

Information Management Project 2014

Information Management Case Study

Therapeutic Resource Centers (TRCs) – an electronic resource for disseminating pipeline evolution, competitor profiles, congress information, news and other competitive information with employees of a biopharmaceutical company.

Challenge

The Information Resources team supported employees working in the clinical, marketing and regulatory departments worldwide. The company as a whole was organized by therapeutic area responsibilities and requests for information were categorised accordingly.

Examples of frequently repeated requests were for:

- Pipeline evolution – drugs in development for particular indications (diseases) from Phase I through to Launched.
- Disease-specific background information
- Latest scientific congress posters and abstracts relevant to key current or future competitor products.

The team was small and answering each request as it came in was labour-intensive and often repetitive, although we did store materials locally for re-use.

We decided it would be a better use of time and resource to provide some of this information pro-actively and also create a standardized format. It also meant we could make more effective use of expensive subscriptions to databases, e-books and journals. Many of these were end-user subscriptions but under-used by employees, with also the inherent difficulties of training employees to the level necessary to effectively exploit the tools to their full extent.

Solutions adopted

We wanted employees to have efficient access to relevant, analysed information that would support their day-to-day activities.

We began a project to create an electronic resource available on the company intranet that would be structured by therapeutic area (TA) but would contain a similar data structure for each TA:

Information Management Project 2014

- **Pipeline charts (by specific disease/indication)**
Summary (and count) by phase of drugs (drug name(s); company) in development
- **Competitor profiles**
Key competitor last annual and latest 3 quarters financial top-line results
- **Disease fast facts**
Top level, very illustrated, definitions, aetiology, epidemiology, pathology, diagnosis, current treatments, unmet needs of diseases – particularly for indications in development by the company rather than for launched products.
- **Congress abstracts / posters**
Links to full-text of abstracts where subscriptions allowed or details of abstracts not covered by subscription. Reports from our company congress attendees on poster presentations.
- **Monthly newsletters**
Monthly summaries of latest drug development (clinical trial updates, drug registrations, drug launches, research projects etc.) – these were also e-mailed as an update.

The format of each output was carefully considered so that it could be easily downloaded and individual segments of information could also be extracted to make them as flexible as possible. For example the Disease Fast Facts were created in PowerPoint® so the presentation could be used as is, incorporated whole into another presentation, or individual slides extracted for use in another presentation.

We were also very clear on the sources of individual pieces of data to encourage people to use those sources for other requests.

Outcomes

We had a lot of positive comment on the introduction of the TRC. We were invited to present the TRC and also the Information Resources other services at high-level meetings (Executive board members; Annual Clinical Department meetings; Medical Information Worldwide meetings etc.) which was very positive.

We also saw slides being used in presentations. We had a lot of anecdotal evidence on value and use, but would have liked some specific counts in terms of access to the intranet pages and specific download counts. However our IT department was

Information Management Project 2014

unable to provide this level of statistics for more cultural, political than technical reasons and this was very disappointing.

Providing information pro-actively certainly saved time and resource on staff working on very repetitive requests. Even if the customer still approached us directly for information available on the TRC we were able to either point them to the data or send it directly.

In time with customer feedback and response we refined the TRC offerings, combining the pipeline and disease fast facts and adding more data to create full competitor landscapes for a very selected group of diseases which represented key pipeline candidates for the company. We also began to be invited to sit directly on project teams at early stage of product development.

At budget time it was certainly easier to justify expenditure of databases when their use was more visible in products that the company valued. It also helped us refine our requirements in terms of databases and subscriptions and allowed us to cut certain databases which we found didn't deliver as effectively when we were also the real end-user.

Reflections

We probably went into too much detail in some areas; we certainly covered more diseases for pipelines that were needed. Later as we evolved these pipelines and disease fast facts into more comprehensive competitive landscapes we were certainly more discriminating in the number of diseases covered for the straightforward pipelines.

The company profiles were not well used and we discontinued that service after a while.

The congress abstract and poster information proved very popular, this represented very hard to find data and having it brought together in one place and digested was very well received.

Overall we were very satisfied with the success of the TRC.