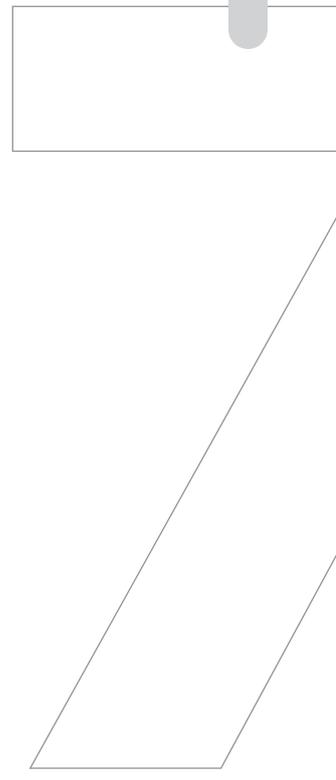


**SPRING 2013**  
—  
VOLUME #02  
EDITION #06

**OUR OPPORTUNITY  
TO RETHINK THE  
HEALTH EXPERIENCE**

—  
Our point of view



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IN HEALTH

## **OUR OPPORTUNITY TO RETHINK THE HEALTH EXPERIENCE**

—

Our point of view



OUR  
OPPORTUNITY  
TO RETHINK  
THE HEALTH  
EXPERIENCE

—  
Our point of view



# RETHINK THE HEALTH EXPERIENCE

## HEALTH IS OUR MOST INTIMATE HUMAN EXPERIENCE.

Throughout time, the sick and the well, patients and doctors, nurses and caregivers have used the best available means to seek out the most effective answers for maintaining and improving health and wellness.

# NK

Today, and moving forward, we seek answers and support in entirely new ways. Health is in the midst of a shift never before seen. It's being driven by new technologies and by innovations in medical science and practice: by ageing populations, chronic health conditions, and demanding patients; by competing healthcare providers and competing philosophies of providing healthcare. Most urgently of all, change is being driven by economic forces.

Whether it's the market-driven system of the United States, or the socialised medicine of United Kingdom, change is unavoidable and necessary. The crunch question for all health industry stakeholders is who is just reacting to change and who can shape it?



On the front line, physicians, nurses, and other healthcare professionals are too busy just getting through their work to shift their focus to the bigger pictures of healthcare. At best, they adapt to the changes affecting their field and make the incremental changes that they must.

Both public and private health insurance systems are on the back foot. Money is getting tighter. They have to balance income, costs and coverage to keep things sustainable and as fair as possible. Politicians and healthcare managers are under pressure to get systems working more effectively without increasing budgets. Pharma companies have to generate enough cash to develop new therapies, just at a time when many drugs are falling off the patent cliff.



OUR  
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06

*"The key to  
this evolution is  
digital technology"*



CONT

Marketing and sales force budgets are being squeezed, which makes it harder for pharma companies to differentiate their brands and prove their value to healthcare professionals. And entirely new players, from lifestyle brands to telecom operators, retailers to car manufacturers, are entering the new health tent that is getting bigger every day.

The results that all these stakeholders achieve are scrutinised intently and debated daily across the media. In this environment, health marketers are lucky; we have insider insights into the everyday reality of healthcare stakeholders, but we can also take outsider perspectives. We understand the intricacies of how healthcare stakeholders and systems interact, and we look at what is happening outside healthcare too. We are free to create new ways of putting all these elements together to help our clients.

Amid all the changes in healthcare, we've been looking hard at how we too can change. As health marketers, how can we apply our experience and expertise in communication to change what we do and provide greater value?

How can we harness developments in and around healthcare to foster better business for our clients and better outcomes for patients?

We intend to drive the evolution of health marketing far beyond its traditional forms. We are looking to a future in which our value is helping to provide helpful information, service and support critical points in the health journey. The key to this evolution is digital technology.



