



# FIREFISH HEALTHCARE

[www.firefish.ltd.uk/healthcare/](http://www.firefish.ltd.uk/healthcare/)

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## ABOUT FIREFISH HEALTHCARE

We believe that successful healthcare outcomes are all about better understanding and connection between the people at the heart of the healthcare equation. We are here to help you make that connection & develop winning strategy and execution

## ABOUT THE ARTICLE

Primary Care

Telehealth

Healthcare data

Communication

Mental Health

Ecosystems

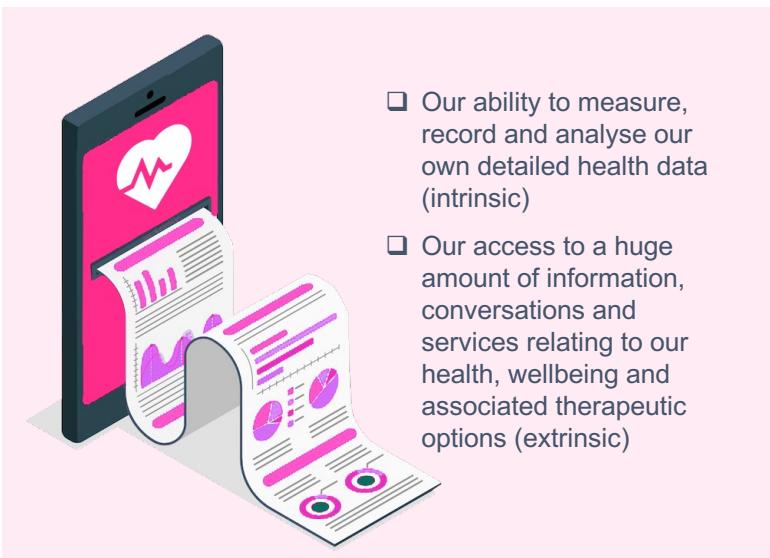
Estimated ~ 6 minute read

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## MAIN ARTICLE

# CLINICAL DECISION MAKING UNDER NEW INFLUENCE: ADAPTING THE INSIGHT PROCESS

It's an exciting time to be working in healthcare. Technology is driving a shift in our relationships with our bodies, health and wellbeing. In many ways, this can be seen as a new age of enlightenment on 2 broad levels:



- ❑ Our ability to measure, record and analyse our own detailed health data (intrinsic)
- ❑ Our access to a huge amount of information, conversations and services relating to our health, wellbeing and associated therapeutic options (extrinsic)

This *enlightenment* by data is creating a shift in terms of how health and wellbeing are being considered, experienced and delivered. At best, people are empowered by the information to become more proactive and involved in managing & optimising their own health and wellbeing outcomes. More than ever before, people have the option to take control of their own destiny – or at least become an active participant in its management.

What this ultimately means is that there is an increasing awareness of the detail of our health and wellbeing reality – combined with the ability to access the information, services and products that will help us to do something about it. This is having an interesting impact on the healthcare sector at a variety of different levels – from the extremes of some advocates of the [Quantified Self](#) movement, to a more general change in the nature of the dynamic between HCPs, patients, and the pharmaceutical industry.

One significant example of this shift can be seen in the area of mental health and depression, where a variety of factors are changing the nature of therapeutic conversations.

At a macro-cultural level, the narrative around mental health has shifted considerably over recent years - from stigma and ignorance towards more acceptance and understanding. This new narrative can be seen in news coverage, [drama](#), [entertainment, music](#), [sport](#) and [brand communication](#) before evolving and amplifying in conversations and posts across social media, in [influencer blogs](#) and on leading community sites such as [Mumsnet](#) and [The Student Room](#).

## ABOUT THE AUTHOR



**Dr. Bob Cook**  
MANAGING DIRECTOR,  
FIREFISH HEALTHCARE

Award-winning insight industry innovator Dr Bob combines 20+ years of strategic insight experience with his years within the healthcare professional world, having formerly been a practising doctor & psychiatrist



## MAIN ARTICLE CONTINUED...

Another factor that needs to be considered is [the current lack of resource in primary care services](#) - leading to longer waiting times, shorter consultations. This is prompting more people to initially take action themselves and seek information and advice online. This can be seen from analysis of search and social data by [Emerald Thinking](#) in May 2022, which shows an increasing number of searches including the term depression, as well as more direct questions typed into Google (78.2K times per month) such as 'Am I depressed?' as Claire Aldous reports:

*“Social and search data is an exciting and often untapped big data resource, providing ‘real time’, unrivaled views of naturally occurring patient conversations and questions. To not only understanding the most relevant issues those struggling with Mental Health are facing, their motivations, needs, but also the different pathways taken to wellness and the major influencers of choices taken”*

**Claire Aldous, Head of Data and Customer Experience of Emerald Thinking**

At its best, this is taking people to reputable specialist resources like WebMD and the [Royal College of Psychiatrists](#), but it can also take them to less helpful places leading to much less desirable outcomes as was highlighted in a piece called [‘I can cure you’](#) on the BBC in November 2021.



