

White Paper

INTEGRATED DESK RESEARCH

Combining art and science to drive business strategy

YUNUS JALEEL, Director, Commercial Outsourcing Services, IQVIA SURAJ PRASAD, Engagement Manager, Market Assessment Center of Excellence, IQVIA



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EXECUTIVE SUMMARY

Pharmaceutical companies are increasingly reliant on multiple sources of data and information as they try to cope with the growing complexity of a marketplace in which business decisions need to accommodate an ever-broadening spectrum of stakeholders. To compete successfully in this environment, and deliver genuine benefits to patients, health professionals, and healthcare systems, companies need a 360-degree view of market trends and competitor activities.

Information systems are evolving to meet this challenge. Integrated desk research (i-DR) seeks to maximize the value of multiple inputs through structural analytics, pattern recognition and other advanced techniques, along with expert judgment that sifts and prioritizes data according to the context. With its broad range of capabilities and technologies, IQVIA provides a single hub for six key elements that define and differentiate i-DR: IQVIA data assets, non-IQVIA/open-source data, real-world evidence, practitioner skills, pattern recognition techniques, and a sustained commitment to innovation.

By combining traditional desk research with a mixture of quantitative and qualitative inputs, including new information channels such as social media, i-DR practitioners can craft an intelligence mosaic. This can be used as a basis for actionable insights, wellsubstantiated business decisions, validation of existing inputs, or guidance on in-depth research.

i-DR methodologies can be tailored to a variety of business challenges, especially when characterized by ambiguity or where a swift response is needed. The weighting of expert judgment versus quantitative and qualitative inputs, and the way these components are integrated into a framework for generating insight, depends on the nature of the questions posed, timelines, and budgets. In addressing challenges around brand launches, market trends, competitor activity, or investment risks, i-DR uses triangulation strategies to find data patterns that translate information into insight and insight into informed, strategic decision-making.

i-DR will continue to evolve as data sources proliferate and new technologies and methodologies, such as collaborative analytics, emerge to tackle the questions that will inevitably arise in a constantly shifting market environment.

With its geographical reach, extensive data resources, in-market expertise, and capabilities in innovative technology, advanced analytics, forecasting, and consulting, as well as a wealth of smart-creative i-DR practitioners, IQVIA is ideally placed to move information gathering and analysis well beyond secondary data reviews. It is already positioning i-DR as a strategic function of significant value to its clients in negotiating today's multi-faceted pharmaceutical market.

WHAT IS INTEGRATED DESK RESEARCH?

i-DR takes the basic principles of desk research or secondary data review and transforms these through technological innovation; the breadth, accuracy, and timeliness of its data sources; the skills of flexible, expert practitioners; and a depth of analysis achievable only with sophisticated pattern-recognition and triangulation techniques.

As market complexities mount up, so do the ambiguities that must be addressed if business questions are to be answered as comprehensively and effectively as possible. There may not always be the budget or time to do so through more conventional means, such as a full management consultancy exercise. In that case, i-DR can provide a quick and highly focused response to business challenges without losing sight of underlying complexities.

Secondary data research, using easily accessible information as well as more basic pattern-recognition and triangulation techniques, may still be appropriate in tackling elementary business questions. More advanced challenges, though, call for an integrated approach that functions at the highest level of sophistication and insight.

Drawing on the widest possible spectrum of inputs, both internal and external, proprietary and nonproprietary, public and non-public, qualitative and quantitative, structured and unstructured, i-DR turns established methodologies into a true craft. It does so by applying the techniques of creative destruction and relentless innovation to deliver more productive, robust, and strategically advantageous research outcomes.

The inputs could be anything from the client's own data assets to IQVIA's rich store of data on global, country, or category trends in healthcare; syndicated reports; or even social media trends, accessed through tailored channels such as Nexxus Social, IQVIA's cloudbased platform for social media monitoring, content collection, and analysis.

i-DR frames these in the context of specific challenges where inaccuracy, lack or obsolescence of data impede clarity and insight. It uses judgment and experience to determine which sources and types of data will best serve the identified research objective - connecting the dots to deliver the most inclusive solution and point the way to deep-dive analysis or higher-level strategic initiatives.

