AD SPENDING FOR THE U.S. HEALTHCARE INDUSTRY LAST YEAR HIT A RECORD $9.7 BILLION, UP 11%. TV STILL RULES, BUT CONSUMERS INCREASINGLY ARE LOOKING ONLINE FOR ANSWERS. THE FACTS AND FIGURES YOU NEED TO KNOW. STAT.
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A HEALTHY AD MARKET

BY JULIE LIESSE

Buoyed by spending on new prescription drugs and by increased competition among hospitals and other providers, the healthcare industry is one of the 10 biggest categories of U.S. ad spending—and in the past few years, one of the fastest-growing categories.

An exclusive analysis by Kantar Media shows total U.S. measured-media ad spending for the healthcare industry increased 11.3% in 2015 to $9.7 billion.

After single-digit declines during the U.S. economic collapse and recession beginning in 2007, healthcare industry spending began to tick upward again in 2011.

“Healthcare is a significant and growing part of our economy, and with the way demographics are lining up, healthcare will continue to be an even larger part of the consumer ad marketplace,” says Jon Swallen, chief research officer for Kantar Media.

The bulk—86.2%—of healthcare ad spending comes from two categories: pharmaceutical companies, which represent nearly two-thirds of total spending, and hospitals, healthcare systems and clinics.

Reflecting dramatic changes in the marketplace, hospital advertising increased 41.0% in 2015 vs. 2011. Hospitals, healthcare systems and clinics last year accounted for 23.3% of U.S. healthcare spending.

Insurance companies are the third major category of healthcare-industry spending. Insurers spent $1.1 billion in 2015, representing about 10.9% of total healthcare measured-media ad spending. That’s about one percentage point higher than insurance companies represented a decade ago.

Among insurers, one name packs a punch: UnitedHealth Group is the only non-pharmaceutical company to rank among the top 10 healthcare ad spenders.

Despite the growth in hospital advertising and the consistent spending among healthcare insurers, the healthcare ad marketplace is dominated by pharmaceutical companies—and by the significant increases in spending on prescription drugs over the past three years in particular.

Pharmaceutical advertising spending totaled $6.1 billion in 2015 (including digital media), a yearly increase of 19%.

It’s been nearly 20 years since the U.S. Food & Drug Administration changed its rules governing direct-to-consumer TV ads for prescription drugs—a 1997 move that led to an explosion in pharma advertising.

Today, Mr. Swallen says, pharmaceutical marketers are using more advertising than ever to drive customer traffic—to directly or indirectly encourage people to ask their doctors about specific prescription drugs—and to keep their branded drugs’ names in the forefront of prescribing physicians’ minds.

“Pharma companies find themselves being squeezed on one side by generic competition, and pharmacies and benefit managers who are trying to reduce costs by moving business toward generics,” Mr. Swallen says. “On the other hand, the development costs of branded drugs are enormous; it takes a lot of time and money to bring a drug to market.”

The window to recoup those costs is relatively small since a branded pharmaceutical is protected by patent for a limited number of years; after that, its formula can be reproduced as a generic drug.

Look at Pfizer’s Lipitor, a top-selling cholesterol-reducing drug for 10 years, Mr. Swallen says. “Lipitor was based on a generic chemical compound that could be turned into a generic drug,” he says. “As it approached its patent expiration date, Lipitor went from being the top-advertised prescription drug to one with no consumer advertising support whatsoever.”

Indeed, he points out, the list of branded drugs that receive ad support is very small compared with the FDA’s list of approved prescription medications. And the trend seems to be to put more money behind a smaller list of big-budget pharmaceuticals.

Sixteen drugs were supported by U.S. ad spending of $100 million or more in 2015. By comparison, there were only nine drugs with $100 million-plus budgets in 2012.

Part of the reason pharma companies spend so much advertising their drugs, Mr. Swallen says, is they are legally required to include lists of side effects and risks in their branded advertising. “That pushes pharma toward TV commercials.
and magazine ads,” he says, rather than something like a website banner ad, which does not have room for the fine print of all those legal disclosures.

Beyond that, it means pharma ads are usually multi-page magazine ads—the average prescription drug magazine ad was 2.2 pages in 2015—and Mr. Swallen says more than half of prescription drug TV ads are 60 seconds or longer. “That’s part of why pharma spending is so large,” he says. “They’re buying double units, effectively.”

In addition to branded drug ads, pharmaceutical companies also run complementary unbranded advertising that discusses a particular medical condition but doesn’t mention a specific drug by name.

Increasingly these ads steer consumers to a website sponsored by the pharma company with a drug to treat the condition. Actress Jennifer Aniston currently appears in this type of TV spot for Shire’s Xiidra dry-eye medication; commercials direct viewers to myeyelove.com but don’t mention the drug’s name.

“Those messages don’t have the disclosure requirements that branded ads do; no disclaimers about side effects, just awareness of the condition,” says Mr. Swallen. “At the next step, manufacturers provide the educational info and link to the branded drug’s website. It’s not uncommon for manufacturers to concurrently run separate advertising messages for the educational website and the related branded drug.”

Unbranded ads accounted for $425 million in spending—7% of total pharmaceutical spending—in 2015.

Reflecting the patent lifecycle, pharma companies’ ad spending also is focused on their newest drugs. “New brand introductions clearly have been driving the recent increases in spending,” Mr. Swallen says.

Mr. Swallen looked at the “freshman class” of drugs over the past three years—recently FDA-approved drugs that were in their first year of notable ad spending.

The freshman class of 2015 had 13 drugs—including the $100 million brands Harvoni from Gilead Sciences and Opdivo from Bristol-Myers Squibb Co.—that as a group accounted for $967 million in ad spending in 2015. Total spending on branded ads for prescription drugs increased by $888 million from 2014 to 2015—so the new drugs accounted for all of the increase, and more.

Similarly, the “class of 2014” included nine drugs with cumulative spending of $704 million in 2014. Total branded ad spending for prescription drugs jumped $808 million from 2013 to 2014; the nine new drugs accounted for most of that.

“These freshmen drugs as proportion of all spending might be 10%-15%, but they represent virtually all of the incremental spending in the category,” Mr. Swallen says.

Thirteen of 2015’s top 25 advertised drugs were launched from 2013-2015.

Mr. Swallen wonders how the industry’s shift from chemically synthesized compounds to the new biologics—complex, genetically derived mixtures that are difficult to replicate as generics—will affect branded drugs’ marketing lifecycle.