OUR  
OPPORTUNITY  
TO RETHINK  
THE HEALTH  
EXPERIENCE

—  
Our point of view

08

*Chemical*

*Biological*

*Mechanical*

*Optical*

# INNOVATION

Before the 21st century, the first big innovations in healthcare were optical; microscopes enabled researchers to see into tissues and micro-organisms. Chemical technologies improved healthcare with antiseptics and later, with chemotherapy drugs. Biological science resulted in vaccinations and antibiotics and mechanical specialists have delivered steady improvements in surgical techniques and implants.

Digital technology is the newcomer this century. It has spawned transformational applications on virtually every level of scale, from the microscopic to the global. It is already crucial in virtually every domain and specialty of healthcare; it's been adapted for everything from diagnostic imaging and laparoscopic surgery through drug design and clinical trial analysis to patient compliance and online support groups.

In group care practice and hospitals, digital is fast becoming embedded in systems of care, from diagnostics to devices, to electronic medical records. It is increasingly providing both the channels and the formats for systems of professional interaction between practitioners, providers and other stakeholders; even communications between healthcare professionals and patients are becoming more common thanks to digital.

Even though digital is everywhere, it is still so new that most people are only just beginning to use it beyond the basics of email, social networks and online content. Most people have very little idea of what digital technology already does, let alone what it can be made to do in the future.

# HEALTH IN THE DIGITAL AGE

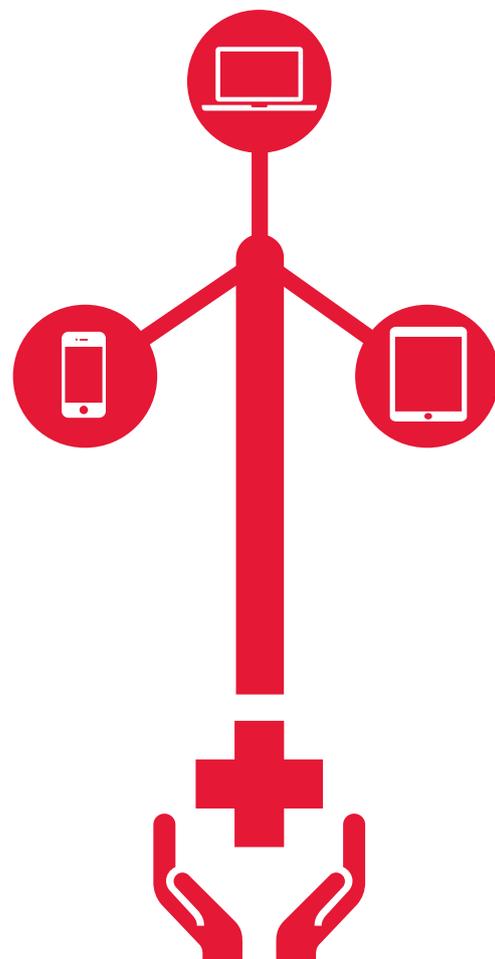
## CONNECTING DIGITAL

Digital technology drives devices and generates data; it creates the links between data, devices, and people; it provides the channels of communication through which people can make sense of it all and move towards what they seek. We now all look for answers and support through interactive technology in the digital world. We are learning to find our way through combinations of humans, data and devices.

That is alluring in theory. In practice, the huge amounts of data and communication being generated by digital technology can be overwhelming; the world's digital information is doubling every two years. This is a daunting prospect for IT professionals, let alone for the great majority of people.

It is a lot tougher for healthcare professionals. They struggle with the same kinds of IT basics as everybody else, such as remembering passwords. They also have to deal with higher levels of data security with expensive new technology and with protocols for using proprietary digital systems that are continually evolving. And they have to do all this amid the normal work of providing healthcare.

We aim to use our expertise in communications to help our clients use emerging technologies more effectively. Our mission is to help them harness digital and data to create new levels of connectedness and intimacy with their customers.