As the 'i' in i-DR implies, the ability to orchestrate, triangulate, and integrate this broad spread of assets and capabilities is critical if data analysis is to keep pace with a fast-changing and demanding business environment.

IQVIA is ideally placed as a hub for cutting-edge i-DR, with its enormous data resources across therapy areas, market segments, and geographies worldwide. Combined with sophisticated analytics, longestablished in-market and global expertise, strategic know-how, forecasting capabilities, and consistent innovation in technology and data management, IQVIA provides unmatched capabilities to translate data into relevant, timely, and commercially valuable insights for its clients.

ORCHESTRATING INTEGRATED DESK RESEARCH

As Figure 1 shows, i-DR comprises a cluster of assets and capabilities organized around a single hub that can marshal these faculties effectively, and apply them with the flexibility, skill, and insight to address whatever business challenges arise in the client's day-to-day operations or longer-term strategic planning.

The core elements of i-DR fall broadly into three categories of input: data (on the left-hand side of the chart); i-DR practitioners and techniques (right-hand side); and consistent innovation/change (bottom of the chart).

Within these categories are six key elements that define and differentiate i-DR from conventional desk research: IQVIA data assets, non-IQVIA/open-source data and real-world evidence, practitioner skill-sets and

Figure 1: The core elements of i-DR



• 3rd party data

pattern recognition techniques, and the commitment to innovation that underpins and updates these capabilities while making sure they are applied to optimal advantage.

IQVIA brings a comprehensive set of proprietary data assets, spanning multiple geographies, market and patient segments, healthcare stakeholders and prescribing activities, to the i-DR effort. IQVIA can also draw on its clients' own assets, as well as open-source or third-party data, together with crucial real-world evidence from social media, registries, or longitudinal patient-level data.

Access to real-world evidence is a vital competitive tool in an environment where attention is shifting increasingly to the effectiveness, cost-effectiveness, and outcomes of therapeutic interventions under reallife conditions, rather than controlled conditions in clinical trials. By incorporating real-world evidence into integrated desk research, clients can ensure the findings reflect what is happening now, and from the broadest possible range of perspectives.

PATTERN RECOGNITION

- Pattern recognition
- Structured analytics techniques
- Triangulation

SKILL-SET OF PRACTITIONERS

- Heuristics techniques
- Expertise in IQVIA data assets
- Process and project management

INNOVATION

- Efficiency and productivity
- Constant up-skilling of technology and people
- IQVIA Academy

IQVIA'S OWN RICH DATA ASSETS INCLUDE:

- **MIDAS**: Data from more than 70 local market audits, spanning value-added metrics in areas such as licensing, market segmentation and biologics/ biosimilars, and consolidated into an integrated viewing and analysis platform.
- NPA: The National Prescription Audit (NPA) is an industry-standard source of national prescription activity for all pharmaceutical products, measuring demand at both prescription and retail level, on a daily basis and at varying levels of depth.
- **Medical Rx**: IQVIA captures data on more than 3 billion prescription transactions a year from chain, independent, mail-order, and specialty pharmacies in over 15 countries worldwide.
- **DDD**: Drug distribution data (DDD) are sourced from hospitals with 200 or more beds, monitoring sales performance and competitor activity at brick (postcode/area code) level.

- **NSP**: The National Sales Perspective (NPS) captures 100% of the U.S. pharmaceutical market, measuring sales of prescription drugs, over-the-counter products, and selected diagnostics at actual transaction prices through every major trade and distribution channel.
- NDTI: The National Disease and Therapeutic Index (NDTI) provides insights into diagnoses, patient characteristics, and drug treatment from a monthly audit of office-based physicians across the continental U.S.
- **OneKey**: Core data on 13.7 million healthcare providers and organizations in 73 markets, including name, address, specialty, prescribing potential and habits, therapeutic attitudes, etc.

