THE MSL

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A Modern Manager's Guide to MSL Onboarding and Development; Part One: New MSL Management

I've Interviewed Hundreds of MSLs About What Brings Meaning and Joy at Work, Here's What I Learned

The Potential Importance of Multi-disciplinary Knowledge in the Repository of Medical Science Liaison Specialist Skills

The MSL Society Mentor Program - Mentees and Mentors Find Value in Mentorship

What Should I Expect as a New MSL in the Digital World of Medical Affairs?

Benefits of Taking a Pharmacy Student on Rotation with a Field Medical Team

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Letter from Editor

By karolina | Fall 2022

Dear Readers,

It is that time of year again when we look back and reflect on all we have done and aspired to do over the past year! 2022 has been a journey through the winding trail of the recent pandemic, where we find Covid is still with us and that we have all successfully adapted to life, finding new ways to conduct business and make an impact on patient care which is central to our mission. We are at a junction in Medical Affairs that has yielded quite a transformation. The field of medical roles has dramatically expanded with a variety of new titles and a mix of activities that sync with the evolving healthcare environment.

As much as we take time to reflect on where we have been, and where we laid the groundwork to reach our current place, it is ever more vital to have keen foresight into the future of where our journey will take us in medical affairs. Learn from the past, assess the current status, and cast a vision forward into future paths. It is crystal clear that medical affairs have proven value, impact, and necessity. The role will continue to expand, and in many ways take on an even greater mission to get involved earlier in drug development, partnering with R&D to expedite clinical research that can deliver medical solutions to patients who are waiting. Medical Affairs will take on more strategic and consulting roles to offer sage advice, deeper analysis with the use of analytic techniques, mining data, and defining paths forward with a more targeted focus on essential goals. New technology will enable field medical to be more nimble and adapt with knowledge at our fingertips!

This edition of the journal speaks to readers to inspire the continued innovation, sparks of ingenuity, and advancing strategic thinking that will guide us onward to greater heights! From articles that focus on MSL competencies needed today and into the future, content on how technology can be better leveraged, and tips that take field medical to the next level, to measuring impact on engagement and how to evaluate performance, this edition spans a variety of topics that reflect where we are today in this transformation that is shaping the development of novel therapeutics with the field medical affairs role as a central, essential element in this process. I hope everyone finds pearls that will elevate field-focused efforts and allow for cross-pollinated learning on a global level.

As we move from the US Thanksgiving holiday into the winter holidays, I am grateful to so many colleagues, friends, leaders, and all those around us who have supported our growth, development, and advancement. Rising tides lift all boats together. As we share our best practices, learn from failure and find humility in this time of year, please take time to be with your family, and friends and make memories; our careers in medical affairs give us such a strong sense of purpose and yet this should be well

balanced and harmonious with our need for family and down time!

Wishing everyone good health, relaxation, and the time to recharge as we take on new challenges in 2023!

Happy reading!

Cherie

Editor:

Cherie Hyder, PharmD, MSL-BC

Cherie Hyder is Syndicated National MSL Director at Syneos Health. In her previous job at Biohaven Pharmaceuticals, she supported a virtual launch of Nurtec ODT for acute migraine. She has been involved in drug development for more than 30 years, working at FDA in CDER and pharmaceutical companies including Pfizer, Lilly, Novartis, Solvay, and Avanir, among others. At the University of Missouri, she received a Doctor of Pharmacy degree with the intention to devote her career to pharmaceutical research. She has multiple adjunct faculty appointments and enjoys teaching opportunities.

MSL Leader Mentors Share Their Perspectives on the Aspiring MSL Mentor Program

By Samuel Dyer, MD, PhD | Fall 2022

Mentoring has always played a crucial role among the activities of MSL professionals. Through mentors, aspiring MSLs are guided on how to break into the MSL role, and MSLs are coached properly with advice on how to further their careers.

The MSL Society recognizes the value of mentoring MSL professionals, hence its dedicated Aspiring Mentorship Program. This unique program is one of the multiple inclusions of the MSL Society's 2 programs dedicated to Aspiring MSLs: the 3-Day Live Aspiring MSL Presentation & Communication Skills Program, and the eLearning program "How to Become a Medical Science Liaison.

The program is designed in a way that 2-3 MSL Managers would serve as mentors for participants, or 'mentees,' in personalized monthly sessions. There is also a monthly topic relevant to aspiring MSLs where mentees can ask their mentors questions.

Overall, the mentoring program allows mentees to have direct interaction with MSL hiring managers and have their queries answered immediately. On the side of the mentors, they are given the opportunity to give back to the MSL community and guide aspiring MSLs until they break into the MSL role.

We had the chance to interview former mentors of the MSL Society Aspiring Mentor Program 2022 and ask for their insights, why they decided to become a mentor, and what they learned from their mentees.

Why do you participate in the virtual mentor program for Aspiring MSLs?

The virtual mentor program is a way for me to give back to the scientific community. Back when I first researched this job, there were limited resources available, my advisors from academia had no insight into this role and I had very few connections with current MSLs. I had told myself that when I make it into this profession, I will focus on making it easier for scientists like myself to transition into this role. This is also the reason I had joined the MSL society and had worked with them on numerous programs throughout the years to advance the MSL profession.

Douglas Yau, PhD, MBA, CMD

St. Director, Oncology, Medical Affairs, Sanofi

I really enjoy the opportunity to help support the future of the MSL role by doing all I can to mentor, encourage and provide feedback to aspiring MSLs.

Larry Dollar, PharmD, MS

Vice President, Medical Affairs, Syneos Health – Deployment Solutions

I enjoy mentoring both aspiring and current MSLs and thought this would be a unique forum to provide practical advice for current job seekers.

Christiane Carney, PhD

Director, Field Medical Affairs, Verastem Oncology

I participated in the virtual mentor program as a way to give back to the MSL profession that has been so vital in my development.

Paul Ward

Executive Director, Head of US Field Medical Team, BeiGene USA, Inc.

What do you think is the greatest value of the aspiring mentor program?

The aspiring mentor program is a way for scientists and clinicians to have direct access to MSL society staff and MSL managers, who can provide them with accurate information and prepare them for the role. Not only do they get insight into the job, but also what hiring managers look for in candidates and what stands out to us in a resume and in an interview. They get to ask

questions, get critiqued, and receive valuable feedback that they can use to improve themselves.

Douglas Yau, PhD, MBA, CMD

St. Director, Oncology, Medical Affairs, Sanofi

There is no better to learn a new skill than by spending time with people who have experience with that skill and know what it takes to be effective in the role. Allowing aspiring MSLs to have coaching and mentor sessions with experienced leaders is a great way to learn and grow to help get that first MSL role.

Larry Dollar, PharmD, MS

Vice President, Medical Affairs, Syneos Health – Deployment Solutions

One of the best ways to break into the industry is to leverage your network, but many aspiring candidates know few people in the industry. The MSLS virtual mentor program provides direct, live access to current MSL managers who can answer questions and provide advice. These managers review resumes and make hiring decisions so they are equipped to give up-to-date current advice on both what to do and importantly what NOT to do to land your first role.

Christiane Carney, PhD

Director, Field Medical Affairs, Verastem Oncology

Mentor – giving back to the community and seeing someone grow and thrive as they start their career

Mentee – an instant connection to not just a mentor but an entire community of industry leaders

Arthur Chan, PhD, MBA

Vice President of Medical Affairs, Tarsus Pharmaceuticals

What have you learned from the aspiring MSL mentees?

These aspiring MSLs are quite eager to join the greatest profession in the world. They have a lot of drive, and quite frankly, a diverse set of skills that would add value to our current MSL teams. However, these candidates are up against others who have more clinical experience, might be starting their second career, or even current MSLs at another company. I have found that those aspiring mentees who took in the feedback with an open mind and developed a plan to focus on improving on a few of the core competencies, were able to grow significantly and attained their first MSL job.

Douglas Yau, PhD, MBA, CMD

St. Director, Oncology, Medical Affairs, Sanofi

They are energetic, passionate about the role, and willing to work extremely hard to give themselves the best chance to break into the role.

Larry Dollar, PharmD, MS

Vice President, Medical Affairs, Syneos Health – Deployment Solutions

Every MSL should be grateful that they have one of the most coveted jobs in the universe. Keep that in mind when you need a pick me up

Arthur Chan, PhD, MBA

Vice President of Medical Affairs, Tarsus Pharmaceuticals

I've learned that the aspiring MSL group I've interacted with are smart, motivated, and oftentimes just need a chance to prove themselves in order to get positioned well for their 1st opportunity.

Paul Ward

Executive Director, Head of US Field Medical Team, BeiGene USA, Inc.

What advice would you offer to aspiring MSLs regarding breaking into their first role?

Be proactive in seeking help and advice from current MSLs and MSL managers months to a year before you are ready to apply. If they give you time, ask them for advice and not a referral. Ask them to help review your resume, provide ideas on areas you can strengthen or develop to be a better candidate that can be actionable today, and practice interviewing with them. They may also give you some guidance on how to answer certain interview questions or where they would focus on the final presentation. Be grateful for the time they give you; their insight is a gift.

Douglas Yau, PhD, MBA, CMD

St. Director, Oncology, Medical Affairs, Sanofi

Be open to a variety of therapeutic areas, keep networking, and be professional (business dress) in your interactions and interviews. Don't give up!

Larry Dollar, PharmD, MS

Vice President, Medical Affairs, Syneos Health – Deployment Solutions

Networking is key! This means everyone: current MSLs, managers, medical directors, med info specialists, recruiters, etc. You never know where a great insight or referral will come from. Ensure your resume is tailored to being an MSL at the specific company you are applying to, not whatever your former career has been. Breaking into the MSL role is difficult so do not get discouraged! Keep putting forth your best effort, selling yourself and your skills, and believing in the process.

Christiane Carney, PhD

Director, Field Medical Affairs, Verastem Oncology

The people you want to work for seek a combination of emotional intelligence and scientific intelligence.

Network with as many MSLs as you can – not the hiring managers but MSLs. Managers trust their team members to recommend additions should openings become available. And regarding “what kind of company would be the best fit for me?”, the answer for your first MSL gig is “the one that’ll offer you an MSL job!”

Arthur Chan, PhD, MBA

Vice President of Medical Affairs, Tarsus Pharmaceuticals

My advice to aspiring MSLs is to network, network, and then network some more – with current MSLs, HCPs, and other Pharma roles and to consider contract work as well as connect with some of the very talented recruiters that focus on MSL roles.

Paul Ward

Executive Director, Head of US Field Medical Team, BeiGene USA, Inc.

About the author:

Samuel Dyer, MD, PhD

Dr. Samuel Dyer is the CEO of the Medical Science Liaison Society and has over 25 years of international MSL experience. During his career, he has managed MSL teams and operations in over sixty countries across the United States, Canada, Europe, Africa, the Middle East, Australia, and New Zealand. He has facilitated the successful launch of pharmaceutical and medical device products for both Fortune 500 pharmaceutical companies and small biotechnology companies.

Dr. Dyer has coached, interviewed, and reviewed the CVs of countless aspiring MSLs. His insights and guidance have resulted in hundreds of aspiring MSLs successfully breaking into their first roles.

While leading the MSL Society, he has conducted MSL training programs for over 75 pharmaceutical, biotechnology, and medical device companies in more than 15 countries. Dr. Dyer has also written extensively on the Medical Science Liaison profession, including numerous published articles, benchmark studies, and reports. He has been the keynote speaker and moderated numerous international conferences on various MSL–related topics, including creating teams, management, MSL training, proper utilization of MSLs, global trends, and the KPIs and metrics used to measure MSL performance. Dr. Dyer has also served as a resource and consultant on several MSL–related projects for several organizations, including McKinsey & Company and Bain & Company.

Dr. Dyer has an MD from Washington University (Health & Science) School of Medicine, a PhD in Health Sciences from Touro University, a Master’s degree in Tropical Biology (where he studied in the Amazon) from Southern Illinois University Edwardsville, and a Bachelor’s degree in Biology from the University of the State of New York. Dr. Dyer also completed a certificate program for Executive Leadership and Strategy in Pharmaceuticals and Biotechnology at the Harvard Business School.

Dr. Dyer is the author of the multi-award-winning and Amazon #1 Best Seller, *The Medical Science Liaison Career Guide: How to Break into Your First Role* (https://amzn.to/4aoYcZp). The book is the first and only step-by-step guide on how to break into the MSL profession and it has received multiple prestigious awards, including:

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He is also the author of the *Medical Science Liaison Job Application Tracking & Interview Self-Evaluation Journal* (https://amzn.to/49n6MGR).

MSL of the Year Awards: Perspectives from 2022 Winners

By Samuel Dyer, MD, PhD | Fall 2022

The 2022 MSL of the Year Awards were announced during the 10th annual MSL Society conference in Las Vegas, September 6th-8th. The purpose of the awards is to recognize excellence within the MSL Profession and is open to all MSLs and MSL Managers globally.

During the Awards Night Celebration on September 7th, 39 finalists from eight countries were acknowledged, and a winner was announced in each of the 8 award categories: MSL of the Year (US and outside the US), MSL Rookie of the Year (US and outside the US), MSL Manager of the Year (US and outside the US), and MSL Rookie Manager of the Year (US and outside the US).

All submissions were evaluated by a panel of 10 highly experienced global MSL leaders representing pharma, biotech, and medical devices companies.

Each award category required four letters of recommendation from a KOL or direct report, a manager, a peer, and a cross-functional team member to be submitted as part of the application. During the month-long evaluation and review period, each of the 10 judges independently evaluated the four letters of recommendation and introspective questions on a scale from 1 to 10. An awards platform was utilized to determine the winners in each category based on the total scores from each judge. The highest-scoring application in each award category was determined to be the winner.

We interviewed some of the 2022 winners to learn their perspectives regarding winning the award, what the award means to them, and what advice they would offer to others.

What were your first thoughts after you heard you won the award?

Bethany Grayce Bedford: I was overwhelmed, and, honestly, surprised. The nominees this year were fierce and phenomenal, and it was an honor to even be included in the group as a nominee and finalist. Though of course, I hoped to win, I did NOT expect it: there's an amazing class of rookies out there, and I'm inspired by them!

Amit Lalwani: SURPRISED, HUMBLED & HONOURED! To receive an award for the profession that I absolutely love from the Medical Science Liaison Society, an organization that I highly admire makes me truly happy and grateful. When the awards were being announced in Las Vegas, I was boarding a plane in Australia and as I was about to sit on my seat, I saw a Linkedin post of congratulations on my smartwatch. Before I could even read the entire message on my phone, deep down in my heart I knew I won the MSL rookie award and I couldn't help but scream with excitement "YESSSSS". A few fellow passengers looked at me and smiled and one said "looks like something great happened.. congratulations". For the remaining 4 hrs of my time on the flight, I had a never-ending smile on my face.

Mandy Turton: Honestly, just getting to the final was something I was not expecting, but then on the evening of the awards to hear my name called out as the winner, well, it was just the best feeling, you know, one of those once in a lifetime moments that just blow you away. So I was totally overwhelmed, but extremely happy, just in shock really, but so so happy!!

Kelby Kuhn: I was happily surprised, and shocked when my name was called. All of the events, decisions and hard work of the past few years that led me to this night flashed through my mind. It was a humbling experience to be recognized as a leader in the MSL profession. I am grateful to all the amazing mentors and colleagues I have had the opportunity to work alongside.

Kevin Knower: I was shocked, excited, and genuinely happy to be the recipient! I really wanted to be there in person as I was so thankful to the judges, other nominees, and the MSL Society for the recognition. It was so nice to also have my close colleagues reach out, some of who I haven't worked with in a while, to say how deserving I was of the award.

What does receiving this award mean to you personally and professionally?

Bethany Grayce Bedford: It is incredible – such a confidence booster and encouragement. I think we always wonder if we're doing enough, bringing enough value, or proving our worth to our company and colleagues. This feels especially true when we started as completely online MSLs. This nomination and award are confirmation that the time, effort, and encouragement invested in me by mentors and peers have been successful. I feel empowered to continue growing as an MSL and be supported by mentors and colleagues.

Amit Lalwani: Overall, receiving this award and being recognized for my profession as an MSL is a humbling and honorable achievement. Personally, it feels like one of my wildest dreams has come true. It empowers the significant highlights of my MSL career and the value I bring to HCPs. Hopefully, this will make many others understand what I do day on the day as an MSL. Professionally, it has increased my confidence every day, strengthened my commitment to the medical affairs function and to my HCPs, and lastly, I successfully exceeded all expectations and have the respect of my peers, which means the world to me.

Mandy Turton: I absolutely love what I do, and working in medical affairs is just the best place in the industry to be, in my

opinion. I'm passionate about what I do and I put my heart and soul into my work, so winning this award for me on a personal level is knowing that what I and the team that I lead do makes a real difference to the lives of cancer patients. That is incredibly powerful and humbling. On a professional level, it means so much that my manager believed in me and nominated me for the award. I have had an amazing opportunity to build a strong team, and helping them grow and develop has been an honor. The support I received from my team, my manager, and my peers has been just amazing and means the world to me.

Kelby Kuhn: Being selected as the MSL of the year 2022 is an honor. Personally, I have been on a mission to pay it forward. What better way to realize this objective, than be recognized by an organization with values that align with my own personal goals? In addition, I was able to share this experience with a colleague, whom I had been mentoring over the past 6 months, and was offered her first MSL position one week before the MSL Society Conference. I mean, "WOW" that was the icing on the cake. Professionally, I am grateful to have the best job ever and be recognized by my profession as one leading the way. I know this will help my development toward becoming a director or manager in the future.

Kevin Knower: It is amazing to be recognized for my MSL work on the international stage. It was really gratifying as I felt my application showcased many years of accumulated MSL work in the industry. The award submission also allowed some time for me to reflect on the impact that I as an MSL have had on my peers and external stakeholders. I feel this recognition is a great motivator for me to utilize to advance my career to the next level.

Do you have any advice for your colleagues/peers?

Bethany Grayce Bedford: Keep going! Find mentors who encourage you and challenge you. Raise your hand and say 'yes' to opportunities (even if they're a bit outside of your normal box). Reach out to your network and GROW your network. The MSL world is incredible, and we're here to build each other up.

Amit Lalwani: My advice to my colleagues/peers would be to always keep going, never give up, and take smart risks. You need to have a deep understanding of your personal values and missions and see if they resonate with your company and your role as an MSL. Always love your work that has tangible positive effects with a deep impact on the quality of the patient's lives and experience. I take every opportunity to give back to the MA community and so if you may have any questions, please don't hesitate to reach out.

Mandy Turton: To my colleagues and peers working in medical affairs, I would say that if you are passionate about your work, then someone in your team will probably nominate you. The sky is the limit, so just go for it and grab the opportunity with both hands. You never know what you can achieve. Look at me – I had no idea when I started on this journey that I'd be on the stage accepting such a prestigious award. Believe in yourself and you can too!

