THE MSL

JOURNAL OF THE MEDICAL SCIENCE LIAISON SOCIETY

DECEMBER 2020

Our Path to Industry

Happiness, Own Your 40%

Virtual interviews are here to stay

Last year, on 4th September, my life changed forever

Enhance Your Next Virtual Medical Conference!

Lessons that I learned during my first year as an MSL

The revaluation of email in times of COVID-19: KOL engagement and KPI

Augmenting MSL effectiveness in emerging markets of the Middle East

How MSLs and the Society Inspired Me to Consider a Degree in Pharmacy - Minds of the innocent

Emotional intelligence

Winning is just the beginning

The Often Forgotten Other KOL

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Adding value to KOL VIRTUAL ENGAGEMENT from the MSL Excellence perspective

MSLs in the Age of COVID: KOL Perceptions of MSL Digital Engagements

Survey of Utilization of CRM platforms by MSLs: How can we leverage data to provide personalized engagements with KOL?

Letter from the editor

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December-2020 Issue

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Letter from the Editor

By Shahrukh Hossain | December-2020 Issue

Warm holiday greetings to everyone! As we settle into winter and the holidays are upon us, I want to wish each of you a happy new year going into 2021! This year has been one of unprecedented challenge and vast change for all of us! In my view, we are demonstrating the nimble, adaptable nature MSLs and leaders have! Closing out 2020, we are dedicating this issue of The MSL Journal to virtual development. Check out the array of topics as you consider novel approaches and ways to stretch professionally in our new environment! From developing virtual presentation and interview techniques to polishing your virtual conference approach and remembering to keep patients first in our discussions and scientific efforts, this issue will build more bridges for learning as you start a new year!

While you make your new year resolutions, which may include losing weight packed on during the stay at home orders of the COVID-19 pandemic, I encourage everyone to have an individual development plan with specific professional goals you wish to accomplish. Without a target goal, it is always more challenging to know if you truly achieve an objective! An approach that has always worked well for me is to place a calendar hold note for 15-30 minutes per week to look at my development folder resources and absorb new ideas and information or tips I can try that week! Be sure to invest in yourself regularly and seek feedback for your growth needs. We all need development and new opportunities regardless of how much experience we have. Based on a 2018 MSL Society survey of 304 MSLs, professional growth is the primary reason MSLs leave their position, whether a lack of development and training or lack of opportunities to grow and stretch. Thus, asking for new opportunities and investing in development is critical to both MSLs and leaders in order to attract and maintain talent within the organization. MSL capabilities are quite diverse compared with other positions. Take time to review MSL capability continuum guides (hint – one was published in the January 2020 journal edition!) and consider how you want to focus on growth in your next year!

Also vital is to consider who you look to for mentorship and whom you can mentor. Reach upward and also around you to lend an ear, offer sage advice, and seek new ideas from others. MSLs are natural networkers; leverage networking and the MSL Society to help you with mentorship. The MSL Society mentorship program is a fantastic way to get involved and informal mentorship can also be done with work colleagues and others in your network as you reach out to your MSL community! Consider elevating your voice by writing for the journal; we want to hear your ideas, best practices and perspectives! Know that your accomplishments and experiences reach a global Medical Affairs audience in this journal!

Keep growing and developing in these virtual times and know that 2021 will bring renewed energy and focus as you invest in growing your skills and capabilities!

Grab a cup of cocoa (or beer/wine) and dive into this edition of The MSL Journal! Happy reading and best wishes for a wonderful, relaxing, safe and healthy holiday!

Cherie Hyder

Cherie Hyder, PharmD, MSL-BC is Medical Excellence and Operations Lead in Medical Affairs at Biohaven Pharmaceuticals where she recently 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 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.

MSLs in the age of COVID: KOL perceptions of MSL virtual engagements

By Dr. Samuel Dyer | December-2020 Issue

The COVID-19 pandemic continues to have a substantial impact on the activities of Medical Science Liaisons (MSLs) including access to Key Opinion Leaders (KOLs) and how MSLs engage with them. The Medical Science Liaison Society (MSL Society) has conducted numerous surveys throughout 2020 to understand this impact and what the activities of MSLs have been during the pandemic[1]. In April 2020, the MSL Society partnered with H1 to design and conduct a first of its kind survey to understand how KOLs (across the USA) prefer to engage with MSLs during the pandemic[2].

As the pandemic continued it was increasingly important to not only understand the impact of the pandemic on MSL/KOL engagements but also equally important to understand the perceived value of MSLs from KOLs perspective. As a result, the Medical Science Liaison Society partnered again with H1 to conduct a second survey of Key Opinion Leaders (KOLs) in the United States[3]. The purpose of this second survey was to gain a better understanding of how frequently KOLs were engaging with Medical Science Liaisons (MSLs) prior to and during the Covid-19 pandemic, the perceived effectiveness of virtual scientific discussions with MSLs, and among other valuable information, what specific type information that KOLs find most valuable. The KOLs surveyed also shared their perception on whether the information presented by MSLs was fair balanced along with what qualities make an MSL stand out from others.

Survey Methodology

A KOL research firm was hired to conduct a survey with KOLs across the USA. An online survey was created and open from September 11-23, 2020 and sent to KOLs across the USA. The survey included 9 questions which were all required and only completed surveys were included in the data analysis. KOLs were only allowed to participate one time and duplicate surveys from a single email address were not accepted. The survey results were not weighted. Only KOLs that responded that they regularly interact with Medical Science Liaisons were included in the survey results.

Perspectives from KOLs representing diverse specialties of medicine

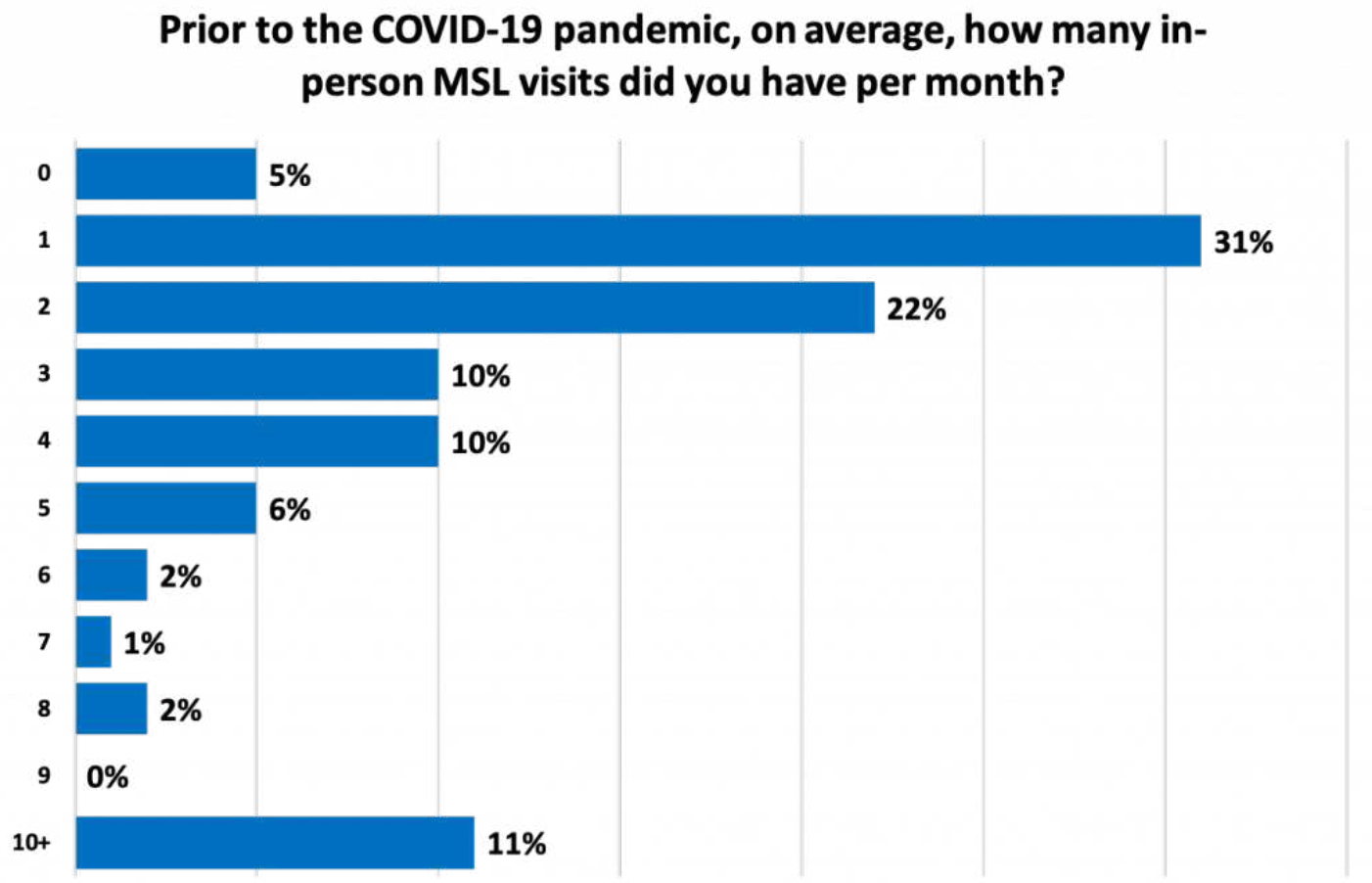
One of the goals of the survey was to understand how a diverse group of KOLs perceive the value of MSLs during the pandemic. KOLs were allowed to self-identify their specialty of medicine. A total of 245 KOLs representing a wide diversity of 29 specialties*, all based in the USA, completed the survey. Of the KOLs who were represented in the survey, the 3 specialties that had the greatest representation included Cardiology 18%, Obstetrics and Gynecology 17%, and Neurology 12%. The remaining 26 specialties made up less than 10% of each speciality.

KOL Specialty*

18%	Cardiology	2%	Anesthesiology	1%	Maxillofacial Surgery
17%	Obstetrics & Gynecology	2%	Family Practice	1%	Nuclear Medicine
12%	Neurology	2%	Infectious Disease	1%	Otorhinolaryngology
8%	Gastroenterology	2%	Orthopedic Surgery	1%	Pediatrics
6%	General Surgery	2%	Sleep Medicine	1%	Plastic & Reconstructive Surgery
6%	Internal Medicine	1%	Abdominal Surgery	1%	Podiatry
6%	Oncology	1%	Blood Banking/Transfusion Medicine	1%	Reproductive Endocrinology
5%	Pulmonary Disease	1%	Emergency Medicine	1%	Spinal Surgery
5%	Rheumatology	1%	General Preventive Medicine	1%	Vascular and Interventional Radiology
2%	Allergy and Immunology	1%	Hepatology		

Prior to the COVID-19 pandemic, on average, how many in-person MSL visits did you have per month?

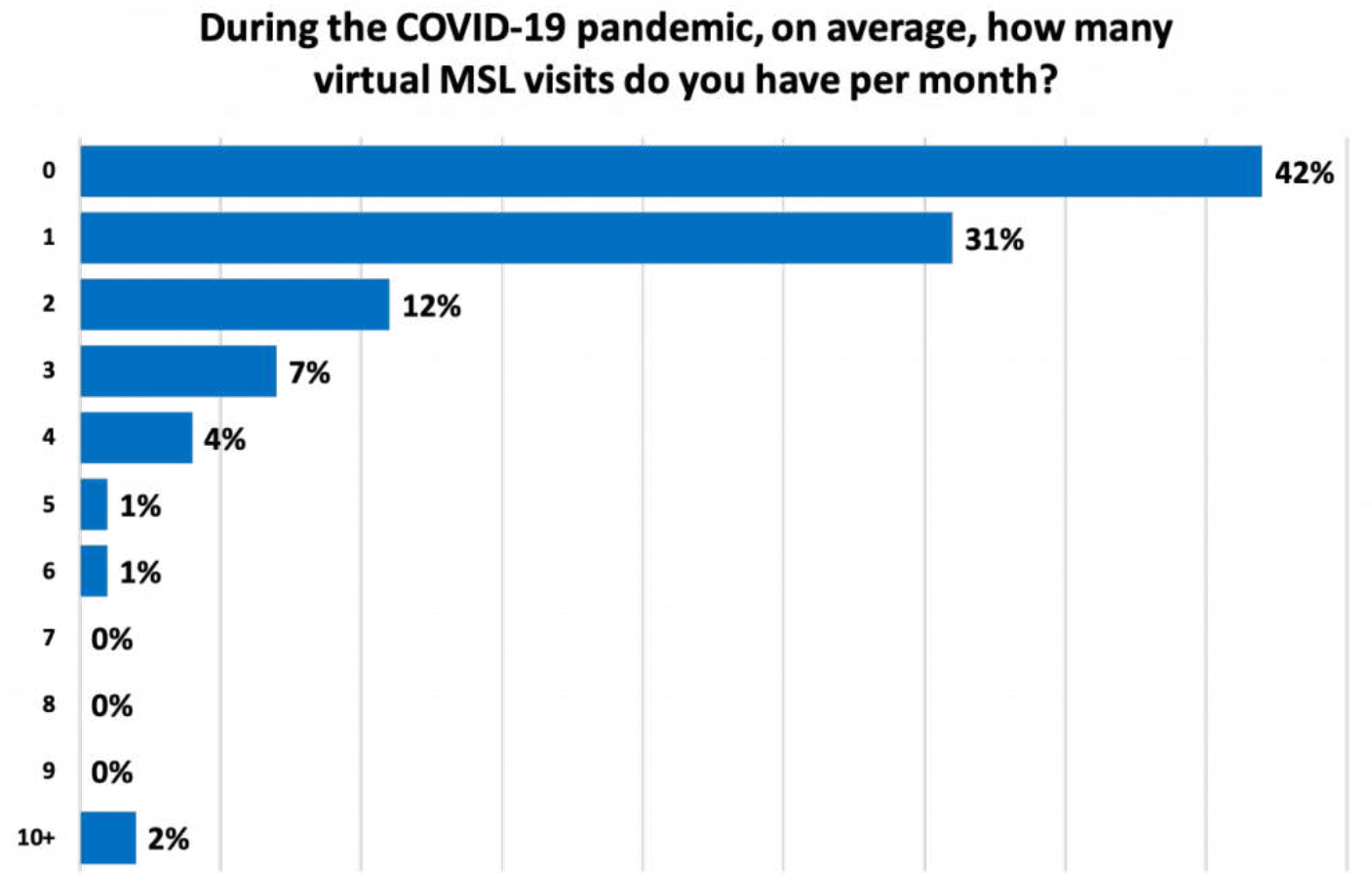
For comparison and to understand how the pandemic has impacted the activities of MSLs and specifically how frequently KOLs engage with MSLs, it is important to understand the frequency of in-person KOL/MSL engagement prior to the pandemic. This study found that prior to the Covid-19 pandemic, 63% of KOLs averaged 1-3 in-person MSL visits per month.



During the COVID-19 pandemic, on average, how many virtual MSL visits do you have per month?

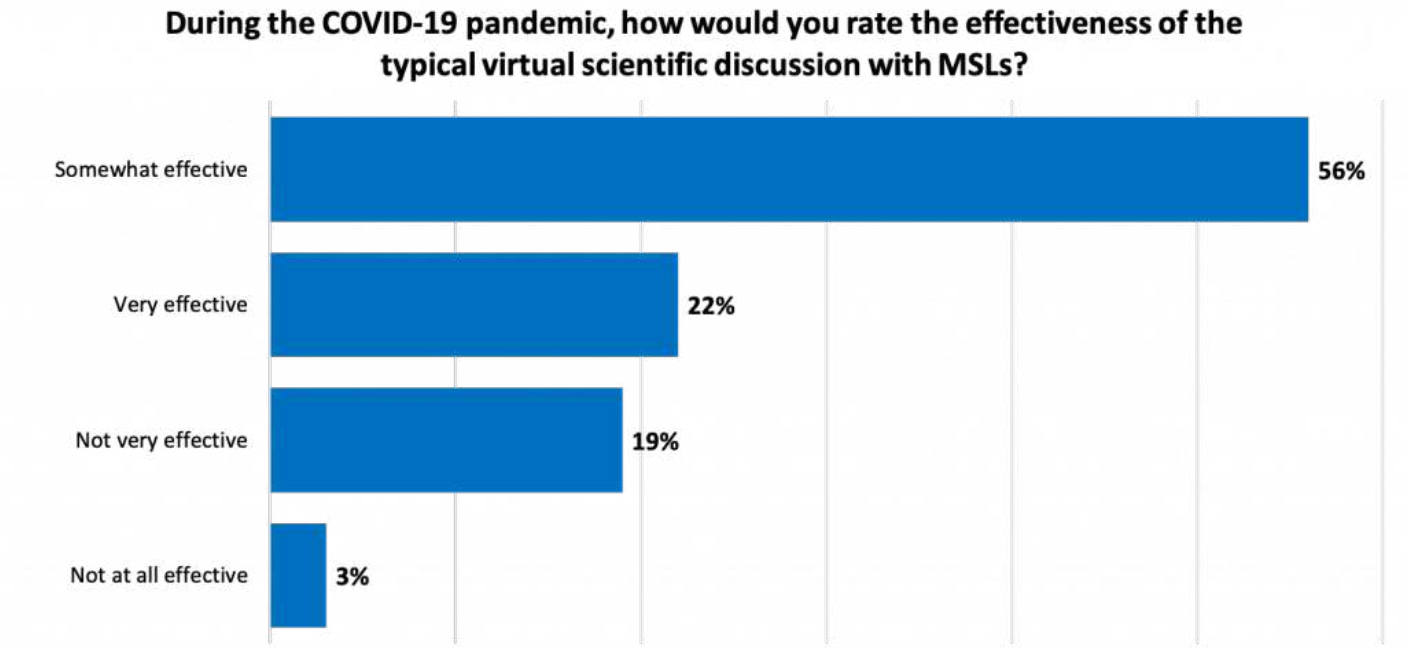
Although there were some initial concerns about the decrease and frequency of KOL/MSL engagements during the pandemic, the

survey revealed that 50% KOLs still averaged 1-3 MSL visits (virtual) per month. This represents only a 13% decrease when compared to in-person engagements prior to the pandemic. Although 42% of KOLs revealed they had 0 virtual MSL visits per month (on average), the remaining 58% of KOLs continued to engage with MSLs during the pandemic. This suggests KOLs continue to value engaging with MSLs. It's important to note that these virtual visits were live engagements and do not include email exchanges or telephone calls.



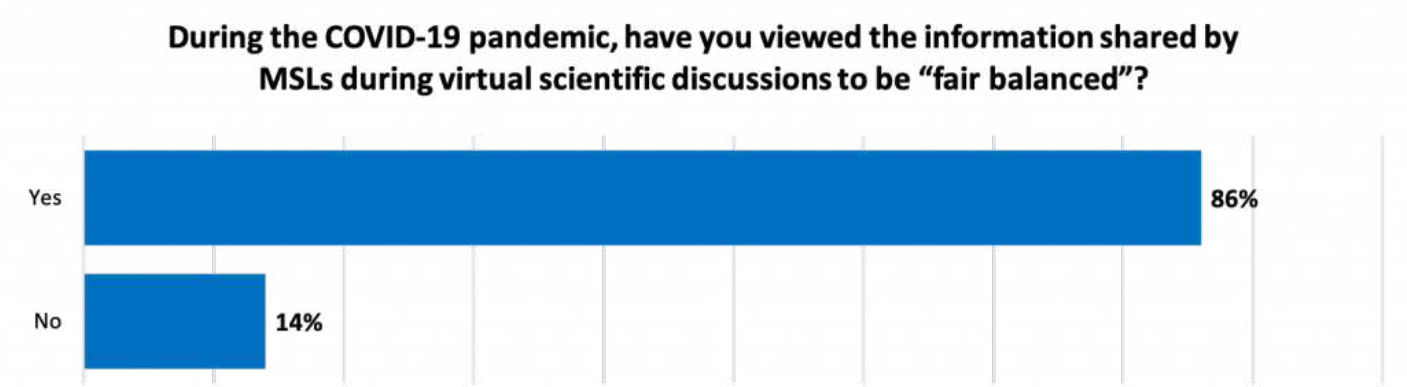
During the COVID-19 pandemic, how would you rate the effectiveness of the typical virtual scientific discussion with MSLs?

Another concern regarding KOL/MSL engagements during the pandemic, has been MSL effectiveness in a virtual environment. The study found that 78% of KOLs rated the effectiveness of the typical virtual scientific discussion with MSLs as "Somewhat effective" (56%) or "Very effective" (22%). This is important because it suggests that even in a virtual environment, MSLs continue to effectively add value to KOLs.



