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### Why the Life Sciences Industry Is Avoiding Wading Into the Social Media Pool, and How Companies Can Prepare for the Inevitable Deep Dive



BY D'VORAH GRAESER AND HELEN C. LIEBELT

**W**hile some life sciences companies have cowered in the face of social media, one company, Sigma-Aldrich, has been fearless. The \$2.5 billion-a-year life sciences and technology company posts “This Day in Chemistry History” facts regularly on its Facebook wall, tweets announcements from the @SigmaAldrich Twitter handle, and hosts a handful of informative videos on its “Sigma” YouTube channel. The company even monitors a “Sigma-Aldrich Friends and Family” network on LinkedIn for employees, alumni, and friends.

For the general public, this is no revolutionary feat. For the life sciences industry, however, Sigma-Aldrich is an anomaly.

Facebook, Google+, Twitter, LinkedIn: We were introduced to these companies as individual internet browsers, and they were presented as new ways for people to communicate. Now, however, social media’s scope has moved beyond person-to-person, to businesses, brands, and industries. Over the last few years, the corporate world has amassed valuable social media real estate within these networks to try to communicate with their customers and market to new ones.

The life sciences industry, though—from the providers to insurers and drug manufacturers—has avoided the social networks. These businesses have gone as far as maintaining quality websites and now are shifting to advanced technologies in electronic medical records, but for a multitude of reasons, they have intentionally stopped short of participating in social consumer conversations.

This, however, is not stopping the patients and prescription users of the world from finding information and sharing with others over social networks. The pub-

lic takes to the web every day to self-diagnose their ailments, find second opinions, and discuss their reactions to different medical treatments and devices with others. And while they chatter on Twitter, Facebook, and other forums, the life sciences industry—with the exception of Sigma-Aldrich—stays mum.

It is easy to blame our litigious society for drug companies’ hesitancy; however, the real reasons go much deeper than the fear of being sued.

One of the primary forces holding the industry back, or, at least, doing very little to encourage forward progress, is the Food and Drug Administration. The

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FDA made no remarks about social media usage until December of last year, when it proposed guidelines for medical firms already using, or hoping to develop, social media campaigns. The short counsel only focused on tips for drug companies “responding to unsolicited requests for off-label information” regarding treatments, leaving the industry more perplexed and misguided than before.

The only piece of the FDA’s guidance that appeared emphatic was the warning that “medical or scientific personnel independent from sales and marketing departments” should be the ones charged with any social media content mediation. There is no clear answer as to whether this suggestion becomes anything more than a policy recommendation.

Aside from piling it on the FDA, there are several main reasons social media has been slow to get off the ground in the life sciences industry.

### **Problem One: Social media strays from medical products industry’s preferred methods of communication.**

The FDA and the organizations it governs are conditioned to using a one-way transmission of information from themselves to the public. The tradition has been for them to collaborate and decide, draft, and edit a set of guidelines, instructions, or directions, then send them to the public. With social media, though, companies forfeit some of that control. Patients can post questions on Facebook about a particular drug or tweet to their followers about their personal treatment. That implies a two-way discourse between the public and the businesses and associations they are interacting with.

### **Solution: Listen to what patients are saying about your product online.**

Start monitoring what’s being said about your therapies online.

Medical device and pharmaceutical companies need to be extremely cautious when aggregating and reacting to reports of product complaints or side effects on branded forums, websites, and social media accounts. The FDA does, however, have regulations in effect that lay out the steps companies must take in the event of such posts (see <http://www.fda.gov/BiologicsBloodVaccines/GuidanceComplianceRegulatoryInformation/Guidances/Vaccines/ucm074850.htm#SPECIALREPORTINGSITUATIONS>). For example, questions may arise if a drug manufacturer does not have a set policy for responding to inquiries/comments on external sites—which is why internal policies are crucial before incorporating any kind of social media into the business plan.

At the very least, companies require standards and regulations that uphold consistent monitoring across any affiliated websites, from blogs and Twitter to YouTube channels. With these measures in place, it becomes less stressful to respond to patients and end users accurately and effectively.

### **Problem Two: Many drug companies are publicly traded and act as such.**

Years of operating under close governmental oversight have instilled one general rule of thumb in life sci-

ences companies: If there are no laws that explicitly allow something, assume that it is illegal.

Between the obligations as a publicly-traded company and one subject to the rules and regulations of the FDA, medical product companies are conditioned to always act on the safe side.

One might guess that with the number of product recalls and safety issues on the top of government and consumers’ agendas, the FDA would have more to say. But as part of its own culture, the FDA, again, backs down from direct conversation with the end users of the treatments and products it regulates, instead communicating directly with industry.

Sooner rather than later, this will change. The growing number of patients who already chat about their treatments online (even when the related drug company does not have a branded Facebook profile) will push the FDA to speak and deliver long-sought-after answers.

Take Humira (adalimumab), the injectable tumor necrosis factor (TNF) inhibitor manufactured by Abbott. Humira has a website for the one-way flow of information to patients, including the option to contact a “mentor” for a more direct conversation and a phone number for reporting negative side effects to the FDA. The site, however, does not offer a patient discussion board or social media communities. Humira users turn to channels like Twitter to converse instead. Over a 24-hour period, 40 separate users tweeted about the drug, including adverse effects—illustrating that patients are getting and sharing information wherever they can.