Kelby Kuhn: I would like to share two quotes, which have helped me focus when I needed direction during the tough times as an MSL. Winston Churchill said, "Never, Never, Never, Never give up" followed by Thomas Edison, "Our greatest weakness lies in giving up. The most certain way to succeed is always to try one more time". I have learned from my experiences over the years, that if you have the desire to do something, then dream big and make those dreams your reality. Most importantly, remember that you have two hands, one for helping yourself, and one for helping others.

Kevin Knower: While the MSL role is very autonomous in nature and can be quite isolated, I put a lot of my own success down to the amazing people I surround myself with. If you are an MSL or even an aspiring MSL, be sure to find yourself a great mentorship network, create more visibility through involvement in tasks or projects that take you out of your comfort zone, and importantly, where possible be sure to pass on your wealth of knowledge to act as a leader for your peers and others in your organization.

About the author:

Samuel Dyer, MD, PhD

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Evaluating MSL Performance and Advocating for a Promotion

By Celeste Mosby | Fall 2022

Introduction

Effective performance evaluation helps leaders identify strengths and weaknesses relative to the overall mission; through careful evaluation of what is working and not working related to achieving goals, one can focus on areas for improvement, create benchmarks for achievement and provide data to make informed decisions. Performance evaluations create a snapshot of current performance capabilities and track progress toward enhancing performance in a systematic manner. With this in mind, it is essential to define the characteristics of a job description that will lead to the successful execution of the duties. Also, considering key competencies and behaviors for a position guides the ability to measure performance. A good performance measure should be based on activities that leaders can assess and control or influence; activities need to be able to be measured and realistic. Evaluating performance, providing feedback, and coaching to elevate performance seeks to move staff toward a promotion opportunity. A stratified competency framework with defined performance standards at various proficiency levels of a position offers a roadmap for career pathways; a competency model is an objective approach to formally evaluate readiness for promotion across teams. Identifying differentiating behaviors for field medical teams also elevates the expectations of all of those new to the role and in the role for a longer period of time.

Competencies drive the delivery of value as a function of MSL performance. As the pool of Medical Affairs (MA) key stakeholders expand beyond healthcare practitioners and patients, leveraging data sets that provide insights into trends and behaviors will also allow MSLs to refine and improve their interactions. This will help to develop more targeted and impactful engagement plans. Data analysis provides insights into past behaviors and, in some cases, can be used to reveal current behaviors. Nevertheless, due to a constantly evolving landscape, accurately predicting current trends and behaviors based on data may be difficult. Thus, the development of targeted approaches may be challenging, as the rationale behind the outputs may be unclear.

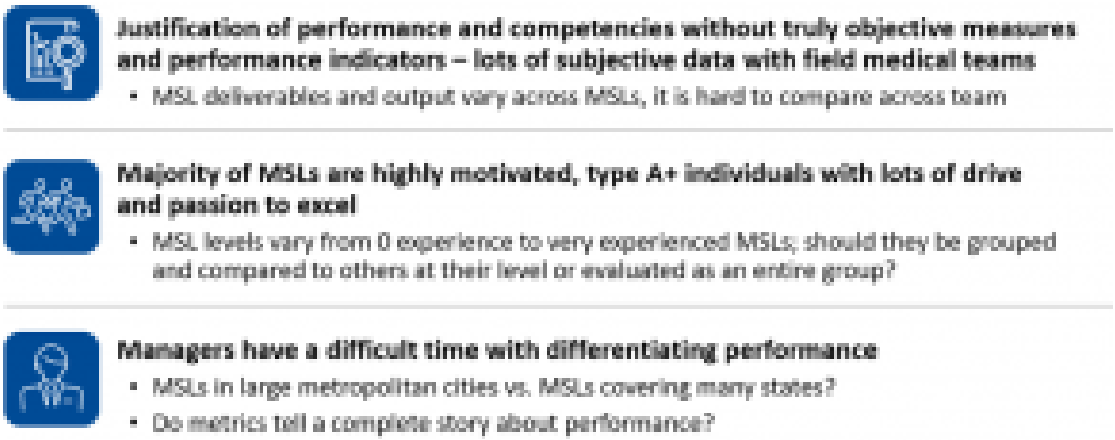
Therefore, sentiment research may yield useful data for Field Medical organizations and allow them to identify and gravitate towards their desired state with a baseline assessment, which can be tracked on a longitudinal basis to see shifts in knowledge and awareness levels of ecosystem stakeholders. To that end, MSL impact can be measured to evaluate best practices, which in turn can help with current and future competency needs.

As part of the MSL Society 2022 annual conference, some of the authors led an interactive workshop on "Evaluating MSL Performance and Advocating for a Promotion".

Key objectives of the workshop included:

- Understanding the challenges and solutions to guide performance evaluation and staff promotion
- Creating a more consistent and well-documented competency-based model for MSL career growth and development
- Discussing ways to use metrics and performance evaluations to show accomplishments that can lead to promotion
- Linking field coaching and feedback to continuous improvement that advocate for moving to the next level

Background challenges and obstacles to effectively evaluating and reward performance: What are the problems?



Field medical teams are involved in a variety of activities across their regions in support of external KOLs and in support of internal stakeholders, thus the metrics and ability to compare performance across the field medical team are problematic. Additionally, one would not compare a new MSL to a highly experienced MSL in terms of expected performance if they share the same title or position level. It's helpful to consider creating experience bands and proficiency levels for more appropriate comparisons. Further, there are regional differences that may yield less opportunities to deliver value across some regions and the leaders should give consideration to some degree of parity to make comparisons among regions to look at MSL efforts and the value they deliver. Metrics will never tell a complete story. In addition to metrics, consider deliverables, value-added efforts, overall effort to reach goals, and ways of working; look at *how* the work is done and achievements happen, in addition to what is accomplished and the quality of the output.

Many facets of the field medical role are very subjective and sometimes hard to quantify. Additionally, MSL deliverables and opportunities vary by territory and therapeutic area. An MSL working in a large metropolitan area (e.g. New York City) may have more meeting opportunities than an MSL working in the Midwest. However, they need to have the same method of evaluation and determination of value in their performance. The creation of an MSL competency model helps to bridge this gap.

How Can Development of an MSL Competency Index Help Overcome These Challenges and Provide a More Consistent Path to Promotion: What are Some Solutions?

1. The development of a competency index provides more clarity and transparency to what is expected and how MSLs will be evaluated
2. Competency Index, behaviors, proficiency levels, plus competency-based Field Coaching Reports (FCRs) provide cross-departmental documentation for use in ongoing evaluations/feedback and roll up into reporting that can inform annual reviews and promotion review committee meetings
3. The level playing field for managers and MSLs; expectations and definitions are calibrated for consistency in

application across the team
4. Greater staff motivation with clarity surrounding the performance evaluation process and areas of assessment

Using competencies in FCRs and when providing performance feedback throughout the year, ensures a seamless performance review process where staff understands areas they need to focus on for growth and have clarity around how to build capabilities to higher levels.

Using a standard FCR Digital Tool and online coaching companion can more easily connect performance with evaluation data and dashboards. Following metrics with actions, and making coaching interventions, has a positive impact on-field performance. Combining FCR results with an online coaching companion tool, ties coaching to competencies with real-world actionable steps. The value of using a FCR digital tool is that it drives further organized data collection/metrics/insights and some tools embed A.I.(Artificial Intelligence), which automatically nudges MSLs to learning interventions important to group & individual performance growth.

Aligning appropriate training enables perceptible, positive change in behavior internally and externally. The FCR measures that in a way that can be easily traced back to a training curriculum. In this case, it's not academic, it's tied to real-world application. Also, assessments and quizzes are built directly into the same LXP (Learning Experience Platform) as the FCR to:

- Serve as additional competence & confidence data points
- Determine knowledge gaps
- Trigger the completion of a curriculum
- Test competency

Why is a Competency Framework Needed?

Using the competency framework

- Three primary sections: Scientific Expertise, Collaboration, Business Acumen
- Stratified across three MSL levels
- Definitions for each competency area by MSL level

Using the competency framework helps to

- Determine readiness for promotion
- Apply a consistent framework to evaluate everyone the same way
- Ensures a defensible approach with all MSL staff, HR, and Medical Affairs leadership
- Helps to coach for development and ensures no surprises during performance reviews
- Mirror FCR for competency-based coaching throughout the year

Review the published MSL competency framework provided below which lays out specific competency areas for success in a field medical role. Note how the sections are divided into three areas: Scientific Expertise, Collaboration, and Business Acumen. Additionally, three levels are defined for field medical roles: MSL, Senior MSL, and Executive MSL; these levels can be any title such as Level 1, 2, and 3 or MSL Manager, Senior MSL Manager, and Principal MSL Manager. Regardless of how one defines the titles for three levels of field medical role, it is useful to consider how these levels progress with increasing strategic focus, more independence, greater opportunity to mentor others, and the ability to take on additional responsibilities.

One consideration for promotion readiness is to have examples for each competency area that are consistently displayed for at least 6 months as an industry standard, although leaders may elect to choose another period to determine readiness.

Note that the FCR example also contains competencies with a 3-point rating scale to identify areas for improvement and open text boxes where performance observations or feedback can be outlined along with useful goals to build competencies.

MSL Competency Framework

MSLS

MSL CAPABILITY CONTINUUM

Capability	MSL	Sr. MSL	Executive MSL
SCIENTIFIC EXPERTISE			
Knowledge of MSL Role	Capable of performing MSL function with ongoing training and supervisor / mentor support	Capable of performing MSL function independently, with supervisor / mentor support for ongoing development	Capable of performing MSL function with complete independence and with occasional team leader coverage at times as needed
Scientific Knowledge in TA	Growing expertise in therapeutic area; can answer most therapeutic questions and seeks guidance / resources for deeper understanding	Viewed as expert in therapeutic area by KOLs / HCP and business partners	Able to provide substantial deep therapeutic insights and viewed as scientific peer by KOL / HCP and internal partners
Strategic Thinking / Decision Making Ability	Seeks guidance to answer questions and makes decisions with supervisor / mentor support	Significant independence with making decisions and demonstrates more strategic focus when developing solutions	Capable of seeing larger view with respect to business needs, strategy and insights; develops independent plans, novel approaches and ideas to enable sound judgment and decision making
Communication Skills (oral and written)	Ability to articulate scientific data and messages with acceptable quality through written and oral formats	Recognized oral presentation and solid writing skills for scientific data and information such that others look to MSL as an example	Polished oral presentation skills and excellent writing capabilities enabling authorship and editing of others' work in professional setting; viewed as excellent communicator
Creativity and Innovation	Developing ability to create unique solutions with input from others	Capable of developing novel ideas into viable business solutions; sought out by peers for input and advice	Ability to quickly see new opportunities, develop novel solutions that make a visible impact on business, recognized and sought out for novel ideas and implementation
COLLABORATIONS AND PARTNERSHIPS			
Collaboration and Interpersonal Skills	• Communicates activities and projects with team colleagues	• Seen as a trusted partner on cross-functional projects	Serve as an integral part of the company, and actively engaged in cross-functional projects

MSL Onboarding Program
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	and internal partners in a transparent manner • Clear communication with other customer facing roles regarding customer interactions • Works as directed on collaborative projects across different company functions	• Seeks opportunities to promote synergy between departments • Builds rapport easily with internal and external stakeholders	
Flexibility / Adapting to Change	Accepts guidance on execution of novel activities, and willing to take on new responsibility	Regularly demonstrates the ability to deliver in a changing environment, and balances the impact on existing workload	Anticipates change, mentors / guides colleagues and peers through change process
Organization Skills	Works according to a defined plan;	Consistently works in a time-efficient manner. Proactive in developing work plans and sharing ideas with peers	Innovates new ways of working to the benefit of the team / company
Productivity	Meets deadlines and role expectations	Demonstrates continuous delivery of defined objectives, and often goes beyond	Consistently performs to a high standard on all objectives, and contributes strongly beyond the team to the benefit of the wider company
ACCOUNTABILITY / BUSINESS OWNERSHIP / INTERPERSONAL SKILLS			
Compliance Standards	Aware of responsibilities in regard to relevant job-specific procedures, especially pharmacovigilance / quality, guidance on compliant customer activity, interpersonal relationships etc.	Seen as a model of compliance, seeks opportunities to improve company adherence to these when they arise	As for MSL
Independence, Initiative, Self-Motivation	Self-motivated, requires some regular supervision and guidance	Works well independently, takes appropriate decisions with little supervision	Takes opportunities to make appropriate decisions on own initiative. Drives own personal development
Acceptance of Feedback	Takes guidance well with minimal disagreement	Accepts positive criticism, will defend own position as appropriate	Seeks feedback from internal / external stakeholders to improve performance

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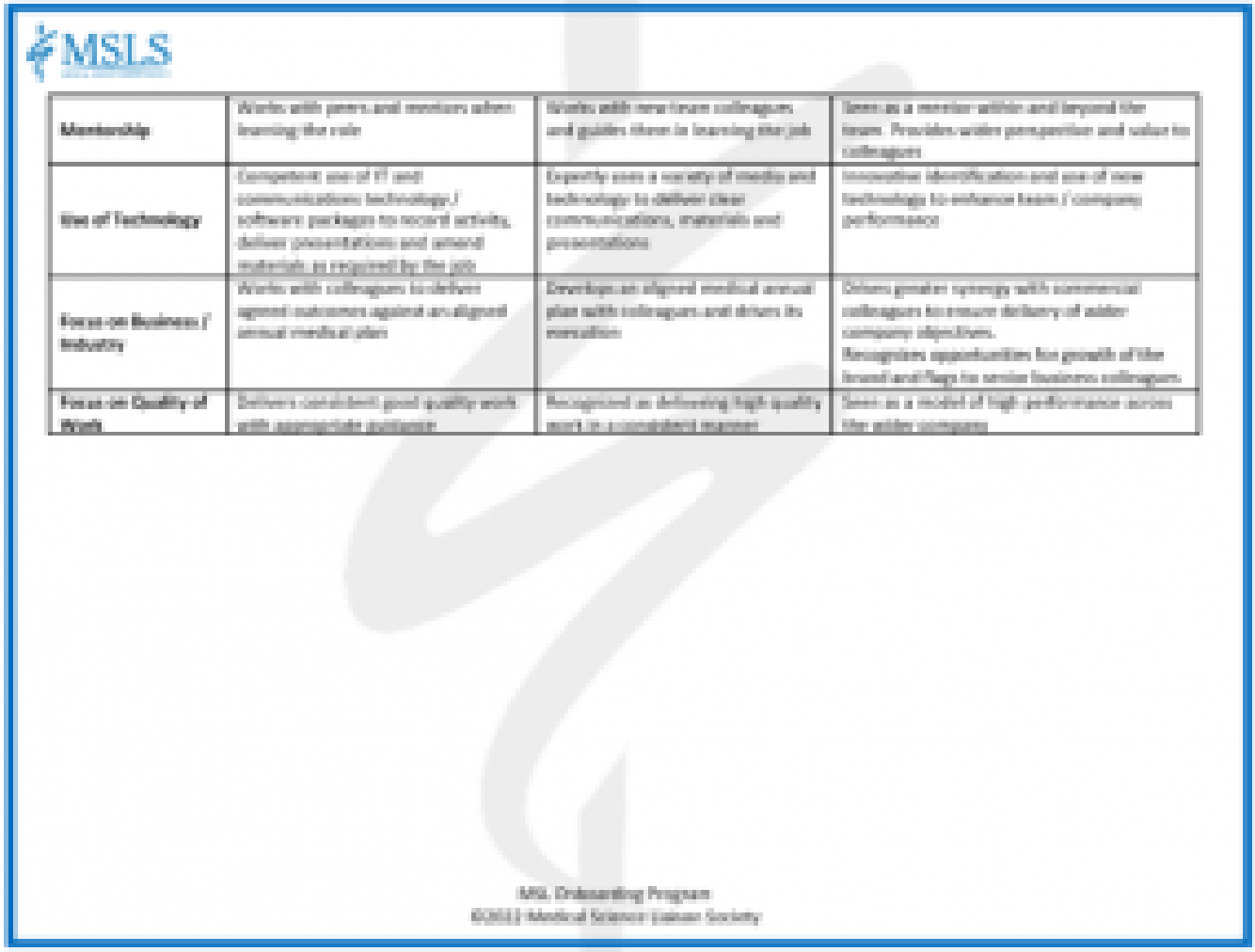
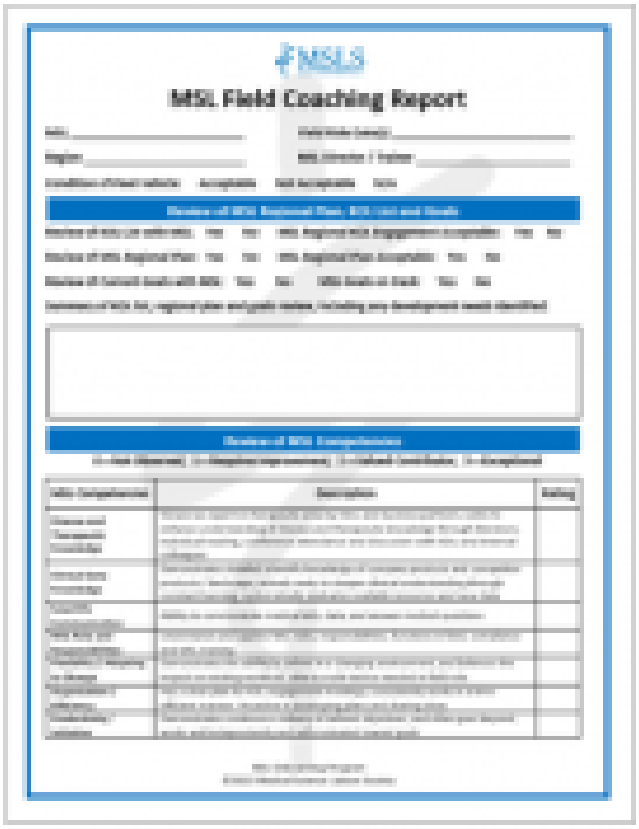
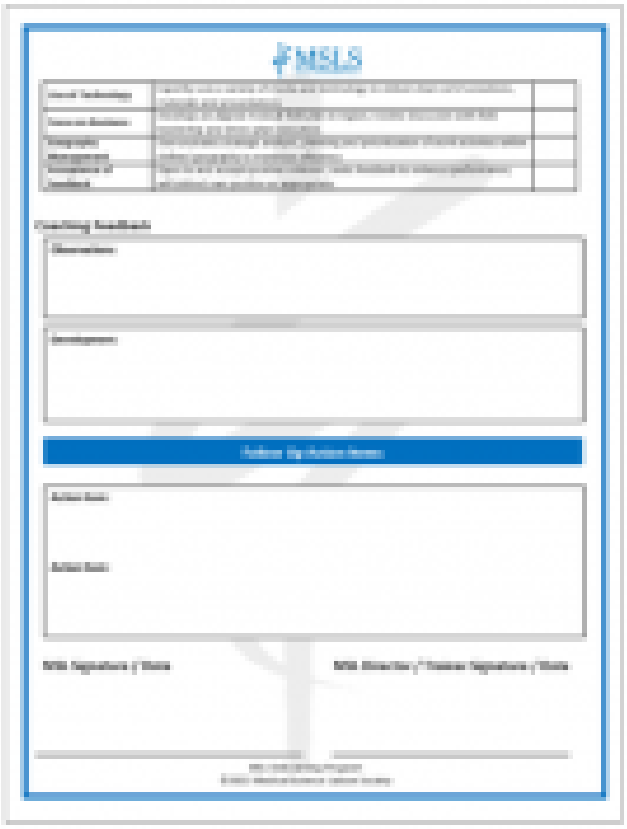


MSL Onboarding Program

Field Coaching Report – Competency Model





How do we apply the competency framework and FCR?