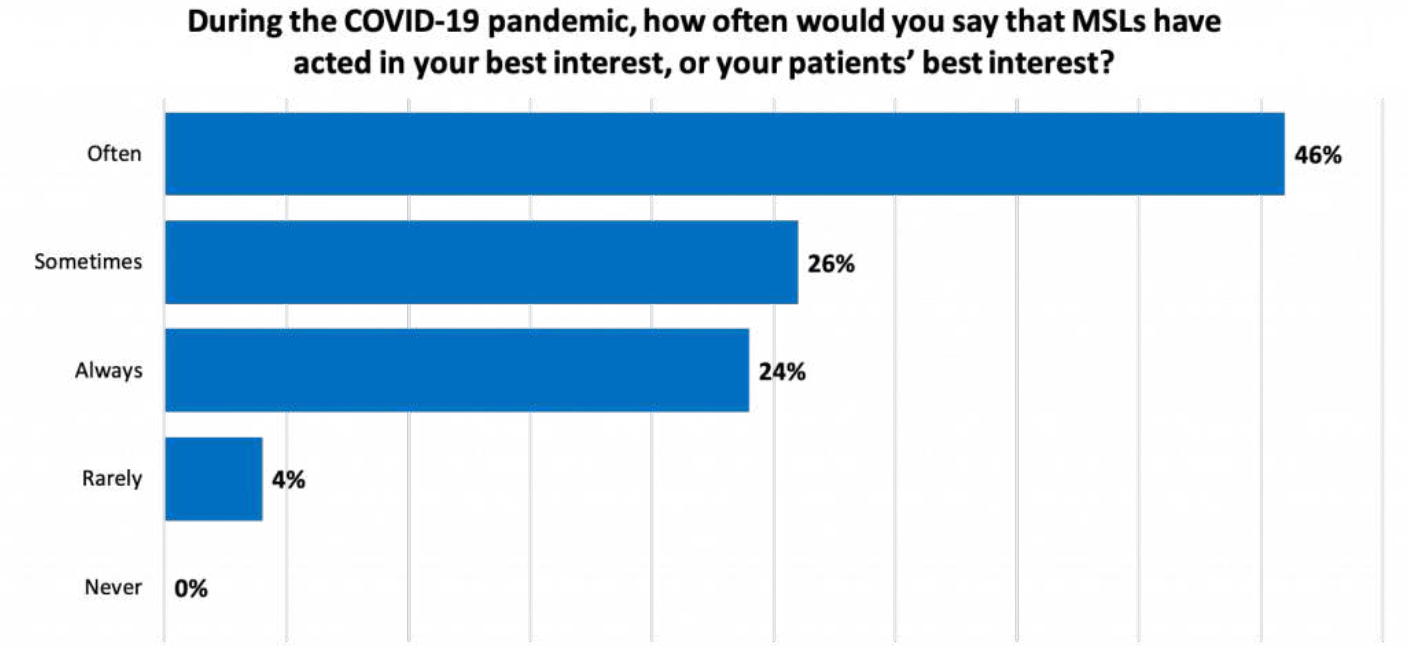
During the COVID-19 pandemic, have you viewed the information shared by MSLs during virtual scientific discussions to be "fair balanced"?

The two guiding principles for MSL engagement with KOLs according to the *MSL Activity Guidelines* are that MSLs should be "primarily focused on: 1) fostering ethical relationships with key opinion leaders and 2) facilitating the exchange of valid, unbiased, fair, and balanced scientific information within the context of a medical product or device and the therapeutic area that the MSL supports"[4]. These principles are often mentioned when discussing how an MSL should engage with KOLs, but prior to this survey, there has been little data on how KOLs perceive the information shared by MSLs during virtual scientific discussions. This survey found that 86% of KOLs viewed the information shared by MSLs during virtual scientific discussions as "fair balanced" during the COVID-19 pandemic. This is important because it supports what should be the goal of all MSLs: to be a credible medical resource to the KOLs they engage with.



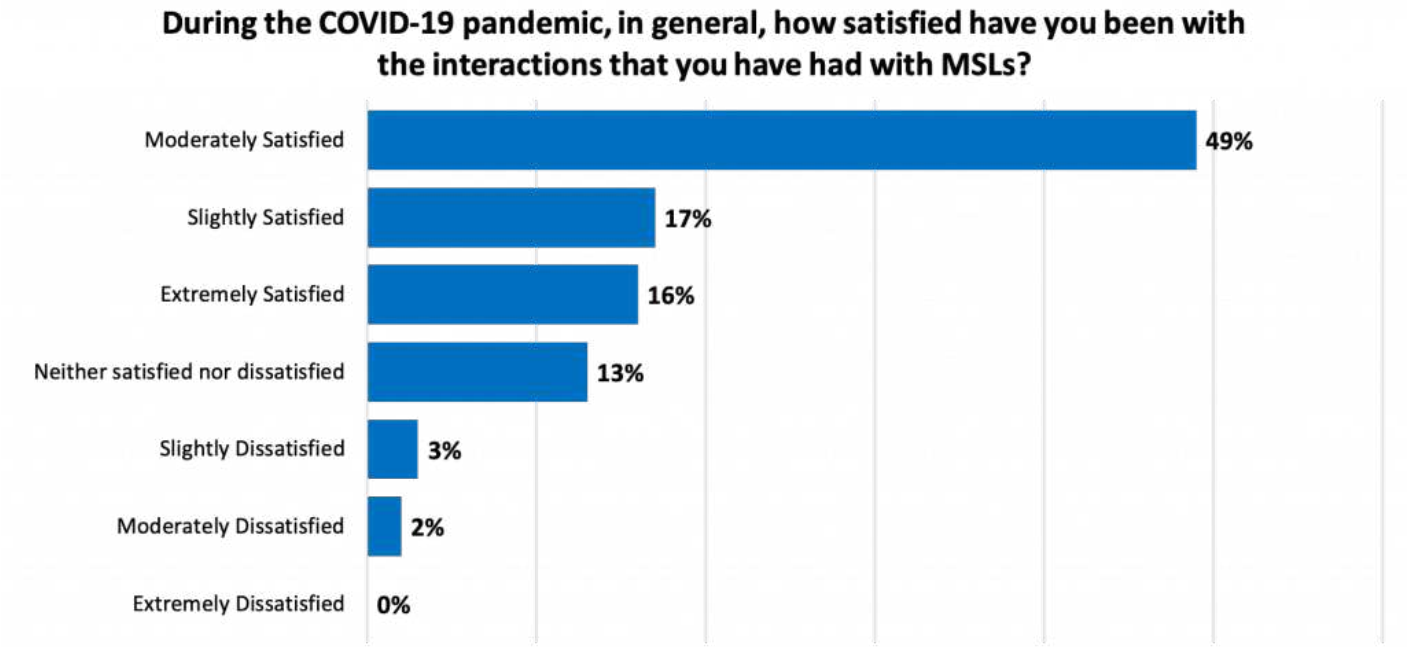
During the COVID-19 pandemic, how often would you say that MSLs have acted in your best interest, or your patients' best interest?

Another principle that is often mentioned when discussing how MSLs should engage with KOLs is that MSLs should act in the KOLs' or their patients' best interest. Importantly, 70% of KOLs reported that MSLs "Always" or "Often" have acted in their or their patients' best interest during the pandemic. The data suggests that KOLs do perceive that the goal of MSLs is to foster ethical relationships with them.



During the COVID-19 pandemic, in general, how satisfied have you been with the interactions that you have had with MSLs?

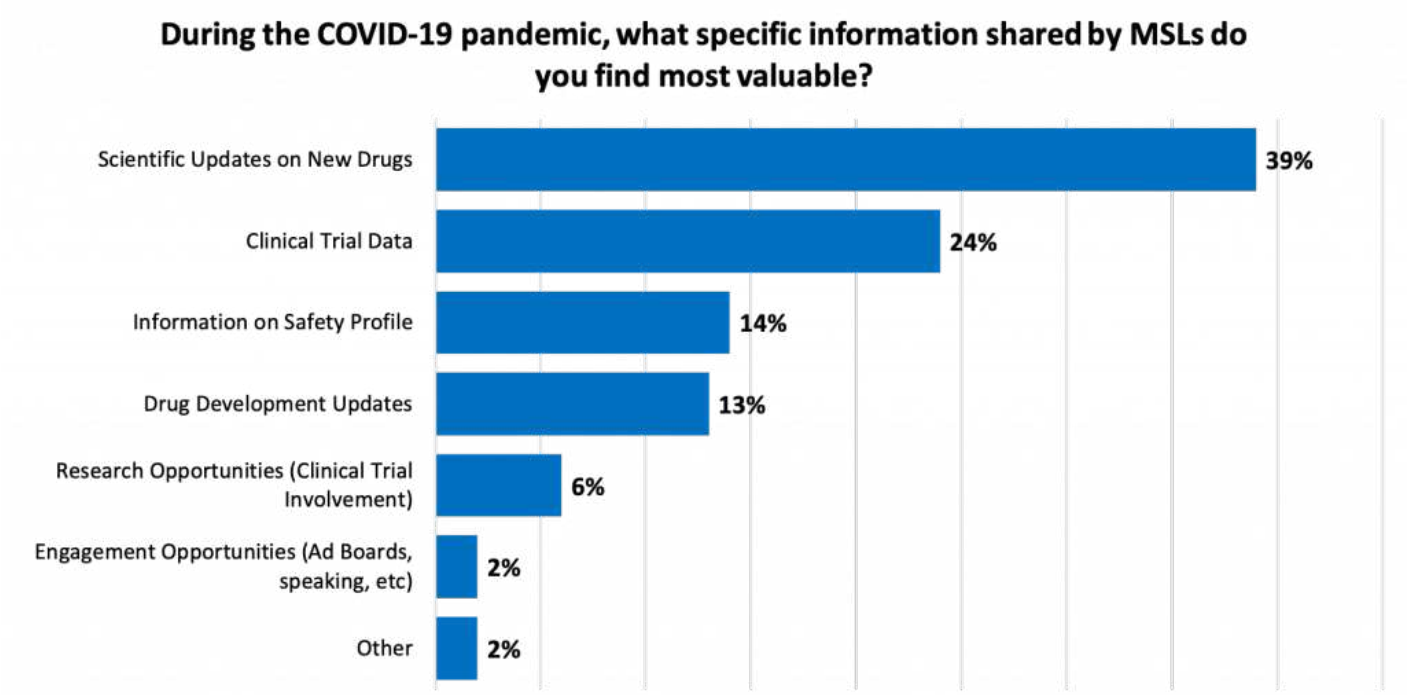
One of the important goals of the survey was to understand and establish how satisfied KOLs have been with the interactions they have had with MSLs during the pandemic. This is important because a decrease in satisfaction could lead to reduced access to KOLs. The KOL/MSL satisfaction interaction question in this survey utilized a seven point Likert scale, which is considered to be the most accurate type of Likert scale. Interestingly, 65% of KOLs indicated that they were "Extremely" (i.e. 7 out of 7) or "Moderately" (i.e. 6 out of 7) satisfied with the interactions they have had with MSLs during the pandemic, which represent the two best possible answer choices for this question. At first glance, it may be concerning that only 50% of KOLs indicated they were "Moderately Satisfied" with the interactions they have had with MSLs. However, it's important to consider that this means KOLs rated their satisfaction with MSLs as a six out of seven which represent 85% satisfaction.



During the COVID-19 pandemic, what specific information shared by MSLs do you find most valuable?

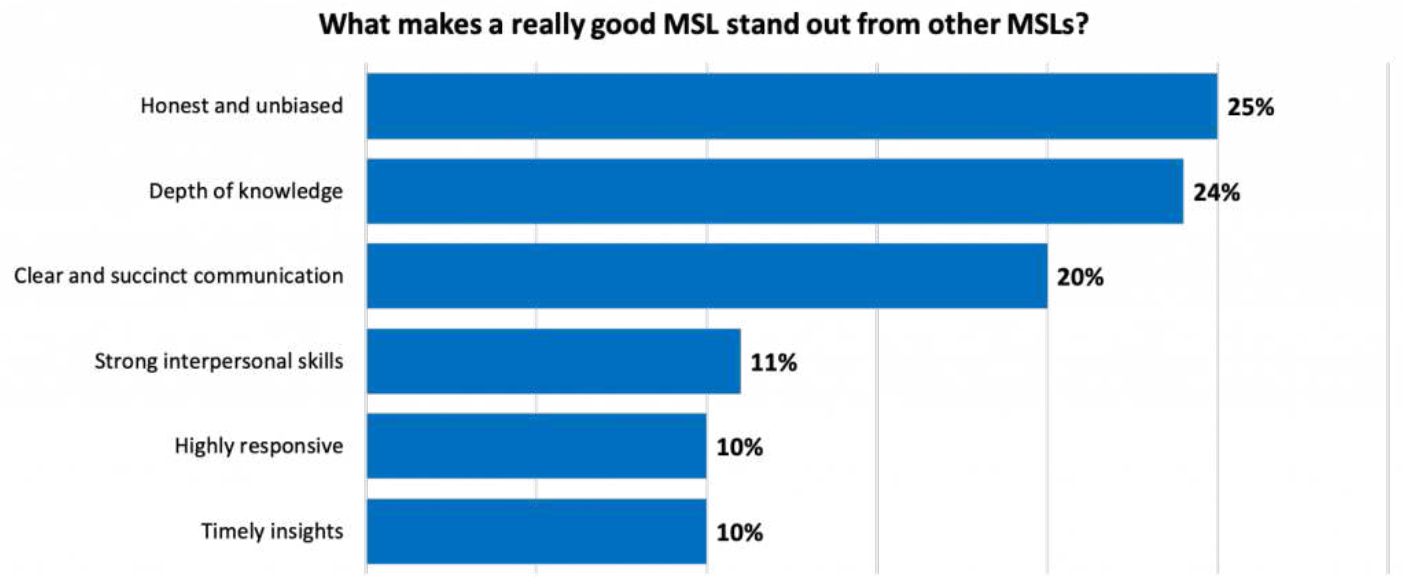
MSLs are often challenged with determining what information or material will add the value to a KOL. Of course this is dependent

on numerous variables including the specific needs of a KOL, what type of practice the KOL has and the patients they treat, where a product is at in its lifecycle, the technology and competitive landscape, among others. Part of the challenge in adding value to a KOL relationship is understanding what KOLs value. This study found that 39% of KOLs indicated that "Scientific Updates on New Drugs" was the most valuable information shared by MSLs, followed by "Clinical Trial" data (24% of KOLs). Clearly, all information shared by MSLs should address the needs and interests of each individual KOL in order to strengthen and create a value added relationship, but knowing that as a group these KOLs found that scientific updates were more important than, for example, speaking opportunities, allows MSLs to focus on one of the primary goals of the MSL profession and what MSLs do best: facilitating the exchange of valid, unbiased, fair, and balanced scientific information.



What makes a really good MSL stand out from other MSLs?

Because a KOL may have MSLs from multiple companies competing for their time, an important result of this survey was gaining an understanding of what makes a really good MSL stand out from other MSLs during the pandemic. KOLs in this survey revealed that being "Honest and Unbiased" (25%) followed by "Depth of knowledge" (20%) were the two most important qualities for an MSL. Clearly, having a thorough knowledge of the disease state and the product an MSL supports is essential, and being honest and unbiased is valued even more by KOLs. This underscores what the goal should be for all MSLs, which is to always foster ethical relationships with key opinion leaders.



Conclusion

Although this survey built on the insights gained from the first survey conducted with KOLs in April of 2020, there were numerous unique revelations discovered in this important follow-up survey. The results of this second survey and the insights gained from the information, may help MSLs be more effective in fostering ethical relationships with key opinion leaders during the current pandemic. MSL leaders may also be able to use the data to manage their expectations of what KOLs want from MSLs during the pandemic which may assist in creating realistic goals for KOL engagement. Doing so will contribute to an MSL's ability to add value to the KOLs they support.

Facilitating the exchange of valid, unbiased, fair-balanced value-added scientific information, should always be the goal of all MSLs when engaging with KOLs!

The full results of the survey have also been incorporated into an infographic that is available as a free download here.

References:

1. Various articles from the April issue, The MSL Journal.
2. How KOLs prefer to engage with MSLs during the COVID-19 pandemic Report, 2020 MSL Society. https://www.themsls.org/covid-19-kol-engagement-survey/
3. KOL interactions with MSLs during the COVID-19 pandemic report, 2020 MSL Society. https://www.themsls.org/covid-19-kol-engagement-follow-up-survey/
4. MSL Activity Guidelines, 2018 MSL Society. https://www.themsls.org/msl-guidelines/

Authors:

Dr. Samuel Dyer

CEO and Chairman of the Board

Dr. Samuel Dyer is the CEO and Chairman of the Board of the Medical Science Liaison Society.

Dr. Dyer has over 20 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 biotech's.

He has led numerous MSL training programs over the last several years in more than 15 countries. He has written extensively on the Medical Science Liaison role, including numerous published articles, benchmark studies, and reports. He has also been a speaker at several global conferences presenting various MSL topics, including creating teams, management, global trends, and the metrics used to measure performance. Dr. Dyer has also worked as a consultant for a number of pharmaceutical and management consulting companies on MSL projects.

Dr. Dyer has a Ph.D. in Health Sciences and did his medical training in Chicago. He has a Master's Degree in Tropical Biology (where he studied in the Amazon) and has a B.S. in Biology. 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 Amazon #1 Best Seller "The Medical Science Liaison Career Guide: How to Break into Your First Role". The book is the first step-by-step guide on how to break into the MSL career: (www.themslbook.com).

Ariel Katz

Ariel started his first company in college, Research Connection, to help connect students with research opportunities. That company grew to over 40 universities and was eventually acquired by the Bill and Melinda Gates Foundation and the Ewing Kauffman Foundation. Ariel then helped co-founded, H1. Ariel Katz is currently the CEO and Co-founder of H1. H1 is a platform-based network that is dedicated to connecting healthcare professionals and companies with the aim of being the "Linkedin for healthcare." The platform now has over 9 million HCP profiles in 16,000 institutions in 70-plus countries. Its clients, which encompass over 35 pharmaceutical companies, including seven of the top 10, use the platform to do things like find doctors to work on a clinical trial for given biotech, find hospitals where they can do their clinical and find the thought-leading healthcare professional to lead a CME session.

Maria Amorosso

Maria is a member of the Business Development team at H1 in New York City. Maria studied Psychology and Spanish at Colgate University, where she also developed a significant interest in the way the healthcare ecosystem communicates across disparate channels. During her career so far, Maria has demonstrated a detailed and attentive eye for new and emerging data trends, particularly as it is related to the healthcare market. When she's not helping out at H1, she enjoys running, reading, and staying up to date on current events and politics.

Winning is just the beginning

By Arthur Chan, PhD, MBA | December-2020 Issue

It was a true honor to join my esteemed peers as one of the judges for the annual MSL society awards. I'm sure I speak for the other judges by sharing that the 9+ hours we each spent reviewing applications in our spare time was incredibly refreshing and inspiring. We got to know the finalists through their heartwarming stories and recommendation letters, and you couldn't help but just feel the emotions and experiences as they shared how they truly made a difference in this challenging year. Judging was definitely no easy task, as the bar was set high just to become a finalist and everyone was deserving and had unique merits!

I thought I would share what stood out amongst the finalists that made an exceptional impression (and may have scored a few extra points). In fact, it is the same "secret sauce" that enables exceptional MSLs to really stand out in their everyday work.

1. Tell a great story

People remember and relate to stories over facts and data. The most memorable selfie videos from this year's competition were stories that start with why (borrowing the title from Simon Sinek's book), contain humor and personal touches, and end with a visionary statement that the individual aspires to pursue. The best videos have all the ingredients of what an impactful and memorable story – and KOL conversation – should contain.

2. Empathy matters

The most touching letters of recommendation went beyond describing the applicant as top of their game, always ready to help, and a great person. Letters that resonated with me described how the applicant listened, attempted to truly understand needs and challenges, and came up with curated and creative solutions. Empathy and emotional intelligence go a long way in being a successful MSL or manager. In fact, since most conversations that MSLs have are reactive, the art of listening, asking probing questions, and using empathy to best help a KOLs solve their dilemmas makes engagements impactful.

3. Cross-functional collaboration and curiosity

I work for a company where being curious is a trait that we value in our associates. Curious MSLs explore opportunities to contribute beyond medical affairs and often take on tasks that go above and beyond the MSL role. Tasks that demonstrate cross-functional partnership, versatility, and a desire to find additional ways to contribute, all while ensuring compliance. In the MSL of the year applications, there were some really fantastic letters from cross-functional peers that described how individuals truly shined in collaborating.

4. All about team

One common thread with our winners every year is their humility and how they share the honor with their teams, families, and mentors. The top finalists all emphasized the impact that their team members, managers, and cross-functional associates had in their career journey. The managers who won awards talked about not what they accomplished, but rather the gratitude they had for their team and how they became better people because of the people they hired. It was so heartwarming to hear acceptance speeches about how team members supported each other emotionally and personally during this challenging year. We know that behind every award winner is an award-winning team and support infrastructure.

5. Community Involvement and character

Peer nominated industry-wide awards are an opportunity to recognize those who stand out as role models. With that honor comes an unsaid but assumed duty to give back to the community, lead by example and inspire others to do the same. Every year during the awards reception, Samuel Dyer talks about the MSLS awards as an opportunity to pay it forward. The judges look for individuals who have the most potential to further contribute towards the entire medical affairs community based on what

they do beyond their daily job-related tasks. Examples: Volunteering their expertise with professional societies and employee resource groups, mentoring associates and students, giving back to their alma mater, serving others in their community. MSLs are much loved and much trusted employees, on the front lines as the faces of our companies. As such, equally important to being a wealth of scientific knowledge is one's character, integrity, ethical conduct, having the courage to ask for guidance, and always doing what's right.

