

Zyprexa Diabetes Strategy

March 12, 2002



H A R P E R

Methodology



H A R P E R

b 5 Focus Groups (Washington DC)

- 2 High Flyers
- 1 Rule Bound
- 1 Skeptical Experts
- 1 Selective Treaters



Research Objectives

- ① Determine attitudes & practices toward diagnosing, monitoring and treating H/D
 - What has been their experience?
 - Is there a need for additional tools to support the physician?
- ① Determine if the “Diagnose, Monitor, & Treat” (DMT) message would conflict with the intent of the “Comparable Rates” message
- ① Evaluate the potential equity as well as possible “unintended consequences” of offering such a program
 - Should Lilly leverage its reputation as being the leader in diabetes?
 - How can Lilly address this concern without taking further ownership of it?
- ① Evaluate how well prepared psychiatrists are to treating diabetes
 - Determine if DMT would fix H/D problem as well as or better than the “Comparable Rates” message or in combination with
 - Determine if some physical tools, such as blood glucose monitoring kits, would be of value to psychiatrists & support the DMT message

Report Outline



H A R P E R

h Key Findings

- Overall Findings
- High Flyers
- Rule Bound
- Skeptical Experts
- Selective Treaters

h Conclusions and Recommendations

Key Findings



H A R P E R

b Overall findings across all segments

- Psychiatrists are not comfortable treating medical conditions in general and diabetes specifically. The following reasons are expressed most often:
 - Not an expert
 - Haven't studied diabetes since medical school
 - Better patient care if they see a PCP or Endocrinologist
 - Not the standard of care in psychiatry – could lead to liability
 - Malpractice insurance may not cover
- Most also agree that they do not feel comfortable refilling prescriptions for medical illnesses. They feel it is a “slippery slope” – once you begin, patients will expect you to do it regularly.

Key Findings



H A R P E R

b Overall findings across all segments

- There are certain medical conditions that psychiatrists consider within their “realm” of practice. Such illnesses would include chronic pain, migraines and sexual problems or sexual side effects. Most admit to prescribing Viagra to a number of patients.
- Most speculate that there may be a higher incidence of diabetes in the schizophrenic population due to lifestyle issues – poor diets, sedentary, smoking.

Key Findings



H A R P E R

b Overall findings across all segments

- Among all groups, physicians agree that Zyprexa is an “excellent” medication, and often they describe it as producing better outcomes for patients than other medications.
- There is a high correlation between Zyprexa and weight gain among all segments, however the correlation between Zyprexa and diabetes is mixed. Those who do feel there is a relationship between Zyprexa and diabetes are not sure if it is due to weight gain or metabolic changes. Regardless, those who feel that Zyprexa is likely to induce diabetes indicate that it has impacted their prescribing patterns.

Key Findings



H A R P E R

h Overall findings across all segments

- Most physicians feel that the “Diagnose, Monitor and Treat” (DMT) piece is too simple and basic for physicians. Most agree that it contains very helpful information that could serve as a good reminder for them. However, they do believe that this information, with some modifications, would be better served going to patients.
- Regardless of segment, respondents generally feel that this document would most likely come from Lilly. This sentiment comes from those who have had patients develop diabetes on Zyprexa and those who have not. The message that would be conveyed with this document, whether it comes from Lilly or a competitor, differs by segment. Overall, most physicians respond positively to the idea that a company would have an open and honest discussion about side effects.

Key Findings



H A R P E R

b Overall findings across all segments

- Some physicians believe that data regarding Zyprexa and diabetes has been reported in the psychiatric literature – meaning they feel it is from a credible source. Most do not recognize that this message is coming primarily from Zyprexa’s competitors – namely Janssen. A few do acknowledge the efforts by the competition, but they do not have the same contempt for these efforts as they do for Lilly’s marketing campaign against Geodon. Many mention the full spread ads in the journals and feel that Lilly has gone too far.

Key Findings



H A R P E R

h High Flyers

- Zyprexa has the highest correlation with diabetes among this segment. Although the cause is uncertain, most agree that they are prescribing less Zyprexa because of the fear.
- The potential of inducing diabetes has prompted some to order baseline and periodic blood tests to look for elevated blood sugars. This is not a practice being implemented by the segment as a whole.
- This segment seems to be eager to learn more about medical conditions within their patient populations. This is not to say that they would be more willing to treat these conditions, but they do want to be informed in order to discuss these issues with patients.

Key Findings



H A R P E R

High Flyers

- In general, this segment feel positively about the DMT message coming from Lilly because it shows an effort to address a problem. For some, this acknowledgement says that there is a problem and something that needs to be addressed. Coming from a competitor, it is seen as a blunting effort to point fingers at Zyprexa and away from themselves.
 - *All the pharma companies should be helping to solve these issues. They do not want to because it would be acknowledging the problem with the medication. It is the right thing to do, but it doesn't make good business sense.*
 - *Coming from Lilly it is good PR, coming from another it is just information.*
 - *From Pfizer, it would say that a best defense is a good offense. (This quote is in reference to Lilly's QTc ads)*

Key Findings



H A R P E R

h Rule Bound

- These physicians do not see a strong correlation between Zyprexa and diabetes. They mention seeing some references in journal articles and hearing the message from competitive reps, which they do not give much credibility.
- Current information from Lilly reps is centered around the issue of weight gain and not diabetes. They are providing information regarding diet, healthy lifestyle, and pharmacological interventions, which these physicians feel is very helpful since weight gain is the biggest issue with Zyprexa.