Even though some of the biologics are treating relatively small populations of patients, they are more expensive to produce and cost more for consumers and insurance providers. Opdivo is a biologic and cancer treatment drug. It hit the marketplace with $127 million in ad spending in the first year of sales.

“The cost of treatment with Opdivo can be $50,000 a year or more, so that even though it is not aimed at a large group of patients, that is how they can afford to advertise,” Mr. Swallen says. “You don’t have to sell a lot if that is the unit cost of the prescription.”

**HEALTHCARE MARKETING**

**PHARMACEUTICAL AD SPENDING**

Fueled increasingly by new branded drug launches, ad spending in the pharmaceutical category is growing at a torrid pace year to year. U.S. measured-media spending. Dollars in millions.

**BIG SPENDERS**

The number of pharmaceutical brands with $50 million or more in yearly U.S. ad spending has nearly doubled since 2012.
AD SPENDING: 25 LARGEST HEALTHCARE MARKETERS

1. **Pfizer**, New York
   - 2015: $1,245 | 2014: $1,196
   - % change: 4.1

2. **Merck & Co.**, Kenilworth, N.J.
   - 2015: $442 | 2014: $341
   - % change: 29.6

3. **AbbVie**, North Chicago, Ill.
   - 2015: $432 | 2014: $405
   - % change: 6.5

4. **Allergan**, Dublin/Parsippany, N.J.
   - 2015: $421 | 2014: $405
   - % change: 5.8

5. **AstraZeneca**, London/Wilmington, Del.
   - 2015: $345 | 2014: $354
   - % change: -2.6

6. **Eli Lilly & Co.**, Indianapolis
   - 2015: $316 | 2014: $387
   - % change: -22.3

7. **Johnson & Johnson**, New Brunswick, N.J.
   - 2015: $309 | 2014: $253
   - % change: 22.8

8. **Valeant Pharmaceuticals International**, Laval, Canada/Bridgewater, N.J.
   - 2015: $277 | 2014: $47
   - % change: 468.7

9. **UnitedHealth Group**, Minnetonka, Minn.
   - 2015: $252 | 2014: $207
   - % change: 21.8

10. **Bristol-Myers Squibb Co./Pfizer**, New York
    - % change: 12.9

    - % change: 90.6

12. **Sanofi**, Paris/Bridgewater, N.J.
    - 2015: $193 | 2014: $45
    - % change: 332.1

13. **Gilead Sciences**, Foster City, Calif.
    - 2015: $193 | 2014: $63
    - % change: 205.6

14. **Bristol-Myers Squibb Co.**, New York
    - 2015: $178 | 2014: $11
    - % change: N/A

15. **Novo Nordisk**, Bagsvaerd, Denmark/Plainsboro, N.J.
    - 2015: $164 | 2014: $60
    - % change: 175.0

    - 2015: $160 | 2014: $146
    - % change: 9.3

17. **Sumitomo Dainippon Pharma Co.**, Osaka, Japan/Marlborough, Mass.
    - 2015: $158 | 2014: $208
    - % change: -24.4

18. **St. Jude Children’s Research Hospital**, Memphis, Tenn.
    - 2015: $129 | 2014: $189
    - % change: 31.5

19. **Cancer Treatment Centers of America**, Boca Raton, Fla.
    - % change: 3.6

20. **Roche Holding**, Basel, Switzerland
    - 2015: $105 | 2014: $91
    - % change: 15.7

    - 2015: $98 | 2014: $115
    - % change: -14.7

22. **Celgene Corp.**, Summit, N.J.
    - 2015: $65 | 2014: $9
    - % change: 951.8

23. **Boehringer Ingelheim**, Ingelheim, Germany/Ridgefield, Conn.
    - 2015: $95 | 2014: $128
    - % change: 25.8

    - 2015: $75 | 2014: $81
    - % change: 20.6

25. **Humana**, Louisville, Ky.
    - 2015: $59 | 2014: $75
    - % change: 21.1

**Top 25 total**
- 2015: $6,336 | 2014: $5,209
- % change: 21.6

## AD SPENDING: 25 MOST-ADVERTISED PRESCRIPTION DRUGS


<table>
<thead>
<tr>
<th>Rank</th>
<th>Drug</th>
<th>Manufacturer</th>
<th>2015</th>
<th>2014</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Humira</td>
<td>AbbVie</td>
<td>$366</td>
<td>$273</td>
<td>34.0</td>
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<tr>
<td>2</td>
<td>Lyrica</td>
<td>Pfizer</td>
<td>$331</td>
<td>$249</td>
<td>32.9</td>
</tr>
<tr>
<td>3</td>
<td>Eliquis</td>
<td>Bristol-Myers Squibb Co./Pfizer</td>
<td>$252</td>
<td>$223</td>
<td>12.9</td>
</tr>
<tr>
<td>4</td>
<td>Cialis</td>
<td>Eli Lilly &amp; Co.</td>
<td>$227</td>
<td>$275</td>
<td>-17.3</td>
</tr>
<tr>
<td>5</td>
<td>Xeljanz</td>
<td>Pfizer</td>
<td>$189</td>
<td>$158</td>
<td>19.5</td>
</tr>
<tr>
<td>6</td>
<td>Latuda</td>
<td>Sumitomo Dainippon Pharma Co.</td>
<td>$155</td>
<td>$190</td>
<td>-18.4</td>
</tr>
<tr>
<td>7</td>
<td>Harvoni</td>
<td>Gilead Sciences</td>
<td>$140</td>
<td>$0</td>
<td>N/A</td>
</tr>
<tr>
<td>8</td>
<td>Prevnar</td>
<td>Pfizer</td>
<td>$137</td>
<td>$32</td>
<td>325.7</td>
</tr>
<tr>
<td>9</td>
<td>Viagra</td>
<td>Pfizer</td>
<td>$136</td>
<td>$236</td>
<td>-42.3</td>
</tr>
<tr>
<td>10</td>
<td>Chantix</td>
<td>Pfizer</td>
<td>$133</td>
<td>$120</td>
<td>10.9</td>
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<tr>
<td>11</td>
<td>Opdivo</td>
<td>Bristol-Myers Squibb Co.</td>
<td>$127</td>
<td>$0</td>
<td>N/A</td>
</tr>
<tr>
<td>12</td>
<td>Farxiga</td>
<td>AstraZeneca</td>
<td>$120</td>
<td>$63</td>
<td>92.5</td>
</tr>
<tr>
<td>13</td>
<td>Jublia</td>
<td>Valeant Pharmaceuticals Intern</td>
<td>$118</td>
<td>$41</td>
<td>191.0</td>
</tr>
<tr>
<td>14</td>
<td>Invokana</td>
<td>Johnson &amp; Johnson</td>
<td>$115</td>
<td>$64</td>
<td>87.3</td>
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<tr>
<td>15</td>
<td>Xarelto</td>
<td>Johnson &amp; Johnson</td>
<td>$113</td>
<td>$119</td>
<td>-4.9</td>
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<tr>
<td>16</td>
<td>Premarin</td>
<td>Pfizer</td>
<td>$106</td>
<td>$89</td>
<td>19.3</td>
</tr>
<tr>
<td>17</td>
<td>Tamiflu</td>
<td>Roche Holding</td>
<td>$98</td>
<td>$69</td>
<td>43.6</td>
</tr>
<tr>
<td>18</td>
<td>Botox</td>
<td>Allergan</td>
<td>$98</td>
<td>$108</td>
<td>-8.9</td>
</tr>
<tr>
<td>19</td>
<td>Belsomra</td>
<td>Merck &amp; Co.</td>
<td>$98</td>
<td>$0</td>
<td>N/A</td>
</tr>
<tr>
<td>20</td>
<td>Anoro Elipta</td>
<td>GlaxoSmithKline</td>
<td>$97</td>
<td>$2</td>
<td>28.5</td>
</tr>
<tr>
<td>21</td>
<td>Otezla</td>
<td>Celgene Corp.</td>
<td>$93</td>
<td>$5</td>
<td>171.0</td>
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<tr>
<td>22</td>
<td>Symbicort</td>
<td>AstraZeneca</td>
<td>$92</td>
<td>$124</td>
<td>-24.4</td>
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<tr>
<td>23</td>
<td>Onexton</td>
<td>Valeant Pharmaceuticals Intern</td>
<td>$91</td>
<td>$0</td>
<td>N/A</td>
</tr>
<tr>
<td>24</td>
<td>Linzess</td>
<td>Allergan</td>
<td>$87</td>
<td>$115</td>
<td>-24.4</td>
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<tr>
<td>25</td>
<td>Enbrel</td>
<td>Amgen</td>
<td>$86</td>
<td>$97</td>
<td>-11.5</td>
</tr>
</tbody>
</table>