On behalf of all the 2020 MSL Society Awards Judges, congratulations again to our 2020 award recipients – you are true role models! Winning is truly just the beginning. The medical affairs community is excited to see how you will use this platform to be someone who leaves a legacy by giving back and inspiring others to follow!

Author:

Arthur Chan

Arthur is the head of MSL Capabilities at Novartis and leads the team that trains all of Novartis' US MSLs, ensuring they have the customer tools, resources and technology to be the best they can be. Prior to his current role, he built the Alcon surgical North America MSL team from scratch. Arthur holds a degree in mechanical engineering, a PhD in biomedical engineering, and an executive MBA specializing in healthcare marketing. He developed and patented an image-guided treatment for uterine fibroids using focused ultrasound waves and was a Bill and Melinda Gates foundation fellow involved in starting three biotech companies. Arthur has had various leadership roles in clinical applications, professional education and medical affairs for both pharmaceutical and medical device companies in various therapeutic areas. His career highlight was representing Alcon in Cambodia on a SEE international medical mission trip. Arthur is originally from Calgary, Canada and now resides in Plano, TX with his family. In his spare time, Arthur enjoys running, cycling, playing piano, coaching his kids, traveling, skiing and volunteering.

The MSL-DISC Personality Types survey

By Shahrukh Hossain | December-2020 Issue

The MSL role is constantly evolving and facing new challenges. MSLs are both scientific experts and relationship managers. As such, they are required to perform tasks that are extremely analytical and technical in nature, while being able to skilfully handle relationships on a human level. Each of these responsibilities seems to require not only very different competencies but also dissimilar personalities. However, very little has been investigated about MSLs' personality traits.

We have designed and conducted a survey that explores MSLs' personalities and behavioral styles, based on the DISC system. Our goal was to provide some insights about the distribution of personality traits among MSLs and to investigate the relationship between each personality type and the preference for specific MSL-related tasks and responsibilities.

We received responses from 50 MSLs, with a wide range of experience in the role (Fig. 1A), different academic backgrounds (Fig. 1B), and working in all main healthcare company types (Fig. 1C). However, not all geographical regions of the world were significantly represented. Most participants were working either in Spain (34%) or in the USA (32%). 42% of the responders were males, 58% were females (Fig. 1D).

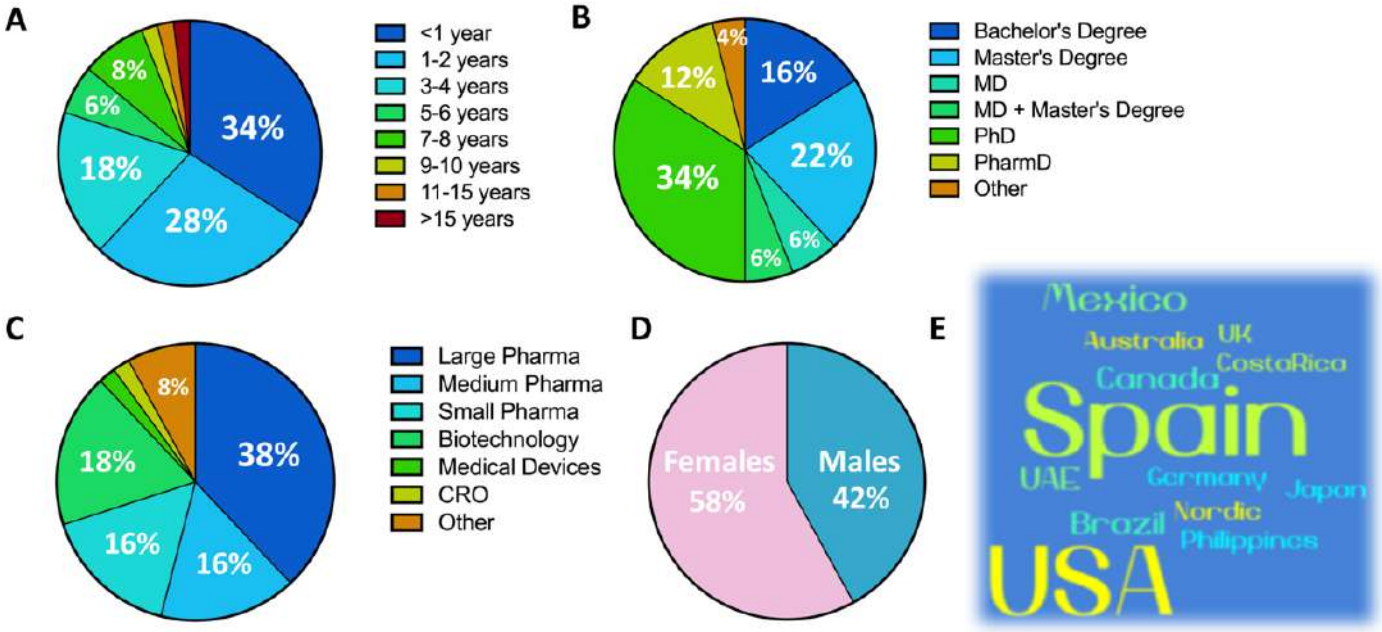


Figure 1

Fig. 1 – Responder's demographics. (A) Years of experience in the MSL role. **(B)** Academic backgrounds. **(C)** Company classification. **(D)** Gender. **(E)** Countries where participants work. Size is directly proportional to frequency. We received responses from MSLs working in 13 countries. Most responders were working either in Spain (34%) or in the USA (32%).

Survey Methodology

The survey included a total of 19 questions. Data were collected and analyzed anonymously. A link to a freely-available, reduced version of the DISC test was provided (https://discpersonalitytesting.com/free-disc-test/). Such a tool generally gives a good approximation of the responder's DISC style blend. Nonetheless, it is not a comprehensive test, and the outcomes might be biased.

Participants were asked to rank specific tasks related to the MSL profession according to their preference. The tasks were classified into five categories based on the MSL guidelines published by the MSL Society in 2018: KOL engagement; congress support; evidence generation; insights gathering; internal activities. Each of the tasks was assigned a priority to one of the four DISC styles, depending on whether we considered it innate of a task- versus people-oriented people, or of introverts versus extroverts. It's important to stress that we aimed at analyzing preferences, not competencies. Competencies can be learned and improved; preferences, instead, are innate and are less likely to vary through time. However, we cannot guarantee that such a distinction was clearly understood by all participants. As a result, some of the received responses could be skewed.

An additional limitation of the study was the self-selection bias, as some individuals tend to respond to the invitation to participate, while others normally ignore it. Nevertheless, our demographic data indicate that we have an adequate representation of the MSL, as we received responses from individuals with various degrees of experience and academic backgrounds.

The DISC System

The DISC system was developed in the 1920s by a Harvard psychologist, Dr. William Moulton Marston. According to his model, people are driven by two key motivators, the "motor" drive, and the "priority" drive. On the one hand, people can be either extroverted and fast-paced or introverted and slower-paced. Extroverts tend to be talkative and outwardly focused, while introverts are generally quieter, observant, and inwardly focused. On the other hand, individuals can be either task- or people-oriented. Task-oriented people will focus on logic, data, results, and projects, whereas people-oriented individuals will be more concerned with experiences, feelings, relationships, and human interactions. The combination of these two basic drives generates the four main DISC types: "Dominant" (D)", "Influencing" (I), "Steady" (S), and "Compliant" (C) (Fig. 2).

MSLs are both scientific experts and relationship managers. They are constantly leveraging their interpersonal skills to engage

with stakeholders, to support and to influence them. The qualities that make MSLs innately great at relationship management are more likely found in people with High Influencing and Steady styles. On the contrary, result-oriented people with a propensity for analytical thinking and a strong drive for results are more likely to have High Dominant and Compliant energies.

We, therefore, set to investigate the distribution of the four DISC styles among MSLs around the world.

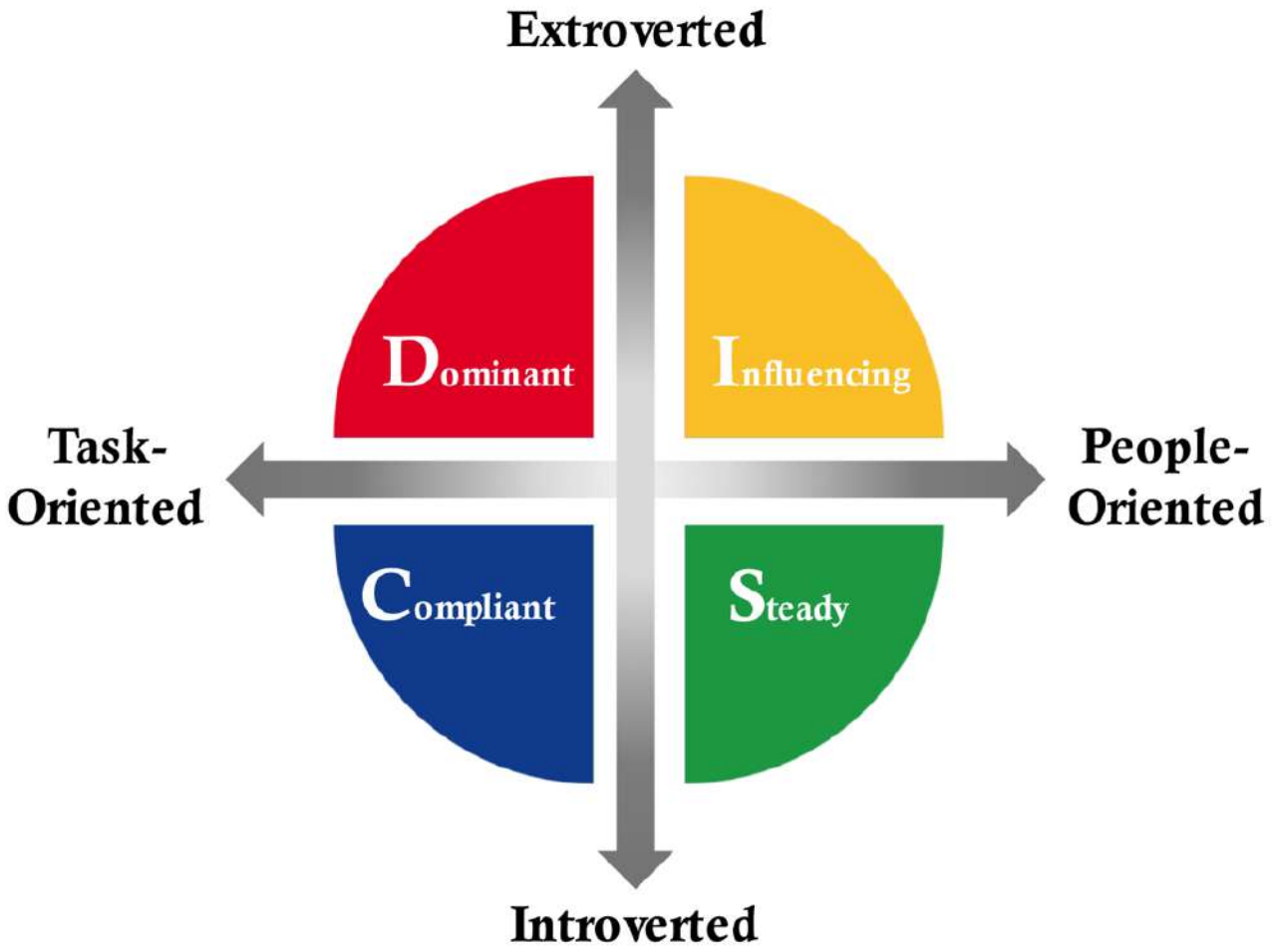


Figure 2

Fig. 2 – DISC Style System. The axis of introversion vs extroversion and that of tasks- vs people-orientation define four main behavioral types: “Dominant” (D)”, “Influencing” (I), “Steady” (S), and “Compliant” (C). People with a High D style are action-driven, strong-willed, extroverted, and outgoing. Their focus is on solving problems, and they enjoy taking charge of the situation. However, they can sometimes be perceived as controlling or aggressive. They strive for power and control, and they are motivated by results and achievements. People with a High I style are extroverted, outgoing, persuasive, and quite talkative. Their focus is on interacting with people, generating enthusiasm, and motivating others. For this reason, they may sometimes struggle with structure and organization. They have a strong desire for sociability, approval, and praise. People with a High S style are reserved, supportive, easy-going, and agreeable. Their focus is on maintaining harmony and cultivating deep relationships. As a result, they might be scared of or resistant to abrupt change. They have a strong desire to help and understand others. People with a High C style are introverted, very detail-oriented, analytical, and precise. Their focus is on facts, rules, and compliance. As a consequence, they might sometimes be perceived as “cold”, stubborn and excessively bureaucratic. They are driven by a desire to understand the world with objectivity, and they are motivated by quality, analysis, and accuracy.

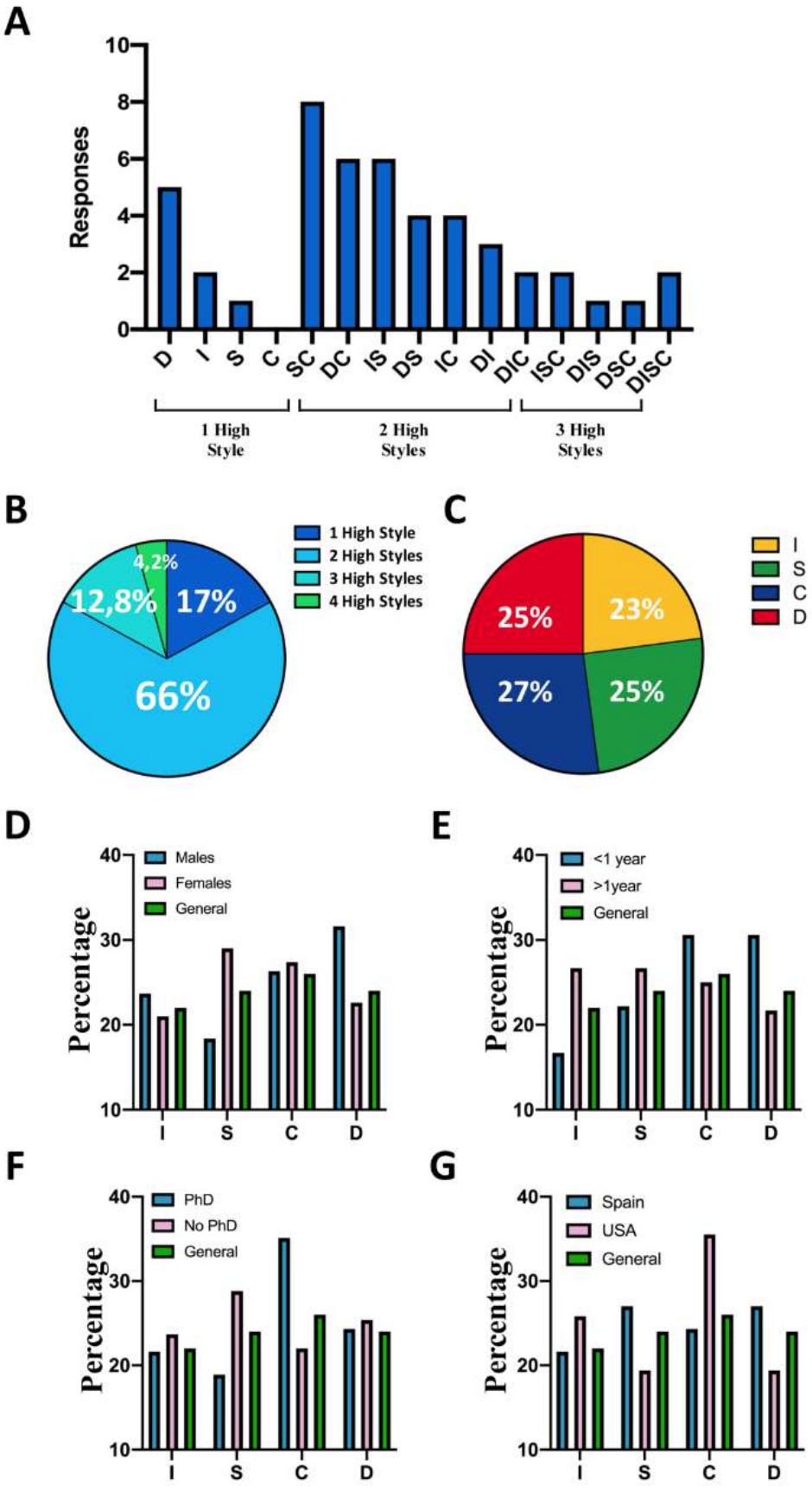
Distribution of DISC Styles among MSLs

It’s important to keep in mind that each individual person is highly unlikely to display a single behavioral style. As a rule of thumb, they will possess a blend of styles; some of them will be stronger (High styles), while others will be weaker (Low styles). In the general population, most people have two High and two Low styles (80%). However, there is a small percentage of people that have either three High types (15%) or a single one (5%).

In our survey, the distribution was different (Fig. 3A, B). Only 66% of the participants showed two High-Styles, while the percentage of responders with one or three dominant styles was 17% and 12,8% respectively. The remaining 4,2% of the participants declared they had an even mix of the four traits. Interestingly, among the participants with a single High style, there was no one with an Elevated Compliant type (62.5% High D; 25% High I; 12.5% High S). However, if we consider the percentage of participants with a specific High trait independently of the total number of Elevated traits, then the distribution is quite balanced (25% High D; 22,9% High I; 25% High S; 27,1% High C) (Fig. 3C).

Interestingly, females seem to have Higher Steady traits, while Dominant traits are more prevalent in males (Fig. 3D). Task-oriented (C and D) styles are more frequent among new MSLs (<1 year of experience), whereas experienced MSLs have higher people-oriented traits (Fig. 3E). MSLs with a Ph.D. display noticeably higher Compliant traits, while Steady traits are more common among people with a different academic background (Fig. 3F). Remarkably, style blend also seems to vary depending on the country. MSLs working in the USA tend to have high Compliant and Influencing traits, whereas Steady and Dominant traits are more prevalent in Spain (Fig. 3G).

Fig. 3 – DISC profiles of survey participants. (A) Details of the DISC style blends of the participants. The most common profiles, in order, were: High SC (introverted) (17,4%); DC (task-oriented) and IS (people-oriented) (13,0%); D (extroverted, task-oriented) (10,9%). **(B)** Distribution of the DISC styles blends (1 High style – 17%; 2 High styles – 66%; 3 High Styles – 12,8%; even blend of 4 styles – 4,3%). **(C)** Distribution of individual High styles among participants, independently of the total number Elevated traits (High D – 25%; High I – 22,9%; High S – 25%; High C – 27,1%). **(D)** Distribution of individual High styles in male versus female participants. **(E)** Distribution of individual High styles in participants with more or less than one year of experience in the MSL role. **(F)** Distribution of individual High styles in participants with or without a Ph.D. title.


A
Responses
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S
C
D
E
<1 year
>1year
General
Percentage
F
PhD
No PhD
General
Percentage
G
Spain
USA
General
Percentage

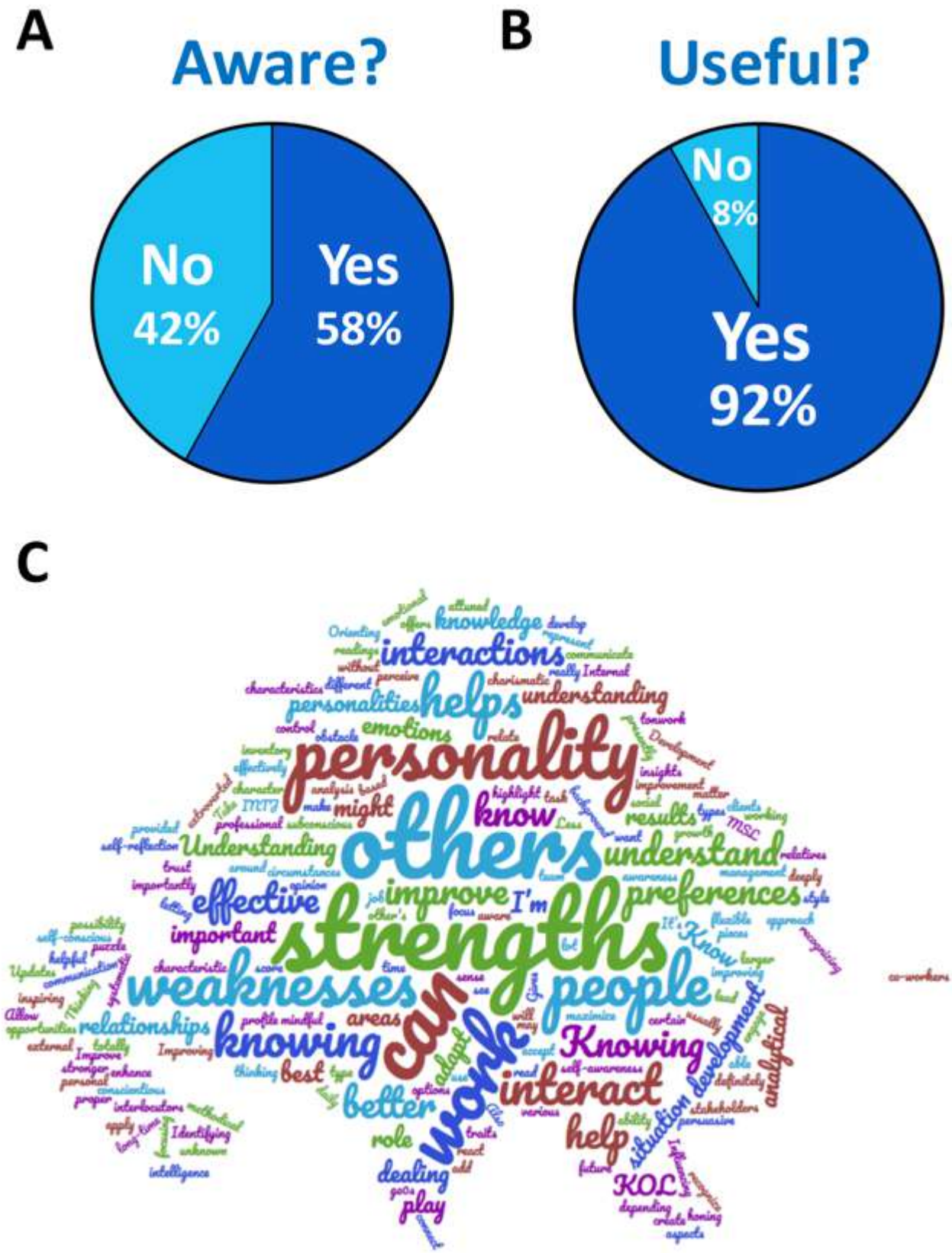
Figure 3

(G) Distribution of individual High styles in participants working in the USA versus Spain.