IQVIA is well qualified to understand, explore, select, analyze, synthesize, and integrate these assets. Its practitioners live and breathe the data. They know what it means, how it is generated, and in which context. They know where it needs to be supplemented and clarified through third-party, real-time, or other data assets. Furthermore, these practitioners' ability to engage quickly and efficiently with the data leaves them more time to build creative, strategic solutions to client challenges.

Practitioner skills, experience, and business/market awareness in applying advanced techniques such as heuristics, pattern recognition, and triangulation to analyze and contextualize the broad spectrum of data assets already described, are the bridge between information and strategic insight. i-DR practitioners are 'smart creatives', a term coined by Eric Schmidt (Executive Chairman of Google's holding company, Alphabet Inc.) to describe a new breed of multifaceted employee who will 'question the status quo and attack things differently'.¹ The smart-creative i-DR practitioner has the ability to see meaningful patterns across a broad sweep of data, unpick those patterns, and translate them into actionable, practical insights, and is the bedrock of i-DR (see Figure 2).

Figure 2: i-DR practitioners combine smart-creative thinking with pattern identification



PATTERN IDENTIFIERS



Patterns are identifiable components which need to be recognized and then converted into actionable blocks of information They can use heuristic techniques to cut through intuitively to acceptable solutions where ambiguity might otherwise cloud judgment and slow decision-making. They can interrogate the quality of open-source data, ranking available information in terms of robustness, relevance, and timeliness, cross-verifying disparate sources through pattern recognition and triangulation, and filling any gaps with data assets and real-time analysis through channels such as social media.

These capabilities also enable i-DR practitioners to tackle the specificity of business challenges presented by their clients. Rather than relying on open-source data to deliver more generalized solutions, they can mine multiple sources of information, data, and intelligence, then apply advanced analytics to identify the patterns that release the full strategic potential of the available inputs.

Smart creatives also bring to the table a new form of fluid intelligence in constant evolution: a capacity to rephrase business challenges, shake off stale thinking, and promptly deliver innovative solutions of genuine value to clients.

IQVIA has the optimal mix of intuition, flexibility, creativity, and logic, supplemented with deep domain understanding and commercial know-how from global healthcare markets, to tackle a variety of challenges and questions, from the known to the unknown, the 'knownunknown', and beyond (see Figure 3).

Innovation is forever driving efforts towards deeper and more meaningful insights by keeping practitioner skills sharp, technology and techniques up to date and relevant, and data assets fully reflective of the complex, fast-moving environment in which i-DR operates. This calls for a fundamental commitment to sustained upskilling of human resources and analytical approaches, cutting-edge technology, and efficiency/ productivity at all levels of the i-DR undertaking.

The IQVIA Academy, for example, contributes to these objectives by selecting top performers from business

schools and putting them through a rigorous in-house training program, which includes regularly updated live case studies. IQVIA Academy staff are equipped with the relevant industry skills to cover the spectrum of i-DR activities.

Key i-DR practitioner techniques

FLUID INTELLIGENCE

The ability to analyze and solve novel problems in a logical manner, without any prior knowledge in the area. Fluid intelligence includes abilities such as pattern recognition, abstract reasoning, and problem-solving.

HEURISTIC TECHNIQUES

These are mental shortcuts or strategies – general rules of thumb – used in problem solving which allow people to make decisions quickly and efficiently based on limited data.

PATTERN RECOGNITION

Human brains naturally seek out patterns, trying to make sense of the world by identifying repeating qualities or reasons behind events and processes. This also applies to solving business problems where the brain will identify a pattern and change it into defined actions.

STRUCTURED ANALYTIC TECHNIQUES

An analytic method divided into eight key techniques: decomposition and visualization, idea generation, scenarios and indicators, hypothesis generation and testing, cause and effect, challenge analysis, conflict management, and decision support. Each technique involves a step-bystep process, which combined with the expertise of the practitioner, reduces the risk of analytic error.²

TRIANGULATION

A technique for validating data through cross verification from two or more sources. By applying a combination of research methods, researchers aim to remove weakness or bias in the data, which a single research method would not address.

A CHALLENGING ENVIRONMENT

As was already noted, the evolution of, and growing need for, i -DR are characteristic of a markedly challenging environment for the pharmaceutical industry and stakeholders in healthcare provision and funding.

