
13 - 19 Jul 2015

Feature

Is pharma getting over social media fears?

Posted 13 July 2015

It is well known that pharma, as an industry, has been slow to adopt social media, but recent indications are that it might finally be gaining some traction.

Communications agency Ogilvy recently analysed the corporate social media activity of 14 pharma companies across 10 social networks over three months and found that the average number of tweets per week has gone up 530 per cent since 2013, the number of twitter followers 295 per cent, the number of Facebook followers up 44 per cent and YouTube subscribers up 133 per cent.

And *Pharma in Focus's* own white paper, [Marketing in the Australian Pharmaceutical and Healthcare Industry](#), found 58 per cent of pharma companies in Australia are looking to increase their marketing expenditure in 2015-16, with a strong emphasis on online strategies including social media. The research also found that the proportion of companies spending money on social media sites will rise from 38 per cent in 2014-15 to 64 per cent in 2015-16.

However, those involved in the industry say that there is still a lingering reticence to get involved and where pharma companies do, it is often not done comprehensively or with a clear strategy.

"There is still not a lot happening," said Jenni Beattie, director of digital agency Digital Democracy, who has worked with pharma and healthcare clients. "When social media goes wrong it really goes wrong and companies have to consider this risk."

On the other hand, she said, people do expect companies to be in this space and it can present an opportunity to gather business intelligence for example on patient communities. It is also an "authentic" and "real time" way to stay in touch with customers and with patients through producing helpful content, she added.

With pharma's recent beating in the media likely [linked to a perceived lack of transparency](#), social media could be another tool to help improve its image.

Regulation

Many pharma companies in Australia are deterred from social media by the highly regulated environment; social media use must comply with the Medicines Australia Code of Conduct, Australian Consumer Law and the Therapeutic Goods Advertising Code, including direct to consumer advertising.

Simone Mitchell, a partner at law firm DLA Piper, who advises pharmaceutical companies on regulation and compliance, agrees.

"There is the some hesitation about social media for a couple of reasons," she said. "First, there is the spontaneous nature of social media compared to other media."

"And because of this there is the need to monitor and moderate and this requires time and attention."

She said the Therapeutic Goods Advertising Code and the MA code do not distinguish between social and other media when applied to areas like direct to consumer advertising. The MA code of conduct does provide some, although not much, specific additional guidance on social media, but Mitchell said this is more than comparable codes overseas such as in the UK.

On top of this, the ACCC requires large companies to identify and remove any content from social media which is misleading or inappropriate within 24 hours, Mitchell said.

This issue of third party comments was highlighted in the 2009 Federal Court case between the ACCC and Allergy Pathway, which operates allergy testing clinics. Its director was held liable and given two \$7,500 fines for allowing false reviews to remain on its Facebook, Twitter, YouTube and company website.

And there are lots of other issues to consider, for example associated content - Mitchell points to a 2012 Code of Conduct

case involving MSD and YouTube as an example.

In that case, Bayer made a complaint regarding 'suggested links' that appeared alongside the content created by MSD on its YouTube channel, saying they did not comply with the code.

The video creator has no control over the clips that appear, but they are suggested according to keywords that are input by the creator when uploading the video.

Although the committee ruled that those suggested clips were not promotional or complementary to MSD's educational content, the code of conduct report notes that "a different set of suggested clips displayed in association with MSD's video may have led to a different decision".

"The Committee cautioned that companies should carefully consider what content may be displayed in association with the company's content published through the social media and whether the association between the company's content and other content could result in promotion to the general public," the report said.

Another additional burden which social media creates is more adverse event reporting.

"The code is very clear on adverse events - if it comes to the attention of the company then it has to be reported the same way, said Mitchell. So you have to actively monitor any social media pages."

Mitchell said there is also a lack of understanding as to how to use certain features of social media, such as filtering or restricting access to certain posts or allowing regional access - which could also help companies comply with regulation.

Monitoring and manpower

The only way to get involved in social media, therefore, is to be properly resourced.

"If you want to play in the space you have to invest," said Beattie. "You have to have a full strategy, you have to be well-resourced and you have to monitor. You can't be half in or half out." This means monitoring social media pages seven days a week and having a good crisis plan in place.

The Ogilvy survey found three separate groups of social media users in the pharma industry; those who have successfully integrated social media into their wide marketing strategy, those which have a presence but are not maintaining a consistent level of activity or attracting loyal followers and those who want to be involved but haven't had a good strategy.

What sometimes happens, Beattie explains, is that there is division in-house about social media. The marketing department get senior management to agree, but they never really get behind it or resource it properly. Then, when it goes wrong, the marketing department get the blame.

She points to the [2013 case of GSK's baby Panadol](#), which started on Facebook after someone posted a picture of a dosing syringe with incorrect markings, as an example of how something can blow up on social media.

"The key in a negative situation is to look like you've listened, accept the negative feedback and stay there," she said.

"We're not marketing something like Pringles here where there is little downside. This is a serious business and there is already negative industry sentiment out there."

As well as a strategy, employers should have written policies and procedures for social media use, including what their employees can post on their own social media sites to mitigate any risk, Mitchell said.

Despite all these potential minefields, social media may still have its day in pharma.

"I think change will come but it will be gradual," Beattie said. "It is still a very challenging area."

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