DISC Style impact on MSLs' career

We asked participants whether they were aware of the existence of the DISC system prior to taking our survey (Fig. 4A). Over 40% of the responses were negative. Nonetheless, the vast majority of the participants (92%) agreed that being aware of their DISC style blend could help them advance in their careers (Fig. 4B). In their answers, some words (identified by creating a word-cloud; Fig. 4C) were particularly recurrent: strengths; others; weaknesses; people; interact; improve. Most responders believe that being aware of their DISC style can help them achieve a higher level of self-knowledge, which will allow them to maximize their strengths and identify areas of improvement to work on.

Ultimately, MSL's success comes from communication and relationships. As stressed by most participants, recognizing the DISC styles of their interlocutors and adapting to it may foment relationships based on trust and facilitate interactions with both internal and external clients.


A
Aware?
No
42%
Yes
58%
B
Useful?
No
8%
Yes
92%
C
personality
others
strengths
weaknesses
can
work
people
interact
knowing
Knowing
understand
preferences
improve
effective
important
relationships
better
help
KOL
dealing
play
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areas
adapt
situation
development
analytical
know
might
results
emotions
personalities
helps
understanding
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knowledge
Understanding
I'm
Know
co-workers

Figure 4

Fig. 4 – Benefits of the DISC system for MSLs. (A) 58% of the responders were aware of the existence of the DISC style testing before taking the survey; 42% weren't. **(B)** 92% of the respondents believed that being aware of their DISC profile can help them in their professional development; 8% didn't. **(C)** Word-cloud showing the words that participants used when asked how being aware of their DISC personality can help them in their careers. Size is directly proportional to frequency. Some of the most recurrent words included: Strengths; Others; People; Interact; Weaknesses; Improve.

DISC Style influence on MSLs' work preferences and motivation

We asked participants to rank specific tasks related to the MSL profession according to their preference. In the analysis, we first looked at the preference for either extroverted or introverted activities (Fig. 4A). We found that the former was preferred by people with High Dominant or Influencing styles, whereas the latter received higher scores by people with Elevated Steady or Compliant traits. These results are in accordance with the DISC profiling system and suggest that the introvert-extrovert axis might influence MSLs' propensity for specific activities. As an example, High D/I individuals might prefer delivering presentations in front of large audiences, whereas High S/C people would rather prepare training material for internal use and support sales representatives.

However, this trend did not seem to be conserved for the task- vs people-orientation axis (Fig. 4B). Indeed, it appears that people-oriented activities are generally preferred over task-oriented ones, regardless of the DISC styles blend of the responder.

We also asked participants if they typically feel prouder of themselves when they are praised for their ability to overcome obstacles and achieve good results (D style), their charisma and inspiring talks (I style), their support and dependability (S style), or their analytical work and adherence to high-quality standards (C style). In accordance with our hypothesis, we found that D/I type appraisals work better for extroverted people, whereas SC type appraisals greatly motivated introverted individuals (Fig. 4C). Similarly, I/S type appraisals are better perceived by people-oriented individuals, whereas appraisals centered on tasks and results are preferred by people with High D/C traits (Fig. 4D).

Indeed, the analysis of individual profiles points to a correlation between the motivation type and the DISC style of the person (Fig. 4E). in other words, the profile for which a specific appraisal works the least is the opposite one in the DISC wheel. As an example, an S-type appraisal works best for Elevated S individuals – introverted and people-oriented – and worse for High D individuals – extroverted and task-oriented.

We believe that being aware of these differences could be of use for MSL managers and MSL excellence. Considering whether an MSL is more of an introvert or more of an extrovert could help predict what tasks they will prefer and feel more comfortable with. Additionally, it is important to consider it when thinking about coaching and development. Indeed, in our view, keeping MSLs motivated is crucially important not only for their individual development but also for the achievement of the medical goals of the company. By taking an interest in their personality and by adapting the communication and the mentoring style to each blend, managers may have greater success in motivating MSLs. In turn, this might actually boost the impact of the MSL team.

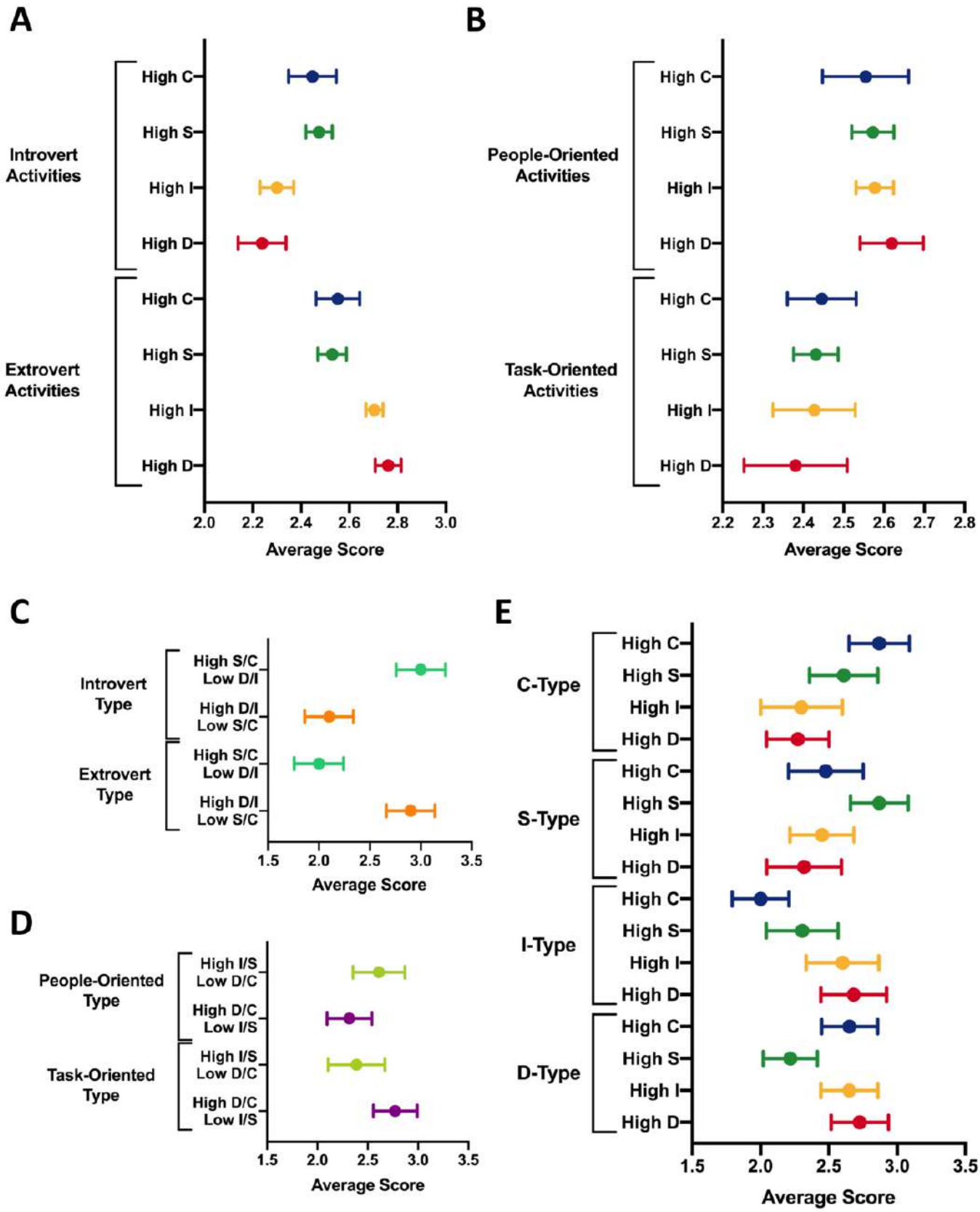


Figure 5

Fig. 5 – Relationship between MSL's DISC styles and their preference for work-related activities. (A) Preferences of

High D, I, S, and C individuals for introverted and extroverted activities. **(B)** Preferences of High D, I, S, and C individuals for task-oriented and people-oriented activities. **(C)** Preferences of High D/I (Low C/S) and High I/S (Low D/C) individuals for extroverted and introverted types of appraisals. **(D)** Preferences of High D/C (Low I/S) and High I/S (Low D/C) individuals for people-oriented and task-oriented types of appraisals. **(E)** Preferences of High D, I, S, and C individuals for D-, I-, S- and C-types of appraisals. All data are presented as mean ± SEM.

The "Ideal" MSL

In the survey, we asked MSLs what personality traits the "ideal MSL" should possess. Almost 90% of the responders indicated that MSLs should be "influencing or analytical, depending on the factor that governs the situation; flexible in dealing with people; methodical, analytical and systematic". Such traits describe individuals with Elevated IC – and comparatively Low DS – styles. Indeed, people with High IC might exhibit either Influencing or Compliance-related behaviors. The former will prevail in social and relaxed circumstances; the latter will dominate in more formal situations. This description appears to fit perfectly with the two main roles of the MSL: a compliant and analytic scientific expert, and an influencing and persuasive relationship manager.

Nonetheless, it is important to consider that Influencing and Compliant traits tend to compete for supremacy. As a consequence, the person will generally end up picking one behavioral type over the other, depending on the situation at hand. Furthermore, even though the majority of people display some degree of style blending, not all combinations are equally frequent. In fact, combinations of styles with similar characteristics are more prevalent than combinations with divergent ones. Concretely, Elevated DS, and Elevated IC are the least common profiles, as they merge styles that are diametrically opposed.

What these results are telling us is that the profile that describes the "ideal" MSL is particularly rare, uncommon, and possibly subject to unbalances. In fact, High IC individuals might be more or less skilled in harmonizing their opposite innate tendencies. Think of an MSL with the methodology and the organization of an extremely High Influencing individual when reviewing the literature. Or think of an MSL with pure and inflexible Compliant traits during a KOL meeting. It's a recipe for disaster. However, if you get it right, if you manage to get the Influencing and Compliant styles to co-exist harmoniously…there you have it: the ideal MSL. A deeply analytical, compliant, and evidence-based scientific expert that can skillfully leverage his/her influence traits to excellently communicate and persuade in professional settings.

Fig. 6 – The "ideal" MSL. 89,9% of the responders indicated that the "ideal" MSL has an

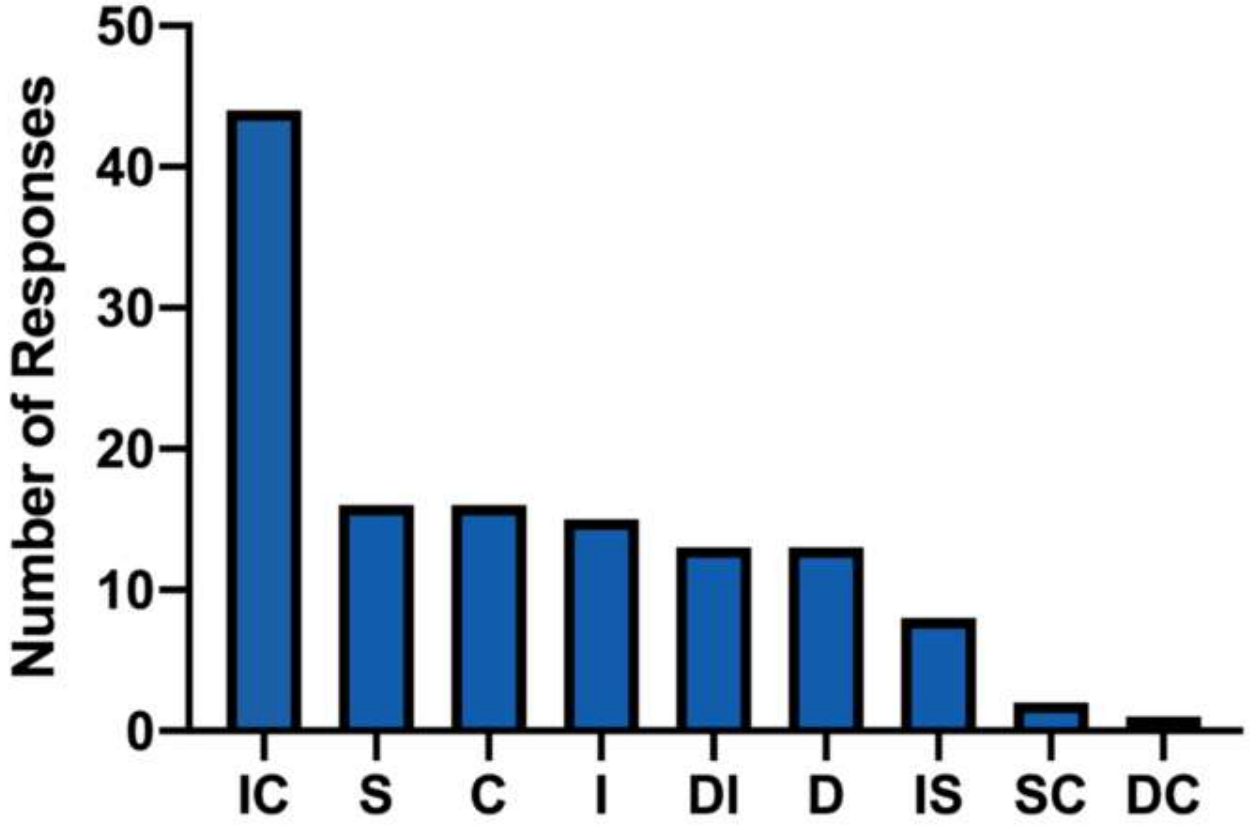


Figure 6

Elevated High IC profile. The following selected profiles, in order, were: High S and High C (32,7%); High I (30,6%); High DI and High D (26,5%); High IS (16,3%); High SC (4,1%). The Elevated DC style, corresponding to an extremely task-oriented style, was selected by only one of the participants.

Concluding Remarks

Each person is unique, with their own needs, motivations, and expectations. In these differences, there are great strengths. Nonetheless, they need to be understood. The spectrum of personality blends among MSLs is wide and varied, and it appears to have an impact on their work-related preferences and on their responses to appraisals. Indeed, the DISC system seems to provide a valid set of useful principles for motivating MSLs, especially when the introversion-extroversion axis is considered.

Even though the results presented in this report are preliminary and not supported by solid statistical analysis (due to the low number of responses), they can serve as a starting point for future investigations. Indeed, they highlight some potentially interesting trends that could be further explored with studies on a bigger scale and involving additional professional roles, such as MSL managers or Medical Affairs Directors. Ultimately, the findings of this study might help optimize medical strategies and facilitate the achievement of the goals not only of the medical department but of the whole company.

Authors:

MARTINA PESARESI

Martina holds a Ph.D. in Biomedicine and has over 5 years of experience in leading pre-clinical R&D projects in neurobiology, inflammation, and regenerative medicine. Recently, she completed her MBA in Pharma & Biotech, and she joined the medical oncology division at Sanofi Genzyme, from where she's actively working to break into her first MSL role. She's passionate about science communication and training, and she is committed to making a positive impact on the lives of patients. She is driven by a strong desire for self-improvement, and always welcomes new challenges and the opportunity to step out of her comfort zone

ALBERTO AVILA GIRALDO

Alberto is a Transformation Manager. He's committed to challenging current mental premises and attitude, fostering new ways of thinking and behaving. That's what a true transformation is all about. His job is to promote the transformation of the company at all levels, not only from a digital and technological point of view but also (and perhaps most importantly) from a cultural point of view. In this way, the company will be able to rapidly adapt and reinvent itself, thus thriving in a world that is complex, constantly changing, and demanding new ways of thinking and acting.

DAVID VALLS COMA, M.S.

Systemic consultant and facilitator of transformation in organizations. Senior Coach with International Certificate (ICF-PCC). Systemic and Organizational Constellations Coach. Trainer of trainers and Consultant in Neuro-Linguistic Programming from NLP University (Santa Cruz, CA). Insights Discovery Licensed Practitioner. MS in Electronics and Telecommunications Engineering.

I think everyone deserves to be able to display their best version, to feel that their work is meaningful and that it has a valuable impact on their environment.

MARTINA RIOSALIDO, M.Sc

Martina has more than 13 years' experience in the Pharmaceutical & Biotech industry, in Training, Marketing, and Medical Affairs departments, overseeing both national and international projects for subsidiaries and headquarters within a multicultural work environment. She is currently an MSL with Gilead, focusing on COVID-19 ant-viral drugs. In 2019, she received the MSL of the Year-Outside USA from the MSL Society.

VICTOR SASTRE, M.Sc, MSL-BC

Victor has more than 20 years of experience in the pharmaceutical & biotech industry, Medical Affairs, and R&D. Professor in several Masters and Pharma MBA Coordinator. Passionate and author of various publications related to the MSL position. He is currently a Senior MSL in Amgen, with responsibility in Bone Metabolism, Neuroscience, Inflammation, and Biosimilars. Victor has previous experience at Parke-Davis and Pfizer. In 2018, he received the MSL Award of the Year-Outside USA from the MSL Society. Victor is also a Board-Certified Medical Science Liaison (MSL-BC®).

Augmenting MSL effectiveness in emerging markets of the Middle East

By Shahrukh Hossain | December-2020 Issue

Through my experience as an MSL, it was integral to be an excellent communicator. I've worked primarily with insight gathering and therapeutic area support in the pre-approval stage of a drug, as well as on an established drug with medical affairs support where the role substantially changed compared to when working on a pipeline drug.

The MSL role has evolved and is challenged by the large amount of data they share while ensuring it is accurate, updated, and complies with local regulations. This has caused the MSL to be a central hub of information that needs to be managed efficiently since the role of the MSL has expanded to include a vast array of technical & analytical skills that must be met by a set of updated, effective enablers to help them do their job more efficiently.

The research objective is to explain the relationship between the tracking/reporting system for MSLs in medical affairs departments in pharmaceutical companies located within the MENA region and its impact on the MSL productivity, therefore, impacting the growth rate of the company taking into consideration the varying usage of the systems, frequency of tracking & choice of metrics trying to prove the direct relation between all the variables.

Figure 1: Theoretical Framework & Research Design

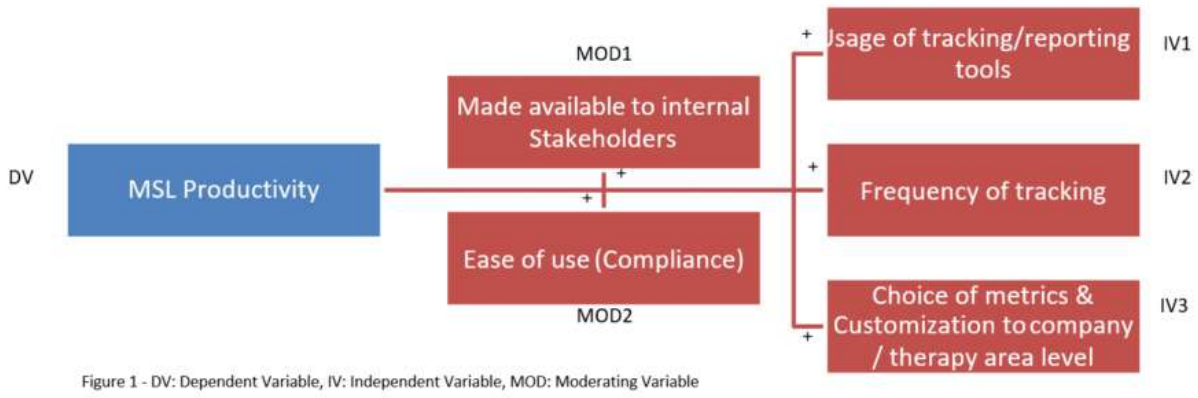


Figure 1 - DV: Dependent Variable, IV: Independent Variable, MOD: Moderating Variable

This research will be exploratory research to test a non-directional hypothesis in this setting. The type of investigation is a descriptive analysis, a correlation which will be non-controlled (amount of control will be minimal (0 – 20%)) as it will deal with variables as they are without change.