The result is a population that is better informed about mental illness, within which we have a growing group of people living with depression who have become more aware of their condition and the therapeutic options that are available to help them. Where once diagnosis and treatment were driven and dispensed in a fairly linear fashion by the pharma businesses and HCPs - and accepted by patients - there is now more of a 2-way interaction as healthcare decision making is increasingly influenced by a patient-driven agenda too. This is particularly true when considering depression as it presents to the primary care sector.

## The New Reality for HCPs

For HCPs, the reality is an increase in people presenting with depression and depressive symptoms who are more informed and engaged. These people often have increased insight and expectations that means they are better able to express their clinical picture, articulate their desired treatment needs and take an active role in the conversation and decision making. While the initial treatment decisions typically remain HCP-led, there is an increasing patient awareness of what good and bad look like in terms of the clinical benefits of medications and their associated side effects. This can then lead to pressure to change and optimise treatment regimens as the patient has a point of view that they feel is valid and should be considered. This in turn creates a real opportunity for a wider range of drug treatments and complementary therapeutic options to be considered.

*“GPs everywhere are noticing a big difference in the number of patients seeking help for their mental health problems. This may be because people are becoming more open about raising concerns about their mental health issues but, whatever the reason, we need to ensure that our GPs are as prepared as they possibly can be to deliver care to their patients”*

**Professor Helen Stokes-Lampard,  
Chair of the Royal College of GPs**

In addition to this, we need to also consider the prescribing influences on GPs themselves via training, professional guidelines and other communications. Covid lockdowns, heavy workloads and the new communication landscape have all changed and restricted traditional sales-led interactions between HCPs and pharma companies.

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## MAIN ARTICLE CONTINUED...

This has left GPs needing to be more self-reliant and proactive in keeping up to date with therapeutic options via resources such as NICE, NB Medical and patient.co.uk. This means a shift in emphasis as these resources speak more from the perspective of evidence-based medicine (EBM) financial impact and an overarching aim to reduce polypharmacy. This is reflected in the most recent [NICE guidelines](#) regarding mild-to-moderate depression where GPs are advised to present and discuss a range of non-drug alternatives like CBT and exercise before considering antidepressants. Interestingly, this may be in contrast to the views from the better informed patients who seek pharmacological treatments potentially having seen campaigns such as [#postyourpill](#). (Shown to right >>) This creates a new, and in many ways tougher, environment for pharma businesses to navigate as they communicate with HCPs.

### The Implications and Opportunity for Pharma

In this world where patient influence is increasingly a factor to consider, it's important to understand the nature of that influence and where it is coming from. As in all ecosystems, success is more likely when we are tuned into the environment we exist in and adapt to it.

While asking people directly about their needs, attitudes and expectations can take us some way to understand this, another essential and valuable part of the picture comes from looking at secondary data and a wider cultural frame too.

An initial **review of social and search data** is a simple and very efficient way of identifying and exploring the key themes and conversations, what is driving them – and how they are evolving over time. This insight can then be enriched by adding in the wider context via **semiotics and a cultural insights** work. This also gives us a steer on the language and imagery that forms the basis of online content and conversations – something that will help us develop strategy and content that is **authentic and resonant** with the real needs and experiences of both HCPs and patients.

This kind of deep **human insight** is an essential ingredient of effective strategy and communication – be that authentically contributing to the conversation around mental health – or developing specific campaigns and innovation that **connect** with the experiences and needs of all sides of the therapeutic dynamic.

It is always important to keep in mind that HCPs are humans too, and while clinical data is essential in defining a drug's properties and performance, there is also an important emotional aspect that must be considered where being a trusted, understanding and well-motivated *brand partner* will also have a positive impact on clinical choices.



### SELECT CASE STUDIES

#### LIFE WITH NASAL CONGESTION

Our innovative approach helped GSK get closer to the reality of living life with chronic nasal congestion

[Read the case study](#)

#### ROSACEA: 'ACT ON RED'

We helped Galderma and Ogilvy Healthworld develop a successful global communication campaign that resonated with people's experiences of living with rosacea and prompted them to re engage with HCPs to explore new treatment options.

[Read the case study](#)

#### USEFUL INNOVATION FOR THE REAL WORLD

We designed an approach to make sure that a packaging innovation was optimised and launched in the context of real-life needs experiences of people living with hyperhidrosis. [Read the case study](#)



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