

RESEARCH DESIGNS	WHAT IT DOES	WHAT IT IS USED FOR	WHY CHOOSE AXESS RESEARCH
KOL interviews	6 to 12 key opinion leaders (KOL) over the world are interviewed in English and audio taped on the phone or face to face through an in-depth non structu- red or semi-structured interview guide.	At the top of the pyramid of influence, thought international or regional opi- nion leaders provide anticipating and invaluable information about our client drugs and the existing or coming alter- native treatments. At the early stage of a product life cycle management, this information certainly must be integrated in the building of a brand value proposal.	We are experienced in identifying, recruiting and interviewing these highly knowledgeable spe- cialists. This small, very targeted and very sensitive research must be carried out centrally by highly skilled interviewers. When our client requests our support on this type of research, a senior research managers and the research director will centralize all the interviews and propose the client to anonymously listen the interviews. We will make the difference in our capability to deeply understand and manage these highly knowledgeable respondents and in writing a synthetic and actionable report.
Test of concept (Also called Demand Study)	A new or upgraded pro- duct X (drug or device) is described to iden- tified potential pres- cribers, payers and/or users. Respondents are asked about their level of interest for the new concept and willingness to adopt product X. When needed, pricing can be integrated in this type of research.	Before any heavy investment in R&D or cost for acquisition be invested, this is typically the go / no go corporate research which must be performed. Return on investment of test of concept is obvious. For products which potential has already been demonstrated, test of concept measures, as accurately as possible, the market potential of product X, fix the optimum pricing when needed and identify the patient priority targets.	Our great experience of tests of concept allows us to benchmark the stated level of interest and willingness to adopt and soundly recommend a go or no go when requested. For market potential assessment we usually propose a complementary combination of patient cases and conjoint analysis. When pricing issue is applicable, our expertise in pricing is recognized (see pricing study).
Pricing study	Pricing research cal- culates the optimum selling price that should be fixed as the objec- tive price in order to maximize the product gross margin. Pricing research should also integrate the related pricing policy and level of services.	Each mini-group iteratively improves and fine-tunes the output of the previous group. Evolutive mini-groups are used in messaging study in order the build up a convincing and adapted sales represen- tative script.	Very early, market research professional has observed that asking upfront the price to an hospital pharmacist or a physician would be ready to pay for a product was not the appropriate approach to determine the optimum price for a product. When a product has clearly identified competitive alternatives, we believe that Conjoint Analysis is the state-of-the-art technique to calculate the optimum price that optimize a product gross margin. When a new product has no clearly identified alternative offer, conjoint analysis can miss the product real value. In this case, we believe the best approach is EVE approach (Economic Value Evaluation). We also conduct alternative methodologies such as the spontaneous request of price willingness to pay such as the Price Sensitivity Meter (PSM) from Van Westendorp and the Gabor Granger technique. Axess Research has contributed to the pricing policy of dozens of hospital products and medical devices. Our clients can testify the relevancy of our pricing estimations. We also run the most innovative software allowing to use the most adapted conjoint analysis technique (standard conjoint, CBC or ACA) face to face or on-line.