The setting will be a field study and the time horizon will be cross-sectional as the data will be gathered once with regards to the theoretical framework highlighted above.

Data collection will be done through an electronic questionnaire developed through Free-online Surveys® to be distributed to a sample of **73 MSLs** from the population of MSLs in pharmaceutical companies in the MENA Region (calculated through sample size calculator at http://www.raosoft.com/samplesize.html)

The list of 73 targeted respondents initially calculated as the representative sample was reached after 6 days of launching the survey online during February 2019 and using specialized social media platforms like LinkedIn® to professionally promote the survey to the targeted audience as well as face-to-face interactions in Egypt & Saudi Arabia.

All respondents were from the intended targeted audience and well balanced between genders with 53% Male and 47% Female. 37% of the respondents were currently working as MSLs while the remaining 63% previously worked as MSLs dating back to 2010.

With a slight overlap for associates that worked for multiple therapy areas during their MSL period, most respondents managed two therapy areas during their period working as an MSL. The majority of respondents reaching over 70% managed specialty care while the rest was a mixture of primary care and oncology therapy areas.

The top-represented country in our research was Egypt followed by Saudi Arabia then the United Arab Emirates with the rest of the main countries in the MENA Region all coming in the following position with similar representation amongst the countries. This may be a slight representation of bias since these countries had a face-to-face briefing of respondents prior to taking the survey while other countries lacked this. Another limitation of this research related to geography was the lack of representation from other major countries in the MENA Region like Turkey & Iran.

Nearly all surveyed respondents worked for multinational companies that emphasize the global direction of the incorporation of the systems in MSL performance evaluation and it was not surprising to find that the majority of these companies had tracking and reporting systems already in place. These available systems were mainly web-based CRM systems in the majority of cases and nearly all of them tracked a mixture of qualitative and quantitative metrics for MSL performance.

With regards to the in-depth analysis of the MSL performance metrics captured, previously mentioned to be a mixture of qualitative & quantitative metrics, there was a clear overlap between company customized metrics that related specific MSL performance aspects to tailored company approaches and general or generic MSL metrics like number of HCPs covered or a number of visits for example where both contributed 43% and 33% respectively. Results conclude having the correct mixture of quantitative and qualitative metrics enhances performance.

These tracked metrics were mainly tracked monthly in the majority of companies while overlapped with either a quarterly or annual review of performance in most companies. The main aspect that the majority of respondents wanted to change is the time of tracking where over half of the respondents preferred quarterly tracking followed by monthly. The results suggest there seems to be a direct positive relationship between the frequency of usage of the systems and MSL productivity.

To ensure better-optimized performance for MSLs, the systems can be used as effective tools in the end-of-year performance management process. In over half of the surveyed respondents, currently tracked metrics make up around 30% to 50% impact of annual appraisal of MSLs. which shows a clear association in the eyes of pharmaceutical company executives that MSL performance metrics – regardless of type and tracking period – define the overall value of the MSL and hence their annual appraisal.

Being dynamic systems, nearly half of the respondents used the already available systems for planning their work which clearly indicates the importance of these tools in having an effective and productive business cycle for MSLs. This is backed up by a fair number of respondents using other tools to plan their work, which signals the importance of planning for MSLs working in pharmaceutical companies across the MENA Region.

The research paper at hand has proven that there is a positive relationship between the correct and efficient use of tracking and reporting systems for MSLs in medical affairs departments in MENA Region pharmaceutical companies and its impact on the MSL productivity and hence the growth rate of these companies taking in consideration that these reporting systems should be built on established business metrics that are quantitative and qualitative as well as being a customizable per company or therapy area, taking in consideration the various jobs done by MSLs on different products in different stages of the product life-cycle, while making sure generated reports from these systems should be shared effectively and regularly within the organization to internal stakeholders to increase collaboration and better demonstrate the value of the MSL function.

Author:

Shereef Ibrahim, MBA

Currently a Therapy Area Medical Manager at Amgen, I previously spent 10 years at Novartis in different roles of varying responsibilities since 2009.

I worked as an MSL for Bone & Pain, Respiratory & Transplantation during the period of 2014 till 2016 which added a lot to my perspectives of being patient-centric in business.

My career to date has provided me with invaluable knowledge in some key areas, namely Bone & Pain, Respiratory, Cardio-Metabolic, Nephrology, Transplantation & Biosimilars in Egypt, Iran & Sudan.
I am also an accomplished individual with a strong desire to succeed and lead others to success. Indeed through my past experiences, I have had the distinction of being an individual who is energetic, hardworking, and efficient.

On a more personal level, I am open to any situation that is challenging and which tests my abilities, as well as among my work colleagues I have a reputation as being a fast learner, who is dependable and organized.

Survey of Utilization of CRM platforms by MSLs: How can we leverage data to provide personalized engagements with KOL?

By Shahrukh Hossain | December-2020 Issue

Introduction:

The MSL Society conducted an online survey between September 20 – October 9, 2020, on the utilization of Customer Relationship Management (CRM) systems by MSLs. Only responses from MSLs, Sr. MSLs, Medical Advisors, Managers/Directors of MSLs were included in the analysis. The survey was conducted in conjunction with the webinar that Huma.ai sponsored and co-presented with Sanofi at the MSL Society Annual Meeting on the topic "How to build KOL relationships digitally in the New Normal". This article summarizes the key findings and discusses the next steps for leveraging data to help MSLs be successful in their KOL engagements in this new era of digital.

Demographics:

Over 50% of respondents were from Pharma, with representation from medical devices and diagnostic companies. Over 50% of the MSLs were field-based with < 2 years of experience. The survey looked at the MSL field team as well as a combination of MSL field team plus managers and the results were similar. In addition, the survey looked at both US and Global and the trends were similar.

Results:

CRM Tools being deployed to identify/establish KOL relationships.

>50% of respondents both within the US and Global are using Veeva followed by 20% who are using Salesforce. There are still around 10% of the respondents who are using EXCEL spreadsheets or are not leveraging their CRM for KOL engagements or are using an alternative CRM. Questions remain how exactly the MSL teams are using the CRM data – are they leveraging the field team insights from discussions with KOLs and feeding them back into the collective team to provide guidance on strategy for the product pipeline? MSLs with their vast amount of experience in subject matters are the best channels to gain these insights. They provide the role as a trusted partner that KOLs can lean on for information on drugs, clinical trials since they are constantly being inundated with information through multiple channels.

Primary Resources being used to build KOL relationships

MSLs are using public data sources such as PubMed and ClinicalTrials.gov as well as scientific meetings and CRM field notes to build KOL relationships (Figure 1). Interestingly, social media was not being leveraged much for building KOL relationships. The current publicly available tools such as PubMed and Clinical trials.gov are rich with data but they require complex filtering and are not built to gain business intelligence on KOLs easily. What if we could combine several data sources so that we can generate personalized KOL dashboards that include their publications, participation in clinical trials, social media posts plus internal CRM data?

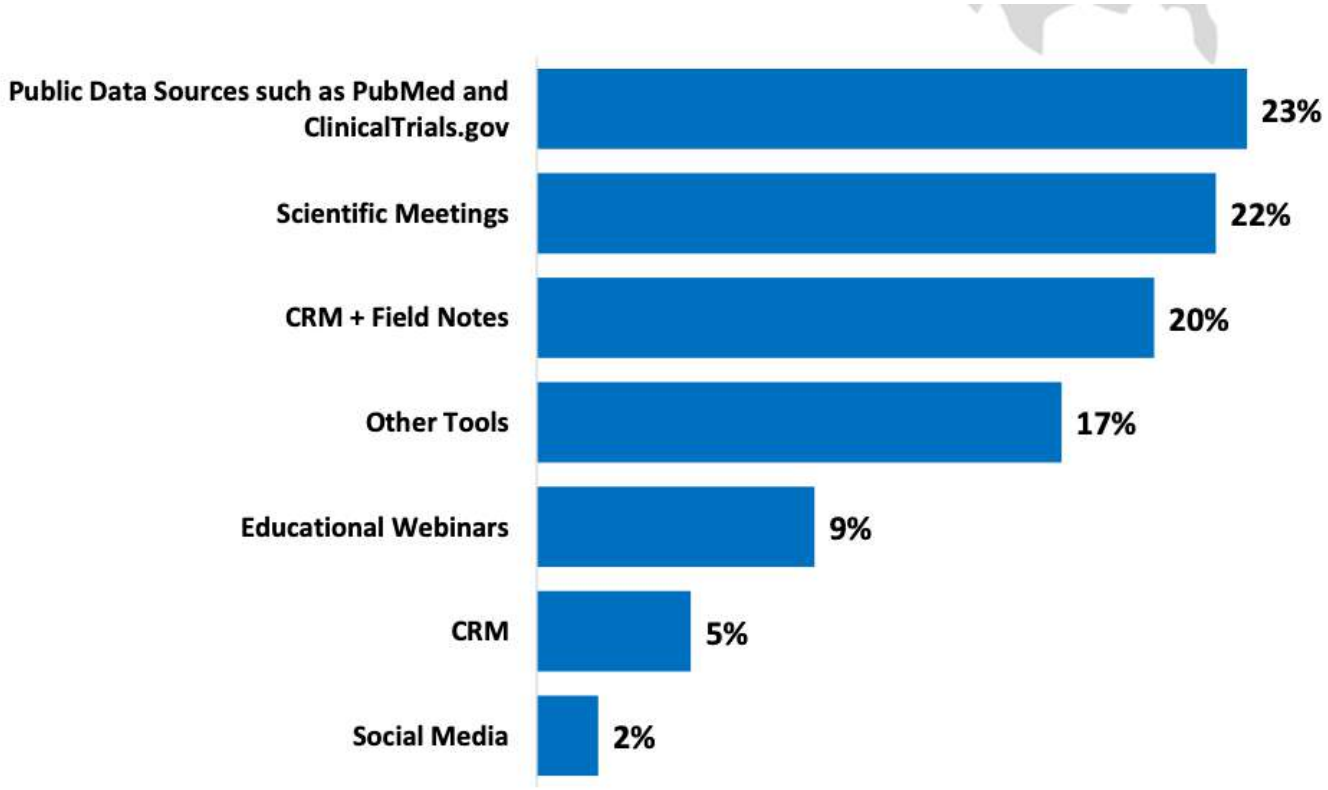


Figure 1: What resource are you primarily utilizing to build new KOL relationships? Manager / Director of MSLs (or equivalent title) and MSL, Sr. MSL, Medical Advisor (or equivalent title)

USA Data

Interestingly, >70% of the respondents are using CRM to capture and leverage KOL insights and yet ~50% say that they do not believe that their CRM data effectively helps them to prepare for their KOL meetings. Clearly, there is a huge opportunity here to help MSL teams leverage their CRM data. Why are MSL teams not leveraging their CRM data? Part of the issue is that the current BI tools for CRM structured data are not self-service and require data scientists to run SQL searches to uncover the data. Based on several discussions that Huma.ai has had in the past few months with MSL teams, most of them are using CRM systems to collate the field team notes but are not leveraging these for their KOL management. Specifically, these are free-text notes and unstructured data. Many are manually reviewing them to uncover insights that they can leverage for business intelligence around drugs and clinical trials. Additionally, there are several vendors that leverage keyword searches to organize these free-text notes into different topics that are searchable within the MSL CRM database. There are however limitations to using only key-word searches based on our experience leveraging our machine-learning enabled platform to uncover insights from field medical notes. Additionally, with the COVID-19 pandemic, many of the feedback from KOLs related to COVID-19 effects are buried within the CRM, thus leveraging machine-learning platforms can help uncover these insights that are valuable for real-time response to unexpected needs from KOLs.

Another huge barrier that is preventing MSLs to leverage data is that the data sources that they need are disparate and siloed. Approximately 70% of the respondents said that their current system does not integrate data from multiple sources which makes it much more challenging to link the data to get a 360 view of the KOLs that they are targeting. This becomes even more pertinent since face-to-face meetings through scheduled visits or at scientific meetings have been nearly non-existent with the COVID-19 pandemic.

One of the key eye-opening results was the question regarding whether their organizations were considering new solutions to integrate KOL data as shown in Figure 2 below. This is quite surprising since several Pharma companies are heavily investing in leveraging data to increase efficiencies and provide real-time data analytics to empower field-based MSLs with personalized engagements with KOLs. Likely barriers include support from senior leadership as well as buy-in from the organization as a whole to ensure adoption of machine-learning enabled tools. There is an education barrier as well with a lack of knowledge, but providers like Huma.ai take it as an opportunity to help educate the MSL community on the value of leveraging data as a powerful tool to increase the performance of field teams. The Huma.ai approach acknowledges the power of human intelligence and combines this with our machine-learning enabled knowledge automation platform to empower MSLs with real-time data. Our

platform combines business intelligence with an Alexa-like easy-to-use Q &A format. Our goal is to help MSL teams leverage data and become their own data scientists. MSLs are the purveyors of scientific rigor and truth and empowering them with tools to make their lives easier will benefit all.

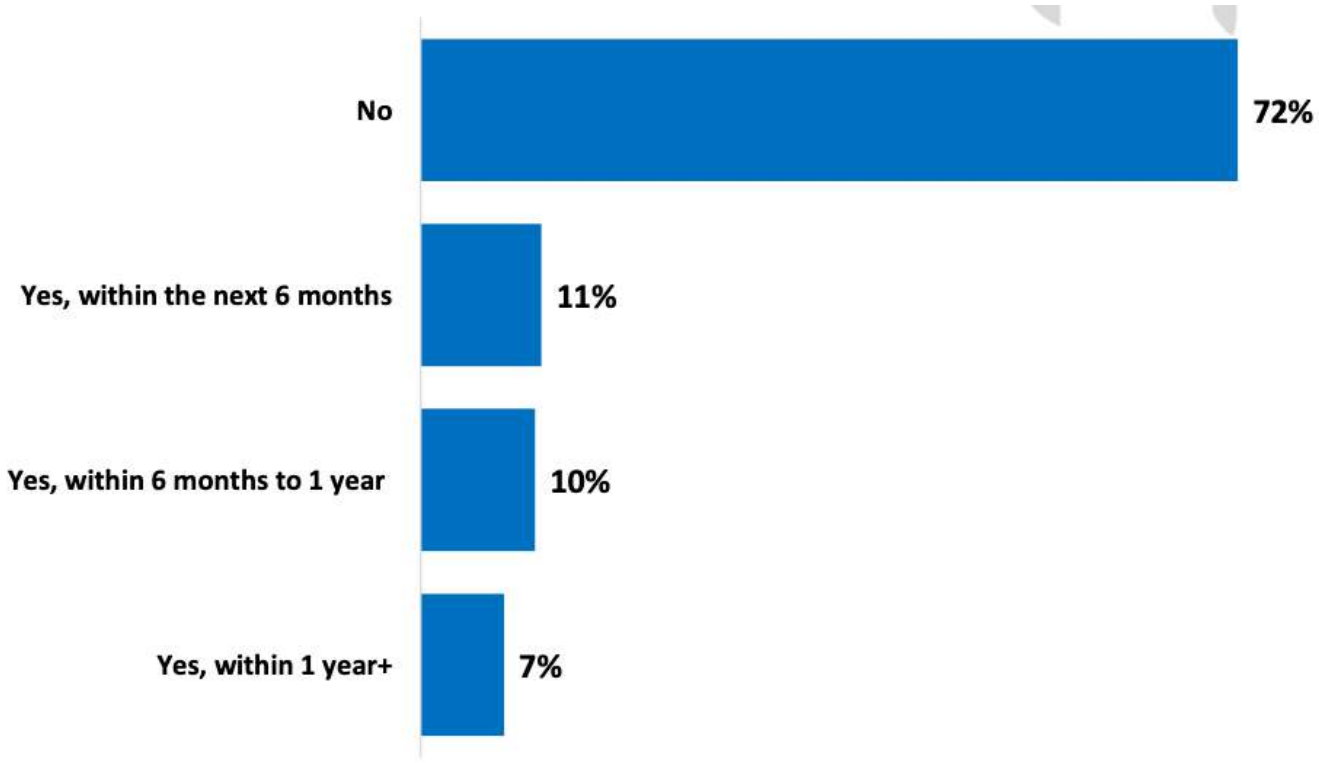


Figure 2: Is your company considering a new solution to integrate KOL data (background, insights, etc.) from multiple sources? Results from 67 Manager / Director of MSLs (or equivalent title) and MSL, Sr. MSL, Medical Advisor (or equivalent title)

USA Data

Conclusion:

Survey results suggest that although the majority of MSLs have access to CRM platforms, they are not currently leveraging data within their CRMs because of the limitations of the current tools. Leveraging machine -learning approaches to uncover insights from free-text notes as well as connecting disparate data silos such as private CRM plus public data sources such as PubMed combined with an easy-to-use interface will help reduce the barrier to adoption of these new technologies and enable organizations to target KOL engagement driven by data.

Author:

Sabita Sankar, Ph.D.

Dr. Sankar obtained her Ph.D. from the Institute of Molecular and Cell Biology in Singapore. She completed her postdoctoral fellowships at Yale and Duke Universities. She then spent the next several years at Celgene as Group Leader in the Oncology Research Department and co-led the project team that developed CC-223 and CC-115, mTOR, and mTOR/DNA-PK inhibitors. Prior

to joining Huma AI, she spent several years in both scientific affairs and business development roles at several diagnostic companies including MolecularMD, Biodesix, and Ambry Genetics, providing genomic and proteomic solutions to Pharma clients. Dr. Sankar's expertise includes a unique mix of both drug discovery and diagnostic perspectives.

The Often Forgotten Other KOL

By Shahrukh Hossain | December-2020 Issue

To begin, let us start with the simple but often overlooked fact that without the patient, the Pharmaceutical and Biotech World would not exist. Yet the importance of working with patients (and their caregivers and advocacy groups) has only come into focus for most in this industry, over the last decade.

For Medical Science Liaisons and others active in Medical Affairs, interactions with these constituents vary widely from company to company. Robert Grobel, (Vice President of Global Medical Strategy at Monocl), states,

"Medical affairs leaders are looking to build long-term, sustainable relationships with external scientific experts earlier in the product lifecycle. There is a greater focus on improving patient outcomes, addressing experts' needs, and delivering timely science-based evidence."[1]

How can this be compliantly accomplished and still give the patient a voice? Let us take a hypothetical look at some key questions to ask and answer to help frame the opportunity.

Why engage these key stakeholders?

By engaging the individuals afflicted with the condition under study, carefully derived insights can provide a cornucopia of ideas as to how to best address them during cross-functional strategy meetings.

Essentially, by including patients, patient advocates, and caregivers through an array of engagement activities, extremely valuable insights can be attained. Building engagement plans that include insights from these invaluable stakeholders may very well highlight unmet needs that may otherwise not be identified and are gleaned from the very populations we are trying to serve. These real-world concerns can then be used to support the development of the most effective clinical development programs.

Companies often learn valuable insights from patients after a product is already on the market. Imagine learning these insights during clinical development and incorporating them all along the product lifecycle.

Who drives engagement?

Understandably, Patient Advocacy is the first line for patient interaction, and utilizing these interactions is the primary step to engage patients. However, there are many different approaches to engage patients, patient organizations, and caregivers.

For instance, one approach might be to ask your physicians and Health Care Providers (HCP) as part of your KOL discussions, if they have an interest in speaking at Patient meetings. If so, as liaisons you can connect the head of the patient organization or the meeting organizer with the expert physician or HCP who treats the disorder to enable attendance at their meeting as a guest speaker.

What are some types of engagement?

Patient meetings are one way. If the corporate organization has a Charitable Grants or Education Grants program, particularly if the grants provided to the Patient Organization are unrestricted, representatives from the sponsor can often attend patient meetings. If allowed to attend, Medical Science Liaisons (MSL) will not initially actively engage with patients but can glean unmet needs through active listening. Patients like to share concerns with each other and often share solutions or best practices as well. This information is invaluable as it provides insights into the daily struggles and suggested solutions that can potentially be incorporated into the program and effect relevant change.

How to use insights gleaned from this type of engagement?

Educational tools can be developed to aid patients and caregivers in teaching others about the disease. Therapeutic approaches to the administration and treatment can be made easier by utilizing creative ways via suggestions often shared during patient meetings discussed above.

MSLs can share insights cross-functionally, thus ensuring the development of such programs within the company. For patient representatives, or patient advisory groups, their review allows for relevant feedback as protocols, and other aspects of the program grow during the product life cycle.

This feedback and evaluation of individuals who live with a particular disorder provide unique and useful perspectives toward further development, as described but not limited to,

- Program Development
- Clinical Development
- Educational Materials
- Quality of Life Concerns

Working with your Patient Advocacy Department to see how Medical Affairs can collaborate to further educate patients, families, and caregivers by providing medical review and oversight is another way to become involved.

We cannot appreciate a patient's diagnostic odyssey or journey better than to hear it first-hand, utilizing a vetted agenda that compliantly allows an understanding of the disorder being researched.

These are some suggestions for engaging the often forgotten, but incredibly valuable patient KOLs.