1. As a starting point, review the competencies alongside the MSL job description and assure that all relevant competencies for this field medical role are represented in the competency framework. Consider whether some competencies are emphasized, prioritized, or weighted more heavily than others.
2. Assure senior leadership has reviewed the competency framework you intend to use and is aligned with your assessment of key competency areas and prioritized competencies. Align the behaviors and proficiency levels for each competency so managers will understand how to coach and impact behavior.
3. Present the competency framework, behaviors, proficiency levels, and leadership view on competencies for the field medical role to the MSL team and engage in a dialogue around the competency definitions and the stratified levels for competencies if there are multiple MSL levels within the Medical Affairs division.
4. Use the competencies, behaviors, and proficiency levels when providing feedback and coaching to MSLs throughout the year; share areas of strength with examples from observations and areas where further growth is needed with action plans that will facilitate development.
5. Identify growth and development areas based on observations for MSL IDPs (individual development plans) and define action steps to take with routine progress checks and continued coaching to facilitate growth. Align a competency-based curriculum that offers learning resources that focus on filling competence & confidence gaps.
6. During performance reviews, consider competency-based examples where performance is on target, exceeding expectations, and where some competency areas may fall short, needing ongoing development.
7. As talent development reviews occur and for promotion review cycles, use the competency framework to detail specific examples of performance accomplishments; STAR format can be helpful (situation or task, actions MSL has taken and results achieved). Look at the level above the MSL's current position level and consider whether the MSL has consistently demonstrated capabilities at the next level for all competencies which is an indicator of potential readiness to move to the next MSL level as a promotion. It is also essential to take into consideration that the MSL is achieving success in sync with the corporate culture or ways of working that are vital to success. Expect executive leadership to push back on promotions and that use of competencies with specific examples will be helpful to defend recommendations for promotion during these discussions.

As part of the workshop, attendees were asked the following question and their responses were analyzed for

patterns and trends.

1. What is your biggest challenge in differentiating MSL performance?

Responses all pointed toward aspects of metrics as a significant area where leaders struggle to evaluate performance among the team. Specific comments made were noted below in three key metrics components:

METRICS

- **Territory differences**
  - **KOL access, impact in the region, different opportunities, a region more developed**
- **Quality vs Quantity**
  - **How to measure and assess the value of the qualitative output?**
  - **What is good vs excellent?**
  - **How to value time/effort spent on activities?**
  - **When tasks differ between staff, how to compare them?**
  - **How to compare experienced staff to new MSLs?**
- **Need competency framework**
  - **Job description same for all levels (yet the pay is different)**
  - **Set goals/expectations in advance**

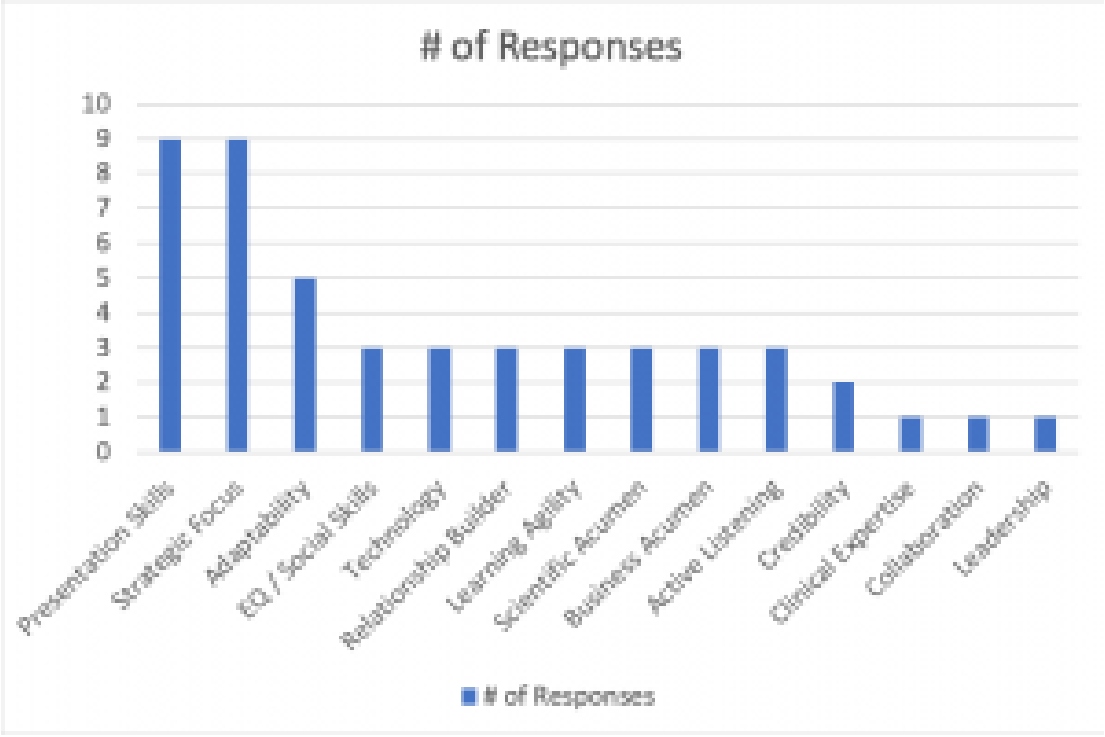
Considering regional differences such as size, KOL density, the sphere of influencers within a region, level of MSL development, and opportunities to partner, one can readily note that all regions are not created equal when it comes to assessing performance, and in particular, the value and impact potential within a region. Thus, this is a factor that leaders should consider when evaluating the level of effort and MSL activity to support region needs as part of the performance weighting.

Another question posed to workshop participants was:

2. Which competency areas are most vital in today's MSL field medical role?

Responses were graphed to show the frequency distribution of competencies leaders believe is most essential for current MSLs. Of the 49 responses, presentation skills and strategic focus were most commonly identified. Other responses indicate more soft skills are needed. In the past, one may have seen more focus on scientific acumen, however, today's MSL needs strong strategic capabilities alongside emotional intelligence and soft skill savvy. Clearly, the competencies needed for success in a field medical role are broader than many other positions and reflect the evolution of the role with a greater need for nuanced dialogue, insights, and aligning with medical strategies to deliver value.

Prioritized Competencies for Success in MSL Role Today



N=49 responses

36% indicated Presentation Skills or Strategic Focus to be the most needed competency area in field medical affairs.

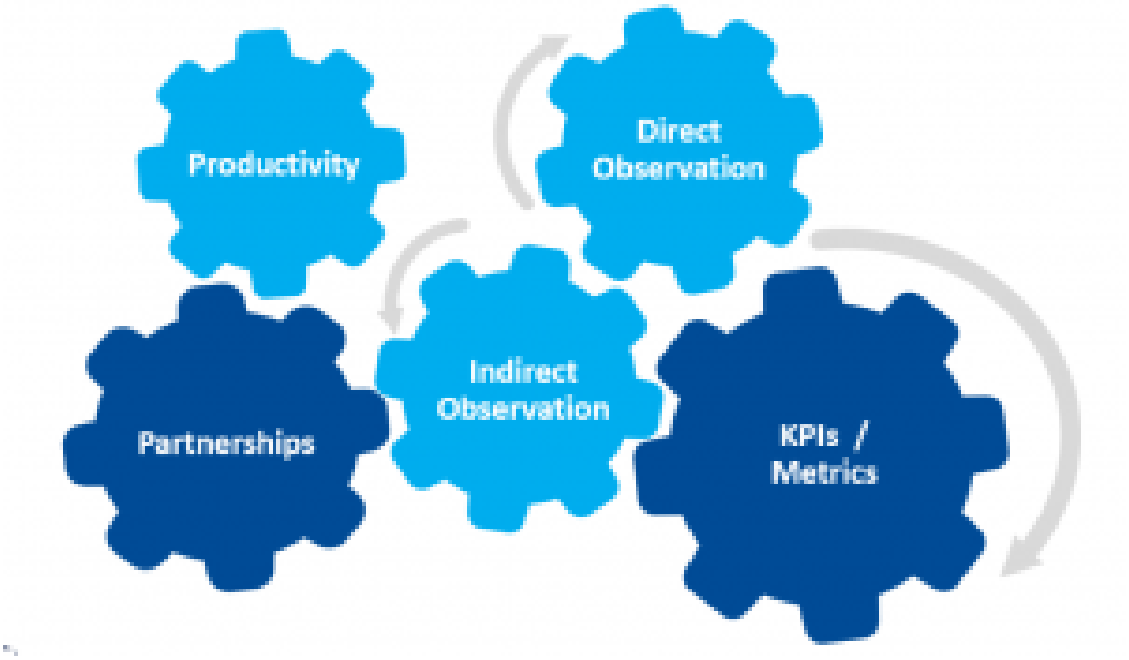
Performance Evaluation Cycle

Performance evaluation can be described as a cyclic process where goals are defined, observations occur leading to coaching and feedback on performance that culminates in a formal review with an overall evaluation. New goals are set and the process continues.

As the leader works with the MSL to establish clear goals and defined metrics for their region and calibrate expectations, there should be periodic checks done by the team leader to assess progress toward goals. The assistance or advice provided to the MSL to foster success through coaching and feedback from observations which may include internal stakeholder feedback as well as any feedback from field teams or external activities. Through a consistent coaching and feedback process, there should be no surprises during the performance review process and the MSL should feel encouraged, inspired, and supported to take on more challenging goals that deliver value back to the organization.

Sources of Performance Evaluation

The data for performance evaluation generally comes from a variety of sources as shown in the graphic below; the most common is direct observation such as viewing presentations or KOL meetings the MSL leads as well as looking at dashboard metrics to gauge levels of productivity that support value-added efforts. The team leader may also seek feedback from internal stakeholders and other field team members to share their input based on MSL efforts and this is referred to as indirect observation because the team leader is not there to observe directly. The team leader will also look at partnerships within the team and across the organization where the MSL may lend support such as with speaker training, leading conferences, supporting ad boards, assistance to draft standard response letters for medical information and so many more possible ways MSLs are involved with medical and strategic needs.



Type A High Performers

High performers are also known as high achievers. They're the employees who consistently take on more work and leadership tasks and are eager to go above and beyond what their role requires. Type A personalities are typically driven, ambitious, and successful, and may even live longer due to their tenacity.[1] But, they are also more stressed and prone to depression, anxiety, and relationship problems. Type A personalities need encouragement to have more patience with themselves and others; don't create unrealistic expectations. They need reassurance that failure is part of learning and will help them grow.

Consider these useful approaches when leading Type A Personality – High Performers:

1. Use direct language
2. Stay productive; focus on actions to take
3. Encourage healthy competition to take on challenges
4. Reduce stress factors; it's ok to say no or not now at times
5. Create goal-oriented tasks that enhance focus
6. Give them leadership roles and training opportunities
7. Offer autonomy and let them show you what they can do
8. Don't be late or delay efforts; keep projects on track
9. Have a timeline with clear expectations
10. Talk development often and give regular feedback/coaching

Workshop participants discussed key questions about performance evaluation in small groups; their responses are summarized.

Questions Asked of Workshop Participants and Group Feedback:

1. Is there a standard evaluation and promotion process for MSLs at your company?

- If yes, what is it?
- If no, how has this created more challenges for the managers and impacted MSL retention?

YES – We use forms, timelines, and competencies in our performance evaluation and promotion process.

- There is a need to be more transparent with the performance process across teams
- Staff struggle with why another is promoted and not them

YES – We have some performance resources, yet it is variable and should be enhanced

- Need to include tenure timelines and ways to assess readiness for promotion

NO – No standard performance evaluations in place

2. Does your company currently use an MSL Competency Index to evaluate performance and recommend for promotion?

- Which competencies are most widely used and/or valued in evaluating performance?
- What is an effective blend of MSL competencies and Key Performance Metrics that should go into an annual performance plan?

NO – We use a checklist for responsibilities/expectations; need to understand levels of performance to advance our performance evaluation process

- Move from MSL to Sr MSL based on "great relationships" / "attended advisory boards" which is not ideal

YES – We have performance evaluation tools and use them with transparency in our teams

Promotion Review Committee (PRC)

Once you have your MSL Competency Framework and Model in place you are ready to operationalize your program.

From an operations perspective, a PRC usually includes the Medical Affairs Leadership team and Human Resources. The committee generally meets twice a year to review proposed candidates for consideration. The set PRC meeting schedule helps managers and MSLs know how to coach and plan for promotion milestones.

Process:

Using the MSL competency framework, the MSL managers document with examples how the MSLs are functioning in those next level roles. Using examples is key to confirm competency in that specific area. We would recommend that MSLs should be functioning at that that next level competency for at least 6 months before being submitted for a promotion.

Meeting:

During the PRC meeting each nominating manager is given 10-15 minutes to present each candidate up for promotion. Highlighting their background training, time in the role, and the top 3-5 next level competencies that the MSL is excelling in is a good model for the presentation. After the presentation, the Medical Affairs Leadership team and HR are allowed to ask questions for follow-up and clarification. It is good practice to make sure all the nomination forms and supporting documents are received by the PRC members at least 5 business days prior to the meeting to allow for adequate review time.

Follow-up:

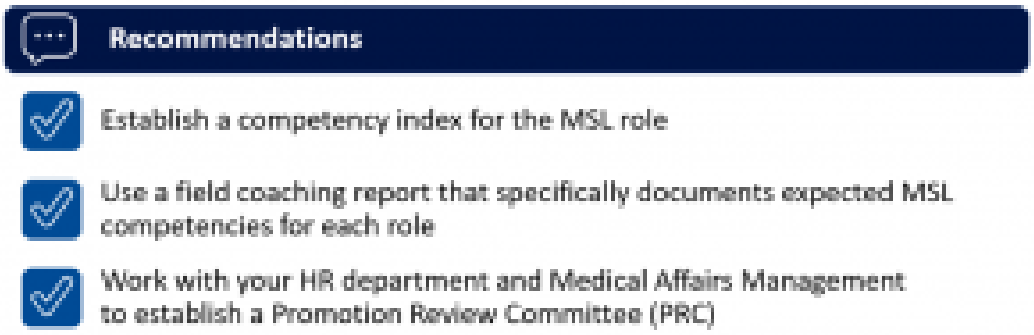
The PRC is expected to follow-up with the presenting manager with final decisions and recommendations within 5 business days of the meeting.

3. What parameters do you use to define "optimal performance"?

- What are behaviors, benefits and positive results of optimal performance? What are negative impacts when performance is not optimal?

Optimal Performance:

- Quality Interactions that yield valuable insights
- Measurement of non-HCP activities and impact
- Feedback from internal and external stakeholders
- Being proactive; takes self-initiative with projects (self – driven)
- Metrics that are pre-defined
- Positive Results of Optimal Performance: self-motivation / consistency, adaptable, change enabler / positive change agent
- Negatives when Performance is Not Optimal: unwillingness to change; poor team culture, lowering the bar; highly subjective performance data: MSL Involvement, internal projects, ad boards, IIR involvement, feedback from stakeholders, informal metrics



Summary

This workshop focused on 4 key aspects of performance evaluation and the promotion process:

1) Problems encountered when evaluating performance and promotion readiness and how to best address these needs.
2) Using and adapting a competency model for MSL evaluation, development, and growth that fosters good documentation for key performance areas.
3) How to balance metrics and other performance feedback sources to determine promotion readiness based on accomplishments founded in capabilities.
4) Ensuring competencies are built into the FCR and approach for consistent feedback and development that guides staff toward promotion

The most significant issue when evaluating MSL performance was metrics, whether there are differences in regions that impact opportunities to add value, access issues, examining how to measure impact and value and level of MSL experience as well as the need for a competency framework to systematically define core capabilities for field medical roles. Workshop participants were asked to identify which competencies were vital to success in the MSL role today. Of the 49 responses, presentation skills and strategic focus were most commonly identified. Other responses indicate a desire for more soft skills such as adaptability, emotional intelligence, and relationship building. More focus on technology as a competency area was noted.

The performance review process is cyclic with goal setting, coaching, and feedback as well as formal performance reviews that guide into the next cycle with new goals established. Sources of performance feedback may include direct or indirect observations, partnerships, KPIs / metrics that are pre-defined, and productivity levels. There is a high degree of subjectivity in the evaluation process which is why having an objective competency framework with definitions, stratified levels, and integration of competencies into field coaching tools or reports affords more consistent methods of assessing staff performance as well as guiding development needs using competencies. A promotion review committee comprised of medical affairs leaders and HR partners establishes a formal process to review nominees for promotion using the competencies to detail examples of performance levels above the current position as justification for supporting a promotion.

When participants were asked if they have a process for performance evaluation and promotion or whether they have an MSL competency framework, there were mixed responses indicating some organizations have nothing in place, some have imperfect tools that are evolving or need enhancement while others have more robust formalized performance and promotion review procedures in place. Clearly, there is more work to be done for many groups who seek to improve their ability to evaluate staff and document promotion readiness by instituting a competency framework for field medical.

Using competencies in FCR when providing performance feedback and coaching ensures a seamless performance review process where the staff understands areas they need to focus on for growth and have clarity around how to build capabilities to higher levels. Consider using a digital FCR which can provide additional data on learning needs and potentially nudge MSLs

regarding areas to focus on. Further, evaluation of MSL impact through the use of a targeted approach to assessing external stakeholder baseline knowledge, tracking areas on a longitudinal basis to see a shift in knowledge and awareness levels provides a line of sight to how MSL education evolves understanding. Elevating MSL best practices can help identify current and future competency needs. Leveraging data that provides insights into trends and behaviors will allow MSLs to refine and improve their interactions to develop more targeted and impactful engagement plans.

Thank you to all the MSL Society workshop participants in this session at the 2022 annual conference who shared vital perspectives on this topic!