Top 25 total
2015: $3,605 | 2014: $2,651 | % change: 36.0

HEALTHCARE AD SPENDING BY YEAR

<table>
<thead>
<tr>
<th>Year</th>
<th>Measured-media spending</th>
<th>% chg.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>$9,700</td>
<td>11.3%</td>
</tr>
<tr>
<td>2014</td>
<td>$8,718</td>
<td>17.0%</td>
</tr>
<tr>
<td>2013</td>
<td>$7,452</td>
<td>8.9%</td>
</tr>
<tr>
<td>2012</td>
<td>$6,846</td>
<td>-3.4%</td>
</tr>
<tr>
<td>2011</td>
<td>$7,084</td>
<td>9.3%</td>
</tr>
<tr>
<td>2010</td>
<td>$6,481</td>
<td>-3.2%</td>
</tr>
<tr>
<td>2009</td>
<td>$6,695</td>
<td>-3.3%</td>
</tr>
<tr>
<td>2008</td>
<td>$6,923</td>
<td>-7.2%</td>
</tr>
<tr>
<td>2007</td>
<td>$7,457</td>
<td>-2.9%</td>
</tr>
<tr>
<td>2006</td>
<td>$7,682</td>
<td>N/A</td>
</tr>
</tbody>
</table>


HEALTHCARE AD SPENDING BY MEDIUM

- Digital: $1,223 (55.7%)
- Newspaper: $577 (18.7%)
- Outdoor: $360 (12.6%)
- Radio: $323 (5.9%)
- Magazine: $1,811 (3.7%)
- TV: $5,406 (3.3%)

Total: $9,700M


AD SPENDING: LARGEST HEALTHCARE MARKETERS BY CATEGORY

<table>
<thead>
<tr>
<th>Rank</th>
<th>Marketer</th>
<th>Headquarters</th>
<th>Measured-media spending</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>2015</td>
</tr>
<tr>
<td><strong>Prescription drugs</strong></td>
<td></td>
<td></td>
<td>$1,245</td>
</tr>
<tr>
<td>1</td>
<td>Pfizer</td>
<td>New York</td>
<td>$1,245</td>
</tr>
<tr>
<td>2</td>
<td>Merck &amp; Co.</td>
<td>Kenilworth, N.J.</td>
<td>442</td>
</tr>
<tr>
<td>3</td>
<td>AbbVie</td>
<td>North Chicago, Ill.</td>
<td>432</td>
</tr>
<tr>
<td>4</td>
<td>Allergan</td>
<td>Dublin/Parsippany, N.J.</td>
<td>421</td>
</tr>
<tr>
<td>5</td>
<td>AstraZeneca</td>
<td>London/Wilmington, Del.</td>
<td>345</td>
</tr>
</tbody>
</table>

**Health insurance**

<table>
<thead>
<tr>
<th>Rank</th>
<th>Marketer</th>
<th>Headquarters</th>
<th>Measured-media spending</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>UnitedHealth Group</td>
<td>Minnetonka, Minn.</td>
<td>$252</td>
</tr>
<tr>
<td>2</td>
<td>Allac</td>
<td>Columbus, Ga.</td>
<td>98</td>
</tr>
<tr>
<td>3</td>
<td>Humana</td>
<td>Louisville, Ky.</td>
<td>59</td>
</tr>
<tr>
<td>4</td>
<td>Cigna Corp.</td>
<td>Bloomfield, Conn.</td>
<td>59</td>
</tr>
<tr>
<td>5</td>
<td>Kaiser Permanente</td>
<td>Oakland, Calif.</td>
<td>41</td>
</tr>
</tbody>
</table>

HEALTHCARE MARKETING

HOSPITALS

REFLECTING DRAMATIC CHANGES in the way their marketplace works, the nation’s hospitals, healthcare systems and clinics have grown to account for 23.3%, or $2.3 billion, of 2015 total healthcare ad spending, according to Kantar Media.

Although category measured-media spending last year was flat, spending in 2015 was 41.0% above the level of 2011.

It’s no coincidence that spending surged early this decade. The federal Affordable Care Act, also known as Obamacare, was signed into law in March 2010.

“With the benefit of hindsight, it’s clear how this has affected advertising and marketing,” says Jon Swallen, chief research officer for Kantar Media. “The ACA dramatically changed the landscape for these companies, and advertising and marketing strategies have evolved to meet the new challenges.”