1.https://www.veeva.com/blog/trends-in-medical-affairs-patients-engagement-and-science/

Author:

Rita Zambelas, MSN, MSL-BC

Rita is a dynamic self-directed individual with an established history of working in the biotechnology industry. She demonstrates scientific and clinical expertise in Rare Disease and Oncology, and with her diverse therapeutic background, possesses a commitment to deliver. She is a strong professional leader who engages in cross-functional collaboration to pioneer and implements successful clinical programs and strategies designed to address and resolve complex problems and unmet medical needs.

As a professional in the healthcare/biotechnology industry, with 20+ years' experience in a broad range of positions in the Biotech and Pharmaceuticals research arena; Rita is focused and highly motivated. She performs well in both individual and in team environments. Prior experience includes: Director, Medical Science Liaison, Associate Director, Medical Affairs; Medical Science Liaison; Clinical Science Liaison; Nurse Clinician; Clinical Research Coordinator; Institutional Review Board Coordinator;

Clinical Research Monitor; Clinical Research Manager and Clinical Research Associate, to name a few. She has expertise in multiple therapeutic areas, including Rare and Orphan Genetic Diseases, Oncology, Hematology, Bone Marrow Transplant, Infectious Disease, Cardiovascular Disease as well as Medical Device. Where consistent integration of new information is imperative and expertise is needed, she focuses on the identification of complex problems and creative solutions. She is also a Board-Certified Medical Science Liaison (MSL-BC®).

Rita is married, lives in South Carolina, and has 5 children and in her spare time dabbles in arts and crafts and her dog(s).

Our Path to Industry

By Shahrukh Hossain | December-2020 Issue

Two pharmacy students share their unique summer internship experiences and the value of gaining real-world experience in the field of medical affairs.

Since the beginning of pharmacy school, we knew we wanted to work in a setting that would allow us to impact patient lives and health care on a global scale. Over the last two years, we connected with many professionals currently working in the industry who shared their experiences and helped us realize that we can combine our clinical knowledge with a business acumen which made us ultimately want to pursue a career in the pharmaceutical industry. When we first started to apply to pharmaceutical internships, it was like shooting darts in the dark. Knowing how difficult it was to obtain an internship, we attempted to present our best selves in every application. Combined, we applied to over 100 positions across the United States and faced many rejections before receiving one email to request an interview. After what seemed like a lifetime, we were able to obtain internships at Novartis Pharmaceuticals and Janssen Pharmaceuticals in New Jersey. Although our road to the industry hasn't been straightforward, like our car breaking down in Pennsylvania on our 12-hour drive from Chicago to New Jersey, we were able to embark on a summer adventure that would directly impact our professional growth and development.

Being a summer intern taught us the value of networking, collaboration, and the importance of cross-functionality within medical affairs. It was inspirational to be surrounded by innovation and cutting-edge science, where the ultimate goal of any team is to impact patient outcomes. Most importantly, we were able to develop invaluable relationships with our associated team members that will carry on into our future career paths. Besides the invaluable skills and experiences gained, we were able to explore the east coast for the first time through multiple road trips to Boston, New York, the Jersey Shore, Washington D.C, and Philadelphia. This summer was truly unforgettable on both a personal and professional level and helped us establish where our long-term goals lie within medical affairs. This isn't the last time the east coast has seen of us.

"This summer, I sought to supplement my previous market access internship with health economic research experience and joined Janssen Pharmaceuticals as a real-world value and evidence intern assisting the Cardiovascular & Metabolic brands. I was able to contribute to feasibility measures for new real-world studies via literature searches and helped draft a study concept that will be finalized and used retroactively by field managed care teams. This experience gave me a background in strategizing, managing, and budgeting for real-world studies that align and support the brands market and communication needs. I was fortunate enough to work under an incredible manager, Mike Durkin, who gave me the attention I needed to complete numerous projects while at Janssen. His lessons will carry over into my career in the industry and have fostered even more ambition in my future endeavors. After this summer, I have solidified that I would like to pursue a career in Health Economic Outcomes Research to improve patients access to medications." – *Alec Thompson, University of Illinois College of Pharmacy Class of 2021*

While Alec was able to learn and gain valuable experiences in the field of Health Economic Outcomes Research (HEOR), Nicole was able to obtain a different opportunity that was focused on field medical capabilities.

"To increase my knowledge of Medical Affairs and its role within companies, I joined the Novartis MSL Field Medical Capabilities team where I got to impact how Medical Science liaisons operate on a daily basis. I learned the various tools and resources MSL's utilize in the field, and I was able to use my creativity and education in aiding in the creation, editing, and harmonization of field educational materials for designated therapeutic areas. Many companies do not have the adequate time or internal resources to fully onboard new MSLs, and through my work this summer I was able to design and implement a new onboarding program to positively impact MSLs' ability to apply their knowledge in ways that will drive value for both the customer and the company. But, more importantly, the greatest part of my internship was becoming a member of a professional family that supports and cares about your well-being outside of the company walls. Being part of the field medical team, I worked closely with 10 amazing individuals that taught me something new and exciting every day. I am grateful to be surrounded and mentored by smart,

talented, and hardworking people who guided me through multiple franchises. I am thankful for my manager and mentor, Arthur Chan, for bringing me on board and providing me a platform to make an impact on the field medical team. I couldn't have asked for a better team, and I am excited for the opportunity to be able to stay on remotely as I start my third year at the University of Illinois College of Pharmacy, and continue to contribute to the great work we do!"

– *Nicole Fuchs, University of Illinois College of Pharmacy Class of 2021*

Authors:

Nicole Fuchs

Alec Thompson

Last year, on 4th September, my life changed forever

By Shahrukh Hossain | December-2020 Issue

Last year, on 4th September, my life changed forever when I won the Best MSL outside the USA award at the second annual MSL Awards ceremony in Las Vegas. Perhaps, you may think I am exaggerating when I say it changed my life, but quite honestly, it is no exaggeration!

Winning the award has directly impacted my career at MSL over the last year. It has given me a fantastic opportunity to help junior MSLs through the Mentoring Program to which I applied after receiving the award. It has also opened doors in terms of collaborating on projects within the MSL Society to set standards of excellence to which future projects can aspire.

I have no doubt that even in the long-term winning this award will continue to impact my MSL career by giving me the opportunity to lead new projects where I will bring all my enthusiasm, knowledge, experience, and passion to the position.

Apart from the professional benefits, there are also some personal ones which are equally worth mentioning. For instance, the application process was extremely worthwhile in the sense that it allowed me to put together all of my achievements, both past, and present and it meant that I was able to take stock of my career to date. That experience in itself was so rewarding; with everything down on paper, I realized the extent of my achievements and how I have impacted people I have worked with, on projects I have done and I felt a great sense of pride.

The award means so much to me. It's an honor and a wonderful recognition, but I could not have won it without the human and professional experience that I have had along the way. I am lucky to share my career with all the collaborators, colleagues, patients, KOLs, students, with whom I have worked in a methodical and rigorous way. The mileage that has been clocked up so far is the result of a joint effort, the interactions, and experiences of several people from different fields in pursuit of a common goal. This is one of the most beautiful parts of my profession, and I thank them from the bottom of my heart and share this award with them.

In a position as competitive and demanding as working as an MSL, you are fortunate to have supportive and encouraging colleagues, but you are even more fortunate again if you can call your colleagues friends and I am delighted to say that this is the case for me. I entered the competition because my colleague and now friend, Victor Sastre (Senior MSL Amgen) nominated me in the first instance, and Cristina Garcia (MSL Manager Persan) encouraged me to apply. They believe in me more than I do in myself sometimes and I couldn't be more grateful to them.

I would not like to end without thanking the judges for all the remarkable work they do in receiving and reading all the applications from the MSL, MSL Rocky, and MSL manager who enthusiastically apply. Making a decision cannot be easy. A tremendous thank you for choosing me last year and for your decision this year. And of course, thank you to the MSL Society for making everything possible.

Finally, I would like to congratulate the winners of the 2020 awards. It's fantastic to be recognized for your excellence within our MSL profession!!!! Enjoy the moment! It truly is an awesome milestone in your life. Hopefully, we will celebrate next year face to face.

Author:

Martina Riosalido Montero, MSc

Martina has more than 13 years' experience in the Pharmaceutical & Biotech industry, in Training, Marketing, and Medical

Affairs departments, overseeing both national and international projects for subsidiaries and headquarters within a multicultural work environment. She is currently an MSL with Gilead, focusing on COVID-19 ant-viral drugs. In 2019, she received the MSL of the Year-Outside USA from the MSL Society.

Quick Tips for our MSL new Virtual World

By Shahrukh Hossain | December-2020 Issue

Quick Tips for our MSL new Virtual World

1. **Effective Communication.** Present clearly and honestly as transparency is vital to building a trusting relationship. If you are having a global discussion, avoid cross-cultural faux pas by researching cultural etiquette. Remember the 7 C's of communication: clear, concrete, conversational, correct, constructive, concise, and complete**.**
2. **Proper Technology.** It is important to have the necessary tools in both software and hardware for virtual interactions such as headsets, speakers, and lighting. Multiple virtual platforms may be required as certain institutions have limits such as no camera or speaker with their institutional computer (Microsoft Teams, GoToWebinar, Zoom). Also, have a good setup for correct postures such as an ergonomic chair for a neutral posture creating 90-degree angles at the waist and knees.
3. **Take Initiative**. If you identify a gap or a process that needs to be improved, share this information with your manager or director. Provide the problem and a solution, show your skills and abilities. Want to improve a skill, see what your Human Resources department offers for professional growth and development.
4. **Seek Positive Feedback.** Talk with your coworkers, mentor, or manager, and ask for positive feedback. With high performing teams, positive feedback outweighs negative by nearly 6 to 1 – focus on the positive according to Harvard Business Review. Encourage team members to coach one another when preparing for presentations or important meetings.
5. **Listen Actively**. Give others your full attention and avoid multitasking during meetings. This shows respect for others. Remember to mute your computer or phone on group meetings unless you are speaking and turn off the ringer on your cell phone.
6. **Improve Body Language**. This is what people remember: 55% visual, 38% vocal, and 7% verbal content. People are mostly visual so ensure you come across the computer as authentic, have open posturing without

arms crossed, sit still, and remember to smile .

7. **Foster Trust**. Relationship building is an ongoing process. Before each meeting, share a professional or personal news item. Ask “how are you?” and be sincere. This helps to overcome isolation while building relationships.
8. **Take Breaks**. It is okay to be away from your computer and phone for breaks. Take a walk, go outside for fresh air, exercise, talk with a family member or friend on facetime. These actions help prevent burnout.
9. **The Power of Thank You**. Appreciation matters. Gratitude has been linked to improved physical and mental health. Remember to end your messages with a thank you.
10. **Stay Positive**. Energize one another with positivity. Smile. Listen to music. Write in a journal. Meditate. Improve your attitude with gratitude and share it with others!

Author:

Delinda Bane Melvin, MSN, APRN, FNP, CDECS

Delinda is a board-certified Family Nurse Practitioner and Certified Diabetes Education Care Specialist with biological and pharmaceutical expertise spanning over twenty years. She received her Bachelor of Science degree in Nursing, from the University of South Alabama, Mobile, graduating summa cum laude and receiving the prestigious Community Service Award from the College of Nursing. She received her Master of Science degree in Nursing Leadership and Management from Walden University, Minneapolis, Minnesota and she received her Family Nurse Practitioner from the University of Massachusetts, Boston. She currently holds a Florida Nurse Practitioner license. Delinda has been with Fresenius Kabi in Medical Affairs for nearly three years as the Senior Manager, Medical Science Liaison, Parenteral Nutrition Division. Previously, she was with Novo Nordisk for nearly 17 years. Delinda was recently selected as MSL Manager of the Year 2020 by the MSL Society. Additionally, Delinda has earned four National Awards including the Education Excellence Award in 2017 and multiple Vision Awards during her pharmaceutical career for leadership, collaboration, and teamwork. Her clinical experience includes critical care and trauma at Baptist Health System, Pensacola, Florida, and preceptorships in the therapeutic area of Endocrinology at the International Diabetes Center at Park Nicollet in Minneapolis, Minnesota and the Diabetes Research Institute, University of Miami Leonard M. Miller School of Medicine, Miami, Florida. She is an active member of the American Association of Nurse Practitioners, Association of Diabetes Care & Education Specialist, and the American Society for Parenteral and Enteral Nutrition. She was recently appointed to the Membership Committee for a three-year term and is a member of the Nursing Section Forum and Pediatric Section with ASPEN. She currently resides in Panama City, Florida, Emerald Isle Farm with her husband, Stephen, their AKC golden retrievers, and AQHA/PTHA World Champion quarter horses. She is the founder and VP of Emerald Coast Equine Rescue, a Florida nonprofit corporation, and is a volunteer with Emerald Coast Golden Retriever Rescue. Delinda can be contacted directly at 850.381.1163, delinda.bane-melvin@fresenius-kabi.com or on LinkedIn.

Emotional Intelligence

By Danielle Imbeault, RN | December-2020 Issue

Emotional intelligence is an important factor for success, both professionally and personally, and a great asset when it comes to engaging, managing, and leading others.

Contrary to popular belief, degrees and intelligence quotient do not predict success. Among the factors on which the notion of success in life depends, the intelligence quotient represents at best 20%, according to psychologist Daniel Goleman. In his bestseller, Daniel Goleman defends that success depends less on the intelligence quotient than on our ability to understand, control, and cultivate the emotions that are in us.

But what exactly is emotional intelligence?

Emotional Intelligence is a set of skills, verbal and non-verbal, allowing an individual to generate, recognize, express, understand and evaluate their own emotions and those of others, so as to direct their thoughts and actions in order to face the demands and pressures of the environment. It can be understood as a four-dimensional construct comprising one's ability to (1) understand one's emotions, (2) understand others' emotions, (3) regulate one's emotions, and (4) use one's emotions to improve oneself.

Do you know your EI?

1. Know yourself well

The first component, and according to many, the most important, is self-awareness. Why? Simply because the one who is deaf to what he feels remains at the mercy of his feelings.

Understanding the emotions that inhabit us is an essential condition so as not to let them rule us, both in our personal and our professional life.

Is that you?

- Are you aware of your strengths and weaknesses, your potential, and your personal limits?
- Are you responsive when it comes to talking about your shortcomings (cultivate humility, and put aside arrogance and pretense, and you'll be surprised what you reap in return!)
- Do you look for feedback (without depending on it!)?
- Do you make it your story to learn from mistakes?

Are you open to criticism (without being too critical of yourself)?

2. Self-control

This is the ability to govern one's emotions and impulses and to know how to adapt them to different situations.

People with good self-control do not allow themselves, for example, to get too angry, they do not make impulsive decisions but think before they act.

What are the characteristics of individuals with good self-control? They are considerate, comfortable with changes, with integrity, they know how to say no, and have the ability to focus on long-term success rather than immediate results.

Would your colleagues say this about you?

3. Motivation

The motivation of an individual encompasses the emotional skills to achieve his goals: effort, commitment to oneself, to the objectives of a group or a company, the ability to demonstrate initiative, to seize opportunities, to pursue goals tenaciously, despite obstacles, and to be optimistic.

4. The one and only… Empathy

Empathy is the art of knowing others, of understanding their feelings, of perceiving their points of view, of having a sincere interest in their concerns, and thus, being able to maintain harmonious relations with a wide variety of individuals.

And lastly, our social skills

It is usually so easy to talk to and like people with good social skills… (which is another sign of emotional intelligence).

People with strong social skills are usually team players. Rather than focusing on their own success as a priority, they help others develop and shine to their full potential. They know how to communicate, know how to manage conflicts, and are masters in the art of developing and maintaining good human relations.

But how can you, as an MSL, develop your emotional intelligence?

Obviously, coaching and training (optimal conflict management, motivation, and mobilization, active listening, self-control, self-knowledge, optimization of human relations, etc.) are very appropriate tools, but I would like to offer you a self-reflection tool to

help you in your journey: Leadership Journaling

A simple tool you can use to ask yourself relevant questions, to help you get to know yourself a little better, to understand how you interact with others, and also how to put yourself in other people's shoes.

1 -Observe yourself in all honesty

Make a list of your strengths and weaknesses and validate it with trusted people who know you well. The important thing is to accept our imperfections and to understand that there is always room for improvement. It is only by assuming them that solutions can be found.

2 – Reflect on how you react to others

And take notes. This will help you observe recurring elements. Are you noting that you are quick to make judgments without having all the facts? Do you use stereotypes, bias? Are you looking for acceptance and/or attention from others?

4 – Can you put yourself in other people's shoes?

Be open and receptive to different perspectives. Pick one or two situations from last month and reflect on how you think the other person felt in the chosen context. How do you think you contributed to this dynamic? Make 2 rows: what does it look like from your perspective; and his/her point of view? What was your intention? Can you find a positive intention for the other person? (Often hard to find but when you get there, suddenly the perspective changes!).

These are simple questions that often broaden horizons, break down tensions, and avoid conflict.

5 – Understand the personality of the other (you can check the Insights Discovery: https://www.insights.com

And the complementarity that unites us!

By the same token, learn to listen and develop active listening; to be available and attentive, to avoid jumping to conclusions, to ask open questions, to tame silences, to be attentive to non-verbal language, and to create a rapport

6 – Analyze your motivations

Are you engaged? Do you show optimism and initiative? If not, try to understand why and identify the bottlenecks and the actions and choices you can take to improve it.

7 – Reflect on how you react to stressful situations.

Are you disturbed when there is a delay or something unexpected? Are you very sensitive to rejection and criticism? Do you tend to blame others even when the fault is not theirs? Are you sometimes too preoccupied with what others may think? Are you too demanding of yourself and others? Or maybe too preoccupied with getting results quickly?

The ability to stay in control of one's emotions is an important aspect and essential quality of leadership. It is therefore important to find ways to relieve stress in order to develop emotional intelligence.

Last but not least…

8 – Stop and take responsibility for your actions

Take responsibility and be accountable when your behaviors hurt or impact negatively others. This aspect goes hand in hand with self-knowledge and acceptance and is of utmost importance in order to optimize human relationships.

In the end, to help you develop your emotional intelligence, a nodal aspect of professional and personal success and an essential condition for leadership, all you have to do is embark on a journey of self-awareness, understand your emotions, and those of others, and learn to manage your emotions. It is that easy!

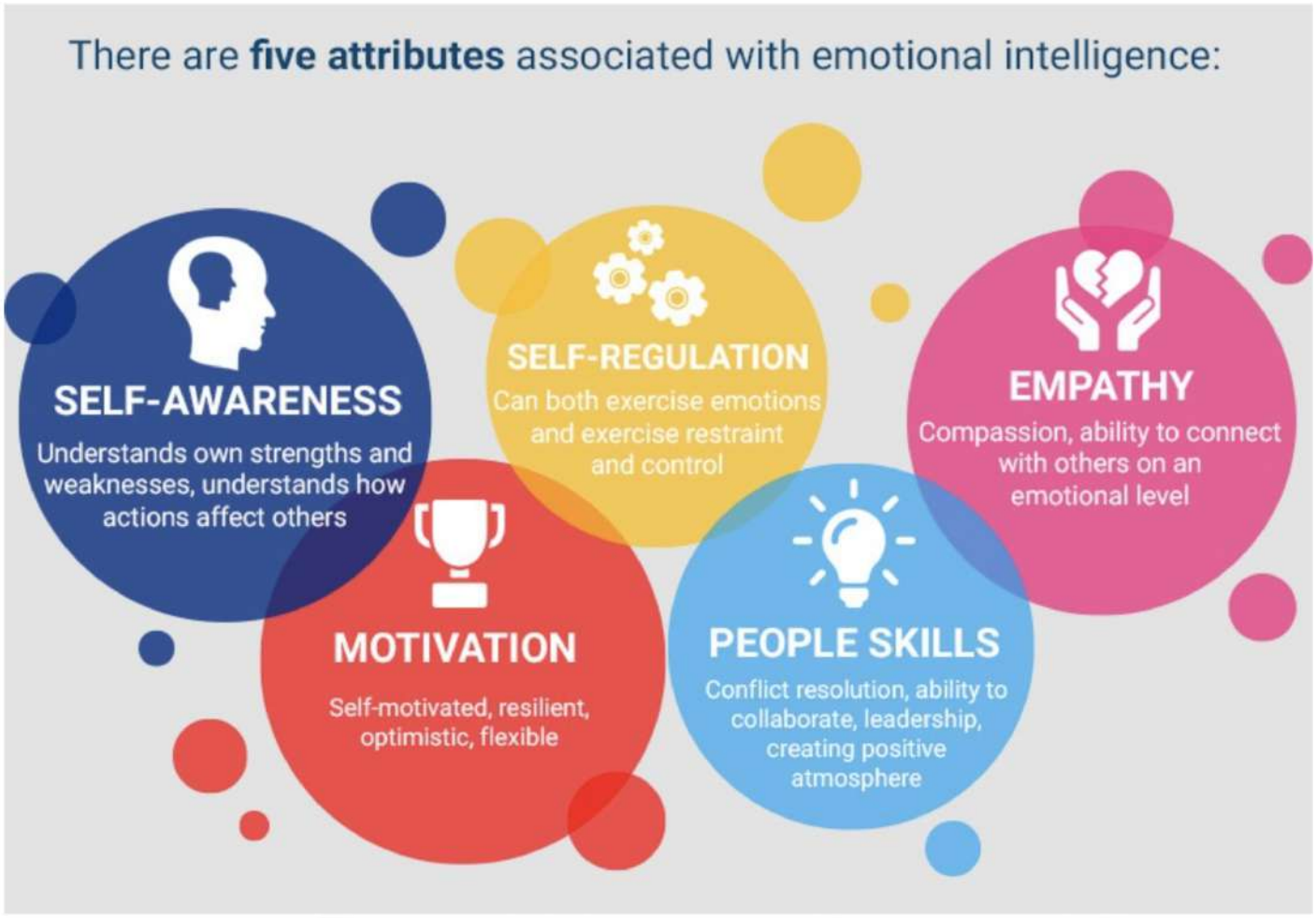
Resources:

https://www.insights.com/

http://www.danielgoleman.info

https://positivepsychology.com

https://elearninginfographics.com/emotional-intelligence-key-successful-leadership/



Author:

Danielle Imbeault

Danielle is a creative, results-driven, international pediatric nurse, with 25 years of Global Pharmaceutical experience, project management, and scientific learning capability, and leadership building. She has extensive qualifications in all facets of drug development, scientific learning, and onboarding program within matrix organizations. Danielle possesses strong strategic planning skills, from performing need analysis through implementation and evaluation of the impact on business. Excellent problem-solving skills and a strong orientation in customer satisfaction. Some of her key achievements: Designed, implemented, and delivered a new approach to leadership Training for Field Medical Managers Lead cross-disciplinary scientific and leadership learning for 1,000 field associates globally;

- A key contributor to effecting change:
- moving the organization towards a team-based culture and empowering and encouraging scientific challenge and debate through the design of workshops, contextualized training, and other development opportunities.
- management initiatives and facilitated Medical Affairs business transformational activities to align and improve the effectiveness and delivery of scientific engagement with external stakeholder across

- Franchises

Danielle has more than 15 years of experience in Capability and Leadership Building in the project team and individual leadership skills. Coached, mentored, facilitated expertise for the pharmaceutical industry.