Key Findings



H A R P E R

b Rule Bound

- This groups has very mixed feelings about the DMT piece. On one hand, it is a good reminder of common symptoms and may help them ask their patients the right questions. On the other hand, they do not like the numerous references to a “higher incidence in the mentally ill.” They indicate that this is “soft data”, and they would like more information to clarify this issue. One respondent expresses that these references made him feel like he was being “handled.” In other words, it was an attempt to shift the blame from the medication to the patient.
- Overall, the DMT piece is “okay” – they would read it once and probably throw it away.
 - *It’s information and a good reminder.*

Key Findings



H A R P E R

Rule Bound

- This groups also feels that this piece is most likely to come from Lilly. Some believe it is Lilly trying to be honest about Zyprexa and diabetes, which is similar to their approach with other side effects. One physician indicates this is probably from Lilly because it is a denial of Zyprexa's role. Regardless of the intention, they agree that this would have little to no impact.
 - *This is barely an introduction.*
 - *This is making a weak effort.*
- If this was coming from Pfizer, it would be an attempt to focus attention away from QTc.
- This segment indicates that they would not be likely to give this to patients. Because of the low likelihood of patients developing diabetes from these medications, they feel it could be more harmful and may frighten patients.

Key Findings



H A R P E R

h Skeptical Experts

- Physicians in this group indicate that they are ordering baseline blood tests for some patients – usually those beginning therapy with lithium or Depakote. A few are also obtaining baseline weight and BMI in order to monitor it throughout treatment.
- These physicians recognize that their patients with schizophrenia have a higher likelihood of developing diabetes, and they recognize that there may be an increase in incidence with Zyprexa, Seroquel and Clozaril – mainly due to the weight gain associated with these medications. They do not feel that this is an issue with Geodon because it does not cause weight gain.

Key Findings



H A R P E R

b Skeptical Experts

- Currently, their Lilly reps are discussing ways to manage the weight gain experienced with Zyprexa. They are giving physicians patient information, and one physician was given a scale in order to monitor his patients.
- All respondents in this group recognize the battle between Lilly and Janssen.
 - *There is a war going on – it's like the Hatfield and McCoys.*
- They recognize that Janssen is going after Lilly on the issue of diabetes, but they also recognize that Lilly is going after Pfizer on the issue of QTc.

Key Findings



H A R P E R

b Skeptical Experts

- In general, physicians in this group feel that this information contained in the DMT piece is good, but they are somewhat confused by the intentions. They feel it is too simple for them, yet too complicated for their patients.
 - *It's a little elementary for a second year medical student.*
- The reactions by this group is very similar to those expressed by other segments. They feel it is most likely to come from Lilly in an effort to inform physicians to be aware of the potential of diabetes. Coming from Janssen, it is seen as more of the same, but coming from Pfizer it is seen as a defensive move against Lilly's attacks on them.

Key Findings



H A R P E R

h Selective Treaters

- This group feels stronger than other groups about being involved with patients medical treatment. They are not treating their medical illnesses, but they are “collaborating” with PCPs in order to feel fully informed. In fact, a majority also indicate that they are conducting baseline blood tests.
- Weight gain is seen as a significant issue for these physicians, and some are tracking the weight of patients who are taking certain medications – Zyprexa, Depakote, lithium, and Paxil. These medications are also seen as potentially inducing diabetes as a result of the weight gain.
- Although most respondents are seeing Lilly reps, they indicate that there is not much being done to address the issue of weight gain.

Key Findings



H A R P E R

b Selective Treaters

- Similar to the High Flyer segment, this segment feels that the DMT piece has been developed for patients. Once again, they feel that it is too basic for physicians, but they would encourage a piece geared toward patient education.
- Unlike other segments, this group believes that this piece is more likely to come from a competitor of a product in order to promote one medication over another.

Conclusions and Recommendations



H A R P E R

- ① Psychiatrists do not feel that they are equipped nor are they interested in monitoring or treating diabetes. They do, however, want to be informed about the issue in order to be fully prepared to help and educate patients.
 - Any information going to psychiatrists about diabetes should not have a focus on monitoring and treating the illness.
 - A piece for physicians with an educational slant should not be too basic – it may be seen as offensive. The best way to educate may be to appear to be educating patients.
- ② Because of their positive experience with the medication, psychiatrists are anxious for answers and solutions to some of the barriers to prescribing Zyprexa – weight gain being the biggest.
 - They need the Healthy Solutions program to offer their patients.



Conclusions and Recommendations H A R P E R

① Psychiatrists do not see treating diabetes the same as treating a side effect with medications – they see it as inducing an illness, and it is very scary. They think about the complications associated with the illness, which can lead to death.

- Lilly may consider ways to make diabetes less threatening to psychiatrists.

① It is clear that very few physicians in this research have heard the comparable rates message. Most find it very easy to believe that the incidence of diabetes is higher with Zyprexa because it is seen as inducing obesity in some patients, which is a risk factor.

- Reps need to be addressing the issue of weight gain with Healthy Solutions and delivering the “Comparable Rates” message.



Conclusions and Recommendations H A R P E R

- ④ Coming from Lilly, the DMT message, by itself, is seen as “owning up” to the connection between Zyprexa and diabetes. This “owning up” is likely to lead to positive equity for Lilly, but it could also bring light to an the issue that did not exist for many. It may send the message that this is something they should be concerned about with Zyprexa.
- Any information and education regarding diabetes may be more effective being presented in conjunction with the “Comparable Rates” message. This approach may not create the same positive equity as “owning up” to the issue will, but it may create some goodwill for the effort of educating physicians and patients.
 - It is difficult to say if this approach would be more appropriate with certain segments as the two messages were not tested together.