As insurance plans have tried to push more of the costs of healthcare coverage onto subscribers, patients have been empowered and incentivized to shop around for healthcare, and to be more cost-conscious. “That’s led to a much more competitive environment for hospitals at the consumer level,” Mr. Swallen says.

It also means that more and more, hospitals and clinics are marketing themselves directly to consumers rather than the professional community.

“Ten or 20 years ago, hospitals depended on physicians to refer a patient,” Mr. Swallen says. “Today, the consumer is more empowered to make those decisions.”

The hospital category is highly fragmented, with a mix of providers: some local, many regional, a few national; some specialized, others with a broad spectrum of services. Some hospitals advertise like local retail businesses, while others seek to develop a national reputation.

Many of the top ad spenders among hospitals and other providers are those that have worked to build a national reputation, such as the University of Texas MD Anderson Cancer Center in Houston or multi-city chains such as Laser Spine Institute and Cancer Treatment Centers of America.

Data show that providers often are advertising their high-investment specialty technology—whether in cancer care, cardiovascular health, spinal surgery, Lasik/vision surgery or pain management—and promoting themselves as an out-of-town destination for premier healthcare.

Metro areas often see single facilities competing in advertising not only with national “destination” hospitals, but also with regional chains.

In addition to the increased marketing competition, Mr. Swallen says, “For hospitals and providers, messaging today has to accomplish a number of different things: offering disease awareness and treatment options, educating consumers about the types of services offered and specialty technologies, and discussing quality and expertise.” It’s a tall order.

### HOSPITAL/MEDICAL SPENDING BY MEDIUM, 2011-2015


<table>
<thead>
<tr>
<th>Year</th>
<th>Cinema</th>
<th>Magazine</th>
<th>Radio</th>
<th>Outdoor</th>
<th>Newspaper</th>
<th>Digital</th>
<th>TV</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>$508</td>
<td>$168</td>
<td>$186</td>
<td>$222</td>
<td>$501</td>
<td>$19</td>
<td>$183</td>
</tr>
<tr>
<td>2012</td>
<td>$389</td>
<td>$218</td>
<td>$244</td>
<td>$184</td>
<td>$269</td>
<td>$19</td>
<td>$183</td>
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<tr>
<td>2013</td>
<td>$222</td>
<td>$186</td>
<td>$19</td>
<td>$269</td>
<td>$184</td>
<td>$19</td>
<td>$183</td>
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<tr>
<td>2014</td>
<td>$789</td>
<td>$294</td>
<td>$215</td>
<td>$469</td>
<td>$294</td>
<td>$19</td>
<td>$183</td>
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<td>2015</td>
<td>$808</td>
<td>$465</td>
<td>$269</td>
<td>$414</td>
<td>$269</td>
<td>$19</td>
<td>$183</td>
</tr>
</tbody>
</table>


### 10 LARGEST HOSPITAL/MEDICAL ADVERTISERS IN 2015

U.S. measured-media spending. Local, national and total spending, dollars in millions.

- **St. Jude Children’s Research Hospital** $128.4
- **Cancer Treatment Centers of America** $104.1
- **Laser Spine Institute** $26.4
- **MD Anderson Cancer Center** $25.9
- **Dignity Health** $18.8
- **Shriners Hospitals for Children** $13.7
- **Memorial Sloan Kettering Cancer Center** $12.9
- **Mayo Clinic** $12.8
- **Osteo Relief Institute** $12.1
- **NYU Langone Medical Center** $9.6

Source: Kantar Media. National media including but not limited to network TV, national cable, national magazines, search, internet display and network radio. Local media including but not limited to spot TV, local radio, local newspaper and locally oriented internet display. Some space and time may be donated to not-for-profits for which Kantar Media assigns a fair market value. More info: kantarmedia.com.
For a growing number of Americans, the internet is the first place they turn when seeking information related to health and wellness.

Some 42% of the U.S. population said the internet is the first stop when they need health and wellness information, according to Kantar Media’s 2016 MARS Consumer Health Study.

The annual MARS study found that a whopping three out of four adults use the internet for health and wellness information, with 22% saying they access internet sources at least once a week.

Although consumers say they still place the highest value on information from a healthcare professional—a doctor, nurse, physician’s assistant or pharmacist—online sources come in second place when they want information about their health or that of family members.

Top trusted online resources are general health-information websites like WebMD, Everyday Health and the Mayo Clinic sites, followed by search engine results and sites dedicated to particular illnesses or diagnoses—for instance, lupus.org (Lupus Foundation of America) or arthritis.org (Arthritis Foundation). Government, nonprofit, association and news sites also rank high.

“As a population, we are concerned about our health and about preventative care—and that can mean looking for everything from diagnostic information to recipes and tips for a healthy lifestyle,” says Jayne Krahn, Kantar Media’s VP-product and research operations, healthcare research.

Among the three-quarters of the adult population who go online for health and wellness information, the top two online activities are no surprise: 29% say they look for information about a particular health condition, and 27% say they research symptoms in search of clarity.

But reflecting Americans’ broad interest in staying healthy, other top online activities include looking for healthy recipes, seeking healthy lifestyle information and tracking diet and exercise.

Ms. Krahn says 18% of adults who use the internet for health and wellness are accessing a patient portal such as MyChart to access their medical records.

“That is growing; it was just a blip on the radar just a few years ago,” she says.

Smartphone users are twice as likely as non-smartphone owners to go online at least once a week for health and wellness information. The No. 1 health and wellness activity on smartphones is tracking diet and exercise, but Ms. Krahn says 39% of smartphone owners say they typically conduct research online before a doctor’s appointment.

A good portion of smartphone users’ online health searches happen in the moment: 15% use their smartphones for health-related purposes while at their healthcare provider’s office (or in the waiting room); 12% while at a hospital or clinic; and another 12% at a pharmacy or drugstore.

In addition to doing general research on the web, smartphone owners also use specific health-related apps—largely to keep tabs on their own health and fitness. The MARS study reports that 17% of U.S. adults who own a smartphone use health and wellness apps.

Far and away the top health and wellness apps are exercise and fitness offerings, followed by apps for calorie counting or diet tracking and apps for planning meals, accessing nutrition information or finding recipes.

Consumers who use the internet for health and wellness information are open to accessing and trusting internet healthcare resources but also cautious about sources. For instance, 63% of adults who use the internet for health and wellness information believe the internet provides them with a wealth of healthcare-related resources.