In today's global pharmaceutical and healthcare sector, conditions for productive R&D, regulatory approval, pricing, reimbursement, market access, and commercialization are constantly evolving, while rapid loss of exclusivity and a vigorous generics market narrow the window of opportunity in the marketplace.

The sphere of influence over brand development, sales, and marketing has widened considerably in recent years. In particular, the power base for medicines funding and uptake has shifted from prescribers and their patients to a whole range of stakeholders, operating at global, regional, or local level, and often with very different priorities.

These stakeholders include regulatory authorities, health technology assessment and reimbursement agencies, hospital management, other budget holders, health insurance organizations, third-party administrators such as pharmacy benefit managers, and patient advocacy groups. The digital age is opening up new channels of informal influence, such as 24-hour exposure through the internet and social media dialogue.

Pharmaceutical companies making business decisions must take into account a broad spectrum of interests, engaging with stakeholder needs and weighing their significance in the context both of individual challenges and of lifecycle strategies for brands, therapy areas, pipeline molecules, and other business assets.

THE NEED FOR INTEGRATED DESK RESEARCH

Information systems have developed in line with the evolution of a more complex pharmaceutical market. They also reflect the data explosion that came with the internet, digital media, and demand for more detailed, interactive information beyond the grasp of the mass media.

These fast-moving trends put data at the very core of the value proposition for modern medicines. A line can be drawn from decision-support systems in the 1970s, through data analytics in the 1980s, and on to the bigdata and structured-analytics environment in which pharmaceutical companies now compete.

A surfeit of data does not automatically lead to enhanced awareness, sharper insights, or more intelligent decision-making. At worst, the outcome may be data overload, an excess of background noise or confused thinking.

It is imperative, therefore, that multiple inputs are examined critically by practitioners who can apply not only technical capabilities but market experience and expert judgment in sifting and validating data from diverse sources. They must also be able to combine and integrate these inputs, using their judgment and experience to illuminate quantitative and qualitative analyses, and ultimately craft an intelligence mosaic of meaningful insights to steer client decision-making.

This is where i-DR comes into its own, identifying and breaking patterns in data to resolve ambiguous questions or provide options for further, deep-dive research (see Figure 3). Figure 3: Types of business questions i-DR can be applied to



AMBIGUOUS QUESTIONS

NEXT LEVEL OF DEEP-DIVE RESEARCH

Note: Derived using Johari Window and Black Swan theories, risk management concepts, and https://www.pinterest.com/ pin/260786634646871874/, http://www.ministryoftesting.com/2015/03/notsure-aboutuncertainty

WHAT TYPE OF INTEGRATED DESK RESEARCH?

i-DR can take a number of forms, depending on the particular questions it wants to answer and the environment in which those questions arise. It is an agile discipline that tailors its methodology to the challenge presented: as much an art as a science. The nature of the research question or challenge, for example, will determine how much weight is given to expert judgment, quantitative analysis, and qualitative analysis in arriving at a properly informed decision. If an answer is needed immediately, then expert judgment is likely to take precedence. A longer timeline will accord more weight to quantitative or qualitative analysis.

The approach will also vary according to the volume of data available. If the market environment is the U.S., a EU5 country, or another market rich in data, a large amount of data may be accessible from a broad range of sources. The challenge then is to zero in on the core issues and craft matching solutions promptly and strategically. On the other hand, i-DR may be directed at an emerging or developing market where data for decision-making are in fundamentally short supply. Here, the focus may be more on finding, ranking, and validating available sources of data to make a viable business case.

Outside North America, the EU5, and Japan, in markets where there could be a paucity of data, IQVIA can look in the right places and source reliable data that deliver meaningful insights through i-DR.

WHAT IQVIA CAN DO WITH INTEGRATED DESK RESEARCH

The basic principle of i-DR is applying the art of expert judgment, market knowledge, and insights into global healthcare to the science of structured analytics and other intelligence-analysis techniques.