*“The paradigm shift we have in our sights is about far more than online or offline. It is about using all types of digital technology to communicate, service, and influence more effectively in emerging healthcare ecosystems.”*

## FROM BASIC DIGITAL TO INTEGRATED ECOSYSTEMS

<sup>1</sup> [“To Market Niche Drugs, US Pharma Goes Online” June 2012; \*emarketer.com\*](#)

Examples of digital technology in healthcare communication range along a spectrum from basic to highly integrated. At the rudimentary end, digital has simply been grafted onto traditional ways of communicating; printed collateral is turned into “brochureware” and made available in digital devices and online.

A little further along the spectrum, healthcare has harnessed some of digital’s capacity for interaction, but mostly in the form of Q&A interactions with experts or forums for peer-to-peer communication. One step further from this are digital diagrams and animations and interactions that would never have been possible in traditional formats.

For example, the InnerBody website provides a combination of visuals and text about the different systems in the body; there are animated visuals and text showing virtually everything related to health, such as the effects of smoking on heart disease and how diabetes disrupts normal functioning.

Nearer the integrated end of the spectrum are self-monitoring systems and ambient health devices that enable consumers, patients, and professionals to become more actively engaged in day-to-day health maintenance and care.



A recent report on the US healthcare and pharmaceutical industry summed up the current state of play: “Most pharma marketers see digital marketing’s potential but remain rooted in old ways of doing things. Though adoption is uneven, a paradigm shift is under way as campaigns slowly but steadily migrate online.”<sup>1</sup>

The paradigm shift we have in our sights is about far more than online or offline. It is about using all types of digital technology to communicate, service, and influence more effectively in emerging healthcare ecosystems.

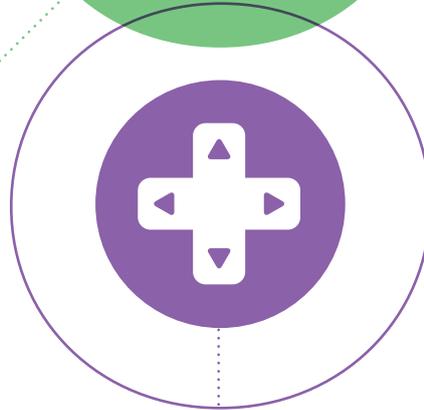
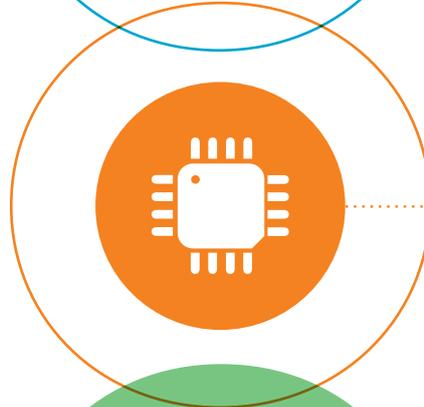
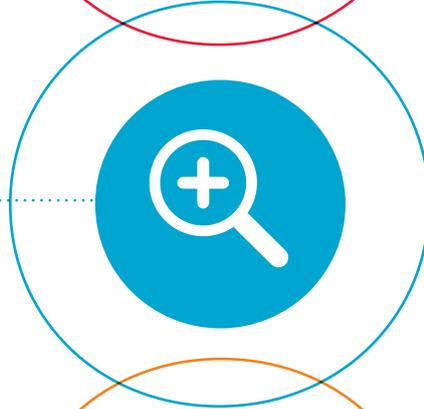
# NEW HEALTH CARE

# ECOSYSTEM

PLACES ●

DEMANDS ●

● PEOPLE



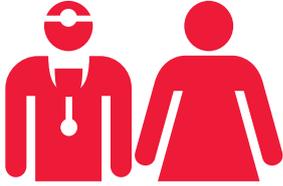
●  
GAMIFICATION

Just like the ecosystems in nature, existing healthcare ecosystems comprise complex interactions between many different elements. Now, new digital technologies are adding many new elements and many new interactions, creating new healthcare ecosystems.

It is in these new ecosystems that future healthcare journeys will take place. To understand the new ecosystems, we need to identify the key elements.

