

TEDxLSE Graduate

x=independently organized TED event



WHEN: 6 PM THURSDAY, 14 FEB 2013

WHERE: UNDERGROUND, THREE TUNS

JOIN US FOR AN EVENTFUL NIGHT
FREE DRINKS AND SNACKS ALONG WITH LIVE
MUSIC PROVIDED

LSE STUDENTS'
UNION
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ADVERTISING
STRATEGY

February 14th, 2013

In Vivo

Disclosure

I have no financial interest in any of the products, brands or companies that I may mention during this presentation

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Copies of this presentation....

- Are available @ www.nvvo.ca/articles-insights/ for download.
- And I can be reached directly at: rohit@nvvo.ca

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Rohit Khanna is the **founder & Managing Director of In Vivo**-- a leading Communications, Advertising & Strategy Agency based in Toronto with satellite offices in Montreal, Boston, San Francisco and London.

With close to 20 years of client experience in sales, marketing and commercial operations, Rohit works with pharmaceutical, biotech and medical device companies to help their brands achieve maximal awareness, adoption and utilization. Rohit has helped launch, develop strategies and promotional tools for medical device companies who work with a wide variety of surgical specialties. He has also worked with clients to launch or re-stage numerous brands into the pharmaceutical marketplace.

An accomplished strategic thinker, Rohit has written dozens of articles on issues and subjects pertaining to healthcare in the 21st Century. He is a **conference reviewer** for the **American Marketing Association (AMA)**--providing input to help shape conference programs. He is also a **project advisor** to the **Queen's School of Business** and **Johnson Graduate School of Management at Cornell University** where he oversees life-science related projects from Executive MBA students.

Rohit is a contributor to both **Pharma** and **Pharmaceutical Market Europe**—monthly print publications providing insight, commentary and analysis on issues and hot topics that affect the way life-science companies address the ongoing challenges of today's complex markets. He also contributes a **monthly online column to PMLive** which serves as the digital channel for Pharmaceutical Market Europe.

He is an active board member of the Board of Directors of the **Ontario Pharmaceutical Marketing Association (OPMA)** and has been a **guest lecturer at Business Schools** on the subject of Marketing Communications, Strategy & Theory.

Rohit holds a **B.A. in Psychology from McGill University**, an **M.B.A .from Queen's School of Business** and is currently completing his **MSc. in Health Economics, Policy & Management from the London School of Economics & Political Science**.

In Vivo specializes in strategic marketing, public relations, medical education, digital media solutions, market research and meeting facilitation. Rohit leads the consulting practice where his areas of specialty include: strategic marketing, operational & commercial strategy, new product planning and health economics & policy.



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A Starting Point....

To re-think our definition of anything, first we must have a definition.....

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What are we talking about exactly....

Health care is the diagnosis, treatment, and prevention of disease, illness, injury, and other physical and mental impairments in humans

Where's the Gap?

- Nowhere does that definition address issues such as cost, access to services or what healthcare 'looks like'
- The definition inherently supposes that 'cost', 'access' and what healthcare 'looks like' are givens in the equation....
- But they're not.....

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The Buck Stops Here....

- Ask 1000 people.....

Estimated U.S. Average 2011 Billed Charges Per Transplant	
Transplant	Total
Heart Only	\$997,700
Single Lung	\$561,200
Double Lung	\$797,300
Heart-Lung	\$1,148,400
Liver	\$577,100
Kidney	\$262,900
Pancreas	\$289,400
Intestine	\$1,206,800

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The Buck Stops Here....

- Almost 100% of the people, 100% of the time will choose the 2013 drug/device @ 2013 prices
- Inherently, people know that what is newer is better and what is latest is greatest
- Because people are willing to pay for 'newer' and 'better', does that mean they should?

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The Mother of Invention

- Necessity
- Doctors, patients & society need new interventions to treat their conditions.....and industry 'invents' them.
- So how do we get 'newer' and 'better' into the hands of patients?

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Pharma Banks



If ING can set up a virtual bank, why can't pharma and med device?



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Re-think #1

Industry and patients need to work directly with each other to improve access to technology and lower costs.

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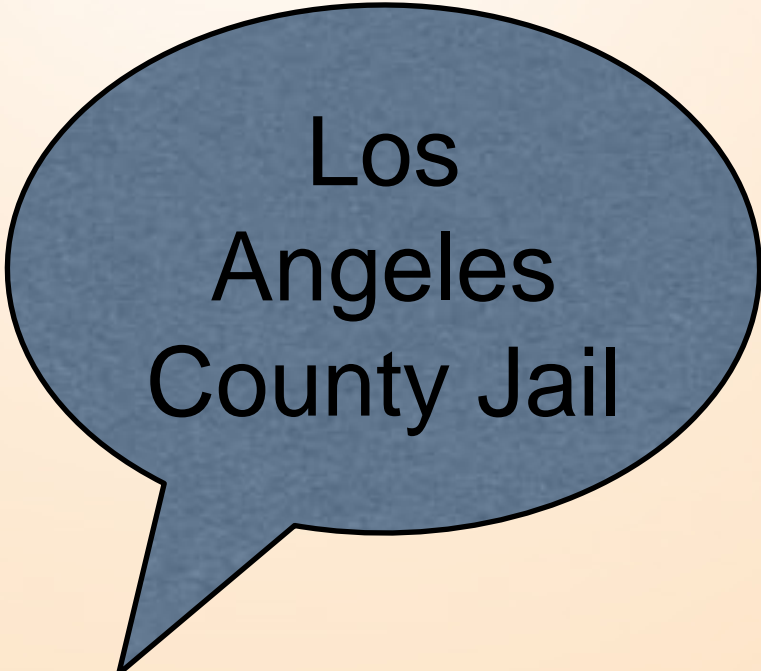
Riddle me this....