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Authors:

Larry Dollar, PharmD, MS, MSL-BC

Larry Dollar has been a Senior Director and Field Medical Head at Takeda Oncology since 2014. Larry has also served in various MSL and MSL Director roles with Sanofi/Aventis, TAP, and Millennium Pharmaceuticals since 2000. He received his BS in Pharmacy from the University of Kansas, his MS in Pharmaceutical Sciences from the University of Missouri-Kanas City, and his PharmD from Idaho State University. His pharmaceutical career also includes experience in clinical research, medical research, and regulatory affairs. Larry currently lives in Prairie Village, Kansas, and enjoys spending time with his wife and four children.

Cherie Hyder, PharmD, MSL-BC

Cherie Hyder is Syndicated National MSL Director at Syneos Health. In her previous job at Biohaven Pharmaceuticals, she supported a virtual launch of Nurtec ODT for acute migraine. She has been involved in drug development for more than 30 years, working at FDA in CDER and pharmaceutical companies including Pfizer, Lilly, Novartis, Solvay, and Avanir, among others.

At the University of Missouri, she received a Doctor of Pharmacy degree with the intention to devote her career to pharmaceutical research. She has multiple adjunct faculty appointments and enjoys teaching opportunities

Celeste Mosby

Celeste brings over 25 years of industry experience to the learning solutions capability at Syneos Health. She is a recognized leader in the industry as a past Healthcare Business Women's Syneos Health Luminary Award Winner and 2021 LTEN Excellence Award Winner. Celeste will bring deep industry experience, strong partnering skills, and keen insights on learning trends into strategic training conversations. Her expertise in Adult Learning, assessment, and measurement will also allow her to quantifiably demonstrate the value of learning/training.

ROLE AT SYNEOS HEALTH:

As General Manager, and VP of Design, Celeste is responsible for leading the Learning Solutions team, providing strategic guidance, and managing client relationships. Celeste is presently the Project Lead for strategic projects which include commercial, medical/clinical, R&D, and market access curriculum development & deployment strategies.

BACKGROUND & EXPERIENCE:

Celeste brought practical experience to every client engagement as Vice President of the global Life Sciences vertical for Wilson Learning. She set Wilson Learning's strategic direction for content expertise and delivery for the life sciences marketplace and led a team focused on addressing the unique performance improvement needs of the industry. Celeste also worked in sales for Eli Lilly and as an Antiviral Marketing Specialist for Astra Pharmaceuticals in the hospital division and as a Clinical Liaison Manager at Managed Healthcare Associates, where she developed customized formularies, education, and pull-through programs for physicians, nurses, consultant pharmacists, and other healthcare professionals. Celeste has vast experience in Medical and Managed Markets delivery from her years as Director of many Brand Team projects at Managed EDGE a Euro RSCG company, now Havas, a leading Global Advertising Agency. Celeste built the Clinical, Medical, and Commercial Assessment, Measurement/Impact Evaluation & Survey Study practice within Syneos Health's Learning Solutions group.

ADDITIONAL RELEVANT EXPERIENCE:

Celeste has been involved in projects covering multiple therapeutic areas as well as clinical/medical, hospital & managed markets environments. Understanding how to make sense of complex strategic and tactical integrated launch excellence, leadership, medical/clinical, sales or marketing solutions is a particular strength. Celeste also helps to lead the Learning Solutions group's innovation in digital/virtual assessment, clinical survey study design & learning strategy.

Arshi Gupta

Arshi Gupta is a leader in the healthcare and life sciences industry and is at the helm of global and regional efforts leading to transform Clinical, Medical Affairs, and Commercial activities, with the last few years focused on the evolution of Medical Affairs. Arshi collaborates with life sciences organizations to help drive efficiency and support the lifecycle of an asset by transforming the underlying strategy and operational infrastructure with the use of data and innovative solutions.

What Should I Expect as a New MSL in the Digital World of Medical Affairs?

By Ahmed Naguib | Fall 2022

Yes, it is clear to all of us now that Medical Affairs has become a strategic function within the pharmaceutical industry, and from this point, I can tell you that the MSL role is much more important than ever before!

But is it only because of the strategic role of the function? No, it is also due to the evolving technological advances and digitalization, along with the dynamics we live in and the Covid-19 pandemic, which led us to work virtually for more than two years now to this point such that everything has moved to digital and opened our eyes to facts that we never felt before in previous life.

We have found that even small details make a difference in patients' lives, understanding their needs, preferences, and even their behaviors toward their care. We became more focused on using digital tools to gather not only HCPs' insights but also to interact with patients in the way they would prefer.

From this point, are we ready to convert this way of communication to a way of impact?

To answer this question, I will take you through a very short story about a patient journey.

Let's talk about a diabetic person, and I would say a "person", not a "patient" because this would better describe what we all should consider whenever we are talking about impact.

This person is 40 years old and has been diagnosed with diabetes yesterday when he saw his PHCP and with the initial denial phase, he passed forward to acknowledgment; what do you expect him to do in life? Should he change his diet? Adhere to diabetes medications? Do you exercise daily?

The story has ended, this person could be any one of us. How would you change your life in a moment when you have to?

This is the impact that healthcare professionals and medical affairs in pharmaceutical organizations should put all their efforts to do in their life. And, to be able to make this impact, you need to try to understand his life, put yourself in his shoes, and understand what makes him happy, satisfied, suffering, and his entire pain points.

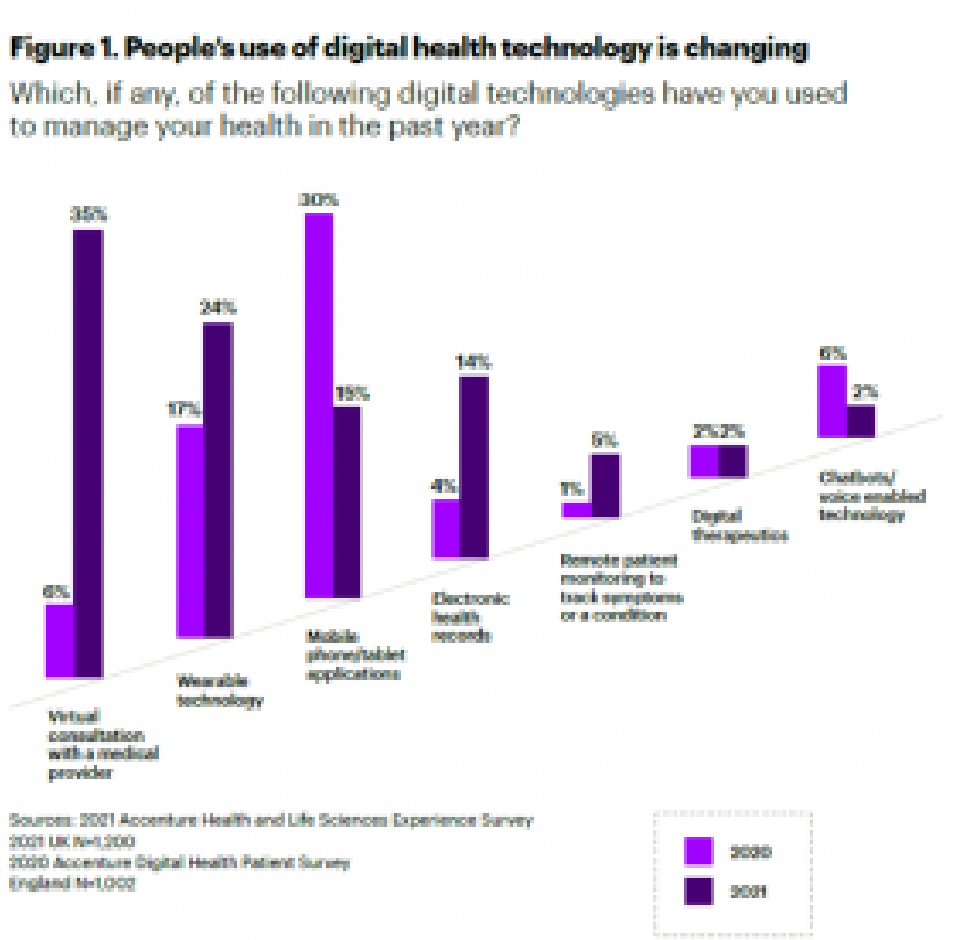
So now, how does digitalization play an essential role in addressing all of that?

This is based on the 2021 Accenture Health and Life Sciences Experience Survey:

In the pre-pandemic survey, which surveyed England rather than the UK as a whole, 57% of respondents reported using at least one form of digital health technology, such as wearables or health apps. Accenture's most recent survey shows that this has grown to 61% over the last year. While this demonstrates a growing use of digital technologies overall, the rise is most pronounced in the adoption of virtual consultations, surging from 6% pre-pandemic to 35% in our latest research.

Equally, the number of patients using electronic health records to access their data has more than tripled (from 4% to 14%).

Figure 1.



How can I utilize technology as an MSL?

It is not about doing virtual calls with HCPs; it is about creating innovative solutions for the healthcare system to improve patient care. Being proactive in offering essential solutions will add real value to HCPs and patients. For example: 1) creating platforms and applications to improve diagnostic criteria, patient-centric clinical research, and patient adherence. 2) Partnering with health authorities to create projects using artificial intelligence (AI) in analyzing data to facilitate the diagnosis of different medical conditions.

A question that we should ask ourselves as MSLs, do we have the capabilities and Skills required for the healthcare increasing and complex needs?!

I think we must get out of our comfort zone and learn to have:

- Critical data analysis rather than data reporting!
- Innovative digital design thinking rather than creative thinking!
- Patient-centric mindset rather than patient-engaging!

Author:

Ahmed Naguib

Ahmed has 12 Years of experience across different roles in pharmaceutical companies within Gulf Countries, managing Primary & Specialty care portfolios in multinational companies. Ahmed holds a bachelor's degree in Pharmaceutical Sciences from Cairo University, Egypt.

He joined AstraZeneca in March 2015, Managing CVRM and Respiratory line where he had the opportunity to grow his career as MSL. Throughout his career in the medical department, he has worked closely with the CFT to establish different therapy areas, establishing patient support programs in the Gulf, and participated in the execution of the Health digital mobile app in the Covid-19 therapy area, Ahmed played his role in building a strategic partnership with medical societies.

He has been recognized recently by the MSL International Society as a finalist for MSL of the year for 2021. Ahmed is a member of the AstraZeneca MEA Society Steering Committee.

In his role, Ahmed is responsible for all Gulf countries, responsible for the Covid-19 therapy area providing medical and clinical expertise in the vaccine and immune therapy area.

Organizing a Successful Advisory Board: Part II

By karolina | Fall 2022

This is the second half of the recommendations, focusing on advisory board execution and debrief strategies; for information on planning an advisory board, please see Part I in the July 2022 MSL Society Journal.

Meeting Content

Meeting content will be specific to the company, product, and intentions of the advisory board; this content should be defined in

the Needs Assessment, which indicates the reason why an advisory board will provide useful insights and specific focus areas.

At baseline, advisors should have familiarity with the company product(s), which can be assured by one of the following:

1) have pre-work assigned and compensated per Fair Market Value (FMV).

2) hold a product-specific program prior to the official advisory board meeting. While a virtual meeting may be the most affordable method to capture all advisors, alternatively holding a dinner program the night before the advisory board meeting may ensure that all advisors are attentive (plus this also provides relationship-building opportunities).

Agenda Strategies

Prioritize addressing the most critical company objectives early in the meeting, as advisors may be somnolent after lunch and/or restless towards the end of the day. Meet with the advisory chair in advance to discuss the program flow, key topics, and questions, as well as how to involve all participants in the discussion.

Likewise, if key questions and comments about the product are anticipated, consider also prioritizing this dialogue towards the beginning of the meeting.

In the second half of the meeting (the afternoon of an all-day meeting), engage the advisors with interactive small-group activities, such as working up patient cases or product scenarios. In addition to providing attendees with a chance to move around the meeting room, this small-group activity will inevitably shift the interaction dynamics – attendees who are more reticent to speak up in large groups may feel more comfortable expressing themselves in smaller groups. Thereafter, the advisors can reconvene and share their work with the larger group.

Meeting Breaks

For an all-day meeting, offer no less than two breaks to participants. A morning break of 10-15 minutes should allow advisors time to stretch, procure caffeine, and check out of the hotel.

The lunch break will signal a major shift in the all-day meeting. Ideally, hold the mealtime break in a separate room to allow mental separation between sessions. Over a meal, this will also foster more organic conversation. Of note, for the MSL who is strictly observing at an advisory board, the meal break can be a prime opportunity to engage more with KOLs.

Depending on the length of the meeting, a third short afternoon break may be helpful.

During all breaks, the organizing MSL should be evaluating the meeting flow with the company and/or co-chairs, allowing for program revisions if needed.

Seating Arrangements

If there will be visuals (slides, videos, etc.) that advisors will be expected to view, ensure that room and seating arrangements are tailored to ensure eye/neck comfort. If this is not possible, prioritize having advisors vs. employees in the optimal viewing seats.

Place careful consideration into the seating arrangement, as there are pros and cons to collegial colleagues sitting next to one another. On the one hand, the meeting experience will likely be more enjoyable for the colleagues; on the other hand, increased friendliness may augment the side chatter, which can detract from meeting focus and group cohesion. For advisors who are unilaterally known to be loquacious, consider placing them next to less familiar persons to reduce side chatter.

Advisor Exceptions

Advisors may ask for circumstances that will enhance their ability to participate. Under no circumstances are spouses or companions to be included or compensated for travel or participation in the advisory board. Whether a particular advisor may arrive late or depart the meeting early will be at the discretion of the company, with considerations given to the amount of time being missed, the expertise of the advisor, etc.

Debrief

The conclusion of the meeting can be a critical time. Quieter advisors may wish to connect 1:1 with the advisory chair and/or with the company to express individual thoughts, so being able to remain at the meeting site (vs. rushing to catch a flight) may

provide additional key insights and/or further build connections.

If able, try to have company attendees gather soon after all advisors have parted. It is important to have only key individuals included in the debrief as particularly confidential and sensitive information may be shared. This gathering will offer an opportunity to share fresh “in-the-moment” thoughts as well as to seek clarity on anything that may have been missed.

Post-Meeting Activities

Meeting minutes should be collated and disseminated to key company individuals as soon as possible after the meeting. It’s useful to define plans for debriefing, follow-up items, and needs in advance for a smooth experience as the ad board wraps up.

MSLs should schedule 1:1 debriefs with their KOL advisor attendees, ideally within 1-2 weeks after the meeting concludes. This will enable the KOLs to provide any additional feedback while relatively fresh; it also offers the MSL the opportunity to ask clarifying questions of the KOLs after reviewing the meeting minutes.

Utilizing these recommendations, an MSL should feel confident in planning and executing a successful medical advisory board.

Author:

Elise Fields, PharmD, BCPS, CDCES

Elise is a Seattle-based Medical Science Liaison (MSL) working for Syneos Health on the Acerus project. Prior to becoming an MSL in 2020, Elise worked directly with underserved patient populations, overseeing a diabetes team and clinical pharmacy programs. She graduated from the PharmD program at the University of Washington and was the first pharmacy student to concurrently complete a certificate in Global Health. She completed a hospital residency and holds board certifications in pharmacotherapy and diabetes education.

In her spare time, Elise hosts a podcast that raises awareness of fertility research.

The Science of Positivity – What They Didn’t Teach You in School

By Don Sandel, MA | Fall 2022

For those that attended the 2022 MSL Society National Meeting in Las Vegas, you met Don Sandel, founder of GoPositiv and author of the new book Positive Mindshift. If you were there, you know. You know how Don has researched how positivity impacts our learning and development. During his keynote, he shared with us how a positive mindset enables the brain to be more effective and makes every relevant business metric go up! Don's lecture at the meeting was impactful to many–if you were there, you remember. If you missed it, or even if you were there, we thought a bit of positivity from Don and me might be useful as we close out 2022 and look forward to 2023.

There is an antidote to the malaise that is out there—not your malaise necessarily, just the malaise existing in the ether. That same antidote is also the answer to the negative, ambiguous, and highly stressful environment we find ourselves in—according to a Willis Towers Watson 2022 global survey, almost 50% of employees are looking for new employment. Gallup continues the bad news that 57% report stress is high or overwhelming and that employee engagement is an abysmal 32%.

These are hard conditions for high performance or improved well-being.

Perhaps more personally, this same solution counters that persistent self-doubt that creeps into our psyche every now and then. This surrounding and pervasive negativity stands in the way of our best, affecting our work performance, relationships, and even our health.

What is this antidote, this wonder solution? Consider the solution may be our *mindset*, the set of beliefs that shape how you make sense of the world…and yourself. Just as important, this mindset drives our performance and our outcomes.

And when that mindset is positive, you are better in every domain of your life—you are more focused, disciplined, innovative, creative, smarter, and healthier! A perfect counter to the negativity and malaise that permeates our environment, daily news

cycle, and even many of our relationships.

By shifting our mindset from a negative default to a positive one, we create a cascade of biological events all in the service of better outcomes. It's more than a social virtue, more than just a nice thing to do. Though it's those things too! With this positive mindset, we literally change our physiology—our brains, guts, neurons, chemicals, even our tissue changes; we optimize our brains, our health, and our all-important connections with others, creating the conditions where our best can emerge.

"It turns out that our brains are literally hardwired to perform at their best not when they are negative or even neutral, but when they are positive," writes best-selling author and researcher Shawn Achor.

And if we are creating such upgrades in these critical components, imagine what this can do in the performance of our jobs as MSLs. Despite your deep understanding of the science, disease state, institutional knowledge, and the intensive molecule training MSLs undertake, the successful MSL must also be deft at developing authentic relationships, building trust, and skillfully communicating both within the world of science as well as the gray areas of the human condition. It's almost impossible to execute these activities with any amount of proficiency or excellence when clouded with a negative mindset.

Why? Here's why you are better with the right mindset.

When you are consumed by negativity, your limbic system is in charge. The limbic system is the emotional part of the brain and guides your fight, flight, or freeze response. As we activate this system, we also limit the power of the brain, minimizing many physical, cognitive, and socioemotional capabilities. The brain is literally and purposefully, saving energy and resources for survival. With these limitations, it's hard to be a good listener, demonstrate empathy, and build authentic relationships–the very skills and capabilities that you were hired to leverage. As the brain sees it, those skills aren't critical at the moment.

But when we have a positive mindset, we create *predictable positive outcomes.* No longer is the limbic system in charge but we are now guided by the newest part of the human brain, the prefrontal cortex. This is the executive and more rational part of the brain. With it in a leadership position, we can operate with maximum capacity, which means we can now leverage our full capabilities and skills; we actually open up the learning centers of our brains! Showing empathy, listening better, and building key relationships are free to occur more frequently, readily, and easily.

As Dr. Mark Hyman writes, "Once we are aware of our thoughts and learn to retrain our brains, using such techniques as meditation to break the conditioning process, we see substantial changes in health."

