & Interactions and Digital Insights studies. Available for France, Germany, Italy, Spain and the United Kingdom.

## Media Measurement Studies

Detailed reporting on physician exposure to content and advertising in 500+ medical content sites and apps, 400+ publications, and other professional media such as email newsletters, social media, print and online drug references, and more. The foundation for media decisions in the professional health market.

## Other Healthcare Professionals

Media Measurement and Sources & Interactions data are available for multiple health professionals including; Dentistry, Hospital Management, Managed Care, Oncology Nursing, PA/NP, Pain Medicine, Pharmacy and Radiology and Radiation Oncology.

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**UNDERSTAND PEOPLE. INSPIRE GROWTH**