Some 31% of adults who use the internet for health and wellness information say they are “comfortable registering on a website” offering information on a particular condition.

These regular online health and wellness users also are more likely to refer friends to websites, more likely to trust an online diagnosis, more likely to find value in online video information and more likely to visit a website recommended by a doctor.

However, more than 68% of regular online health and wellness users say they are “very cautious about which websites I access for health and wellness information.” And only about 17% say they trust the medical information other people share on social media.

Perhaps reflecting wariness about social media content, pharma companies have “treaded very lightly in terms of social media,” Ms. Krahn says. “People have responded skeptically and feel it crosses the line.” Instead, she says, drugmakers are setting up social networking communities or forums to educate, facilitate discussions and create connections among consumers.”
### TOP ONLINE SOURCES FOR HEALTHCARE INFORMATION

When looking for healthcare information, consumers turn first to professionals, including doctors, nurses and pharmacists. Online information sources rank second.

<table>
<thead>
<tr>
<th>Percent of consumers who use online source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health information websites (e.g., WebMD): 58.2%</td>
</tr>
<tr>
<td>Search engine results: 54.7%</td>
</tr>
<tr>
<td>Websites dedicated to a particular health condition: 50.7%</td>
</tr>
<tr>
<td>Government websites: 46.8%</td>
</tr>
<tr>
<td>Association/non-profit websites: 42.8%</td>
</tr>
<tr>
<td>General news websites: 38.0%</td>
</tr>
<tr>
<td>Insurance provider websites: 37.6%</td>
</tr>
<tr>
<td>Diet or fitness websites: 35.1%</td>
</tr>
<tr>
<td>Reference websites with user-generated content: 33.8%</td>
</tr>
<tr>
<td>Drug company/brand websites: 30.8%</td>
</tr>
<tr>
<td>Drug review/ratings websites: 30.3%</td>
</tr>
<tr>
<td>Online communities or support groups: 26.9%</td>
</tr>
<tr>
<td>Social networking sites: 23.7%</td>
</tr>
<tr>
<td>Email newsletters: 23.4%</td>
</tr>
<tr>
<td>Online blogs/vlogs: 20.4%</td>
</tr>
<tr>
<td>Online advertisements: 15.7%</td>
</tr>
</tbody>
</table>

### WHAT DO CONSUMERS SEEK ONLINE?

Among consumers who use the internet for health and wellness information, the top online activities are all about finding solutions to current problems.

**Percent of U.S. adults pursuing the top 12 activities**

- Looked for information about a particular health condition: 29.0%
- Researched symptoms I/someone else was experiencing: 27.0%
- Looked for healthy recipes or other healthy lifestyle information: 24.0%
- Tracked my diet/exercise: 21.0%
- Searched or read reviews of medications or types of treatments: 20.0%
- Looked for alternative (non-medical) treatments or home remedies: 20.0%
- Read about others’ experiences with conditions, medications or treatments: 19.0%
- Used a patient portal to access electronic medical records (e.g., MyChart): 18.0%
- Looked for a doctor: 16.0%
- Looked for information about pharmacies, hospitals, treatment centers, urgent care or surgery centers: 16.0%
- Refilled a prescription online: 15.4%
- Read reviews of doctors or other healthcare professionals: 15.3%

Source: Kantar Media’s 2016 MARS Consumer Health Study. Numbers reflect percentage of U.S. adults who use the internet for health and wellness activities; table shows activities scoring higher than 15%. More info: kantarmedia.com.
More and more, consumers are connected digitally—and instantly—to their healthcare.

The first digital connections have provided consumers unheard-of access to medical information on websites, plus online links to healthcare providers, insurers and pharmacies. Then came smartphone apps, helping people keep tabs on calories, sleep habits and fitness records. The third digital connection may prove the most powerful: web-connected devices and wearable technology.

All told, 37% of American adults use at least one of these “digital health” platforms—web sites, apps and web-connected devices—to track their health, reports Kantar Health’s National Health and Wellness Survey (April 2016).

Wearable technology first brings to mind activity trackers, led by Fitbit; 7% of American adults say they’re using activity trackers, according to this survey.

The mobile health tools poised to change dramatically relationships among patients, doctors and pharma companies are web-connected devices used to manage chronic conditions, including diabetes, asthma, heart disease and COPD (chronic obstructive pulmonary disease).

“Through these devices, [mobile health] is poised to really transform global health and wellness for the better,” says Brian Mondry, global head of digital innovation at Kantar Health. “The big challenges ahead are to get consumers to adopt the technology.”

Web-connected glucose monitors, for instance, currently are used by only 6% of people with diabetes. These monitors automatically sync with companion mobile apps, allowing users to keep track of their blood glucose patterns and, by uploading to the Cloud, share their readings in real time with their healthcare providers, family members or caregivers.

Similarly, web-connected blood pressure monitors allow patients to track their blood pressure changes, compare their readings to national standards, and even detect atrial fibrillation—a common cause of stroke. These devices are only being used by 4% of people with high blood pressure.

Mr. Mondry sees a three-pronged push to increase use of these web-connected healthcare devices.

First are doctors. “Despite what we have heard about patient empowerment, getting the endorsement of a doctor to use a device like this is critical,” he says.

Second, the healthcare marketers making these products—including many big names like Roche, Teva, GlaxoSmithKline and Johnson & Johnson—will need to increase awareness of the benefits and ease of use through offline and online marketing channels, including patient education kits available at doctors’ offices and medical facilities.

Third, peer influence will encourage more patients to investigate and adopt these devices. “People will discover the value of these devices when they are seeking information online—not just at places like WebMD, but hearing from fellow sufferers telling their stories in online patient forums or blogs,” Mr. Mondry says. “Growth will come as people are exposed to others talking about the benefits they have seen.”

For broader acceptance, marketers also must address privacy concerns of some people who are wary of sharing their intimate health data digitally.

Mr. Mondry believes these web-connected devices offer a real opportunity for the pharmaceutical industry.

“The term ‘Beyond the Pill’ has become a cliche in pharma, yet that does not take away from its importance as the industry strives to be more patient-centric. These companies realize that for their future survival, they really do need to look beyond the pill, and expand what they do into products and services that surround the pill,” he says. “Getting into the digital health space can go a long way toward helping them accomplish this. These types of devices and supporting apps and services will help build brand connections that will help them fight against the tide of generics.”
MOBILE HEALTH: ROOM FOR GROWTH

37% of American adults use at least one website, app or wearable device to manage their health and wellness.