In a session at the most recent MSL Society meeting, I (Paul) was asked to describe some of the critical skills that would be most needed for the "MSL of the Future". Of course, deep science and clinical knowledge are paramount for present and future success, but surprising to many in the room, Flexibility, Emotional Intelligence, Hunger for Knowledge, Scientific Storytelling, connecting Strategy to Conversation, and lastly….Positivity. These are not the typical requirements seen in a job description but may have as much to do with MSL success as many of the other conventional predictors of individual success.

This vision of the impact of positivity is not unique.

A multi-industry study of 6 companies found on average that a thriving [happy, engaged] workplace increased performance by 16%. Nationwide Insurance focused on creating a positive culture to counter low engagement, cultural stagnation, and flagging sales. Following training and the integration of new positivity tactics, they increased engagement from 3.7 to 4.2, sales rose 36%, and saw attrition fall from 12% to 3%.

"When organizations develop positive, virtuous cultures," writes Emma Seppala and Kim Cameron for *Harvard Business Review*, "they achieve significantly higher levels of organizational effectiveness – including financial performance, customer satisfaction, productivity, and employee engagement."

The research is irrefutable.

Whether it's to improve personal well-being, team performance, or bottom-line benefits, a positive culture creates positive outcomes. Positive cultures broaden employees' resources, capabilities, and creativity. Moreover, during challenging times like these, they buffer against burnout, and negative environments and enable resilience in the face of difficulties. And finally, employees stay longer, experience esprit de corps, and have a deeper sense of loyalty. If we can create these conditions despite our surroundings, we all benefit, and this includes healthcare professionals and our patients.

Authors:

Paul Ward

Paul joined the industry in 1988 and has been working in Medical Affairs since 1996 as he joined Lilly Oncology as a Regional Research Manager in Oncology. He has since worked in various leadership roles in a Medical Affairs at Cell Pathways, AbbVie Oncology, Pharmacyclics, and Astellas, and National Liaison Leader for the Hematology and Oncology MSL teams at AstraZeneca. Paul is currently the Executive Director of Field Medical at BeiGene. He is passionate about bringing needed therapies to patients afflicted with Cancer, helping reshape medical practice, and aligning field and headquarters strategy in a way that brings forward the incredible value MSLs bring to the many healthcare providers and internal stakeholders we touch.

Don Sandel, MA

Mr. Sandel has a Master of Arts and Bachelor of Science from Western Michigan University. Since graduation, he has amassed a number of highly specialized certificates in Human Performance Improvement, Leadership Development, Coaching, and Applied Positive Psychology, including additional classwork at Yale and USC Berkeley. Don's expertise is in the field of leadership development as well as the impact of shifting to a positive mindset. He is a sought-after speaker on the topic, often speaking at national and global conferences, and has been published nationally. He is currently the Founder of GoPositiv but has spent a quarter century leading talent development for such companies as Astellas Pharma, Allscripts, and United Airlines. He has recently consulted for such organizations as McCormick Spice, Vanderbilt University Medical Center, and AstraZeneca and has thrilled thousands with his energetic keynotes on shifting to a positive mindset. Don has recently published Positive Mindshift by New Degree Press. Don is active in ATD, CCATD, and the Executive Learning Exchange. Don is also a volunteer with his church, community, and an avid reader, often found reading books about neuroscience, travel, and history.

To order a copy of *Positive Mindshift*:
https://www.amazon.com/Positive-Mindshift-Making-Things-Happen/product-reviews/B0B2TW9FQ9

The MSL Society Mentor Program – Mentees and Mentors Find Value in Mentorship

By Darina Frieder | Fall 2022

New medical science liaisons (MSLs) and MSL managers face a variety of challenges in their new roles and may benefit from seeking advice and insights from their more experienced counterparts. To help facilitate this, the Medical Science Liaison (MSL) Society offers an MSL Mentor Program for new MSLs or MSL managers. Their mentor/ mentee program assembles new and experienced MSLs or MSL managers into groups of two mentors and four to six mentees with an aim to provide guidance, support, professional development, and share knowledge. Unlike a one-on-one mentor-mentee model, the group mentorship model allows mentees to learn from their mentors as well as fellow mentees. This program is available to all professional-level MSL Society members and is part of the MSL Society's ongoing quest to advance the MSL profession and to help MSLs and MSL managers cultivate their careers.

I am and have been for several years, a volunteer mentor to life/health science graduate students at the University of Toronto, Canada, helping students identify and prepare for a post-graduation career path in medical affairs and/or medical communications. It is rewarding to see students progress on their own paths and achieve their goals. In turn, my mentees help

me become a better coach and leader and they always teach me something new and unexpected. Given that my experience is my own, I wanted to find out what members of the MSL Society's Mentor Program thought about their experience in the program. To find out, I spoke with two mentors – Amy Patel and Christine Norman – and mentee Brandon Bosque.

For Mr. Bosque, becoming an MSL was a second career after having trained and worked as a podiatrist. He was completely unfamiliar with the role beyond what his employer outlined for him. The mentorship program was precisely what he needed to learn what it means to be an MSL and what skills to develop to become successful. It was an opportunity to learn from the experience of seasoned MSLs mentors and to gain insights into other new MSLs. He credits the program for helping him build a solid understanding of what the MSL role encompasses. He leveraged this knowledge in his new role.

Ms. Patel and Ms. Norman were driven to mentorship by a desire to give new MSLs the guidance and support that was lacking when they started their careers. Although their individual experiences differed – Ms. Norman had the fortune to receive training in the therapeutic area for which she was responsible while Ms. Patel was given free rein to get herself up to speed – neither was provided with information on how to navigate the complexities of the MSL role. No one taught them about the day-to-day work of "MSLing," such as strategies for connecting with thought leaders / key opinion leaders (TLs/KOLs). They learned "on the job" and, while successful in their careers, both admit that their learning curve was steeper, whereas the mentees' training was expedited as a result of participation in the program. The mentorship program creates a safe and trusting space in which mentees ask questions without fear of being judged by colleagues, managers, or company leadership. One topic that the MSL mentees struggled with, Ms. Patel told me, was the scope of their work. It was reassuring for them to understand that sometimes it is normal to wear multiple "hats,", especially during the unprecedented times of the COVID-19 pandemic and associated lockdowns. The mentors emphasized that every challenge can be an opportunity to shine. At the same time, continued Ms. Patel, the conversations helped empower the mentees to communicate with their managers to ask for help when it was needed. Ms. Norman said she shared with her mentees' practical strategies for approaching TLs/KOLs, especially during the pandemic when the face-to-face connection was sometimes not possible. There is no doubt that the mentees in this program walk away with enhanced knowledge and strategies to flourish in their new roles.

Getting back to the earlier question of value for the mentors, Ms. Norman explained that the relationships she has developed by volunteering in the program have been long-lasting. She is still in touch with one of the mentees from her very first mentor role. Her professional network has increased, and she was able to learn what it is like to work in other companies. And having mentees from different therapeutic areas was an opportunity to discover things she would otherwise not have known, for instance, differences between deliverables for MSLs in the medical devices space versus pharmaceuticals. For Ms. Norman, mentoring was a rewarding and beneficial experience. In addition to supporting her MSL mentees, the experience afforded her an opportunity to broaden her current MSL role. Leveraging the knowledge she gained as a mentor, she was nominated to become Takeda's lead trainer in a pilot one-on-one mentorship program and lead disease state trainer for new hires in her neuroscience team; moreover, she was also entrusted with the design of both programs.

The MSL Society supports its mentors by sharing a monthly list of suggested discussion topics. When asked what makes a good mentor, Ms. Norman and Ms. Patel both emphasized the importance of listening and empathy. They added that mentors should strive to discover their mentees' objectives and desired achievements, accept their questions with respect and understanding, and adjust their pace based on their mentees' needs. Storytelling and anecdotes from real-life examples are effective coaching tools as these help mentees relate to and learn from their mentors. On the mentee side, Mr. Bosque stated that a mentee should be coachable, open to new information, and willing to learn and soak up new information. If those conditions are in place, there is a high likelihood that the mentor-mentee team will benefit from their time together.

Currently, the MSL Society's Mentor Program runs virtually. In future sessions, Mr. Bosque would love to see an in-person component to enhance the existing program, adding that it is easier to let one's guard down when meeting new people in person compared to the defenses and walls one erects in a virtual setting. As for what's next for this particular mentor-mentee group, a face-to-face reunion would be welcomed by everyone. Ms. Patel suggested that an annual reunion would be a great way to catch up and to also gain feedback for future mentorship sessions.

Evidently, this program is highly valued by both mentors and mentees and both Ms. Norman and Ms. Patel stated they would not hesitate to participate as mentors again. Mentors and mentees gained much from their participation in the MSL Society's program. So, if you're a senior MSL/MSL manager thinking about amplifying the feedforward loop (i.e., paying it forward), this is a great opportunity to coach a new MSL. Whether mentorship has been on your horizon for some time or is just now coming into focus, consider the group model that the MSL Society's Mentor Program offers as a great way to get started, give back to others, enhance your own career, and discover the additional benefits it might offer.

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Author:

Darina Frieder, PhD BSc

Darina Frieder is an experienced Medical Affairs professional and is currently a Medical Science Liaison at UCB Pharma. She also runs her own medical writing business, Science Nerd for Hire. She lives in Toronto, Canada with her husband, 2 kids, and 1 temperamental cat. She is passionate about many things, a few of which are gardening, creating delicious meals for family and friends, and reading as many books as she can.

MSL Tips & Tricks

By Namratha Sastry, PhD | Fall 2022

There are a lot of new things that you have to learn when you first break into the MSL role. It can be a bit overwhelming when you're also trying to learn about disease states, novel products, and what seems like every SOP ever written at your new company. But there are a few tools that you can use that will make your life a bit easier, which are detailed in this article. This article is focused on computer apps and add-ons, as well as email features. It's important to note that while these can be effective, there are certain companies that will not allow such apps to be downloaded if there are restrictions in place. In such instances, compliance always comes first, and you must conform to your company's regulations. However, even institutions where are strict regulations in place, many of these tools can apply.

Apps & Add-Ons:

- Outlook Web App
    - If you're a die-hard Gmail user like me and all of a sudden find yourself in the world of Microsoft Outlook, this can be a useful tool for you. Outlook has a web version called Outlook Web App, which is much more similar to Gmail. It allows you to customize background and various settings, which can be easier to navigate for some people (like me!). While there is more limited functionality that you can find on the Desktop version, the vast majority of daily email capabilities are allowed.
- Boomerang

    - This is a useful email add-on for various functions. These are the primary reasons why I use this app:
    - Schedule emails
        - There are times when I write out a message, but don't want to actually send it till later. Sometimes, I'll write out an email on a Friday afternoon, but I know that it's unlikely that my email will be read if it send it immediately before a weekend. So, I'll schedule it to go out on Monday morning, so that I have a better response rate.
    - Pause Inbox
        - If you're bombarded with emails and can't focus on the task at hand with constant interruptions, this feature allows you to pause your inbox for a period of time.
    - Return message to Inbox
        - This is where I find this app to be primarily useful. For instance, if I want to see an email later (e.g. the following week), I can have it sent back to my inbox. It can also be useful if you email a KOL and want to make sure to follow-up in a week if he/she doesn't reply.
- Trello
    - Trello can be helpful if you need a way to stay organized. In addition to the website, it's also available as an email add-on. It allows you to organize your tasks and create checklists with deadlines if you need. You can also share Boards with other team members if you're working on a group project.
    - Note that Teams has a similar feature (Teams/Tasks), so if your company uses Microsoft, that can be an option as well.
- Salesforce
    - Many organizations use Salesforce or other CRMs to manage KOLs. If you use Salesforce to log calls/meetings, there is an email add-on that can make it easy to log meetings and also obtain contact info and account details for KOLs.
- TripIt
    - It's no secret that MSLs travel A LOT! It can be a little overwhelming, especially when you're new to the position, to manage the travel with your other responsibilities. TripIt is an app from Concur, which is used by various organizations to submit expense reports. TripIt can help organize travel and can connect to other apps to automatically load details about flights, hotels, car rentals, etc.
- OneNote
    - OneNote is also a part of Microsoft and can be useful for organization. I use Section Groups as an easy way to organize multiple meetings with various KOLs at each institution. There are also To Do checkboxes as well as other marks to keep track of your tasks (Approve, Important, Question, etc.)
- Messaging
    - I message people quite a bit while working, so having messaging apps available online is helpful. Certainly, iMessage is an easy option for iPhone users, but if you're an Andriod user like me, Messages for Web is a great tool. Also, if you use WhatsApp a lot, WhatsApp Web is awesome as well.
- Ad Blocker Extensions
    - I added this at the end because it's an extension to your browser. You can use various ad blockers to stop ads and pop-ups, which can be especially useful while watching YouTube videos.

Functionalities:

This section highlights features that can be helpful while communicating, but don't require any apps or add-ons.

- **Reply All by Meeting** to schedule a meeting after receiving an email
    - If you need to schedule a meeting in response to an email, use this feature
    - Can also use this and add time to your calendar to work on something (just remove all email invite recipients)
- **Schedule email messages** to be sent later. This allows you to compose and send a message now, but have it delivered to the recipient at a later date/time. Note: this accomplished the same function as Boomerang (listed above).
- **Schedule texts**
    - If you use the Google Messages app on your Android phone, you can schedule texts – press and hold the send button to schedule a text
    - Note: You can also schedule WhatsApp Web messages, but this is not an inherent feature of

WhatsApp and requires a Chrome extension

- **Undo Send** – stop emails from being delivered in case you accidentally hit “send”

Author:

Namratha Sastry, PhD

I completed my PhD in neuroscience at Northwestern University, studying aberrant signal transduction in glioblastoma. Subsequently, I joined a position as a Scientific & Medical Writer at a biotech company called Tempus Labs in Chicago. As part of the Science Communications team, I help to lead internal and external publications and also assist with marketing materials, regulatory/FDA documents, and other technical documentation. After being in this role for a year, I decided to transition within Medical Affairs and accepted a position at Biodesix as a medical science liaison. Biodesix is a data-driven diagnostics company, with a predominant focus on lung cancer. After gaining this initial experience in the MSL role, I wanted to switch from diagnostics to pharma, so I transitioned again to my current role as Associate Director of Field Medical Affairs, Oncology in Regeneron. My current position is primarily focused on building relationships with KOLs to advance clinical trials and investigator-initiated studies in the field of oncology.

A Modern Manager’s Guide to MSL Onboarding and Development. Part One: New MSL Management

By karolina | Fall 2022

The medical science liaison (MSL) is emerging as one of the most important roles in the modern pharmaceutical industry[1]. The role requires a unique set of skills and competencies that can only be fully developed through experience in the field, so there is interest in MSL onboarding strategies that build confident, field-ready MSLs and put them on the path to long-term success. In my 6 years in the industry, I have gone from being a new MSL with no industry experience to hiring, training, and managing MSLs. Based on what I have seen work well, I have put together a straightforward model for managing the onboarding phase of a new MSL and progressively building their skill over a period of about two years.

The model comprises two components: *Effective New MSL Management* and *Progressive MSL Competency Development*. The present article will cover the first of these components.

New MSL management

The MSL is a complex and demanding role, and new MSLs (who may also be new to the industry) need 12-18 months to

comprehend its scope and find their feet. The goal of the MSL's manager during the onboarding period is to reassure and direct the new MSL and guide them towards independence, whilst developing the MSL's competency in the core medical affairs activities. Some of the practical things a new MSL's manager can do to achieve this goal are:

- First, be an MSL. The best person to manage MSLs (especially new MSLs) was an MSL for a minimum of 4 years. They have themselves obtained mastery of the core MSL field activities and thus can lead by example. Such a person will obviously have a greater understanding of the pressures and demands faced by MSLs and hence will be better placed to hire and manage the right people and to develop a medical strategy that is aligned with the realities of life in the field. In fact, in the modern medical affairs environment, experience as a field MSL should be an absolute requirement of a person who will be managing MSLs.
- Hire the right person. "Right person" means the best fit for the company, the role, the manager, and the MSL themselves. It's a task that could easily fill a separate article but suffice it to say, it's probably the single most important decision the MSL's manager will make.
- Appreciate the pressure they are under. During this time the new MSL is grappling with a combination of demands: adjusting to the corporate and healthcare environments; finding their feet in a relatively new and ever-evolving role; rapidly acquiring the requisite expert-level therapeutic area knowledge, and being expected to almost immediately develop relationships with KOLs who may be global experts in their field. It's a lot to deal with and, suffice to say, the understanding of a manager who has themselves once been an MSL will strongly affect the MSL's professional development over the ensuing 24 months.
- Set up a written MSL onboarding plan. This is the blueprint for the MSL's first 6 to 12 months and is a live document. Along with the usual orientation information, it should also contain the following:

– An overview of the company's Medical Affairs operations, categorized by function (Medical Information, Compassionate Access, Medical Education, Field Scientific Exchange, etc)

– The MSL competency development plan (to be detailed in Part 2 of this series)

– guidance and templates for KOL mapping, territory planning, and KOL Engagement Plans

– any expectations regarding time spent in-field with KOLs and on project work

The MSL onboarding plan should be set up during the MSL's first week and routinely revised after that to ensure that it is pragmatic and tailored to the MSL's individual situation. It must be flexible and able to evolve based on feedback from the MSL's experience in-field. Since the MSL is the nexus between strategy and reality, progressively optimizing the onboarding template with each new MSL keeps the company's approach to onboarding attuned to the needs of the real world.

- Settling in the period. Prior to going out in-field, the new MSL should be given three months to settle in, study the therapeutic area material, adjust to the industry, and come to understand the intricacies of the MSL role and its expectations. This settling-in period should be formally announced to cross-functional colleagues and should be enforced by the MSL's manager. It is an essential part of managing the demands placed on the new MSL during the onboarding phase.
- Weekly progress meetings. At these meetings, the MSL's progress against the pre-stated expectations is assessed and the MSL's own thoughts and feedback on their situation is discussed. New MSLs *need* to receive regular feedback and to be reassured that they are on the right track and performing according to expectations, otherwise they can easily find themselves feeling directionless and overwhelmed, especially if they work remotely. It is the manager's job to make sure this does not happen.
- Introductory meetings with key people. The purpose of these meetings is not merely to introduce people. Someone who is new to the industry may simply have no idea what the job titles in a complex pharmaceuticals company mean, so the MSL's manager must ensure that the MSL comes away with some understanding of their colleagues' functions and (especially) the day-to-day relevance of these functions to the MSL themselves.
- Shadow an experienced MSL. The obvious ideal is for the new MSL to shadow a colleague who works in the same disease state/therapeutic area and who engages the same clinicians, but there is a benefit (to both the individual and the organization) if the MSL can also spend time in the field with experienced MSLs in other therapeutic areas.