It can be used as part of a wider methodology or in isolation to tackle a broad range of business issues. Internal and external components, such as brand strategy, stage of lifecycle, competitor activity, and market access conditions, all enter the equation. Questions may arise around brand launches, pipeline strategies, market environments or therapeutic-category trends. They may relate to key investment decisions or lower-level intelligence-gathering – preparing for a medical congress, for example, or an internal meeting with the brand team in an unfamiliar market.

With access to, and understanding of, multiple data sources, and the ability to craft diverse inputs into a mosaic of actionable intelligence and insights, i-DR can function at all of these levels. In each case, it will be looking for practical and timely solutions geared specifically to the client's priorities.

THE METHODOLOGY OF INTEGRATED DESK RESEARCH

Developing an i-DR plan requires expert knowledge of structured analytic techniques, such as decomposition and visualization, idea generation, scenario analysis, and decision matrices.

These facilitate identification of useful patterns in available data, so that tailored solutions can be crafted

by integrating quantitative and qualitative inputs. Understanding these patterns, determining the level of ambiguity present, and weighing it against the time available for delivery, enables pattern breakers to assign challenges to the appropriate realm of execution and introduce the right level of input and expertise for the task at hand (see Figure 4).

AMBIGUITY IN RESEARCH QUESTIONS CALLS FOR A TRIANGULATION APPROACH THAT APPLIES AT ONE OR MORE LEVEL:

- Data triangulation
- Investigator triangulation
- Theory triangulation
- Methodological triangulation
- Environmental triangulation

All of these techniques are about finding, evaluating, and processing information towards a solution – from challenge to data to actionable insights that support rational, intelligent business decisions.

Figure 4: Skill set combination matrix



"CAUSE AND EFFECT"

• Analysis which provides higher quantitative direction

"DATA PLAY FOR INSIGHTS?"

• Combinatorial data analysis to draw insights

Depending on the circumstances, such as the scope of work as well as specified timelines and budgets, i-DR may be further integrated with other business processes: supporting overall competitive intelligence, augmenting primary research inputs from the client, or validating assumptions in forecasting.

Integrated data on the prevalence and incidence of a particular disease, for example – whether at global, national, or local level – may serve to endorse inputs to a forecasting model that is used to drive crucial business decisions.

REAL-WORLD CASE STUDIES OF INTEGRATED DESK RESEARCH

The following case studies give some idea of the breadth of i-DR, and how it is bringing innovative new techniques and technologies to the ever-expanding challenges of maintaining a competitive business in a global, multi-stakeholder pharmaceutical market.

They also illustrate how pattern identification and analysis through i-DR enable IQVIA to categorize challenges so that it can tailor its expertise precisely to degrees of ambiguity and the available timeframes.

CASE STUDY 1: A SHRINKING U.S. DIABETES MARKET

CHALLENGE

The question from a large, U.S.-based multinational pharmaceutical company was to discover why the diabetes market in the U.S. was shrinking, despite an expanding diabetes-prevalent population and a rising volume of prescriptions to treat the disease.

METHODOLOGY

IQVIA conducted extensive secondary research and i-DR to illuminate a number of market components that could potentially explain the downturn. This was done via multiple hypothesis and cross-reference discussions with experts. Topics were clustered into groups and explored to provide a sense of direction before analysts proceeded to deep-dive research on the following factors:

- The disease burden and its evolution
- Macroeconomic factors in the marketplace
- Awareness of the disease
- Prescription fulfillment in diabetes
- Changes in drug availability and the generics market

• Changes in prescription behavior

RESULTS

Once all of these inputs were collated and analyzed, a number of reasons were identified for the decline in a market that should theoretically have been on a growth path:

- The diagnosis and monitoring criteria for diabetes in the U.S. changed in 2009, leading to a reduction in the number of patients diagnosed with the disease
- Medicines use per patient for diabetes in the U.S. decreased during 2011
- The number of uninsured in the U.S. grew during a period of recession, with knock-on effects on medicines uptake and prescription fulfillment, mainly due to costs
- While awareness of diabetes increased among the U.S. population, so did usage of complementary and alternative medicines to prevent or treat the disease
- Growth in the availability and use of generic drugs for diabetes reduced the dollar value of the U.S. market

CASE STUDY 2: SEQUENCING AN ONCOLOGY LAUNCH OUTSIDE THE MAJOR MARKETS

CHALLENGE

The client was a large, European-based multinational pharmaceutical company that wanted to sequence a launch program for its oncology business in markets outside the U.S., the EU, and Japan.