RESEARCH DESIGNS	WHAT IT DOES	WHAT IT IS USED FOR	WHY CHOOSE AXESS RESEARCH
Visual Testing (also called Ad Testing)	A healthcare communi- cation agency creates 2 to 6 alternative brand visuals, which often include an image, the brand & its logo, a headline and tag line and the laboratory name & logo & signa- ture. The visual testing identifies the most efficacious visual to convey the expected emotional and functio- nal benefits as defined by the product value proposal.	A brand visual has to be global because international exhibits and Internet is glo- bal. A brand visual should be maintained for a minimum period of 5 years in order to capitalize and gain recognition. As a result, the brand visual selection is often a corporate decision with consequences worldwide for many years. And it seems important to verify that the selected visual effectively conveys the brand expected messages and emotions.	We believe that communication through creative artworks such as brand visuals address both the left brain (analysis) and the right brain (emotions) of respondents. Psychologists and neuroscience experts explain that verbalization is an analytic process delivered by our left brain. A visual testing that would only use direct questioning would be unable to catch the emotional impact of tested visuals such as pleasure/displeasure or emotion arousal. Axess Research has developed a visual testing designed to both evaluate the rational and emotional impact of a brand visual. We use direct questioning, flash memorization tasks and visual analog scales (VAS) published in scientific journals. Visuals also triggers very emotional reactions internally. This often makes internal consensus difficult to obtain only based on qualitative research. We believe that results based on a projectable sample size (from 50 to 200 respondents) best guaranty the internal consensus on the best visual to be selected. An optional preliminary in-depth qualitative phase will be proposed to help the communication agency, based on physicians spontaneous live feedbacks, to fine-tune their existing creative propositions and imagine some additional options.
Messaging study	The messaging study helps the marketing managers to build the adapted and convincing product messaging. Based on the laboratory initial selling script, 3 mini-groups of highly knowledgeable health- care professionals build iteratively an adapted, convincing and diffe- rentiating selling script.	Marketing managers and communication agency are highly skills to build effica- cious selling script to present a product features & benefits and clinical studies. But how to be sure that we find the right words used the right way to convince our target audience? Messaging study propose to product managers to build their product selling script in collabo- ration with their target audience. The objective is to build, through iterative workshops called evolutive mini-groups, the ideal content and wording that will satisfy both the marketing team and the healthcare professionals.	The animation of the healthcare professionals iterative workshops is crucial: The moderator has to assist the healthcare professionals in a literary and selling exercise which is very far from their daily practice and natural skills. We need to introduce the right level of input to make them produce the best messaging, making sure they keep using their own words and logic. We have developed a study design and templates that assist step by step the healthcare professionals to build a selling script. Our methodology have delivered reproducible and cross cultural results building robust and convincing messaging.



<b>RESEARCH</b> DESIGNS	WHAT IT DOES	WHAT IT IS USED FOR	WHY CHOOSE AXESS RESEARCH
Attitudinal segmentation	The attitudinal segmentation identifies and describes homogeneous seg- ments of healthcare professionals who share the same attitudes (what they think). Attitudinal segmentation allows a laboratory to segment his audience and tailor his product messaging. This is commonly achieved by a series of agree/disagree agree-disagree scales or ratings and a hierarchical clustering.	The attitudinal segmentation cross over a standard customer targeting and goes beyond. Based on customers attitudes, attitudinal segmentation determine how to adapt the communication to some clusters of customers. To simplify, standard targeting tells you who you should visit in priority and attitudinal segmentation what to tell. By tailoring the offering (communication & related services) to different clusters you are able to more precisely meet the needs of more prescribers, payers or users and consequently increase your market share.	We believe that the capability to identify and reformulate the attitudes which are segmenting and possibly influencing the brand preference through an in-depth preliminary phase is the first crucial step for a successful attitudinal segmentation. This demands a deep knowledge of the drug or device category and the target audience attitudes. We also think that we can make the difference in assisting our client to implement the research findings. We believe that attitudinal segmentation can increase the sales force efficacy when properly implemented. We often recommend that sales force management be involved in attitudinal segmentation initiative from the very beginning. Most of the benefit from attitudinal segmentation results can be lost because, in practice, sales representatives are unable to reallocate their customers to the identified clusters : We provide to our client a scoring system (similar to credit scoring) which can reallocate customers individually to the clusters. This scoring system simply invites the sales representative to complete a few agree-disagree scales or ratings based on what he knows or what he guesses about his customer. The scoring system can be considered as a learning tool which allows sales reps to know the important questions to ask in order to tailor his product messaging and services offering.
Needs based Segmentation	It is conceptually similar to attitudinal segmentation, but applies to customer needs rather than attitudes. Needs based segmentation identifies and describes homogeneous segments of healthcare professionals who share the same purchase or prescribing drivers. Most needs-based segmenta- tion uses Standard Conjoint Analysis which identifies the individual systems of value from the trade-offs that each respondent makes. Using cluster analysis, this information can be drawn together to identify different segments with similar preferences and needs in a product category.	Needs based segments are typically the most predictable forms of segments as you know what drivers and performance the product has to satisfy to maximize the willingness to prescribe, or purchase. However, because no post-hoc scoring systems can be provided to the sales force, implementation of the research findings into the targeting process can be difficult (see attitudinal segmentation). None- theless you also have the benefit of being able to product a market model or market simula- tion tool using the Conjoint output.	Our expertise in Conjoint Analysis and clustering segmentation is recognized among major pharmaceutical companies. Only Standard Conjoint Analysis provides individual values: We run the most innovative software allowing to field the Standard Conjoint Analysis face to face but also on-line (cost saving).