An MSL's onboarding phase is a window of opportunity that slams shut once the demands of fieldwork take over. Their experience during these initial weeks and months will impact their confidence, beliefs, attitude, productivity, and even their mental health, so the manager must invest commensurate time and effort to create an environment where the MSL can grow into the role at a rate that is only slightly uncomfortable. They can then begin, with the manager's guidance, to progressively

perform and demonstrate competence in the key medical affairs activities, a guide to which – *Progressive MSL Competency Development* – will comprise Part Two of this series.

1. *Pharma in Focus*, 9th September 2022. https://pharmainfocus.com.au/news_m.asp?newsid=20064

Author:

Tim Nielsen, PhD

Tim Nielsen is a medical affairs professional based in Melbourne, Australia. He is a former research scientist who entered the pharmaceutical industry in 2016. He is presently employed by Celltrion Healthcare and has previously worked for MSD and Janssen. The views, thoughts, and opinions expressed in the text belong solely to the author, and not necessarily to the author's employer or former employers.

Benefits of Taking a Pharmacy Student on Rotation with a Field Medical Team

By Melissa Madigan | Fall 2022

According to a 2021 survey, Doctors of Pharmacy (PharmD) make up approximately 42% of all medical science liaisons (MSL); another statistic highlighting the evolution of pharmacists away from traditional dispensing roles.[1] While pharmacists add value to a variety of roles, their skills align closely with those required by MSLs. A PharmD degree is typically obtained after four professional education years preceded by two prerequisite coursework years. The first three years are didactic instruction consisting of pharmacotherapy, medicinal chemistry, pharmacology, pharmacokinetics, and pharmacodynamics. The final clinical experience year consists of advanced practice pharmacy experiences (APPEs); usually, six to nine rotations varying in duration from four to six weeks. This extensive medical education prepares pharmacists to understand diverse therapeutic areas, engage in scientific exchange, and maintain strong clinical acumen. Pharmacy learners also gain skills necessary to understand the inner workings of healthcare systems and critique primary drug literature, competencies central to the MSL role. Finally, professional development components such as emotional intelligence, leadership, and clinical reasoning can contribute to relationship-building and field medical success.

While the pharmacy curriculum prepares students with several transferable skills, education in the biopharmaceutical industry is lacking. As evident by the growing number of biopharmaceutical fellowship positions, students are increasingly interested in this career path. However, gaining direct industry experience continues to be a significant challenge. While MSL teams can give pharmacy students a highly sought-after experience, these field teams can themselves reap concrete benefits by taking

learners, with appropriate planning and goal setting.

Team Education and Training

By leveraging existing medical knowledge and drug literature review skills, students can create journal clubs, prepare micro-learning sessions, update existing training documents, and deliver a variety of presentations. Students can learn about resources used by MSLs and develop writing, research, and presentation skills. Importantly, these activities keep the field medical team abreast of the current therapeutic landscape and keep resources functional.

Congress Planning and Coverage

Large medical congresses are critical for MSLs and a quality learning opportunity for students. Detail-oriented students can create digital platform access guides and present pre-congress slides. After sharing key aspects of medical strategy, learners can be assigned specific abstracts, oral presentations, and sessions to cover virtually. Students can learn about emerging treatments and navigate conferences. During post-congress debriefs, students and preceptors can generate high-quality insights.

Insight Generation

In addition to congresses, students can generate insights through 1:1 KOL engagements, pipeline presentations, advisory boards, and social media coverage. Students can provide a fresh perspective to seasoned MSLs, leading to previously overlooked insights, and learn about a core MSL competency.

Competitive Intelligence

By leveraging their extensive baseline knowledge and ability to understand new information, students can effectively gather competitive intelligence. They can investigate data in recent publications and understand digital opinion leaders' viewpoints through social media platforms. Monitoring landscapes leads to insight generation and competitive intelligence reports to be used for team education.

Despite these advantages, there are only a few student positions due to perceived barriers faced by MSLs. Time may be a constraint, but the responsibility of precepting a student does not have to fall on one MSL or even one team. Distributing the seemingly large 6-week commitment into mini-rotations will allow the student to rotate with different preceptors while alleviating stress on any one team member. PharmD fellows can also be incorporated into rotation design; assigning fellows as preceptors may simultaneously meet requirements for their learning program and relieve MSLs.

The logistical aspects of hosting a student may seem daunting at first. Fortunately, pharmacy schools have staff dedicated to facilitating student rotations. By building a relationship with a university, field medical teams may be assured that students placed on rotation will meet preferred prerequisites and qualifications. Ideally, students will need corporate access in order to function as valuable team members; however, internal human resources (HR) personnel can assist with this process. Early communication with HR to anticipate necessary requirements such as confidentiality agreements and background checks will result in a smooth onboarding process. As a result of the COVID-19 pandemic, pharmacy students have adjusted to remote learning, so they are more prepared than ever to adjust to the remote nature of field medical affairs work.

While human resource logistics and time management may challenge the MSL team upfront, rotations rapidly become more efficient with each subsequent student and the positive impact of students on team efforts becomes more apparent. Investing in the education and development of students may result in more qualified future MSLs. Furthermore, exposing young talent to company culture and opportunities serves to impress future applicants. Assuming current trends continue, today's pharmacy students will eventually account for 42% of MSL teams; thus investment in the talent pipeline will yield returns in recruitment and retention for years.

Tips for success…

- Consider how many students may be precepted each year and when. By separating the time between students, projects will be repeatable but continue to serve the team in a purposeful way.
- Use the first week to orient the student to the biopharmaceutical industry, the company, and the field medical. Utilize team-specific and company-wide training.
- Tailor the rotation to each student's unique capabilities. Assess the interests and goals of the student early in the rotation and assign projects that closely align.
- Consider the needs of the team and how the student can address them. Solicit a list from the field medical team

before the student starts.

- Ask MSLs with PharmDs to get involved and leverage their understanding of the APPE rotation process and expectations for student education.
- Create a project manual and weekly objectives to orient the learner and allow them to function independently.
- Topic discussions, whether MSL-led or even better student-led, are an excellent active teaching tool, especially when paired with pre-reading assignments. Sample subjects: MSL best practices, investigator and company-sponsored studies, product lifecycle, medical strategy, insight generation, advisory boards, cross-functional collaboration, key performance indicators, etc.
- In addition to regular communication, schedule weekly touch points with the student to provide feedback as the rotation progresses.

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Authors:

Melissa Madigan, BS, PharmD Candidate ‘23

Melissa Madigan is a PharmD candidate at MCPHS University. Upon graduation, Melissa is dedicated to pursuing a career as a medical science liaison. Prior to attending pharmacy school, she earned her BS in biology from Stony Brook University. Melissa’s biopharmaceutical industry experience involves an advanced practice pharmacy rotation with Sanofi’s US Hematology/Oncology Field Medical team. She is passionate about building relationships to share knowledge and elevate those around her. She welcomes connections on LinkedIn.

Megan Hartranft, PharmD, BCOP

Megan Hartranft is Clinical Lead with the Clinical and Digital Solutions team at Labcorp Diagnostics. At the time of writing, she was Field Medical Scientific Associate Director of Training for Sanofi's US Oncology MSL team. She is also an adjunct assistant clinical professor with Rosalind Franklin University of Medicine and Science. Megan has published and presented extensively on topics of oncology, hematology, and precision medicine. A tireless advocate for cancer patient access to pharmacist care, Megan is an active member of the Hematology/Oncology Pharmacy Association. She welcomes connections on Twitter @MeganPharmD.

Market Access in Rare Diseases, an Opportunity for the MSL

By Carlos Manuel Romero Prieto, MD, MBA | Fall 2022

It is well known that originally the role of the MSL is purely scientific, but with the development of various business models, it is forced to embrace new skills to generate value under a broader strategic perspective. This post is for those who aspire to be MSLs and those who, being MSLs, may wonder if it's okay to take on some new role.

Doctors in Latin America are specially trained to care for patients, but due to different circumstances, some doctors make a career in health management, from coordination to medical management, to give examples, giving organizational and strategic support to health institutions. This is where the MSL is positioned to spread scientific information; however, the role has been acquiring new responsibilities, in some cases because a therapeutic area is so specialized that there is no sales force, local access areas, and reduced human resources, so the appropriate patient route must be efficiently unraveled to achieve market access.

We could think that we are treading on the gray area since many times the MSL finds itself facing a fine line between what to do and what not to do. However, there is nothing gray about market access, and I love that because in addition to its importance in the process, it is an area that forces you to face the problem from another angle, not purely scientific but more strategic.

In rare diseases, patients can be so poorly mapped (there is always a sub-diagnosis) that doctors do not know about the disease and hopefully have heard of it at some time, so the MSL becomes vitally important when transmitting knowledge. However, it is not only a matter of transmitting knowledge to the doctor but also gaining insight and even presenting studies on efficacy, safety, and pharmacoeconomics (HEOR) to decision-makers, who are not necessarily doctors, but who help this route for the patient to gain access to medication.

An important access barrier in LATAM is bureaucracy. I will not delve into the subject, and the legal/legislative framework that

varies greatly in each country. In Peru, for rare diseases, there is a (reduced) list of rare and orphan diseases framed in the legislative field and that certainly does not cover all existing diseases because there is an under-registration or there are few or no local publications of patient cases. Furthermore, if a medicine is not locally authorized for commercialization (it does not have a sanitary registration), the state will not buy it despite it having approval for EMA/FDA, as it happens in other countries such as Argentina through compassionate use or Colombia through lawsuits where they can have access to high-cost medication for these diseases despite not necessarily having local registration and this does not happen in Peru because its legislation does not contemplate such legal concerns.

Peru is a market that continues to grow and every year there is a lot on offer; it is no wonder that health is a large growing market also because doctors are learning more about rare diseases in general. This is due to the work of multidisciplinary teams, the coordination of a very diverse human group, and the constant look that the pharmaceutical industry places on MSLs so that they take on the challenge of reinventing themselves in the field.

Author:

Carlos Manuel Romero Prieto, MD, MBA

MBA with a specialty in Health Services Management. A physician with experience assuming management positions, that began in the pharmaceutical industry as MSL in the iron line to dedicate later himself 100% to the therapeutic area of rare and high-cost diseases. He is currently assuming the position of MSL for PTC Therapeutics in Peru.

Approaching Insights Gathering With a Different Mindset

By Alain Cérat, PhD | Fall 2022

Let me start this article by telling you a story. 25 years ago, when I was working on my thesis, I could not make any sense of some of the data that my experiments generated over the last three years. I was not able to connect the dots; I was not able to analyze the contradictions and the conflictual information that was in front of me. At one point, I simply concluded that maybe what I was seeing was the result of a simple coincidence. I was not even sure anymore if there was a scientific explanation behind it. I also vividly remember that the harder I worked at trying to make sense of the data, the more frustrated I became. It is as if thinking harder was counterintuitive. I went nowhere and I was stuck. Then I decided to let it rest and ignore it. As we often said, I slept on it and stopped thinking about it.

A few days later, I decided to go for a bike ride in the country. I hopped on my bike, and I cycled for almost one hundred kilometers, enough so that I can still remember today how I felt at the end of my ride. And as I was enjoying my ride in the country, I took the time to look at the nature around me thinking about nothing, completely ignoring the problem that I was

trying to solve to complete my thesis. It is at that moment that something magical happened. At one point, I felt like I was experiencing an out-of-body experience, and just like at a flick of a switch, I was suddenly able to connect the dots and explain the contradictions. This was a huge “aha!” moment.

I got confirmation that day that if you cannot make sense of some of the data, facts, or observations that are in front of you, simply ignore them because, at one point, it will all make sense. But the caveat is that you do not know when it will start to make sense, and as such, you can quickly start to lose faith. And while deadlines are important for certain things, time is often your worst enemy. You need to believe in the power of the brain. During my career, I took great care in reminding myself to apply this approach. Even today, when my thinking is stuck and there is nothing more that I can think of, I go for a run and suddenly, “aha!” moment, accompanied by a solution to a problem that I need to resolve.

Now, let us fast forward 25 years to the world I live in, working with MSLs. I have had the opportunity over the last few years to work with hundreds of MSLs all over the world. All these MSLs have one thing in common. They are great at sharing data and science with physicians so that they can make the right decisions for their patients. They are also providing a very accurate picture of reality by being the eyes and the ears of what is happening in the hospitals, how decisions are made, and what keeps physicians awake at night. One of the tasks that the MSLs must do is collect facts, data, and observations that will lead to insights. Insights are important as they are often “aha!” moments that could potentially result in changes in the way physicians are practicing medicine.

When I look at the way we work today, what is interesting about the capture of insights is that MSLs and Managers of MSLs have the perception that if one of your annual objectives is to identify so many insights in a month or in a year, it will easily be done by simply listening to physicians and asking questions. This could explain why by imposing a certain quota, we are encouraging MSLs to find insights that are not insights but mere facts, data, or observations. Remember what I said before that time is often your worst enemy. It is certainly the case for insights gathering.

Going back to my own story, one can easily say that the harder you work to find insights, the less successful you will be. It is as if when you have a problem in front of you, the harder you work at trying to solve it, the less successful you will be. When it happens, it is much better to let it go and ignore it for the time being. If you want to find insights, you need to give your brain a chance to take a break; you need to go into what is known as the default state, which is the capacity to envision what it’s like to be in a different place, a different time, a different person’s head, or a different world altogether[1]. Sounds familiar? It is identical to the out-of-body experience that I went through when I rode my bike 25 years ago. How often have you heard people say that it is when they are in the shower, or when they are driving or doing exercise, that they find these “aha!” moments and insights.

This is the way we are as human beings. Insights are triggered in most cases when you do not think about them. It is as if they were there, but you need to put your brain in a subconscious mode to find them, the default state. If we remove the obligation to identify so many insights and replace this by an approach where we instead facilitate the identification of insights through the capture and analysis of facts, data, and observations, but also by explaining to people that a positive mood, mind-wandering, daydreaming or even spontaneous thoughts are important, it is fair to assume that any behavior that encourages people to attend their own quiet thoughts will be somewhat helpful to find meaningful insights[2].

And let us not forget sleep as it can help in this process as demonstrated by Thomas Edison who wrote down his thoughts by letting his mind wander as he was moving closer toward sleep. This was also confirmed by a study published in Nature in 2004[3], who concluded that sleep, by restructuring new memory representations, could facilitate the extraction of explicit knowledge and insightful behavior.

I feel obliged to say that based on my experience when we give MSLs a specific objective to find so many insights by the end of the month, we are simply not approaching it the right way. We certainly do not need to put MSLs under this useless extra pressure. It is as if we were hijacking the default state, preventing our brain from relaxing. No wonder most companies and most Managers of MSLs are saying that we are not good at identifying insights. The setup is not correct. We are part of the problem but also part of the solution. We need to understand that it is perfectly fine if an MSL does not find insights, despite the wealth of valuable information that they captured. It happens.

I am therefore recommending that we change our mindset in the way we approach the collection of insights done by MSLs. And to achieve this, I am proposing the following:

1. Stop putting deadlines on how many insights MSLs need to find in a month, a quarter, or a year
2. Take into consideration that facts, data, and observations will one day make sense, but we do not know when
3. Give MSLs a chance to embark on a default state which will enable them to unlock solutions and breakthroughs leading to insights
4. Let MSLs sleep on it as demonstrated by the study showing that sleep inspires insight

5. Approach collecting insights with a positive mindset understanding that it is possible that we do not find any

We need to let go and let the brain do its magic. At one point, breakthrough thinking and insights will appear! And, when you find insight, it is accompanied by an emotionally pleasant "Aha!". You just know, just like you know when you find the solution to a brain puzzle.

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AUTHOR:

Alain Cérat, PhD

Dr. Alain Cérat is a bilingual, visionary Learning & Development Executive with consistent success in delivering exceptional organizational changes in the pharmaceutical industry. Dr. Cérat has led the development of new standards encouraging innovative ways of thinking, drawing on a unique background in Commercial, Medical, and Neuroscience.

Dr. Cérat capitalizes on more than 25 years of cross-functional expertise gained from work done with local, regional, and global stakeholders at Novartis and Merck. He excitedly takes on new challenges and drives continuous improvements to organizations. He is known for solutions that push the learner to think and see differently, try new things, and explore behaviors that lead to long-term change.

In his last role at Novartis, Dr. Cérat ensured the effectiveness and overall performance of the Medical Affairs 3000+ workforce through the high-quality delivery of innovative training programs. He set consistent global learning standards and established a hub capability-building expertise by adopting a growth mindset philosophy. Prior to that, Dr. Cérat worked in the Latin America-Canada Region where he was accountable for building and implementing high-quality standards for Field Medical. He worked closely with 9 countries representing a workforce of 250+, by leading the enhancement of local Field Medical capabilities as well as the development and facilitation of innovative training programs.

Dr. Cérat recently started his own consulting firm, SYNAPSE: Pharma. Training. Solutions. In this new chapter, he will combine his expertise in the field of neuroscience with his 25 years of working in pharmaceuticals, delivering personalized innovative solutions enabling people in Medical and Commercial to learn the fundamental truths about our brain and how we can leverage it to get better at what we do. Dr. Cérat will focus his work on improving general leadership skills, communication skills, presentation skills, coaching, creativity, and general training deliverables. Dr. Cérat can be reached at alain@synapsepharmatraining.com.

Dr. Cérat has a PhD in Neuroscience from the University of Montreal as well as an M.Sc. in Neurobiology. He also completed an Executive Masters Certificate from the NeuroLeadership Institute.

alain@synpasepharmatraining.com

The Potential Importance of Multi-disciplinary Knowledge in the Repository of Medical Science Liaison Specialist Skills

By karolina | Fall 2022

Introduction:

The global outbreak of COVID-19 has had deleterious and substantial effects on the conduct of scientific research over the last few years. The pandemic-induced stalling of drug development efforts worldwide has led companies to make urgent strategic amends to recoup from the delays and economic losses suffered. Meanwhile, the interaction of healthcare professionals globally has taken new dimensions of remote and distance in sustaining the professional relationships expected of them with the current social distancing norms in place. The influencing and communications role in industries in the pharmaceutical, biotechnology, medical device, CRO, and others in the field of healthcare is assigned to specific competencies and professionals. The advanced scientific training and academic qualifications of Medical Science Liaisons (MSLs) make these specialized individuals veritable knowledge repositories in engagement with thought leaders and Key Opinion Leaders (KOL's) in the healthcare industry. The contention of this writer with years of experience in the field is that MSLs can be strategic by acquiring a breadth of multi-disciplinary industry knowledge.

Evolution: Sales to Specialization

In eons gone by, medical representatives (MRs) of pharmaceutical and medical equipment companies were entrusted to be the bearers of information to medical doctors. A more recent phenomenon from the sixties saw the emergence of the **medical science liaison** role taking on a more scientific approach, with the recruitment and use of those qualified and clinically adept in compiling and delivering advanced medical and scientific information to health care professionals. The importance of MSLs in dynamic and contemporary settings is such that every avenue of clinical knowledge dissemination must be availed when the opportunity presents itself. The agility and adaptation of the MSL is therefore an imperative, although delivering value in relationships with healthcare professionals and patients is recognized as challenging (Arec et al, 2013).

