HCP Sentiment Series Part 12 Report

Social Media Impact, Medical Congresses & The Patient Dynamic Among Oncologists

Published June 2023
Report Overview

Insights

1. Social Media Impact
2. Medical Congresses
3. The Patient Dynamic
4. BONUS: Breast Cancer Guidelines

Specialties surveyed:

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hematology - Oncology</td>
<td>56</td>
</tr>
<tr>
<td>Oncology</td>
<td>247</td>
</tr>
</tbody>
</table>

Countries surveyed:

- United States
- Spain
- Italy
- United Kingdom
- Japan
- Germany
- France
- Canada
- Brazil
- Australia
- Turkey

N=303
Social Media Impact
52% of Oncologists think Social Media is an important professional information source

How important is social media as a professional information source for you?

15% Not important at all
17% Somewhat unimportant
17% Neutral
35% Somewhat important
17% Very important

N=101
Sermo is considered by physicians as their primary Social Media for professional purposes

Which of the following social media, if any, do you use for clinical or professional purposes of any type?

- Sermo: 57%
- LinkedIn: 48%
- WhatsApp: 31%
- Doximity: 30%
- Twitter: 29%
- Youtube: 27%
- Facebook: 24%
- Instagram: 21%
- Univadis: 8%
- Snapchat: 4%
- None: 4%
- TikTok: 3%
- Figure1: 3%
- Pinterest: 2%

Which social media is your primary one for clinical or professional purposes of any type?

- Sermo: 29%
- LinkedIn: 16%
- Twitter: 12%
- Doximity: 12%
- None: 10%
- YouTube: 7%
- WhatsApp: 5%
- Facebook: 4%
- Instagram: 2%
- Univadis: 1%

N=101
Oncologists are following influencers on Social Media and using Social to maintain professional relationships

46% of Oncologists said to follow HCP Influencer on Social Media

Q. Do you follow physicians or HCP “influencers” and/or content creators on social media?

- Yes 46%
- No 54%

65% of Hem/Oncs said to have maintained professional relationships through social media

Q. Have you maintained professional or medical school or residency relationships on social media?

- Yes 65%
- No 35%

N=101
Social Media is effective at influencing HCP perceptions of medications & treatments

62% of Oncologists frequently or occasionally change their **perception of a medication or treatment** based on content they’ve seen on social media.

53% of Oncologists frequently or occasionally change their **prescribing choices** based on social media information.

How often do you change your perceptions of medications or treatments based on information accessed on social media?

- Never: 14%
- Rarely: 25%
- Occasionally: 30%
- Frequently: 32%

How often do you change your prescribing choices based on information on social media?

- Never: 24%
- Rarely: 24%
- Occasionally: 37%
- Frequently: 16%

N=101
Medical Congresses
ASCO & ESMO are by far the most popular congresses among oncologists.

Which oncology-focused conferences and congresses have you attended or are planning to attend this year?

- ASCO Annual Meeting - American Society of Clinical Oncology: 69%
- ESMO Congress - European Society for Medical Oncology: 60%
- ASH Annual Meeting - American Society of Hematology: 23%
- AACR Annual Meeting - American Association for Cancer Research: 16%
- ECC - European Cancer Congress: 14%
- ICACT - International Congress on Anti-Cancer Treatment: 8%
- Other: 14%

N=303
Medical journals are the most trusted source for learning about news and data released at congresses, followed by the conference website & physician-only social media.

Outside of attending oncology-focused conferences and congresses, how do you follow along with breaking news and data released at these events?

<table>
<thead>
<tr>
<th>Source</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Journals</td>
<td>85%</td>
</tr>
<tr>
<td>Conference website</td>
<td>56%</td>
</tr>
<tr>
<td>Physician-only private social media (i.e. Sermo, Medscape, Doximity)</td>
<td>46%</td>
</tr>
<tr>
<td>Oncology trade publications (i.e. OncLive)</td>
<td>45%</td>
</tr>
<tr>
<td>Public social media (i.e. Twitter, Linkedin, TikTok)</td>
<td>36%</td>
</tr>
<tr>
<td>Pharma manufacturer websites / press releases</td>
<td>27%</td>
</tr>
<tr>
<td>[other]</td>
<td>1%</td>
</tr>
<tr>
<td>None of the above</td>
<td>1%</td>
</tr>
</tbody>
</table>