METHODOLOGY

This involved assessing and ranking a total of 48 markets in terms of investment risk, taking into account a number of factors such as:

- Disease indicators (e.g., incidence, mortality rates, etc.)
- Healthcare indicators (physician/population ratio, number of hospital beds per capita, etc.)
- Economic indicators (per capita gross domestic product, Human Development Index, etc.)
- Market maturity in oncology
- The client's commercial presence, market activity, and support services in each country

The challenge was to understand how to rank the launch sequence, bearing in mind the following factors:

• Market potential was considered on two levels: risk and returns

- A factor was introduced to understand the strength of the corporate presence in the 48 listed markets, as different business models and market approaches could lead to different outcomes and financial returns
- The risks were examined from multiple perspectives, including economic (e.g., banking stability, exchange rate fluctuations) and political (stability of democracy or form of existing government)

i-DR was used to pull together quantitative and qualitative data. Weights were assigned to each indicator and sub-indicator, and a market score generated, representing the first level of prioritization. The weighted market score was then supplemented with a further ranking based on the client's presence in each market.

RESULTS

The resulting final score was used to group the 48 markets into Priority One, Priority Two, and Priority Three launches. This provided a roadmap for sequencing of oncology brand introductions in countries where data were less readily available and entry conditions more uncertain than in the U.S., EU, or Japanese markets.

CASE STUDY 3: ASSESSING THE EU5 MARKET FOR INTRACTABLE PAIN

CHALLENGE

This project involved assessing for a medium-sized European-based client the market opportunity for intractable pain across the EU5 countries (France, Germany, Italy, Spain, and the UK).

METHODOLOGY

The i-DR drew on a range of data sources and inputs (both public and proprietary), including internal IQVIA assets, a thorough review of the academic literature, secondary epidemiological research, patient-flow analyses, plotting of treatment pathways and unmet needs, and interviews with key opinion leaders (KOLs) in each EU5 market.

The three project phases were:

- Understanding the disease profile (intractable pain definition and characteristics)
- Evaluating the patient potential and size of opportunity
- Identifying current treatment options and unmet needs

Among the complications faced by researchers were varying definitions of intractable pain among KOLs, even within the same country, difficulty in creating a treatment algorithm, as intractable pain is incurable, and problems accessing data, given that pain is defined so broadly. Instead, a standardized definition was adopted to manage the available data on severe pain, acute pain, refractory pain, etc.

Market sizing was based on pharmacologicaltreatment failure, surgical-option failure, and refractory cancer-pain patients. To estimate a patient pool for pharmacological-treatment failure only, for example, the chronic-pain prevalence rate was applied to the national population to generate the number of chronic pain patients diagnosed. A treatment rate was then applied to ascertain the number of patients using prescription-only, over-thecounter, and alternative therapies.

Patients treated with prescription or over-thecounter therapies were segmented by treatment option (NSAIDs, strong opioids, weak opioids, etc.) and a treatment-failure rate was determined for strong and weak opioids using various assumptions and calculations. Finally, an assumption was made that patients failing on weak opioids would move to strong opioids. The failure rate for the strongopioid segment gave us our patient pool for intractable pain.

RESULTS

Despite being a chronic condition that imposed a huge physical, psychological, and economic burden on patients and healthcare systems, as a market opportunity intractable pain was found to be hampered by varying definitions, low awareness, and a lack of specific or really effective treatments.

A relatively small patient pool, and the need for low-priced therapies to sustain potentially lifelong treatment, further limited potential market value. In view of these high market access barriers, a recommendation was made not to proceed with intractable pain as a market opportunity. However, central post-stroke pain was singled out as a welldefined and diagnosed sub-indication with clear unmet needs, opening the way for validation of this opportunity through primary market research.