The Medical Science Liaison is considered a key role, one that is often centered on building and maintaining relationships, perhaps specifically focused on engagement with influential, physicians referred to as Thought Leaders (TL's) and Key Opinion Leaders. The engagement is usually with healthcare professionals affiliated with major academic institutions and clinics. Universally recognized as being field-based, the MSL portfolio is saddled with increasing importance and responsibilities; perhaps the strategic potential of this function can be further leveraged and developed. The MSL profile is uniquely transformative, as

adaptation and resourcefulness are critical, with remote interactions and as a non-sales promotional position (Matesanz-Marín, et al, 2022). MSLs can however contribute strategically when these individuals demonstrate a breadth of knowledge outside of clinical and scientific information, i.e., to include awareness of industry-specific legal/regulatory affairs, strategic marketing, economics, and business dynamics.

A breadth of knowledge in conveying clinical aspects of a drug or device can be complemented if the MSL is able to demonstrate the depth of knowledge in all stages of early drug development, clinical trials, to post activities of market diligence and surveillance. The primary goal of medical science liaison is to engage with medical specialists for a variety of reasons, primarily for scientific content dissemination and clinical relationship-building conversations. Their roles are a little less on commercial, marketing, and other non-clinical aspects of company advancement, and therefore MSLs fundamentally serve as liaisons and influencers. It behooves those in this role to be generalists, as much as specialists, meaning the critical imperative is to be conversationally and scientifically adept in promoting the company's medical agenda, and can extend to be knowledgeable at a holistic level, i.e. from early drug discovery and development, across the continuum of clinical trials, and post-marketing. Holistic knowledge will likely yield many strategic dividends, notably in being held in high esteem, as compared to others in this role who are merely doing their job, and perhaps with only the knowledge, as that is expected within the MSL role. The responsibilities expected of an MSL are specific in relationship building, which is a given. In some organizations, there is a juxtaposition of MSLs and Sales representatives (SRs) when it comes to scientific exchange versus promotional messaging (Theron et al, 2021), however being scientifically, clinically, and informed holistically, may deliver unique strategic advantages and benefits to organizations.

Strategic Mindset and Commensurate Competencies

The strategic MSL competencies recommended by this writer and researcher include skills and persuasive capability development to foster partnerships and collaborations. The MSL role is primarily intended to provide education about products and facilitate research partnerships between clinicians and industry, as collaborations can yield new products and innovations (Baker, 2010). Innovation can also mean adeptness in forging relationships of strategic benefit and must be ethically upright, which serves to achieve the communication goals of the organization.

Current trends indicate including the nurse practitioner (NP), as pharmaceutical firms have sought to build robust relationships to meet the constantly evolving marketplace changes in health care. Vanderhoef and Johnson (2020) observed the importance of a "scientific peer," with clinicians with a PhD, DNP, or physician assistant and use the term "clinical practice liaison" (CPL), a role analogous to the MSL, except that the engagement provider type is almost exclusively NPs and PAs. While these researchers contend that the CPL is not a sales representative, but rather a field-based professional, on hand to provide a balanced scientific and clinical exchange. Arguably, these professionals can be strategic contributors to the mission and purpose of the organization. Acquiring a breadth of knowledge in the sphere of biomedical research, notably in marketing, regulatory affairs, and non-clinical areas requires a progressive mindset with some efforts and investments in time.

Similar to MSLs and CPLs, Medical Affairs represents the interface between important medical/scientific activities emanating from a company and the external sphere of the patient, the professional, and the outside world. The scientific and strategic blend of activities entails a combination of providing input to Clinical Development and Drug Regulatory Affairs, drawn judiciously for analysis and intelligence on medical/scientific trends, and also informed by the views of key opinion leaders. Kientop (2010) contended that CPLs contribute to the body of knowledge of a drug from Phase IV activities and other methods of data collection aiming at real-world evidence. Although the focus and emphasis are on developing relationships, as in most organizations, the interests of the MSL are on building strong relationships with individual Key Opinion Leaders, as progressive companies have realized the value that MSLs can also bring to Key Account Management (KAM). The successful integration of Key Accounts into an MSL function is possible, however, requires a certain level of astuteness. To accomplish this degree of strategic thinking warrants understanding the business approach in the KAM identifying the MSL resources on hand with the development of a comprehensive strategic plan and in judiciously careful and adaptable implementation (Kientop, 2010).

Globalization and Localization

Integral to the operations of the MSL position is the independence from marketing and sales in the pharmaceutical or medical equipment functions, something quite prevalent in Europe and the U.S. The MSL separation from commercial function potentially reduces the risk of ethical miss-steps and conflicts of interest. A singular clinical focus of the MSL helps to ensure accurate, timely, and rigorous detail, across the communication continuum of drug discovery and thereafter in their engagement with clinicians.

Looking at the MSL role further worldwide, specifically in Japan, Medical affairs has been plagued with scandals in clinical trials, attributed to improper relationships between medical doctors and the sales departments of pharmaceutical companies,

reported, notably from events in 2012 (Hideki, 2021). Expectedly, Hideki (2021) noted, the fallout resulted in the undermining of the integrity and confidence in clinical trials in Japan and consequently made it necessary to separate sales from "the conduct of post-marketing clinical trials and evidence generation". Medical affairs consequently therefore in Japan are in the process of re-orientation and change, as there is a greater effort in keeping these vital roles, and responsibilities compartmentalized and independent of each other. The lessons are universal, in that ethics should be the bedrock of all healthcare research and development, regardless of geography.

In further evaluation, the role of the regional medical advisor (RMA) is seen as a trend that has emerged since the last decade in the pharmaceutical industry, and the roles and responsibilities of this function of which are still evolving. The RMA in the geographic vicinity provides field-based capabilities to foster collaborative relationships with KOLs that are conducive to a more expeditious exchange of unbiased scientific information between the medical community and the company (Gupta & Naik, 2013). The trend of field-based medical liaison teams is a global one, nevertheless one which is changing with the upheavals in the drug discovery and commercialization discussed herein. The pandemic travel restrictions made the phenomenon of globalization stutter and cause grave apprehension in research and development. The development of vaccines, gene therapy, and the need for larger patient pools inevitably have led drug firms, and many in the sphere of healthcare to turn to global markets to offset some of the setbacks. The pharmaceutical industry's increased focus on global operations including emerging markets is now quite apparent as the scope and purpose of the MSL will likely continue to evolve as well.

The major objective of the RMA, as the researchers have stated, is to engage with KOLs and in augmenting professional relationships with the healthcare community through peer-to-peer contact. The RMA longitudinal relationships are ideal for investigator-initiated clinical research proposals from approval until completion of the clinical studies initiated within the relevant therapeutic area at the regional/local level (Gupta & Naik, 2013). In such proximity, the breadth of knowledge, as suggested in this discourse, will aid in the overall goals of an ethical relationship.

In summary, it is responsible for those in the field of medical information, communication, and input to facilitate greater strategic inroads into local and global markets. Skilled medical writing and presentation into every aspect of drug performance, and safety, without in any way over or understating, are also adeptness skills unto themselves. The medical input and control of advertising and promotional activities represent "the medical and social conscience of the company" and the Medical Science Liaison holds the keys to disseminating medical/scientific information between the company and the outside world through Medical Science Liaison (Nell, 2018).

A breadth of knowledge in conveying clinical aspects of a drug or device can be complemented when the MSL partnership with Medical Affairs is able to demonstrate a breadth of knowledge that transcends all stages of research and development. The rewards for the sustained pursuit of innovation in any field of human endeavor usually yield a competitive advantage. The innovative demeanor and strategic disposition of the MSL professional to supplement communication and relationship adeptness may similarly also confer unique advantages commensurate with holistic industry knowledge acquisition, requiring ongoing learning and continuous improvement.

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Author:

Lionel de Souza, LL.B., LL.M (IPR Cand) MBA, MACPR, PhD

Dr. de Souza is a well-published and award-winning Professor, Philanthropist, and leads US, International University, and School education initiatives. In the sphere of global higher education development, he is actively involved in advancing the educational needs of aspiring and deserving populations worldwide. Extensive global engagements are in clinical research, management healthcare, and pharmaceutical marketing and he is the CEO of a global law firm. The current projects of Dr. de Souza are in the USA, India, the Middle East, and Africa. Dr. de Souza is currently heading up projects in healthcare, involving Artificial Intelligence and customized IT Solutions to advance and optimize organizational effectiveness. As a professor, he graduates many doctoral graduates and is the recipient of awards and nominations for Excellence in Doctoral and Masters' advisement in the disciplines of management, business, healthcare, and marketing in leading US/UK institutions. Dr. de Souza is the Executive Director of UniversitiGoGlobal, an organization that creates Worlds of Opportunities for students and Universities, with one goal of expanding the frontiers and boundaries of knowledge and innovation globally!

MSL Integration with Dr. Rahm

By Dr. Christina Rahm | Fall 2022

Medical Science is a highly sought-after profession but it isn't an easy career. In order to advance your pathway in this space, continued education and career experience should be prioritized throughout your career in order to maximize what you can accomplish.

Medical Science Liaisons are leading experts in the field of biotechnology and pharmaceutical sciences, and in overall health and wellness. My work in this field started with pharmaceuticals and then led me into the biotechnology arena at Biogen, UCB Pharma, BMS, and Alexion. However, I then pivoted into a CEO and Chief Medical Science Officer role in the Nutraceutical supplement world and healthcare space. This led me to work in more than 80 countries, presenting and lecturing around the world on topics related to nutraceuticals, wellness strategies, bioscience nanotechnology engineering, and environmental solutions. These engagements then provided educational programs for audiences at institutions like John Hopkins Continuing Medical Education, making my professional pathway into numerous higher education centers and governments throughout the

world.

The education I continued to pursue during my career was essential to this pathway. I began with a Master of Science and furthered my career by taking various Doctorate programs in other areas of the sciences. Additionally, my postdoctoral studies at the graduate certification program at Harvard Extension School at Harvard University in Bioscience Engineering and Nano-biotechnology assisted my path to Medical Science. Furthermore, receiving certificates in Nutrition, and Pharmaceutical Management from Cornell University broadened the scope of my career, leading me to do Medical Science in the Nutritional Supplement world. Is all this education necessary? No, it wasn't. However, I would argue that it was the continued educational persistence that helped me continue my career and to broaden my career into encompassing even wellness science.

Throughout my career, regardless of my positions, I established and conducted a multitude of case studies, research, and registries. I also produced my own formulations consisting of patents, provisional patents, proprietary innovation technology, and trade secret innovations. Then, I brought in numerous medical and clinical specialists and liaisons because I knew how important they were to the success of any medical, clinical, or research company. Furthering this, I worked with other scientists to be the founder and to develop the organization International Science Nutrition Society (ISNS), where the society conducts registries and case studies with renowned doctors and scientists in over 67 countries. ISNS collaborates with top scientists, researchers, medical doctors, and experts in complementary and integrative medicine to bring leading-edge concepts and new paradigms of thought in areas of health and wellness.

Bringing in high school and college-age students to assist, the Medical Science Liaisons in our current company have written countless case study papers, including papers on proprietary innovations formulated for The Root Brands on topics such as: adenoid hypertrophy, ADHD, asthma, chronic fatigue/ME, COPD, eczema, ulcerative colitis, Parkinson's disease, peripheral neuropathic pain, psoriasis, depression, schizoaffective disorder, athletic endurance, long covid-19 syndrome, and many more.

Working on research, science, registries, and case studies in over 67 countries is a huge task. However, it was my early experience in Medical Science that led me to lead others in the process which consists of a multitude of information needed from the patients and the physicians. Leaning on my Medical Science career in pharma, the scientist first establishes the medical history of patients, conducts interviews with the patient and their family, documents observations, and tracks primary and secondary diagnoses, along with cross-referencing any medications currently used, along with supplements used. Treatment and methods are then determined based on the patient's general medical background and history. Scientists and other top doctors work together in society to analyze patterns or trends to see what is working to determine if the dosage of supplements needs to be changed according to the individual. Finally, other doctors and medical professionals read the case study and provide feedback. ISNS is an organization that allows top scientists, researchers, and medical doctors to get together and peer review their case studies for accuracy and completion.

The case studies conducted have astonishing outcomes, using methods that are safe and effective. With the help of the International Science Nutrition Society (ISNS), the Medical Science Liaisons, and doctors in the wellness field have been able to share these findings with other renowned doctors in order to help improve patient care worldwide through holistic approaches. I believe that Medical Science Liaisons are one of the most important groups in the emerging trend to integrate traditional and non-traditional medicine and science. There is a lot more to do in this integration of science and medicine. The future is bright and has expanded for MSLs. I am thankful for this piece because it has helped me to get to where I am. I am also excited about this emerging piece in the wellness world.

Author:

Dr. Christina Rahm

Christina Rahm is a sought-after healthcare executive, scientific researcher, patent innovator, entrepreneur, and author. She hosts education from Cornell and Harvard Universities in Nanotechnology, Pharmaceutical Management, and Nutrition, Doctorate in Education and Philosophy, and a Master's in Science; she has lectured at Johns Hopkins, Harvard, Cleveland Clinic, Wake Forest, and Mayo Clinic while holding a plethora of Board of Director and Chairperson appointments for multiple organizations and corporations.

Dr. Rahm is considered an expert resource in the fields of Psychology, MedTech, Fintech, Nutrition, Pharmaceuticals, Bioscience Engineering, Nanotechnology, and Environmental Health having held positions with Pfizer Pharmaceuticals, Janssen/Johnson & Johnson, Biogen, Bristol-Meyers Squibb, Alexion Pharmaceuticals. Her most recent role is founder and Chief Scientific Officer for The ROOT Brands where she has patented trade secret formulas on more than 100 products which are now in more than 67 countries.

Her entrepreneurial ventures include being the founder/CEO of CMT Holdings, Rahm Medical, LLC, Cure The Causes, Inc., DOC and DC2 Holdings; Predicted Health and Merci Dupre Ventures, Rahm Foundation, International Science Nutrition Society, and her most recent project, a global scientific runway fashion and art series titled Under The Red Chandelier.

Dr. Christina Rahm has traveled to more than 85 countries presenting, lecturing, and consulting for both the public and private sectors on health, nutritional, nutraceuticals, wellness strategies, and environmental solutions. When asked what her most important accolade to date is, she simply states that her expansive philanthropic initiatives while being the mother of four have always kept her grounded to be even better in her many corporate business ventures and executive roles.

How the Payer MSLs Can Tame the Value Discussions

By Shereef Ibrahim, MBA | Fall 2022

Many articles you've read recently or will read shortly will always have a rich part centered on the complexity of the medical landscape increasing including the number of treatment options available to patients continuing to expand and how this is changing the MSL function globally. I'll not spend more time on that because it is evident enough, that, there is a growing demand for the value of medications to be demonstrated to payers. This emphasis on the "value" of healthcare solutions, rather than just the price is among the most important and impactful "increasing complexity" putting pressure on pharmaceutical companies.

This has given an urgent need to demonstrate the worth of healthcare solutions in terms of cost-effectiveness as well as direct and indirect benefits which is why there is an increased focus on health economics and outcomes research (HEOR) globally.

Being the best-suited team to engage in understanding and communicating the science – and hence the value – of a company's brand to various stakeholders in accordance with their perceived value, MSLs play an important role in ensuring that HTA requirements are met, sometimes even before the medical therapy has been approved for marketing in that country. This value discussion is especially beneficial when it is conducted earlier since it will optimally decrease delay to market in that country and hence allow patients to have timely access to new therapies.

In the last decade, this importance has dramatically increased and has moved MSL recruitment into a more complex process since the MSL position now requires more skill and certifications. pharma field forces are evolving into a range of job titles all disseminating various types of HEOR data. They include traditional job titles like MSLs, to which are being added managed care liaison (MCL), health outcomes liaison (HOL), and more.

I personally think Field-based HEOR/payer liaisons will continuously keep growing in the near future. The need for liaisons with specialized knowledge of healthcare reimbursement and real-world evidence is on the rise due to the evolving healthcare

landscape making MSLs a key to driving patient access to new therapies across dynamic healthcare systems.

What essentially is the medical affairs' role in payer interactions? MSLs play a critical role in probing payer needs and perspectives as well as gaining insights on value since most companies still don't have dedicated health outcomes liaisons to interact with payers. There are a couple of orbits where this happens ranging from the traditional clinical presentations and discussions during face-to-face MSL visits through payer advisory boards and ending with aiding in the conduction of outcomes research and presenting it to payers in large gatherings like congresses.

More companies are beginning to leverage their MSL teams' advanced scientific understanding of brands to move market access discussions forward, this is evident in that "The percentage of medical science liaison (MSL) teams contributing to reimbursement discussions and formulary committee presentations have increased from less than 10% of surveyed life sciences companies in 2010 to 42% in 2012, according to a new study published by Cutting Edge Information".

As managed care organizations become more interested in the science behind brands, market access is now partnering more with MSLs who are the science communicators of the company to augment value discussions with payers and this is in turn reflected in companies who have MSLs engaged in payer discussions usually report a faster-growing trend in their MSL teams than companies who don't. I personally expect something around a 30% growth of staff who work in payer relationships globally within the next 5 to 10 years.

The trendy debate now is centered around where these roles reside. The core of this is around whether the placement and structure of the HEOR/payer liaison teams should fall under the medical or commercial side. While HEOR and payer MSLs most often remain on medical teams, many companies are considering or have already moved these roles to V&A groups. Companies that have hired HOLs often organize them within the MSL team structure to benefit from the knowledge that these liaisons have. This decision is a flexible one and should be influenced by a couple of factors including therapy area dynamics, company objectives, budgets, and specific role descriptions.

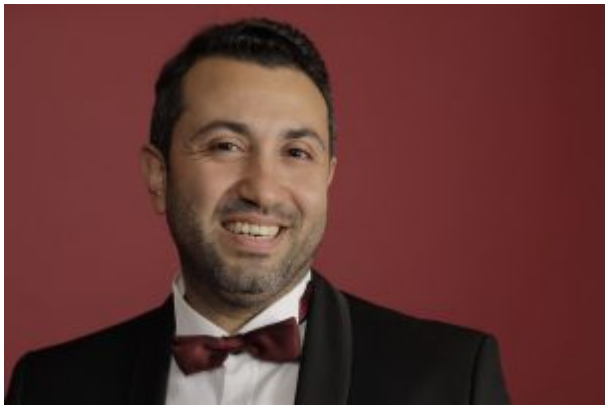
What specific role description you might ask yourself? as MSL roles continue to evolve based on customer needs across the product life cycle, different articles and trials are showcasing a need for clearly defining the scope of MSL responsibilities to ensure maximum effectiveness. As mentioned before in this article, recruitment times are creeping up and the competitive nature of recruitment potentially increases with the rise of HEOR/payer field medical roles, this will be even more important as roles become increasingly more difficult to recruit through HR.