### **Solution: Monitor any confidential company or patient information being exchanged online.**

Health care companies are concerned about the kind of clinical information shared online for good reason; violations of HIPAA, the Health Insurance Portability and Accountability Act, including posting personal health information online, can cost a firm millions of dollars in fines. Whoever curates the firm’s social media account (whether they are scientific or marketing professionals) should act with an abundance of caution when interacting with patients or other professionals via social networks. Any questions about whether or not a published (or drafted) post breaks regulation should be directed to in-house attorneys immediately. A handful of companies combine some or all of the following steps into their social media policy for staff and partner content: a terms of use agreement, confirmed review of the organization’s or hospital’s HIPAA policy, and a strict template for content submission that is reviewed by trained compliance employees.

### **Problem Three: Companies are wary of saying too much.**

The nature of drug and medical device companies’ business is very sensitive—whether it is related to product information or patient health records. Whenever a public safety question arises, such as reported adverse side effects, it is required that those claims be seriously investigated. These are the times when companies and the FDA collaborate on the exact announcements they want the public to be aware of. Due to standing FDA rules regarding the dissemination of side effects or off-label prescription use information, medical companies hold that eliciting too much is deceptive. And since the FDA holds companies responsible for all information

they release, social media activity becomes more threatening.

**Solution: Know what claims your employees and partner health care professionals are making about your product online.**

Anything from a Google pay-per-click ad or grouping of tweets can spread misleading claims about a new drug or treatment to the public, potentially resulting in an FDA warning or violation letter. Conversations about products between company employees, patients, and industry professionals also must be monitored and noted closely.

Medical companies can turn to guidance from the FDA's Office of Prescription Drug Promotion (OPDP), formerly the Division of Drug Marketing and Communications (DDMAC), for tools for safe social media use. Adhering to the specific regulations relating to direct-to-consumer (DTC) patient advertising can significantly minimize internet risk. Of over 90 warning and notice of violation letters issued by DDMAC in 2011 and 52 in 2010, only one references a social media concern. Thus, even with the FDA's tight-lipped attitude, there are resources out there for companies confident enough to apply them.

**Problem Four: Most organizations do not see their purpose as managing *diseases or chronic conditions*.**

While online communities exist to share experiences with chronic conditions and diseases, drug companies do not tend to participate in the long-term progress of patients' conditions. Drug and medical device companies can view themselves as removed from the intertwined steps of preventive care, treatment, and recovery—perpetuating their aversion to one-on-one conversations with their end users.

One exception to note here is Sanofi, which provides a diabetes Facebook page for its U.S. patients. The effort is incomplete, however, with the majority of the page's content provided by Sanofi. Between Feb. 3 and June 16, 2012, only two posts were from patients, and the rest were from Sanofi itself—keeping in line with the usual pattern of information moving uniformly from company to patient.

**Solution: Open up the conversation with relevant content and a recognizable voice.**

To loop patients into the social media dialogue, the material provided must be accessible and interesting—no medical jargon. Life sciences companies need to adapt their language and messaging for a broader audience. Creating in-house guides with sample content and buzzwords to incorporate ensures that your social media "voice" is consistent across channels, and cohesive if multiple employees are running the same accounts.

As far as what to post, it is best to strike a balance between company and industry or thought-leadership pieces. Recall information, product release announcements, and news placements are necessary, but not quite creative. Linking to articles about relevant treatments, studies, or infographics maintain that optimal balance, drive traffic, and promote discussion. Sigma-Aldrich's Facebook profile is a good model to look to for constant activity and equal amounts of internal and external content.

**Problem Five: Organizations are not staying abreast of social media regulations, policies, guidelines, and best practices related to the industry.**

While there is an admitted lack of current rules and enforceable measures for medical companies to follow when implementing social media measures, these companies have not prioritized the process of seeking out other instructive resources or staying up to date on policy announcements. This unwillingness to aggressively seek out information, or be proactive about social media research, adds to the stagnant nature of social media in the life sciences.

**Solution: Look to external sources for supplemental information and temporary guidance.**

While pharmaceutical and medical device companies have little direction from the FDA concerning the use of social media, the agency has indicated that more guidance documents will be published. By building a social media strategy platform that accommodates revised and new regulations, policies, and guidelines, organizations can keep a healthy pace with the changing social media regulation landscape. Social media and legal experts often point out that pharmaceutical and medical device companies should draw from the Securities and Exchange Commission, the U.S. Federal Trade Commission, and the National Labor Relations Board as they develop their social media policies:

- The Securities and Exchange Commission requires that financial advisers create and follow a social media policy prior to engaging customers online, and content from these policies could be leveraged for your pharmaceutical or medical device organization's policy.
- The U.S. Federal Trade Commission published *Guidelines Concerning the Use of Endorsements and Testimonials in Advertising*, found in 16 C.F.R. Part 255, which addresses marketing products and services to social networks.
- The National Labor Relations Board sets policies concerning employee privacy and use of social media.