- Is Weightwatcher's a:
 - a. Weight-loss organization
 - b. Lifestyle management organization
 - c. Healthcare organization
 - d. Franchise of obesity clinics
 - e. Support organization offering psycho-social services



Let's try another one....

- The largest psychiatric institution in North America is:
 - a. Massachusetts General Hospital, Boston
 - b. New York-Presbyterian Hospital
 - c. Johns Hopkins Hospital, Baltimore
 - d. McLean Hospital, Belmont MA
 - e. UCLA Neuropsychiatric Hospital, Los Angeles



Los
Angeles
County Jail



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Re-Think #2

Delivery of healthcare and what it 'looks like' may not always be what it appears to be.....

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The Smoking Gun

- 40 years go (and less), tobacco & cigarette advertising/sponsorship was everywhere.....
- Today, tobacco advertising/sponsorship has been effectively banned in all G7 nations
- Today, you can barely smoke anywhere in public....
- What happened to change all of this?

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The Smoking Gun....(cont'd.)

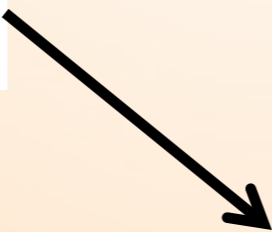
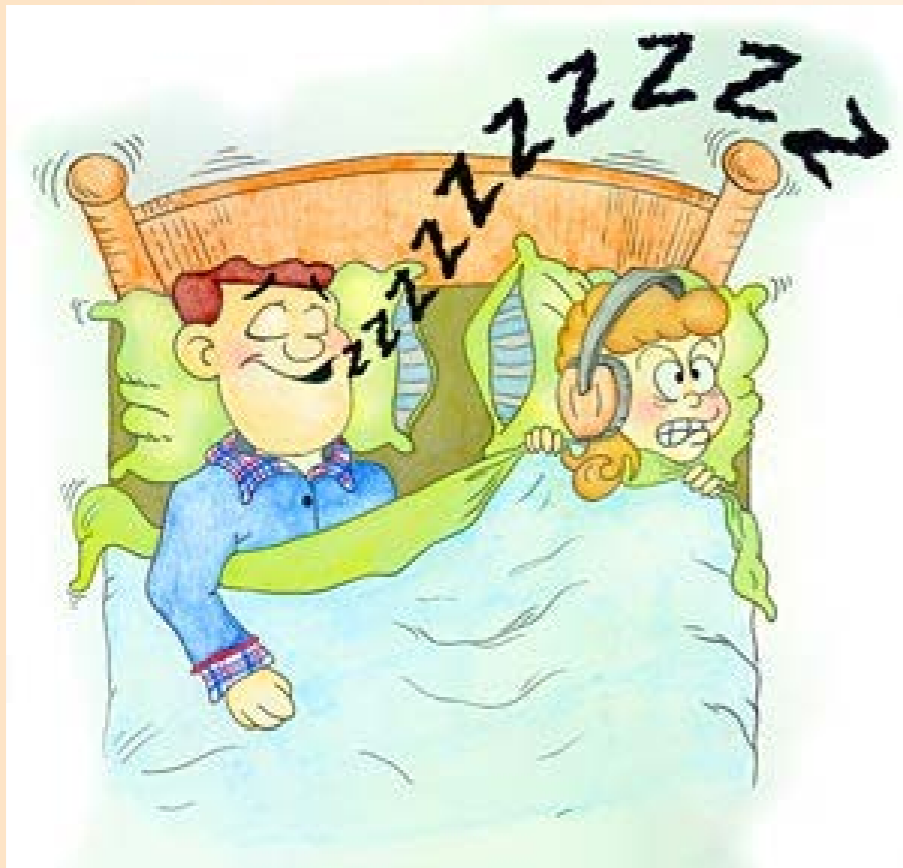
Second-hand
Smoke



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The Smoking Gun....(cont'd.)



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The Smoking Gun....(cont'd.)



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Re-Think #3

Healthcare is no longer just about 'you'. It's about 'you' and 'me'.

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The Backdrop

If you have your health, nothing else matters.

If you don't have your health, nothing else matters

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Thank you.....and good
night

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