N=303
After presentations, oncologists equally look to peers, KOLs & their own research for valuable learnings about new data

<table>
<thead>
<tr>
<th>Scenario</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>During the presentation or poster session</td>
<td>40%</td>
</tr>
<tr>
<td>After the congress, when connecting with peers</td>
<td>20%</td>
</tr>
<tr>
<td>After the congress, by following KOLs &amp; DOLs on social media</td>
<td>20%</td>
</tr>
<tr>
<td>After the congress, doing my own research</td>
<td>19%</td>
</tr>
</tbody>
</table>

Based on your experience, where do you gain the most valuable learnings from in reference to data presented at conferences and congresses?

59% of physicians are saying the most valuable learnings are from AFTER the congress.

Tip: extend the impact of your conference investment by repurposing on other channels such as social and peer-to-peer.
The Patient Dynamic
Oncologists feel even a small amount of extra time—avg. of 7 more minutes—during appointments would make a big difference in enhancing patient communication.

**How much time (in minutes), on average, do you spend with a patient explaining the treatment plan?**

<table>
<thead>
<tr>
<th>Avg. Time Spent</th>
<th>Ideal Time Spent</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>00:27:06</strong></td>
<td><strong>00:34:02</strong></td>
</tr>
</tbody>
</table>

N=303
Can AI help give Oncologists more time with patients?

Oncologists see the possibility of AI to assist patients in translating complex medical info & note taking

Do you see an opportunity for ChatGPT to help with patient education/translating complex medical information into layman's terms?

- Yes: 73%
- No: 27%

In your practice, do you see an opportunity for AI tools to assist patients during appointments, such as note taking?

- Yes, this would be helpful for my patients: 61%
- Not Sure: 23%
- No, I don't see the benefit in this: 16%

N=303
Oncologists are open to using ChatGPT for use cases like literature review and patient education/translation.

As ChatGPT exists today, how do you see your practice best utilizing the technology?

- Literature review: 47%
- Treatment decision support: 35%
- Medical report writing: 34%
- Clinical trial matching: 33%
- Collection of patient education/support resources: 29%
- Medical translations: 25%
- Prior authorization and insurance-related documentation: 23%
- Patient triage: 17%
- Remote patient monitoring: 15%
- None of the above: 14%

Do you see an opportunity for ChatGPT to help with patient education/translating complex medical information into layman’s terms?

- Yes: 73%
- No: 27%

N=303
Despite the promise, fears of data accuracy remain prevalent—which may be why 2 out of 3 Oncologists have not used AI tools professionally.
How can we better support patients from a manufacturer perspective?

More patient-friendly information and effective clinical trial matching are the greatest areas of opportunity.

Where do you think the healthcare industry can best support the oncology-patient experience?

- Patient-friendly treatment information: 32%
- More effective clinical trial matching: 17%
- Patient-friendly disease information: 17%
- Information on lifestyle support during treatment: 9%
- Practice/Health-system-specific care coordination guides: 8%
- Support navigating insurance coverage: 7%
- More access to virtual care: 7%
- Tailoring treatment approaches for racial/ethnic minorities: 3%

N=303
Oncologists overwhelmingly support the updated mammogram guidelines from the U.S. Preventive Services Task Force.

Do you agree with the FDA-guideline mammogram recommendation for all women to get screened every other year starting at age 40 to reduce their risk of dying from Breast Cancer?

- Yes: 88%
- No: 12%
- Not Sure: 13%

In the past 3 years, has your practice seen an increase in patients diagnosed with Breast Cancer from a mammogram before the age of 50 years old?

- Yes: 64%
- Not Sure: 23%

N=303
Oncologists strongly recommend additional screening for patients with dense breast tissue; however, they are not united about screening practices based on racial/ethnic minorities.

In your opinion, do you feel that early detection and screening for cancer do not need to be evidence-based for racial/ethnic minorities or based on socioeconomic status. Instead, general cancer screening standards for the general population should be applied.

Do you recommend additional screening (i.e., ultrasound or MRI) for patients with dense breast tissue?

- Yes: 91%
- No: 9%

N=303
Thank you!

To learn more, please contact us at: business@sermo.com

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