● TECHNOLOGY

# YS TEMS



## PEOPLE

More types of healthcare professionals are now involved in primary care: not just general practitioners but also nurse practitioners and nurses. Some primary care practices are evolving into one-stop health centres offering wider ranges of primary care services under one roof. In many cases, pharmacists too are being encouraged to play a more active role in primary care dealings with patients; in fact, there are more visits to retail pharmacists than to doctors' surgeries.

As always, primary care professionals of all types are still seeing patients presenting conditions. They're also increasingly dealing with the "worried well" who have seen medical shows on TV or checked out their twinges on the internet; medical student syndrome is no longer confined to medical students.

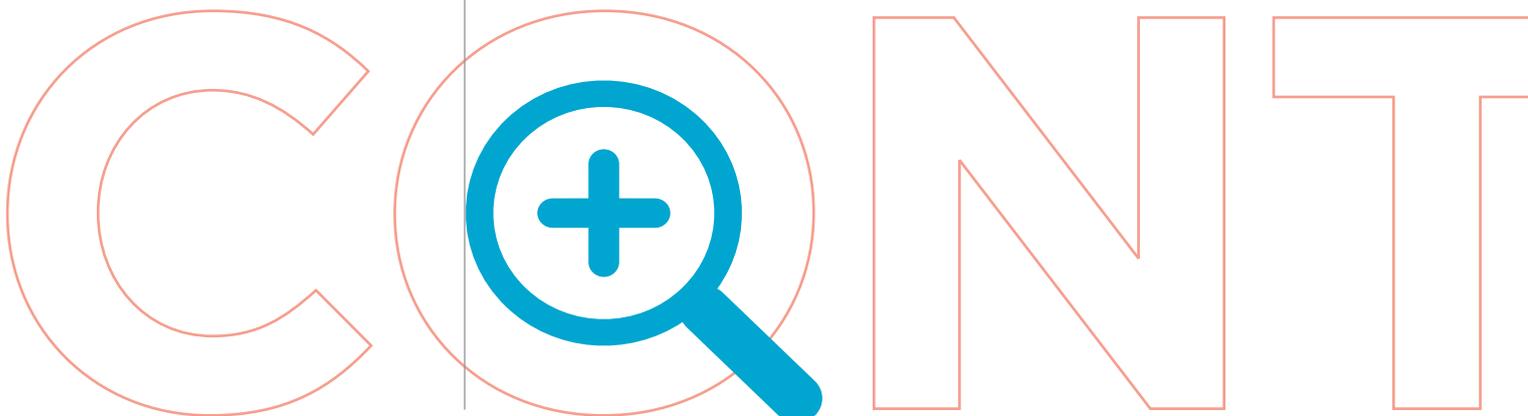
Beyond those people directly involved in primary care dialogues are people who influence them or may be influenced by them: health enthusiasts who pay close attention to it all, and the unworried well who are just fine, as far as they know. Everybody, including healthcare professionals, has been touched and influenced in some way by media coverage of health issues. Technical terms such as cholesterol, blood pressure and reflux have all become part of popular culture.

## DEMANDS

Healthcare now has to do a lot more than it used to, not least because more people are living longer. As always, there are acute conditions that need urgent care. There are also many more chronic conditions such as atrial fibrillation that need long-term care and monitoring. Increasingly, there are also terminally ill patients requiring palliative treatment and elderly people needing specialist care.

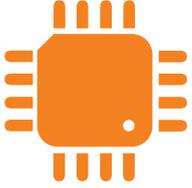
Healthcare is now increasingly factoring in preventive measures to keep people in good health for longer. Cutting across all types of care is long-term tracking and monitoring. A lot of this is carried out by healthcare professionals, but increasingly patients and consumers want to do their own monitoring.

This does not just apply to chronic conditions such as diabetes where patients track their blood sugar levels; consumers are increasingly looking for ways to track their weight, food intake, heart rate blood pressure and activity levels.





## TECHNOLOGY



Some areas of health have been pioneering in technology, especially digital technology; other areas such as medical records have lagged behind. Smartphones and other consumer devices are innovating rapidly to offer health-related functionality. Pharma companies, media companies, retailers and even lone developers are just a few of the providers in this field.