The revaluation of email in times of COVID-19: KOL engagement and KPI

By Shahrukh Hossain | December-2020 Issue

As a result of the new situation imposed by the COVID-19 pandemic, KOL engagement has been limited at certain times. This has not only translated into less interaction between MSLs and KOLs/HCPs but also the approach to this interaction has had to be carried out in a virtual way, taking advantage of all possible resources (e-mail, video calls, telephone calls, WhatsApp, SMS). Nevertheless, some of the benefits that face-to-face meetings bring have been lost.

The purpose of this article is to illustrate how email has evolved to become a valuable tool in order for MSLs to interact with their KOLs/HCPs. During the registration of a webinar carried out by the MSL Society in November 2020 entitled "*Everything you need to know about the MSL Society Conference 2020*", a pre-registration survey of 8 Questions was included. The results of this questionnaire will be presented here.

Email Exchange as a KOL engagement tool

Before the pandemic, communication through e-mail with KOLs/HPCs in many companies was not considered to be proper engagement. However, it seems that the new situation may have modified this view on the part of companies, so our questions were aimed at investigating whether e-mails were in fact a viable means of engagement for MSLs.

The first question was in relation to the pre-pandemic scenario. The question was as follows: *Prior to the COVID-19 pandemic, were email exchanges with KOLs counted towards an MSLs Metrics/KPIs at your company?*

Graphic 1: PRIOR to the COVID-19 pandemic were email exchanges with KOLs counted towards an MSLs Metrics/KPIs at your company?

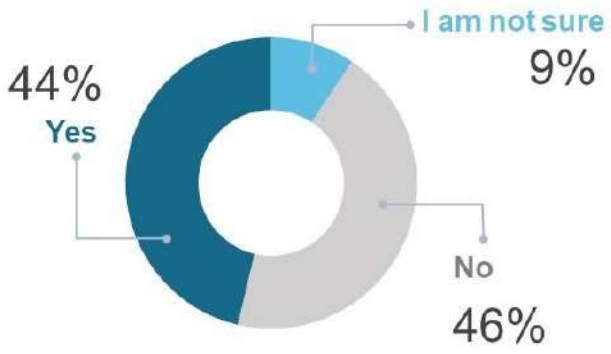


Figure 1. 149 MSLs, Sr MSLs, Medical Advisor (or equivalent title); Manager/Director of MSLs

As the graph indicates, prior to the pandemic, emails were not evaluated as a metric in 46% of cases, essentially, because e-mails were used for logistical purposes, so they were not considered valuable for their metrics.

The next question was: "*Is e-mail exchange considered to be "KOL engagement" during the COVID-19 pandemic at your company?* The objective was to find out if the perception of the respondents has changed due to the new situation. The results are illustrated in graph 2.

Graphic 2: Is email exchange considered a "KOL engagement" during the COVID-19 pandemic at your company?

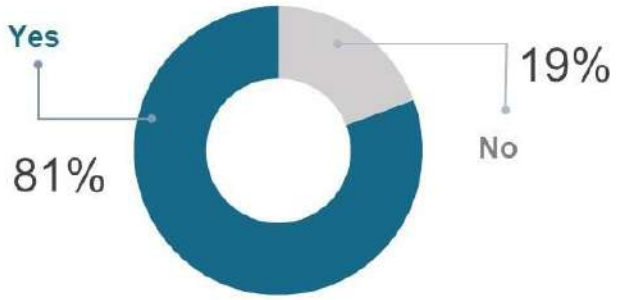


Figure 2. 145 MSLs, Sr MSLs, Medical Advisor (or equivalent title); Manager/Director of MSLs

In this case, we found that 81% of the respondents stated that emails are considered a valid tool for KOL engagement during the pandemic. In terms of global distribution, Europe is the territory in which emails are most considered to be a valid tool for engagement, with results above the average of global responses.

It should be noted that these results include responses from all types of companies, with large pharmaceutical companies being in the majority.

On the other hand, a survey conducted in the USA involving more than 450 KOLs/HCPs (MSL Society survey, June 5, 2020) included the following question: During the pandemic, how did KOLs prefer to engage with MSLs? To which 82% of those surveyed answered that e-mail was their preference. This data, which coincides with the data here, also shows that KOLs now value this resource as a tool for scientific exchanges with MSLs.

E-mail Exchange as a KPI

Since email is a valid and quality engagement channel for interactions with KOLs / HCPs according to the results of the questionnaire, it should therefore be considered from now on in the analysis of metrics in all companies.

Regarding this point, our next question was whether e-mails were currently included in KPIs in the respondent's company. 71% of responses reflect that the exchange of e-mails with KOLs/HCPs are included in their KPIs, compared to 29% who say they are not.

Graphic 3: Are email exchanges with KOLs during the COVID-19 pandemic counted towards an MSLs Metrics/KPIs at your company?

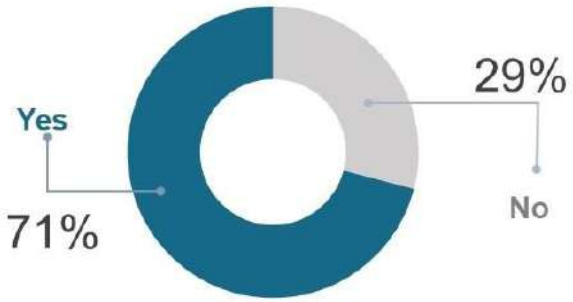


Figure 3. 117 MSLs, Sr MSLs, Medical Advisor (or equivalent title); Manager/Director of MSLs

What can be observed when analyzing the results is that during COVID-19, emails gained more importance and that most companies have incorporated this method of interaction into their metrics.

Additionally, the questionnaire explored the opinion of MSLs on the inclusion of emails as KPIs or metrics in the final question: Should email exchanges with KOLs during the COVID-19 pandemic be counted towards an MSLs Metrics / KPIs?

Graphic 4: Should email exchanges with KOLs during the COVID-19 pandemic be counted towards an MSLs Metrics/KPIs?

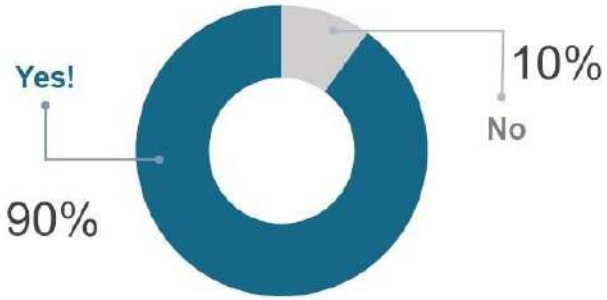


Figure 4. 120 MSLs, Sr MSLs, Medical Advisor (or equivalent title)

As can be seen in the graph, the opinion is quite unanimous, with a percentage of 90% agreeing that e-mails should be included as a tool that weights in their KPIs and counted as a valid way to engage.

This reflects the very versatile profile that MSLs possess in their ability to adapt to the new paradigm imposed by the pandemic: the use of technology so as not to lose contact and to continue their role as scientific interlocutors by interacting through e-mail. MSLs have demonstrated their chameleonic capacity to efficiently carry out their roles in a virtual way, without changing their vision or mission, while continuing to provide interactions of high impact and scientific value.

After the data exemplified here, from our point of view, we advise considering e-mail as an engagement tool, as long as the scientific exchange is obtained from the KOLs or HCPs, that is, there is a virtual interaction in this format, and also this e-mail meets any of the following objectives:

- Resolution of a specific doubt or question posed by an HCP (KOL and non-KOL)
- Resolution of doubts or questions that have arisen during a previous virtual interaction
- Medical-scientific updates that the MSL considers relevant to keep HCP (KOL and non-KOL) updated (typically based upon HCP prior request for updates)
- Proposals and monitoring of follow up actions or projects such as the development of studies initiated by researchers (IITs), clinical trials (EECC), Advisory Boards, scientific support for clinical sessions (Speaker Briefing), scientific meetings (face-to-face or virtual conferences (Workshops / Webinars)) or publications
- Medical Information Responses where substantive medical or scientific information is provided

However, we recommend that the following email interactions should **not be considered** valid:

- E-mail introducing the company or the MSL itself to a new HCP
- E-mails derived from the organization and planning of interactions *(face-to-face or virtual).*
- E-mails of invitation to a virtual interaction *(with or without a link to a webinar, session, or virtual interaction).*
- E-mails without scientific exchange to foster personal relationships.

As expressed at the beginning of the article, the current situation has changed for everyone; companies and MSLs are aware that the metrics are not simply the number of interactions, but their quality. An E-mail has proven to be a means by which scientific discussions can be carried out with KOLs / HCPs and highly valuable insight can be obtained and thus maintaining the standards of technical quality.

Despite the limitations of the pandemic, KOLs / HCPs have continued to generate requests for information and resolution of doubts. Needs and opportunities have been detected through e-mails, which have highlighted the value of MSLs as scientific interlocutors in even the most challenging times.

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Claudia Conesa holds a degree in Pharmacy and a Pharma MBA. She has almost 2 years of experience in the Pharmaceutical & Biotech industry; in Medical Affairs and R&D department. Experienced in Medical Communication, educational virtual events, and aspiring MSL, she is currently working at Amgen, specialized in Inflammation, Bone Metabolism, and Biosimilars.

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Cristina has more than 10 years of experience in the Pharmaceutical & Biotech Industry. She is currently an MSL Manager at Persan Farma, specialized in Clinical Nutrition, especially focused on therapeutic areas as Endocrinology, Oncology, Surgery, and Gerontology. She is developing her doctoral thesis at the Department of Biomedicine, Translational Research and New Technologies at Malaga University.

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Martina has more than 13 years' experience in the Pharmaceutical & Biotech industry, in Training, Marketing, and Medical Affairs departments, overseeing both national and international projects for subsidiaries and headquarters within a multicultural work environment. She is currently an MSL with Gilead, focusing on COVID-19 ant-viral drugs. In 2019, she received the MSL of the Year-Outside USA from the MSL Society.

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Enhance Your Next Virtual Medical Conference!

By Shahrukh Hossain | December-2020 Issue

The MSL Society has a routine “MSL Insights” broadcast hosted by Dr. Samuel Dyer with an array of useful topics! On Aug 28, 2020 show, Eddie Power Ph.D., MBA, GFMD, Vice President, North America Medical Affairs Hospital Business with Pfizer partnered with Rob Consalvo, Director of Strategic Commercial Engagement with H1 to discuss Novel Approaches to Engaging KOLs and Gathering Insights from Virtual Congresses. During the one-hour program, they shared tips that aid in how we engage at medical conferences in the virtual environment.

Prior to the pandemic, medical conferences were a primary place to meet and engage HCPs and researchers live and in person! Learning and staying current with updated information about the disease, clinical data, and ongoing research is vital to our MSL education role, as is being able to engage with attendees, meet new potential KOLs, and provide clinical education. Most live conferences have either canceled meetings or shifted to virtual programs. In the virtual environment, we miss the face to face KOL meetings, the energy of a live conference hall bustling with activity, perusing posters between sessions, hosting KOLs over dinner to discuss the presentations and participate in scientific exchange. Navigating the new virtual conference environment is vital to staying on track with clinical knowledge, learning, and ongoing research. Despite missing the face to face engagement, we need to refine the approaches used to enhance how we plan for and execute our MSL role at virtual medical conferences.

A summary of the top 10 tips from this MSL Insights program is listed below along with details to take your next virtual medical conference to the next level!

1. Have a clear conference plan with staff roles laid out pre-conference

Pro tip: Use an excel sheet with multiple tabs to lay out each day’s coverage, who is responsible for notes and tabs for other company-sponsored events, planned KOL meetings, and more.

2. Email KOLs in advance of a virtual conference to encourage attendance and share planned company posters and session topics

Pro tip: Have an email template that is concise and can be personalized for MSLs to email KOLs prior to a conference with a quick list of sessions, posters, and other relevant info to share! If they can’t attend the conference, offer to meet in follow up to share data highlights from the conference.

3. Set up Zoom Rooms during the conference such that KOLs can meet with MSLs to answer questions, discuss posters and session presentations

Pro tip: Set up zoom links in advance of the conference and share with KOLs attending the conference to encourage them to engage MSLs during or after key presentations or poster sessions

4. Develop virtual abstract (poster and session) information that can be shared with KOLs in advance

Pro tip: In my experience at past conferences, KOLs appreciate a booklet or online information with session and poster items related to a specific product to help them prioritize attendance at these sessions as well as fostering further discussion during and after sessions. Note that this information is often required to have a medical and legal review/approval prior to MSL use.

5. Assign MSL to monitor chat during sessions to capture comments and who is asking questions / making comments

Pro tip: When laying out conference coverage plans, have an MSL assigned to take notes and a separate person to monitor the chat questions to capture this information

6. Develop engaging content such as the use of more videos in slides

Pro tip: Being in a virtual environment makes it more challenging to capture and keep attention; the more engaging content can be with presentation slides, posters, and virtual booths, the more likely attendees with choosing to spend their time on these activities. Gamification, polling, videos, and other interactive modalities help!

7. Ask MSLs to avoid multi-tasking/distractions while attending virtual conference sessions

Pro tip: When attending a virtual conference, set aside time to truly be there in the moment as if you were at a live conference. Block calendars, turn off the phone, be in a quiet place, and immerse yourself in the learning!

8. Generate top-level actionable medical insights gathered from sessions, chat, KOL meetings, zoom rooms, etc.

Pro tip: Consider an executive summary with highlights and/or a daily E-blast email for virtual conferences to share internally. Everyone gets deluged with so much information and it's vital to keep notes and highlights the top line for internal stakeholders. Further details can be included in the conference report to refer to later or in the verbal debrief session post-conference.

9. Check the conference website for late info added / late-breaking updates

Pro tip: In the pre-conference plans, assign someone to check late-breaking updates on web site pre / post-conference and to attend the session during the conference.

- Host verbal medical team debriefs rather than solely a written conference report

Pro tip: Conference reports have been the mainstay method to share what was learned at a major medical meeting, however they often so long that most information is never read. A post-conference debrief session is more impactful where medical team members can provide and discuss data, research, KOL meetings, and learning. A conference summary is a useful resource to use when looking for key detailed information. The debrief should be the main post-conference method to bring salient information to the internal team!

As we wait for a live conference to return post-pandemic, keep the learning and engagement going strong with these tips and you will stay ahead of the curve, bringing vital conference learning back to your organization!

Author:

Cherie Hyder, PharmD, MSL-BC

Cherie Hyder is Senior Director, US Head of Medical Affairs, with more than 15 years of MSL experience in the field. She has been involved in research for more than 30 years, starting as a bench researcher in Genetics. She completed a Bachelor of Science degree in Molecular Biology and Chemistry at Iowa State University where she led Genetics research projects over 5 years. Her education continued at the University of Missouri where she received a Doctor of Pharmacy degree with the intention to devote her career fully to clinical research. She has multiple adjunct faculty appointments and enjoys teaching opportunities. She worked for the FDA for 5 years, focusing on a review of the safety and effectiveness of novel medications. Her experience in regulatory compliance brought her to Eli Lilly as a Regulatory Scientist and led her to attend law school; she has a business development and in-licensing background as well as experience balancing portfolios for major PhRMA companies; she has been employed by Eli Lilly, Pfizer, Novartis, Regeneron, Solvay, and Avanir in Regulatory and Medical roles supporting new product development. In August 2016, she joined Alimera Sciences, leading the US MSL team, building compliant internal processes, and developing the Medical Affairs infrastructure. She is also a Board-Certified Medical Science Liaison (MSL-BC®).

Happiness, Own Your 40%

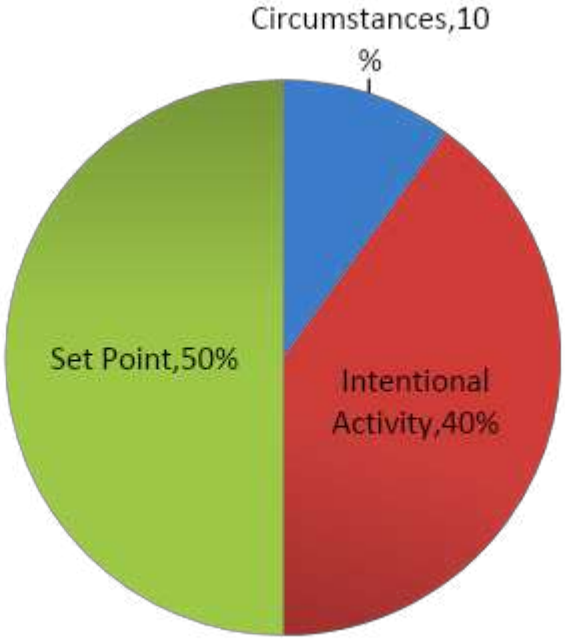
By Shahrukh Hossain | December-2020 Issue

Todd just wanted to be happy. He was feeling overwhelmed by a demanding job, and his desire to really be the best dad and

husband. He began thinking how I am savoring my life? Once struggling with work-life balance, he found the pressures of work to take him away from what he loved most, his two boys and wife. He decided to take a leap into one of his passions and purchased a new racing bike. After talking to his wife about a new bike and the desire they had to remodel their kitchen, she talked him into the bike as she felt it was something he needed to maintain what little sanity he had remaining. How many spouses do you know that would sacrifice a complete kitchen remodel for their spouse to get a new bike? Todd was happy!

A big myth is that happiness is something we must find. If only…we get "the job," marry our love, or lose weight. Science has discovered that 10% is determined by our circumstances, 50% by our set point, genetically determined, and 40% by our intentional activities.

What Determines Happiness?*



10% Circumstances

Only 10% of our happiness is explained by circumstances or situations if we are rich or poor, thin or fat, married or divorced. Riches and perfect health have only a short term effect on happiness. Studies have demonstrated that Americans earning more than ten million dollars annually reported personal happiness only slightly greater than blue-collar workers they employ.

50% Set Point and Genetics

50% of our happiness is our set point that originates from our biological mother or father or both. It is a baseline to which we are bound to return, even after major setbacks of big triumphs. It is similar to our set point for our weight. Some skinny people can eat all they want and not gain weight and others smell food and gain a few pounds. This happiness set point governs how happy we will be over the course of our lives.

40% Intentional Activities

The secret to happiness is not changing your genetic makeup or acquiring more wealth and possessions, rather it is all about being in charge of your behavior. 40% of our happiness is determined by our choices. How easy is that! But what gets in our way? The overwhelming feeling we experience by the circumstances we find ourselves in. Next time you are feeling

overwhelmed, stop use the ABC to happiness formula.

A Awareness – just notice that you are overwhelmed (do nothing else)

B Breath – don't even think…just take a breath or two (notice your breath)

C Choice – Tell yourself you have a choice!

You choose your behaviors. The happiest people are "people persons" and love spending time with their family and friends. They express gratitude. They are the first to volunteer to help you out. They think about their future and make things happen. They possess a commitment to their life long goals and usually have a bucket list. They savor their daily joys and live in the present, not the future.

I wrote back to Todd and said his kids would remember MORE the family meals and warm conversations rather than the new stainless steel fridge and granite countertops. Memories, not stuff. Todd just returned from a family vacation. He owns his life again. He quit waiting. What about you?