44% of those using mobile health apps, websites and connected devices— including activity trackers as well as web-connected glucose and blood pressure monitors—are using more than one platform to track their health.

43 is the average age of mobile health app users, who are younger than non-users (49 years old), more often women, less likely to smoke and be obese, but more likely to drink alcohol.

7% are using a wearable activity tracker such as Fitbit or Garmin—and the majority of those are women, most actively trying to lose weight and exercising regularly.

6% of people with diabetes said they are familiar with and use mobile health devices such as glucose-monitoring systems.

52% of patients with high blood pressure said they only monitor their blood pressure levels while at the doctor’s office.

4% of patients with high blood pressure said they are familiar with and are using web-connected blood pressure monitors.

25% of patients with diabetes or high blood pressure said they were interested in having their blood pressure or glucose history securely recorded on the internet for easy access.


WEB-CONNECTED DEVICES: AN EMERGING MARKET

Most popular web-connected devices among adults who use a web-connected device.

<table>
<thead>
<tr>
<th>Device</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fitness sensor</td>
<td>48%</td>
</tr>
<tr>
<td>Sleep tracker</td>
<td>28%</td>
</tr>
<tr>
<td>Blood pressure sensor</td>
<td>8%</td>
</tr>
<tr>
<td>Smart scale</td>
<td>7%</td>
</tr>
<tr>
<td>Blood glucose monitor</td>
<td>2%</td>
</tr>
</tbody>
</table>

Source: Kantar Media’s 2016 MARS Consumer Health Study. Number represents the percentage of U.S. adults who currently use web-connected devices and own or use a smartphone. More info: kantarmedia.com.

ATTITUDES VARY BY AGE

The majority of those under age 50 have favorable attitudes toward mobile health:

37% believe there are mobile apps available that would improve their current health

54% believe a wearable fitness tracker would make it easier to track diet and exercise

31% are motivated by the opportunity to download and share personal health and fitness data with others, including their doctor

Older adults (50+) are willing to use mobile health but are concerned about security and complexity:

31% believe web-connected devices are too complicated to use

49% are concerned about their personal health and fitness data being securely stored online

28% would be willing to use a mobile app recommended by their doctor and 21% would use a mobile app offered by their insurance

The Diabetes Epidemic

Diabetes drugs and devices have become one of the fastest-growing parts of the U.S. healthcare industry, and simultaneously one of the largest segments of the healthcare ad marketplace.

How big? The U.S. Centers for Disease Control and Prevention estimates $176 billion in direct medical costs associated with diabetes in 2012.

From 1980 until 2012, the number of adults with diagnosed diabetes nearly quadrupled in the U.S., says the CDC.

Currently, 10% of the U.S. adult population, or 24 million people, have been diagnosed with type 2 diabetes (adult onset diabetes), according to Kantar Media’s 2015/2016 MARS Consumer Health Doublebase Study. Another 27 million feel they are at risk of developing diabetes, according to the study. Many of them probably are correct; the CDC says more than one out of three American adults have “prediabetes,” and 90% don’t know it. The American Diabetes Association says more than 1 million new cases are diagnosed each year.

“It’s an epidemic,” says Jayne Krahn, Kantar Media’s VP-product and research operations, healthcare research.

Part of the increase in the number of diabetics is attributable to modern lifestyle trends that have led to obesity, lack of physical activity and poor eating habits—all risk factors for developing adult onset diabetes. But part of the increase also is due to diabetics living longer because of improved healthcare services and self-management practices, the CDC says.

The explosion in the number of diabetics has led to a corresponding increase in both competitive pharmaceuticals and diabetes-management devices, and also in ad spending by those healthcare marketers.

Prescription medications account for the vast majority of diabetes-related ad spending. U.S. measured-media ad spending for diabetes prescription drugs in 2015 surged 117% to $723.4 million, according to a Kantar Media analysis.

Four diabetes drugs had measured spending above $100 million in the 12 months ended May 2016: AstraZeneca’s Farxiga ($137.3 million); Eli Lilly & Co.’s Trulicity ($131.4 million); Sanofi’s Toujeo ($119.8 million); and Novo Nordisk’s Victoza ($101.4 million).

Four pharmaceutical marketers spent more than $100 million to advertise diabetes drugs in the 12 months ended May 2016: Novo Nordisk ($162.6 million); AstraZeneca ($144.7 million); Eli Lilly ($143.0 million); and Sanofi ($133.9 million).

Who is the typical diabetes consumer these companies are trying to reach? According to the MARS Consumer Health study, the median age is 61, but 45% of those diabetes patients are under age 60.

Americans with diabetes are bigger healthcare consumers than most; 98% of type 2 diabetes sufferers experience another chronic medical condition. The typical diabetes patient is nearly 2.5 times more likely than the average adult to suffer also from high cholesterol or high blood pressure.

Diabetes patients are more likely to be dependent on their doctors for advice on treatment and lifestyle suggestions. They are significantly less likely to research healthcare information on their own, the MARS study found.

However, these people are heavier users of traditional media, and more likely than the average American adult to take action after seeing healthcare advertising.

Adults with type 2 diabetes are 32% more likely to be heavy or medium-heavy TV watchers than the average adult. Some 43% of type 2 diabetes consumers say they value TV programs, compared with 37% of all American adults, and 30% say they value TV ads—five points higher than the total adult population.

Advertising leads to more action from these consumers. Type 2 diabetes patients that took some action as a result of seeing advertising are 86% more likely to discuss an ad with a doctor, 65% more likely to consult a pharmacist and 60% more likely to make a doctor’s appointment after seeing or hearing healthcare advertising. They are 65% more likely to ask their doctor to prescribe a specific drug, and 58% more likely to ask for a product sample of a drug they saw advertised.

Reflecting that patient profile, diabetes product marketers have focused their efforts on traditional media.

U.S. measured-media spending for diabetes medications
HEALTHCARE MARKETING

totaled $856.9 million for all media in the 12 months ended May 2016.

Nearly three-fourths (72.4% or $620.6 million) of that spending went into TV, according to Kantar Media. Magazines captured 21.8% ($187.0 million). (Magazines reach a whopping 86% of type 2 diabetes patients.)

Although diabetes sufferers spend more time with traditional media than the average consumer, they do spend time researching the disease and seeking community online. Drug and device marketers as well as educational and advocacy organizations try to reach those diabetes patients with search ads.