There are some critical elements for a strong communication channel with payers and that includes – while not limited to – understanding payers' needs which is what an MSL does best when it comes to insights gathering. Internal knowledge sharing is the next chronological step and is critical in optimizing collaboration which should even dive down to tactical details of planning meetings and trainings together. Strengthen HEOR understanding through an array of internal and external resources which will be the first solid step to conveying value by translating clinical benefits to payers' value discussions since they are demanding clinical trial evidence, HEOR findings, comparative effectiveness research, and post-authorization, real-world and safety data to drive decision-making locally.

Therefore, to build on current knowledge, being a successful MSL requires being a scientific and technical expert, an HCP relationship manager, and an excellent communicator. Yet to become an impactful "payer" MSL, I personally believe there are a couple of attributes that need to be present in the next generation MSL, namely being able to cultivate and nurture productive key opinion leader relationships, explore best practices for assigning the responsibility of communicating HEOR data as well as being able to showcase MSL performance metrics to internal stakeholders.

Author:

Shereef Ibrahim, MBA



Shereef is currently the ELI Cluster Medical Manager at Amgen, handling Medical Affairs across 6 Middle-Eastern Countries. Shereef previously spent 10 years at Novartis in different roles of varying responsibilities since 2009.

He previously worked as an MSL for Bone & Pain and Respiratory during the period from 2014 to 2016 which added a lot to his perspective of being patient-centric in business.

His career to date has provided him with invaluable knowledge in some key areas, namely Bone & Pain, Respiratory, Cardio-Metabolic, Nephrology, Transplantation & Biosimilars across the region.

He has augmented his clinical skills with technical skills including an MBA from ESLSCA University in Paris, a HEOR diploma from Ashford University in the USA as well as being a Professional Certified Trainer.

Shereef is also an accomplished individual with a strong desire to succeed and lead others to success through the array of awards won on different levels. He is known amongst his peers through his past experiences to have the distinction of being an individual who is energetic, a fast learner, dependable, and organized which certainly makes him efficient.

Shereef's LinkedIn profile can be found at: www.linkedin.com/in/shereef-ibrahim

How Can Life Sciences Companies Utilize the Influence of Digital Opinion Leaders?

By Dr. Preeti Sharma MBBS, DCP, RCGP, | Fall 2022

Digitalization is changing the healthcare space, and the COVID-19 pandemic has been responsible for it in some ways. As innovation in biosciences and technology is advancing rapidly, top life sciences companies are gearing up to discover and launch new drugs or products. When any new drug or a product is discovered and goes through its product life cycle, life sciences companies require the guidance of key opinion leaders and digital opinion leaders to take the product from discovery to commercialization.

According to a 2019 PubMed survey conducted on social media usage by plastic surgeons, it was found that "62% of plastic surgeons have active professional social media accounts." On Twitter, "tweets with "#PedsICU" were shared 49,865 times on six continents between February 1, 2020, and May 1, 2020."

Is there a way the life sciences industry can utilize the influence of digital opinion leaders for their drug or product? Read on to learn more about the benefits life sciences companies can reap from digital opinion leaders' expertise.

Who Are DOLs?

Digital Opinion leaders (DOLs) are the new breed of HCPs that have arisen recently. DOLs are healthcare professionals (HCPs) who use digital platforms like social media to disseminate medical and scientific information to their patients, peers, and followers. DOLs do not frequently attend conferences or do not publish articles in journals, but their goal is to share valuable and engaging content to educate their community. DOLs are not social media influencers but are the real "thought leaders" as

they do not self-promote but are advocates of the brand they promote.

Specific to healthcare, the top influencers (DOLs) can be HCPs and non-HCPs. They range from physicians, allied health professionals, medical & scientific writers, caregivers, nurses, and pharmacists to patient advocates, industry analysts, cancer survivors, health bloggers, journalists, and patients. The non-HCPs Digital opinion leaders use the social media platform to write about general topics in healthcare like innovations in the healthcare landscape, and trending topics on specific diseases like cancer, diabetes, etc. Non-HCP DOLs also disseminate information in their groups but the information is mostly generic and may or may not be scientific.

Why Should Life Sciences Companies Engage DOLs?

Key Opinion Leader (KOL) identification and management in life sciences organizations have been the “bread and butter strategy” for decades. A traditional KOL can be influential in terms of the conference attended or articles written, but it is the DOL who can increase the reach of this medical and scientific content through social media.

Leveraging the influence, the DOLs have on digital platforms, life sciences companies can utilize their DOLs:

1. In amplifying the brand messaging the company wants to propagate.
2. Helping the life sciences companies recruit new talent with their influence on digital platforms (clinical trial recruitment).
3. By collaborating on developing marketing materials and providing valuable feedback.
4. Assisting the medical and marketing team in creating educational material for patients.
5. Acting as spokesperson/member of the advisory board/judges for contests, etc.
6. By sharing their voices on disease awareness, best practices, and the new initiatives, the life science company is undertaking.

By involving DOLs and building meaningful relations with them over a while, life sciences companies can reach potential customers they hadn’t even noticed before with just a click of a button.

How Can Life Sciences Companies Identify and Engage DOLs?

In the present time, many DOLs are the new KOLs!

“The 5 Ws” must be answered by the Life sciences companies before identifying and engaging DOLs.

- **Why Should Life Sciences Companies Identify DOLs?**

The medical and commercial teams should be clear on the strategy and objective of the brand to be advocated before deciding on the DOLs.

- **When Should Life Sciences Company Think About Identifying DOLs?**

The life science company should know the challenges or opportunities they are trying to resolve by identifying DOLs.

- **What Parameters Should be Considered to Identify The Right DOLs?**

- Are they posting relevant and innovative content online?
- Do these DOLs have a solid digital presence (public and peer following?)
- Do their peers believe their voice and content? (Are they trustworthy?)
- Are they influential offline too?
- Are they already engaged with your company on different projects?

- **Who is the right DOL to Engage?**

After addressing the WHAT, let’s talk about the WHO.

- Who is the DOL (HCP) sharing content relevant to the company’s therapeutic area/ brand?
- What is the specialty and sub speciality of the concerned DOL?
- How is the quality of the content that the DOL shares?
- How frequently does the DOL post the content?
- Is this DOL engaging with its peers, or is it a one-way communication by just posting the content online?

- **How to engage DOLs?**

Once the DOLs have been identified and mapped, a team member (medical/commercial) must communicate with them. Face-to-face meetings are preferred mainly by DOLs so that they can meet the teams in person and understand their engagement objective.

As the healthcare landscape is rapidly driven by technological advancement, It is essential that life sciences companies use advanced software tools to identify, map and engage Digital Opinion Leaders.

konectar Social- our robust digital opinion leader platform is built on the latest technology combined with an NLP framework for accurate web crawling and entity extraction. konectar Social has several features which enable Life Sciences companies to find the right Digital Opinion Leader from drug discovery to commercialization.

How Can Life Sciences Companies Utilise the Expertise of DOLs?

Life sciences companies should customize DOL engagement strategy according to their business goals. Here are a few common ways life sciences companies can engage DOLs and utilize their skills efficiently:

- **Empower the DOLs with knowledge and resources**

Life sciences companies must educate and train their DOLs on the drug/ product that the DOLs will be advocates for. The internal team should share the resources prepared for that therapeutic area with the digital thought leaders. These resources would help the DOLs disseminate their platform's correct information to their audience.

- **Understand their areas of interest**

This is imperative when the Medical Science Liaisons' (MSLs) interact with the DOLs. The MSLs should be aware of the DOLs area of expertise so that relevant topics are discussed with them.

- **Form an advisory board of DOLs**

As with KOLs, life sciences companies should form similar advisory boards with the top DOLs to obtain more diverse insights. As the DOLs interact with communities, patients, and peers online, they can bring a fresh and unique perspective regarding new research, the latest launches, drugs, or products concerning their therapeutic area. This can help life sciences companies to innovate and explore new avenues.

- **Help the DOLs to increase their reach**

Some DOLs may be active on one or two digital platforms. Life sciences companies can assist and guide the DOLs to use other platforms according to their therapeutic needs. This collaboration will benefit the life sciences companies in promoting their drug or product on multiple platforms and will aid the DOLs in increasing their community network.

- **Build and strengthen relationships with DOLs**

Life sciences companies must deepen their relationship with their DOLs by empowering them with company insights, resources, events, etc. so they can better understand the digital space.

- **Engage on Digital Platforms with DOLs**

Medical & commercial teams should chat, organize webinars, tweet, etc., with the DOLs to build long-lasting relationships by sharing medical and scientific insights. This will empower the DOLs to reach out to the relevant communities online.

- **Keep track of the competitor DOLs.**

It is always essential to keep track of the competition. Life sciences companies should track the activities that the competitor DOLs are into. This will help them strategize better.

The future of Digital Opinion Leaders' engagement in the Life Sciences Industry

The evolving healthcare landscape has brought about a change in the work perspective of life sciences companies. The DOLs have become indispensable to organizations and are here to stay!

- Life sciences companies have become digitally active and are enhancing their presence on digital platforms by engaging DOLs. To transform and grow, life sciences companies in the future would need to co-work with both KOLs and DOLs on the same platform for generating insights, creating materials, and disseminating knowledge rather than working with either one. This will enhance the strength and reach of the life sciences companies.
- A new breed of thought leaders apart from KOLs and DOLs are paving their way into the life sciences space- they are known as Digital Scientific Leaders (DSLs). DSLs are DOLs with excellent scientific knowledge and credentials; they use digital platforms to disseminate information about the latest clinical studies, trials, diagnoses, and treatment mechanisms. In the future that we look upon, life sciences companies will be hiring KOLs, DOLs, and DSLs together for broader and deeper reach.

Healthcare is transforming, and DOLs or DSLs will be carving the way forward!

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Author

Dr. Preeti Sharma *MBBS, D.C.P, R.C.G.P*

Dr. Preeti Sharma brings over 20 years of diverse and rich experience in the healthcare industry with multi-faceted roles as a Physician, Medical Consultant, Technical and Scientific Writer, Marketeer, Medical Trainer, and an Entrepreneur. She is responsible for development and execution of Medico Marketing Strategies at Aissel. As a Medical Advisor, she provides medical, clinical and scientific expertise to internal and external stakeholders.

konectar – Software from Aissel Technologies, embraces the power of technology to transform healthcare landscape by using artificial intelligence (Machine Learning & Natural Language Processing) and advanced analytics. konectar is our next generation AI Powered Healthcare Professional Engagement Platform that enables global life sciences companies to discover, profile and engage the right healthcare experts.

I’ve Interviewed Hundreds of MSLs About What Brings Meaning and Joy at Work, Here’s What I Learned

By Jill Donahue, MadEd, HBa | Fall 2022

For so many MSLs, their purpose was clear when they were practicing healthcare professionals or in the lab. But then, after moving to 'the dark side' of pharma, as their friends often quipped, they started to second guess their purpose. The question, "how do you live your purpose as an MSL and find meaning and joy at work?" may be daunting. If it sounds like too big a question, think of it this way. What is it about your work as an MSL that makes your efforts worthwhile? And how do you keep your noble purpose – to help HCPs save and improve lives, front, and center? And finally, how do you show others your noble intentions to help patients – despite their pre-existing stereotype of you?

I've interviewed hundreds of MSLs from around the world to help them find, develop and communicate their purpose. Why? When MSLs connect with and share their purpose, things change. They go home happier, feel more engaged, and know they were more effective at helping HCPs help patients!

When I ask MLSs why they do what they do, three commonalities emerge.

1. The first thing that comes to mind is their family—of course. It makes sense that everything we do is to support the people we love. They think their 'why' is their family. But I like to push people to think deeper. After all, we could support our families at any job—so why are you in pharma as an MSL? When I persuade them to think about why they chose this role and keep choosing it, that's when the conversation gets interesting.
2. In nearly every conversation, MSLs either immediately or eventually realize that they love that their work ultimately helps people; the patients we serve. Universally, MSLs have chosen this work or stay in this work because not only do they love science, but they also harbour a deep desire to make a difference by helping to save and improve lives and to do it on a larger scale than they could in private practice.
3. The third thing they have in common is feeling like they have lost their connection to their purpose at some point—either due to professional frustrations, reorganizations, bureaucracy, global pandemics, or personal challenges. Fortunately, through my research and years of experience, I've come to understand the key to holding onto that meaning day after day.

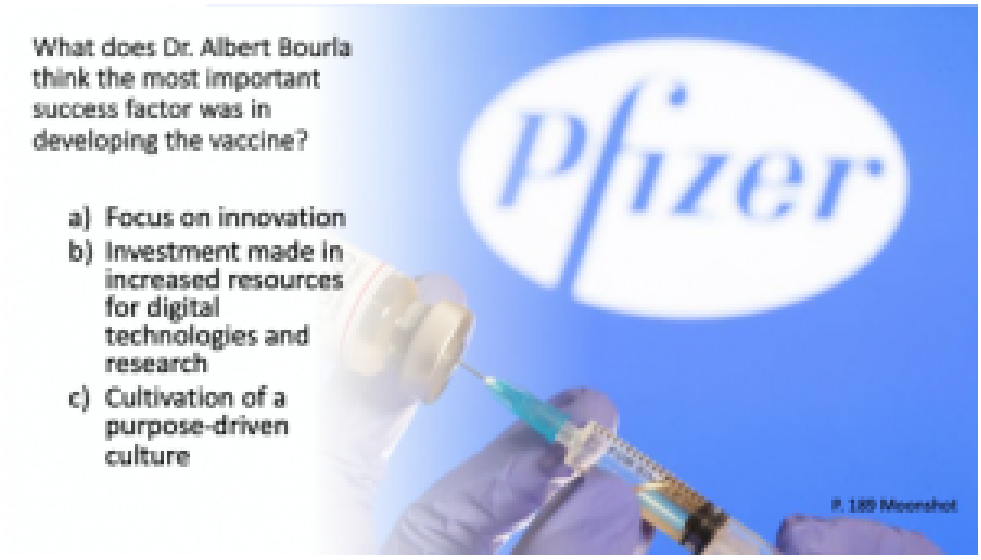
During our journey together, MSLs also discover something else. They learn that connecting with your organization's purpose isn't enough. Most pharma companies now have a mission statement that reads something like, "Everything we do is to improve patients' lives." That's great—but if you work in pharma, it's important to move beyond that general statement to find something more personal.

It is important to connect with why improving patient lives matters to you. Where does your desire to help others come from? Why is it so meaningful to you specifically? In his book *Drive*, Daniel Pink describes an organization's purpose as the 'big P' and the individual's purpose as the 'little p.'[1] He says that often organizations will splatter their purpose all over their website and marketing materials but until the organization helps each individual connect their own life story with the organization's purpose, it will fall flat.

The magic becomes even more game-changing when you share what drives you—your little p—with others. Sharing your purpose lowers walls and builds connections because then the HCPs and colleagues you want to help understand what drives the work you do. People engage with those they trust, admire and believe care for them and the patients you serve together. In Simon Sinek's ground-breaking TED Talk (the third-most viewed talk of all time) and his book "Start with Why", Simon says that the best communicators in the world begin by sharing not *what* they do, but *why* they do it.[3]

For those of us in pharma, I believe we need to push that idea one step further. Because of the industry's negative reputation, we are operating under a trust deficit. We walk into every conversation with outside stakeholders knowing that we need to build trust—and quickly. That means it's not enough for us to say that everything we do is to improve patient outcomes. We need to put some proof behind our words. We must explain why patients are so important to us and then, and—most importantly—we must act upon what we say. Our noble purpose must guide everything you think, say, and do. And the "do" is the most

important piece.



When each individual connects with their purpose, a winning culture is created. In his 2022 book *Moonshot*, Pfizer CEO Dr. Albert Bourla explains that creating a purpose-driven culture was the single most important factor to developing the COVID vaccine in an unprecedented and world-saving nine-month window.[2]

For many, understanding that purpose is a powerful revelation. And what I've found is that when entire teams connect—or reconnect—with the meaning that comes from serving patients, a transformation occurs! They feel brighter, they have better access and engagement with HCPs, the culture is enriched, and siloes fall. Why? Because they are all connected and united around such a meaningful mission. They are on the same team – the patients' team.

It's your choice to connect to your purpose – or not. It's also your choice to act on it – or not.

We should never forget that each of us either is or will be a patient or caregiver ourselves. And when the time comes, don't you hope that the people who are working on your treatment are dedicated to their purpose – to help save and improve lives.

So how will you live your purpose? In some ways, the key is so simple. However, it can be tough to implement it—and stick to it.

Here it is: To maintain a sense of purpose in your work, you must put in the effort. That's it. There's no shortcut solution! Just like any other professional goal, staying connected to your purpose requires continual effort. But the returns in happiness, satisfaction, and effectiveness make it more than worth the effort.

What do you need to do each day to put your purpose front and centre—to take your Vitamin P?

Pfizer's Purpose Circle, created by Albert Bourla to cultivate a sense of equality in team discussions. The photos of Pfizer colleagues' family and friends—real patients—are displayed on the walls to remind them of Pfizer's purpose: Breakthroughs that change patients' lives.
Wendy Barrens

Maybe you can start by putting a picture of a patient on your screen. In *Moonshot,* Dr. Bourla says that he asked each member of his executive team to submit a picture of the patient who inspires them. Then, he had the photos mounted on the wall of their board room and removed the table from the room, placing the chairs in a formation that he calls 'The Purpose Circle.' They have a constant reminder of their 'why' – the patients they serve.

What could you do to create a 'purpose circle' of your own? Instead of a circle of chairs, it might be something else that is meaningful to you and your team. Maybe your colleagues will take turns sharing a patient story at the beginning of each meeting. Maybe you start sharing a short version of your 'why story' with your collaborators. Maybe you decide to volunteer for a patient association event.

Living your purpose might also mean improving your skills and expertise so you are better equipped to help the HCPs help patients. Perhaps you will take a course to upskill or perhaps you take the initiative to redesign a process that is inefficient. Maybe you will simply choose to assume the best intent and practice forgiveness, tolerance, and kindness with your peers and collaborators more often.

Think: what is the one most important thing you need to do in the next six months to make the biggest difference in your connection to your purpose?

The way I think about it, we are all little pieces of a big puzzle. When you put us all together, that's when the big picture comes clear—an image of health and well-being for all. What a blessing to be a piece in that puzzle! We should strive to never forget it!

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Author:

Jill Donahue, MadEd, HBa

Author of 2 books, popular speaker and program creator, Jill Donahue helps MSLs build teamwork, engagement, and communication skills, all with the common denominator of purpose. She'll know she has been successful when MSLs feel proud of what they do and confident that they can make a difference for themselves, their organizations, and most importantly…patients.

Jill is living her purpose by helping MSLs live theirs through The Power of Purpose.