As in other areas of life, social media is becoming a significant channel of information, service and influence. Information and opinions are flowing between consumers, patients, healthcare professionals and brands. Understanding that digital is embedded in every aspect of our lives - from the car that checks your cardiac activity, to the toothbrush that talks to your dentist, to the diet plan you share with your supermarket - is vital to understanding the roles that brands can and will play in the lives of potential customers and influencers.

## PLACES

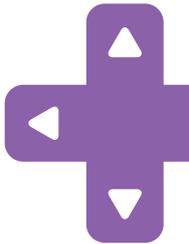
In the pre-digital days, everything had its place. People did their work in the office, the workshop, or the factory; they watched TV at home; they made telephone calls from a call box or a tethered landline; and they consulted about their health at the doctor's surgery or in the hospital.

Now, people work anywhere: in coffee shops, in their garden, in the car, in bed; they watch TV and make phone calls anywhere. Health too is no longer confined to a particular time or place. People can self-monitor and pull in health information online from anywhere. As for push communication - health tips, health warnings and the like - it is anywhere and everywhere including supermarkets, gyms, convenience stores, waiting rooms and public transportation.

## GAMIFICATION

One of the most improbable but promising innovations in healthcare is the introduction of gaming elements to increase patient interest and engagement. Digital technology has created a huge appetite for gaming in general. There is plenty of potential for gamifying all or parts of healthcare journeys.

Whether it is a reward system for young diabetes patients to test themselves regularly, or pedometer challenges to get overweight people to be more active, gamification creates numerous interactions that are totally new nodes in patient journeys. The structure of the games and the interactions provide some of the most promising channels in new healthcare ecosystems.





**NEW  
HEALTH**

# JOURN



Compared with even a few years ago, all patient journeys are now extensively touched by digital technology. All patient journeys are now new healthcare journeys. This is clearly the case for patients who use computers and mobile devices, but it is also increasingly true even for patients who do not know a keyboard from a touchscreen.

In the emerging new healthcare journeys, HAVAS LYNX aims to design integrated programmes that connect at multiple points on the healthcare journey. Delivered through smart technologies, our standard of action has significant benefits in terms of health outcomes, cost control, and business growth.

# EYS

## STAGES AND NODES

Digital is already present at every stage of the traditional patient journey.

### CONSULTATION

The journey starts when a patient sees a GP, whether for a routine check-up, follow-up or to consult about a health issue. At this point or before, the patient needs to recognise symptoms and be able to articulate them; the GP needs to discuss the symptoms and examine the patient.

*Patients are increasingly researching their symptoms online before they consult a GP. This research influences how the patient talks about their symptoms, what they make of them and which brands they associate with them.*

### DIAGNOSIS

The GP has to evaluate their examination findings in the light of the patient's medical history and decide whether there is a new condition, an unchanged pre-existing condition, or a pre-existing condition that has changed. The patient needs to learn the name, nature and implications of their condition.

*GPs have to deal with every possible condition walking through their door. They are increasingly making use of digital resources to help them interpret symptoms and inform their diagnosis.*



*"Patients are increasingly researching their symptoms online before they consult a GP."*

## TREATMENT PLAN

The GP has to decide on treatment options and discuss them with the patient covering likely effectiveness, length, cost, side effects and compliance needs. The patient needs to understand these issues enough to make an informed decision.

*For many common conditions, GPs have preferred plans shaped by habit, protocols and standards of care. In a changing healthcare ecosystem, as they consult online resources for diagnosis, they may come across new information that nudges them to try different treatment plans.*

## THERAPY

In most cases, the GP fades into the background in this phase. It is down to the patient to comply with the course of therapy, to track their own progress and to arrange follow-up visits as necessary.