A total of $28.8 million was spent on U.S. Google desktop search ads on 1,013 diabetes-related keywords in the 12 months ended May 2016, according to Kantar Media’s AdGooroo unit.

The top search spender was the American Diabetes Association. Also in the top 10 spenders were the Juvenile Diabetes Research Foundation and the diaTribe Foundation. All of these advocacy groups use their online presence to offer news and lifestyle help, raise funds and foster a community for diabetics and their families.

Perhaps reflecting both the spread of the disease and diabetes patients’ reliance on the advice of medical professionals, marketers’ spending in professional print journals also has increased significantly. In just the past two years, spending on diabetes-related ads in professional print journals increased 35%, from $34.7 million (12 months ended May 2014) to $46.8 million (12 months ended May 2016), according to Kantar Healthcare.

Eli Lilly’s Trulicity and Johnson & Johnson’s Invokana alone accounted for 48% of total diabetes category spending in professional medical journals.

10 MOST-ADVERTISED DIABETES BRANDS

<table>
<thead>
<tr>
<th>Rank</th>
<th>Brand</th>
<th>Marketer</th>
<th>Ad spending ($ millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Farxiga</td>
<td>AstraZeneca</td>
<td>$137.3</td>
</tr>
<tr>
<td>2</td>
<td>Trulicity</td>
<td>Eli Lilly &amp; Co.</td>
<td>131.4</td>
</tr>
<tr>
<td>3</td>
<td>Toujeo</td>
<td>Sanofi</td>
<td>119.8</td>
</tr>
<tr>
<td>4</td>
<td>Victoza</td>
<td>Novo Nordisk</td>
<td>101.4</td>
</tr>
<tr>
<td>5</td>
<td>Januvia</td>
<td>Merck &amp; Co.</td>
<td>92.0</td>
</tr>
<tr>
<td>6</td>
<td>Invokana</td>
<td>Johnson &amp; Johnson</td>
<td>82.0</td>
</tr>
<tr>
<td>7</td>
<td>Jardiance</td>
<td>Boehringer Ingelheim</td>
<td>71.4</td>
</tr>
<tr>
<td>8</td>
<td>Levemir</td>
<td>Novo Nordisk</td>
<td>41.7</td>
</tr>
<tr>
<td>9</td>
<td>Tanzeum</td>
<td>GlaxoSmithKline</td>
<td>23.6</td>
</tr>
<tr>
<td>10</td>
<td>Novolog</td>
<td>Novo Nordisk</td>
<td>18.4</td>
</tr>
</tbody>
</table>

Top 10 total $819.0

[Source: Kantar Media. Spending figures here reflect branded advertising for diabetes prescription medications. Spending figures exclude awareness and education advertising about diabetes from pharmaceutical houses. More info: kantarmedia.com.]

PHARMA INDUSTRY’S 10 BIGGEST DIABETES ADVERTISERS

<table>
<thead>
<tr>
<th>Brand</th>
<th>Ad spending ($ millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Novo Nordisk</td>
<td>$162.6M</td>
</tr>
<tr>
<td>AstraZeneca</td>
<td>$144.7M</td>
</tr>
<tr>
<td>Eli Lilly &amp; Co.</td>
<td>$143.0M</td>
</tr>
<tr>
<td>Sanofi</td>
<td>$133.9M</td>
</tr>
<tr>
<td>Merck &amp; Co.</td>
<td>$92.0M</td>
</tr>
<tr>
<td>Johnson &amp; Johnson</td>
<td>$82.0M</td>
</tr>
<tr>
<td>Boehringer Ingelheim</td>
<td>$74.2M</td>
</tr>
<tr>
<td>GlaxoSmithKline</td>
<td>$23.6M</td>
</tr>
<tr>
<td>Daiichi Sankyo Co.</td>
<td>$9.8M</td>
</tr>
<tr>
<td>Ipsen Group</td>
<td>$0.1M</td>
</tr>
</tbody>
</table>


DIABETES DRUG AD SPENDING BY MEDIUM

Total: $856.9M

TV: $620.6M

### Top 10 Diabetes Hashtags

**May 2015-May 2016 based on a select group of keywords.**

<table>
<thead>
<tr>
<th>Rank</th>
<th>Hashtag</th>
<th>All Tweets</th>
<th>Retweets</th>
<th>Tweets</th>
<th>Impressions (millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>#diabetes</td>
<td>18,636</td>
<td>8,692</td>
<td>9,944</td>
<td>189.4</td>
</tr>
<tr>
<td>2</td>
<td>#afrezza</td>
<td>3,942</td>
<td>2,558</td>
<td>1,384</td>
<td>10.5</td>
</tr>
<tr>
<td>3</td>
<td>#insulin</td>
<td>1,893</td>
<td>756</td>
<td>1,137</td>
<td>7.5</td>
</tr>
<tr>
<td>4</td>
<td>#health</td>
<td>1,647</td>
<td>209</td>
<td>1,438</td>
<td>5.7</td>
</tr>
<tr>
<td>5</td>
<td>#t1d</td>
<td>1,417</td>
<td>863</td>
<td>554</td>
<td>4.8</td>
</tr>
<tr>
<td>6</td>
<td>#diabetic</td>
<td>1,407</td>
<td>402</td>
<td>1,005</td>
<td>5.4</td>
</tr>
<tr>
<td>7</td>
<td>#heartfailure</td>
<td>1,267</td>
<td>79</td>
<td>1,188</td>
<td>1.3</td>
</tr>
<tr>
<td>8</td>
<td>#t2d</td>
<td>1,198</td>
<td>732</td>
<td>466</td>
<td>17.2</td>
</tr>
<tr>
<td>9</td>
<td>#invokana</td>
<td>965</td>
<td>578</td>
<td>387</td>
<td>2.3</td>
</tr>
<tr>
<td>10</td>
<td>#metformin</td>
<td>961</td>
<td>360</td>
<td>601</td>
<td>4.3</td>
</tr>
</tbody>
</table>

**Top 10 total**

<table>
<thead>
<tr>
<th>All Tweets</th>
<th>Retweets</th>
<th>Tweets</th>
<th>Impressions (millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>33,333</td>
<td>15,229</td>
<td>18,104</td>
<td>248.3</td>
</tr>
</tbody>
</table>