Happy people don't sit around waiting to be happy. They make things happen. You may have thought it was important to work at achieving your career goals or getting promoted to "the job," but the most important work you will ever do is your "work" at being happy. It will be the most rewarding work of your life. Remember happy people love who they are, love what they do, and love how they do it. You only have one life to live, just imagine if it was one you truly loved! How lucky are you…you own 40%!

*The How of Happiness by Sonja Lyubomirsky

Author:

Chere Bork, MS RDN

Chere Bork, Registered Dietitian, Certified Wellcoach®, and Law of Attraction Facilitator inspires people to energize their lives and their businesses. She has 3 decades of experience helping others discover their purpose, energy, and their waistlines. Chere is known as the "positive energy wonder worker" and has the reputation for being the how-to expert to energize your life and attract more health, happiness, and life balance. She wants you to remember, you have only one life to live, just imagine if it was the one you loved. You can reach her at cherebork.com.

Virtual interviews are here to stay

By Shahrukh Hossain | December-2020 Issue

The impact COVID-19 has made on the world will likely affect the way we interact with one another for the rest of our lives. This holds especially true when it comes to the process of interviewing candidates for new roles. While the world seemingly stands still, companies must still find and hire the talent they require to continue operations. The pharmaceutical industry is a prime example of this. While many industries slowed, life science companies were forced to adapt so that clinical and medical professionals continue the work of developing new treatments to improve patient lives, including therapeutics and vaccines to battle COVID-19. The world has changed, the industry has changed, and finding and hiring candidates has changed.

Interviewing virtually quickly gained steam when the world realized the pandemic was going to be prolonged. While the past

emphasis was placed on meeting candidates face to face, shaking their hands, and getting a feel for how they commanded a room, now, candidates must be evaluated through a video feed on a monitor. While this poses several challenges, the new format also created a whole new set of criteria that hiring managers can use to screen candidates.

The Challenges

Virtual interviews can be conducted on multiple platforms, including Zoom, GoToMeeting, Microsoft Teams, Google Meets, etc. It is increasingly difficult to find one in which all parties involved are familiar. As a recruiting firm, we encourage everyone to test and practice with the software that will be used to conduct interviews. This will hopefully prevent technical issues at the start of the interview. Using the program beforehand will also allow the candidate to become familiar with the layout so they are able to easily navigate the presentation tools. Just as important, this demonstrates a level of preparedness that Hiring Managers will want to see. Outside of platform problems, there are other variables that can create challenges such as internet outages, dogs barking, poor audio quality, the list goes on. It's recognized that there are issues that sometimes arise that are out of a participant's control, but every effort should be made to minimize those.

Next, it is more difficult to get a read on a candidate's personality or presentation capabilities when they have their information directly in front of them. Despite this, virtual interviews provide many positives.

The Positives

Interviewers can now evaluate a new skill set, not previously considered. With travel greatly reduced, many internal and external meetings and interactions need to be virtual, a trend that will likely continue once the pandemic subsides. As a result, it is important to hire a candidate who captures the audience's attention via webcast and is also able to create a sense of connection during the interaction. This skill is now front and center when a candidate interviews and presents their material virtually to the hiring team. As we continue to place emphasis on distance interactions, it is important to hire professionals who excel in remote communication.

The shift to virtually based interviews has affected several other processes. Hiring managers can move candidates through the entire interview process much quicker since travel is not required. Previously, it was not uncommon for weeks to pass before candidate and interviewer schedules, travel arrangements, etc., would align. These challenges have been greatly reduced. Rather than candidates and interviewers spending two days to travel to an interview, they only need to dedicate a few hours to complete the final phases of the interview process. This saves everyone involved time, effort, and money.

Also, now additional interviewers can participate in the process since there is less time dedicated to it, and scheduling has become easier. With a speedier process companies can hire the talent they need much more quickly, limit the amount of competition they face, and reduce the possibility of losing their lead candidate to the competition. On the flip side, candidates can vet and find their next opportunity even quicker, which is increasingly important if they happen to be in between roles.

In today's environment, video interview technology is a must-have for companies. The benefits of remote interaction have proven to save time, effort, and money. And as the virus diminishes, companies will likely choose to facilitate interviews and presentations online. Hiring Managers can enhance their Medical Affairs or Clinical Operations team quickly, thereby allowing them to address pressing business needs. How well your company has adapted to this evolution is what will differentiate your organization from your competition.

Author:

Bryce McWhorter

Bryce joined TriNet Pharma in 2018 as a recruiter, and later that year his role expanded; today, he is TriNet Pharma's Director of Operations and Account Management. Day to day, Bryce ensures the proper management of client relationships, including understanding a customer's specific requirements, planning how to meet their needs/demands, and leading recruiters to make sure there are seamless staffing transitions for candidates and clients.

Prior to joining TriNet Pharma, Bryce worked in the retail foodservice industry. There too, he managed client relationships and ensured orders were correct and met quality metrics.

Bryce attended Oklahoma State University and Texas State University.

When not working, he enjoys spending time at his family's farm with his wife, attending Dallas Stars games, traveling, and playing with Scout and Riley, his two dogs.

Adding value to KOL VIRTUAL ENGAGEMENT from the MSL Excellence perspective

By Shahrukh Hossain | December-2020 Issue

Virtual engagement is surely a trend nowadays, the topic is in everyone's conversation. But, why does it matter so much now? Indeed, virtual engagement is not a new concept in the pharmaceutical industry, which was already moving towards digital transformation for years, but the truth is that the progress has been slow.

It is well known that HCPs are experiencing rapid demographic turnover and that the demand for digital participation will increase as digital native generations represent a growing portion of the workforce.

Some data to illustrate it: **Figure 1**

According to data from Regional Health Services, 50% of Spanish doctors are 50 years or older[1].

By 2025, most of the HCPs of the Baby Boomers generation (1946-1964) will have retired and will have been replaced by Millennials (1981- 1996) [2]

Millennials and Generation Z (1997-present) are expected to represent 35% and 24% of the global workforce by 2020, respectively [3]

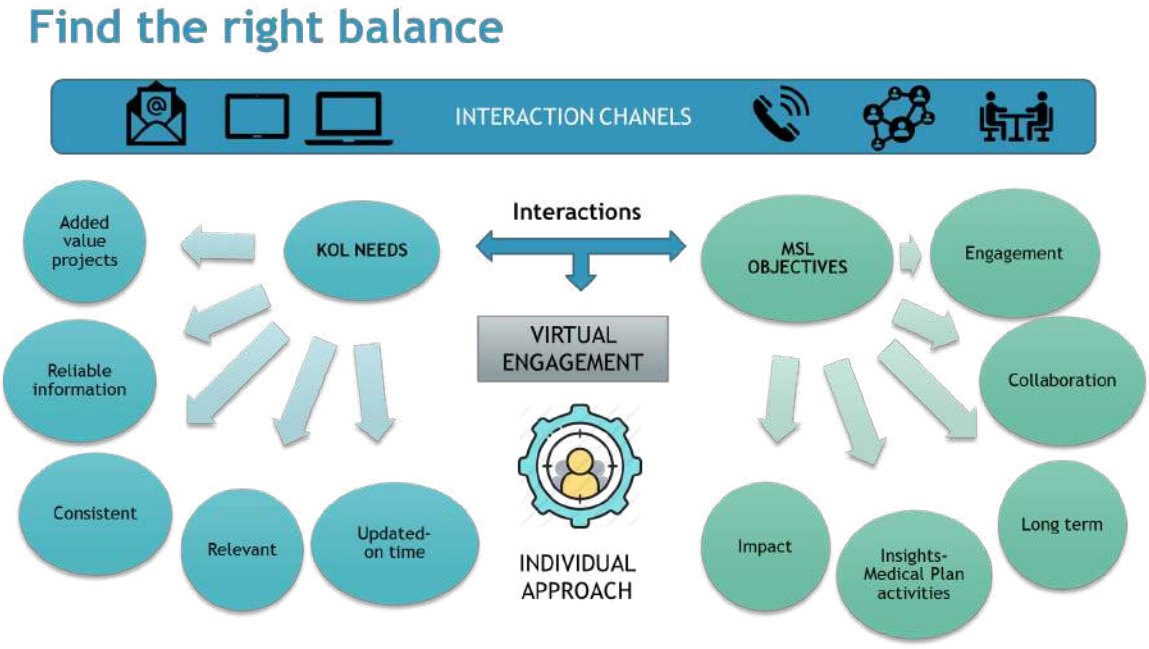
The COIVD-19 arrival has been the turning point and has only accelerated this existing trend in the past months; companies have only just started doing their "homework" in a more agile way.

Until now, in-person meetings represented more than 85% of overall meetings and only 15% of meetings were virtual, both 1: 1 or in groups [4]. However, the situation has changed drastically and the "new normal" implies an almost exclusively remote KOL engagement. In this way, securing value virtual engagement is critical, especially when attendees can leave an event with a simple mouse click.

This has been a real challenge for Medical Infield teams for the past months, but the purpose of the role is still the same, and MSLs are engaging with their KOLs by doing their fundamental activities, as they did in person. These activities seek to add value to KOLs, based on the medical strategy and objectives such as: understanding the disease treatment landscape, generating and communicating evidence, developing and implementing scientific and medical education, or building strategic partnerships.

Since not everybody takes their coffee the same way, generic engagement techniques will just not suffice. It is necessary to personalize both approach and experience by carefully choosing what adds value for each KOL and tailoring communication as much as possible to the target person, thus offering this "digital coffee" that each one requires to meet individual needs.

In order to achieve the necessary personalization and adapt both the approach and communication, it is a must to find the right balance between the KOLs needs (reliable information, valuable projects, consistent, relevant data, correct timing) and the MSL objectives (securing commitment, involvement, lasting and long-term relationships, completion of the activities included in the medical plan and impact generation). **Figure 2**



The following **5 key elements** help us to add value and achieve successful virtual interaction. It is evident that they are not

different from the elements that add value in face-to-face engagement, but in the present context, it is even more relevant to carefully focus on the before, during, and after the interaction to achieve goals. It is not enough to basically replicate the approach used during in-person interactions; rather, it is necessary to rethink it. **Figure 3**

1. MAP and INDENTIFY KOLs in advance:

Having a structured and 360º KOL profiling procedure (scientific, strategic, and digital profiling) will make engagement more effective, because the better we can recognize the distinctive interests of our KOLs, the better we can address them, improving the value and efficiency of our KOL management.

For virtual interactions, the identification of DOLs (Digital Opinion Leaders) is even more relevant. Prior to the pandemic, less than 20% of KOLs had social media presence [5] and only a few were considered DOLs for their online influence. Identifying and mapping the digital KOLs of each TA with respect to their positions and attitudes is crucial. Thereby, we will know how to proactively engage with these digital KOLs to understand and shape their perspectives and needs and develop specific strategic projects.

1. GATHER IN-FIELD INSIGHTS:

It is necessary to explore to better understand the disease and treatment landscape, patient needs, as well as KOL's beliefs and preferences. Insight collection, one of the fundamental activities of MSLs, allows learning more about the new "patient journey" and the "customer journey".

Open and transparent discussions enable MSLs to collect insights and know KOLs' opinions about the preferred communications channel, contact preferences, content…in short, the "how" and the "when". The MSL must know how to ask the right questions in order to determine if the current KOL preferences are aligned with the scientific and business objectives of the company, and, accordingly, propose the best-suited engagement strategy. There is no one-size-fits-all.

1. CORRECTLY DEFINE INTERACTION OBJECTIVE AND CONTENT:

It is paramount to guarantee that the minutes KOLs dedicate to MSLs represent true value to them and that the interaction is as effective as face-to-face meetings, or even more so. You might have only one-shot!

Content should always have high scientific quality and MSLs should have deep, up-to-date knowledge about their products and TA. Also, knowing the medical strategy is a must for flawless execution. Managing and planning content in the mid-term and being able to personalize the messages addressed to specific KOLs via the virtual channel will help build long-term relationships: "Right content, to the right people, at the right time".

So, it is necessary to carefully consider the objective of the interaction, the strategy used to engage with KOLs, the valuable solutions to offer, the right questions to ask, the obstacles and objections that can surface, as well as the potential benefits for KOLs, and ultimately for patients.

1. IMPROVE CAPABILITIES AND SKILLS:

It is also key to improve and increase MSL skills and competencies, both technical and functional; this applies to current, as well as new skills (such as digital tools).

Soft skills and capabilities, such as emotional intelligence or the ability to "read others", among others, are now considered the

new hard skills. Supporting MSLs in their enhancement will help build long-lasting relationships based on trust and emotional bonds, as well as strengthen commitment.

This can be achieved through training or MSL coaching, with as much practice as possible: *"The difference between ordinary and extraordinary is practice" -Vladimir Horowitz.*

On top of this, since the tools used by all companies are pretty much the same, MSLs have to differentiate themselves in order to avoid depersonalization and need to make an impression. So, defining a "personal digital brand" or developing an "elevator pitch" at the beginning of MSL interactions will be essential to secure an open door for future virtual engagements. Finally, MSL should remember to share their best practices internally, so that colleagues can take advantage of the experience.

1. CROSSFUNCTIONAL ALIGNMENT AND COLLABORATION:

Lastly, it is necessary to guarantee the coordination of cross-functional communication between the different roles in the company, covering in-field and office-based positions. This helps to avoid digital saturation and the overlapping between functions, and, as a result, improves teams' efficiency. Companies must start thinking more holistically and abandon the traditional silos perspective.

Some final reflections:

According to the MSL Society survey, 66% of KOLs expected to continue engaging virtually with MSLs[6]; as a result, we are already in the position to say that virtual interactions are here to stay, although, nothing can replace the face-to-face connection. The success of virtual engagement in a country such as Spain lies in finding the right balance and embracing "the best of both worlds" (virtual and face-to-face). However, Medical Affairs Departments and MSLs certainly have to seize the moment and take this opportunity to consolidate remote interactions as a preferred channel due to it unquestionable benefits.

Farther there is still room for improvement; the same MSL Society survey highlighted that 82% of KOLs reported their most preferred method of communication with MSLs was email, a traditional method of communication. So, medical departments and MSLs have a golden opportunity here to explore and boost new remote methods (e.g. video conference).

So, there are endless possibilities for companies to position themselves as valuable partners for KOLs, and special emphasis on an excellent KOL approach that will differentiate leaders from the rest and help them embrace the "new normal" as just normal.

Now we just have to ask ourselves: are we fit for the future and can we make the most of the digital world?

References:

1-https://www.goodrebels.com/es/los-medicos-millennials-desafian-la-estrategia-de-la-industria-farmaceutica/

2-Statista.com. Employment worldwide by 2020, by generation.

3-4- https://www.monocl.com/blog/is-covid-19-forever-changing-how-commercial-and-medical-field-teams-work/

5.-
https://www.pharmaceuticalcommerce.com/brand-marketing-communications/digital-opinion-leaders-dols-role-pharma-markets/

6.- MSL Activities During the COVID-19 Pandemic (2020). Medical Science Liaison Society. Available on *https://www.themsls.org/covid-19-survey-results/*

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Beatriz Cuéllar, MSc is Field Medical Excellence Manager at Takeda. She has a Pharmacy degree and a master's degree in Pharmaceutical and Clinical Research. For the last 10 years, Beatriz has held different roles at key pharmaceutical companies, always within medical affairs. She started in research and then moved to MSL positions, which allowed her to fully understand its different particularities and become really passionate about the role. At present Beatriz is responsible for the planning, execution, and alignment of the in-field strategy, processes, and systems for MSL teams. She loves supporting and inspiring MSLs to enhance their capabilities and skills so that they become high-performing and best in class teams.

How MSLs and the Society Inspired Me to Consider a Degree in Pharmacy

By Shahrukh Hossain | December-2020 Issue

During my college search process, I had an idea about what I wanted to study. My Dad helped me reach out to leaders in the MSL community and his former summer intern to discuss pharmacy programs because I am fascinated by how drugs can make an impact on a person's life.

Women in STEM doing what I want to do truly excites me, and I want to be a part of this growing community, helping to make a difference in the world one person at a time. I began this process in April during the early days of the pandemic. Zooming with many women in science and learning of their journeys and accomplishments in their professional development is what spoke to me. They are each accomplished in their area of specialty and knowing they all began in pharmacy inspired me to pursue this direction for a college major.

Each conversation helped me to hear and see different paths available with a pharmacy degree. No matter the journey, each person I spoke with has made and continues to make a difference in her community, and especially as they advocate for patients.

My greatest takeaway from meeting MSLs is understanding hard work, dedication and perseverance will take you far in life, especially during a pandemic. I am grateful for the opportunity to connect with women who began their careers in pharmacy. I encourage others curious about what they want to study in college to speak with those who are working with similar degrees and ask about their experiences and how they came to their current job. These Zoom meetings have truly helped me. I also happen to enjoy wearing MSL merchandise.

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The Lessons Learned

By Shahrukh Hossain | December-2020 Issue

When I accepted my first MSL role, I was overjoyed, and I had no idea how absolutely amazing yet completely frustrating my first year would be. There were moments of success (like passing certification) and feeling like an integral part of my team. And then there were times when I felt clueless; so clueless that I felt that I did not even know what questions to ask to try to begin to understand what I should or could be doing. At those moments, the sage advice from Samuel Dyer would echo in my ears that it takes the first year to become functional and understand the role and that during the second year, there will be an "A-ha" moment and you begin to find ways to contribute in major ways. It is the best advice that I received as an aspiring MSL. This advice guided me as I navigated the opportunities and challenges in my first year as an MSL. As my first work anniversary approached, I realized that I was beginning to see the MSL role with much more clarity and having the much wanted "A-ha" moment. Along with that advice, I share some of the invaluable lessons I have learned.

On the practical side, live by the Boy Scout motto: Be Prepared. These words have proven so very true as impromptu meetings occurred and then there was the unpredicted snowstorm that left me trapped in Chicago for two additional days with just an overnight bag. Through these experiences, I have learned to always have a jacket on hand and to never forget to squeeze in some comfy clothing for when a trip is unexpectedly extended. On the topic of shoes, function before fashion is completely acceptable as are comfy shoes for long days at conferences or walking large academic campuses. Also, I learned that questions are so very crucial for survival and success, and there really is no such thing as a stupid question. Questions are key to navigating the role of the MSL, the cities and clinics I visited, as well as understanding my physicians. And the simplest practicality of all is just to remember to breathe and smile. It is amazing how these two simple things will help make the toughest situations easier.

On the professional side, the three P's guided my activities during my first year and continue to do so now: **Patience, Planning, and Prioritization**. **Patience** is key to being a successful MSL and establishing long-lasting relationships. Relationship building is a marathon and not a sprint. It is important to determine each step in the path to developing MSL skills and KOL relationships. **Planning** is the key to success from relationship building to career growth to contributing to the team. To bring value, actions and meetings need to be thought out with an objective to be executed. The final P is **Prioritization**. A vast number of opportunities will present themselves and will appear to be great learning experiences. However, not all learning experiences are equally relevant when striving to achieve personal/team goals. Being selective in where and how to spend time is essential and easier to identify with careful planning and will help maintain a healthy work-life balance.

Networking was key to my success in attaining my MSL role and networking has continued to be an essential part of my day-to-day activities. However, I was not always as diligent in maintaining and enhancing my network as I should have been. I quickly learned that having contacts outside of my organization was just as important as having contacts within the organization. It is a great feeling to be able to connect and gain insights and guidance to steer me in the right direction regardless of the situation. I learned there is great value to having mentors of differing backgrounds and experience. I have been fortunate that I have a great mentor within my organization, but I also have mentors outside of my organization who were able to provide impartial views and speak from the perspective of what was the best decision for me and not be conflicted with also balancing what is best for the organization.

The hardest lesson for me to learn (and I am still learning it) is maintaining balance. As an MSL, there are so many opportunities to learn, to grow, to have an impact. It is so very easy for focus to shift more to work and less to balance. I found it hard to say no and I was constantly rearranging my schedule to accommodate the opportunities. I was sacrificing precious time with family and friends. For me balancing work and life is essential. I am a much better person and MSL when I keep a balance. The coronavirus pandemic has allowed me the opportunity to gain perspective and set guardrails to help maintain a healthier work-life balance now and once life returns to some semblance of normal.

The final two lessons that influenced me during the first part of my MSL career are acceptance and trust. I had to learn that despite my best planning and collaborating that not everything would always go as planned. It is life and there are no guarantees. I needed to accept it, learn from it, and move forward. And since things do not always go as planned, I learned to trust my decision to become an MSL and trust my company when asked to pivot in situations that I did not understand and seemed counterintuitive. Being able to adapt and respond to evolving situations calmly and positively is based on trust.

I look forward to continuing to learn and grow as my MSL career continues. In writing this article, I hope that aspiring and new MSLs can have fewer bumps in their journeys as MSLs.

Author:

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Angela Valadez joined Alimera Sciences in May 2019 as the Medical Science Liaison for the Central States Region. Angela has a Doctor of Pharmacy degree from the University of Kansas and a Master of Business Administration from Baker University. With a passion for using evidence-based medicine to guide treatment decisions, Angela has worked with physicians throughout her pharmaceutical career to manage patient care and impact health outcomes. She was named an MSL Rookie of the Year Finalist in 2020.