*This is a part of the healthcare journey where integrated information, service and influence has plenty of scope to add value by encouraging adherence, tracking progress and supporting the patient.*



## RECOVERY

With some chronic conditions (e.g. diabetes, autoimmune diseases), full recovery of the patient is not possible; the goal is to treat an acute episode and manage the condition. Ongoing monitoring by the PCP is usual with these cases. With acute conditions (e.g., infections), the goal is to get the patient back to normal health. In all cases, the objective is to manage the patient back to optimum health.

*With chronic conditions in particular, integrated information and influence will deliver outstanding value by encouraging adherence, tracking progress and supporting the patient.*

## MAINTENANCE AND PREVENTION

For patients with chronic conditions, the journey never ends; in the absence of a total cure, the ideal outcome is no further acute episode. For patients who have experienced an acute condition, the journey may seem to have ended with recovery, but the ideal is to prevent subsequent occurrences of acute illness.

## THE JOURNEY IN ANOTHER DIMENSION

In addition to the stages on the traditional patient journey, digital is creating new entry points, new nodes and potentially new types of journeys – or new ways of moving through the stages. In some of the earlier stages such as consultation and diagnosis, there will be non-traditional inputs, such as surface sensors. For example, wearable cardio sensors and recorders are already in use for patients with suspected arrhythmia. These and other types of sensors, such as ingestibles, will become increasingly powerful and cost-effective. They will forever change the nature of the doctor-patient dialogue.

When smart devices are involved more through time, there will be ongoing diagnostic evidence available. In some cases, these feedback devices will enable instant diagnoses and allow for the immediate inception of treatment regimens that will be synced with personal devices to allow tracking and reporting over time. This may well mean that parts of the health journey will not need to take place in the doctor's surgery; decisions about what to do next can be made wherever the patient happens to be at the time.

This does not imply their doctors are becoming superfluous. Rather, they will be engaged in an always-open, longitudinal consultation; a steady flow of information will help them track and manage their patients. They will be more connected, but in the background, to promote better adherence, better outcomes and to make targeted interventions.

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HAVAS LYNX offer a full array of agency capabilities — branding, advertising, creative, promotion, communications — constellated around an expansive core of digital marketing capabilities, including technology platform development, online media, mobile and social. Because we do not simply believe that online is the future, we see it as just one part of a much bigger digital ecosystem that is evolving for health.

Easy-to-use sensors and meters are forming the basis of a digital nervous system that communicates far beyond the body. Sensors, smartphones, smart screens, tablets and touch surfaces are creating critical new opportunities for interaction and data transfer. Ever since digital began to figure in healthcare, our teams have been helping brands connect with healthcare professionals and patients. We have been dedicated to finding ways of creating links between people, devices and data. Over the years, we have seen more and more applications of digital technology in healthcare. Healthcare professionals, patients and consumers have increasingly embraced digital in their search for greater health and wellness.

This has already created webs of complex and important relationships. As more people turn to digital, the relationships between all the parts will grow more complex by an order of magnitude, creating vast numbers of touch points. Traditional models and techniques of healthcare marketing no longer fit. The old playbooks and frameworks need to be updated to create a new role for marketing in health. In many respects, it will look like something different. We seek to develop an effective and enduring health narrative, built for distribution in a multiscreen world.

Our work transcends the marketing rulebook by not just understanding, but leveraging the complex relationships that drive the search for better health and wellness between individuals and their communities, their digital devices, destinations and data and ultimately, with the people next door or on the other side of the world who can best help them achieve their health and wellness goals.

We understand how those links empower the pursuit and realisation of better outcomes for health and wellness, and the business results that success makes possible. Digital is becoming the indispensable interface for understanding health issues and treatment needs, for professional or patient-run support groups and for brand research. From now on, it will be the main means through which people solve their healthcare problems, from making appointments to monitoring conditions. We understand how companies and brands can align themselves as key links between those searching and working on better health, and the answers and experiences those brands are uniquely equipped to provide.

HAVAS LYNX is aiming for nothing less than digital transformation of the health experience. We are looking to leverage our global capabilities in marketing strategy, content, design, technology and media to identify challenges, promote innovation and create powerful new ways to help our clients make the most of the rapidly evolving opportunities in health.



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