### Top 10 Diabetes Advertisers Based on Search Spending

**U.S. search-marketing spending for 12 months ended May 2016.**

<table>
<thead>
<tr>
<th>Rank</th>
<th>Advertiser (product)</th>
<th>Website</th>
<th>Search spending</th>
<th>Average click-through rate</th>
<th>Average cost per click</th>
<th>Number of keywords</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>American Diabetes Association</td>
<td>diabetes.org</td>
<td>$1,791,373</td>
<td>5.5%</td>
<td>$1.94</td>
<td>884</td>
</tr>
<tr>
<td>2</td>
<td>GlaxoSmithKline (Tanzeum)</td>
<td>diabetes.com</td>
<td>$1,691,969</td>
<td>4.2</td>
<td>2.93</td>
<td>875</td>
</tr>
<tr>
<td>3</td>
<td>Merck &amp; Co. (Januvia)</td>
<td>type2-diabetes-info.com</td>
<td>$1,499,926</td>
<td>4.1</td>
<td>3.52</td>
<td>799</td>
</tr>
<tr>
<td>4</td>
<td>Boehringer Ingelheim (Tradjenta)</td>
<td>treatdiabetestype2.com</td>
<td>$1,331,663</td>
<td>5.4</td>
<td>5.62</td>
<td>468</td>
</tr>
<tr>
<td>5</td>
<td>AstraZeneca (Farxiga)</td>
<td>managing-type2-diabetes.com</td>
<td>$1,221,227</td>
<td>5.0</td>
<td>2.98</td>
<td>967</td>
</tr>
<tr>
<td>6</td>
<td>Joslin Diabetes Center</td>
<td>joslin.org</td>
<td>$1,146,098</td>
<td>4.1</td>
<td>1.99</td>
<td>858</td>
</tr>
<tr>
<td>7</td>
<td>JDRF</td>
<td>jdrf.org</td>
<td>$914,534</td>
<td>3.8</td>
<td>2.11</td>
<td>646</td>
</tr>
<tr>
<td>8</td>
<td>diaTribe Foundation</td>
<td>diatribe.org</td>
<td>$862,791</td>
<td>3.5</td>
<td>2.27</td>
<td>845</td>
</tr>
<tr>
<td>9</td>
<td>Sanofi (Toujeo)</td>
<td>toujeo.com</td>
<td>$760,820</td>
<td>4.0</td>
<td>3.78</td>
<td>931</td>
</tr>
<tr>
<td>10</td>
<td>JDRF</td>
<td>jdrfdsw.org</td>
<td>$716,974</td>
<td>3.1</td>
<td>2.22</td>
<td>726</td>
</tr>
</tbody>
</table>

**Top 10 total**

<table>
<thead>
<tr>
<th>Search spending</th>
<th>Average click-through rate</th>
<th>Average cost per click</th>
<th>Number of keywords</th>
</tr>
</thead>
<tbody>
<tr>
<td>$11,937,375</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

HEALTHCARE MARKETING

HOW DOCS LIKE TO READ DOCS

MANY MARKETERS OF HEALTHCARE PRODUCTS have two target audiences: the consumers who are the ultimate end users of medications and healthcare devices, and the doctors and healthcare professionals who write prescriptions and make recommendations.

How do doctors acquire information and keep up to date? Where can healthcare marketers reach them? Kantar Media’s Sources and Interactions Study, a twice-a-year survey of more than 3,000 physicians across 22 specialties, offers some clues.

According to the March 2016 Sources and Interactions Study, the five sources doctors indicate as most important sources of information for new medical developments are professional portals (72%), colleagues (70%), print editions of current medical journals (69%), meetings for continuing medical education (69%) and in-person conferences on a product or therapy (56%).

Professional portals include websites that aggregate information for medical professionals, such as Medscape and UpToDate. Other online sources that rate high in importance are mobile drug-reference apps, like the app version of the Physicians’ Desk Reference, as well as online and mobile versions of current medical journals and reference publications.

Digital content and technologies, including content sources like mobilePDR and Medscape, have changed how doctors learn and keep up to date on what’s new in their field, while providing potential marketing touchpoints as well. Virtually all—99%—of doctors surveyed reported conducting some sort of work-related activity online.

Among doctors who use the internet for professional purposes, 69% said they had referenced drug data online or on a mobile app within the past month; 64% had completed some form of continuing medical education; 62% had accessed or maintained medical records; and 53% had looked up information on medical equipment or devices.

Video is an important tool to reach doctors as well. About one in four doctors said they within the last month had viewed a medically oriented video online, using a computer, smartphone or tablet.

The days of the old paper prescription pad may be numbered. On average, surveyed doctors report that 73% of their prescriptions are written via computers or mobile devices.

Despite the number of tasks they perform and information they obtain on a screen, however, doctors still access professional journals most often in print form.

When asked which version of current medical journals they read, 93% said they read the print edition. Nearly half (47%) said they access the digital version of the print edition (in PDF form, for instance), and 25% said they access the publication’s website. Only 18% said they access medical journals via a tablet app, and 11% through a smartphone app.

Reflecting doctors’ preference for a print product, print advertising in medical journals continues to grow. Kantar Media reports that U.S. ad spending in professional health print journals reached $654 million for the 12 months ended August 2016, a 6% increase year-to-year.

The top five drug classes advertised in print are currently antineoplastic agents, diabetes insulin, antivirals, anticoagulants and antipsychotic drugs. Those five categories accounted for nearly a fourth (23.6%) of spending for the 12 months ended in April 2016.

TOP FIVE ONLINE INFORMATION SOURCES FOR DOCTORS

Question: “Rate the importance in helping you stay well-informed about new medical developments.”

<table>
<thead>
<tr>
<th>Source</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional portals</td>
<td>72%</td>
</tr>
<tr>
<td>Mobile app: drug reference</td>
<td>54%</td>
</tr>
<tr>
<td>Current medical journals: online/app version</td>
<td>51%</td>
</tr>
<tr>
<td>Reference publications: online/app version</td>
<td>45%</td>
</tr>
<tr>
<td>Disease-specific websites (professional)</td>
<td>44%</td>
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HOW DOCTORS ACCESS MEDICAL JOURNALS

Question: “When a current issue of a medical journal is available, which version do you read?”

<table>
<thead>
<tr>
<th>Source</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Print edition</td>
<td>93%</td>
</tr>
<tr>
<td>Full digital reproduction of print edition (e.g., PDF)</td>
<td>47%</td>
</tr>
<tr>
<td>Publication’s website</td>
<td>25%</td>
</tr>
<tr>
<td>Tablet application</td>
<td>18%</td>
</tr>
<tr>
<td>Smartphone application</td>
<td>11%</td>
</tr>
<tr>
<td>I do not read current publications</td>
<td>3%</td>
</tr>
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