NEW FRONTIERS FOR INTEGRATED DESK RESEARCH

The volume and variety of data that help to shape commercial or strategic decision-making in pharmaceuticals continue to grow exponentially, as new technologies, methodologies, and media sustain the flow of information into and out of healthcare. This flood of data in no way mitigates the need for specialized resources to access, sift, structure, and integrate a multitude of inputs into formats capable of addressing a wide range of business needs.

The growing complexity of a global marketplace will always spawn new questions for businesses looking to gain or maintain competitive advantage. These questions call for increasingly sophisticated insights that identify and illuminate patterns in integrated data. As the challenges evolve, so must specialist providers of information services.

IQVIA has done just that, not only extending its geographical reach to tap into new sources of healthcare and pharmaceutical data, but using strategic acquisitions to access new sources of innovation in i-DR and structural analytics.

The data platforms and tools for social-media analytics acquired with Cegedim and Semantelli in June 2014

and April 2013, respectively, are two examples of how IQVIA is augmenting its capacity to gather data and information from the broadest possible spectrum of sources. Cegedim's customer relationship-management and strategic-data businesses gave IQVIA access to a global reference database with insights into 13.7 million healthcare professionals, as well as a team of more than 4,500 professionals with deep information and technology skills in areas such as business intelligence and analytics. With Semantelli came cloud-based tools to monitor and analyze healthcare-specific social media content under the Nexxus brand.

i-DR will continue to evolve, as new technologies come into play and the role of collaborative analysis in integrating even broader data inputs advances in parallel. IQVIA is a company immersed in data, from its origins through to the present day. It knows only too well that data do not stand still, just as the markets for pharmaceuticals and healthcare are in constant flux.

Only specialist expertise and market knowledge can stay ahead of the curve and gauge the right balance of judgment, insight, quantitative data, and qualitative inputs to turn information into action. By orchestrating a wealth of data assets, technologies, techniques, skills and insights in the service of integrated desk research, IQVIA is uniquely equipped to deliver the holistic solutions demanded by the 21st century marketplace.

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ABOUT THE AUTHORS

YUNUS JALEEL

Director, Commercial Outsourcing Services, IQVIA

Yunus Jaleel is a Director within the Commercial Outsourcing Services division of IQVIA specializing in outsourcing business. Yunus has expertise in global marketing strategies, brand management, life-cycle management and analytics. Specifically, Yunus has supported clients in hybrid onsite/offshore analytics, social media monitoring and analysis, primary and secondary competitive intelligence, key opinion leader identification and profiling, and performancemanagement reporting. Yunus is an industry veteran with more than 25 years' experience in the Life Sciences and Healthcare industries, holding key positions in leading pharmaceutical companies such as Roche, Lilly, and Abbott before joining IQVIA.

Yunus has an MBA from the University of Strathclyde, Glasgow, and a BSc in Applied Biology from Thames Polytechnic, London. He is based out of Basel, Switzerland.

SURAJ PRASAD

Engagement Manager, Market Assessment Center of Excellence, IQVIA

Suraj Prasad is an Engagement Manager for the Market Assessment Center of Excellence, responsible for a 30-member team based in India. Suraj and his CoE delivers outstanding service to customers through deft handling of project and account management, while continuously developing their capabilities and expertise.

Suraj has over 13 years' experience working with Life Sciences and Consulting firms, executing projects in a range of therapy areas and markets, including onsite delivery in U.S., EU5, Singapore and emerging markets (Indonesia, Nigeria, Sri Lanka, United Arab Emirates, and Vietnam). He has a strong understanding of strategic planning and delivery management, gained across multiple product and therapy areas, including but not limited to biotech, vaccines, antibiotics, and over-the-counter brands.

Suraj did his Post Graduate in Management from Indian Institute of Management, Kozhikode, and is a Pharmacy Graduate from NGSMIPS, Mangalore University. He is based out of Bangalore, India.

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CONTACT US

iqvia.com/contactus

LOCATION

100 IMS Drive Parsippany, NJ 07054 United States

