

Reshaping Healthcare Provider Perceptions: Developing an Integrated Marketing Framework for Biosimilar Adoption in Specialty Care

Dissertation Submitted to



By: Sarthak Sudhirrao Joshi

**Under the Supervision and Guidance of
Dr. Sudhinder singh chowhan**

Introduction

What are Biosimilars

Biotherapeutic products **highly like** approved biologics

Offer **same safety, purity, and efficacy** at a **lower cost**

Critical for **chronic diseases**: Cancer, Rheumatoid Arthritis, Diabetes

IN India's Role in Biosimilars

60+ biosimilars approved in India

Leading players: **Biocon, Dr. Reddy's, Zydus**

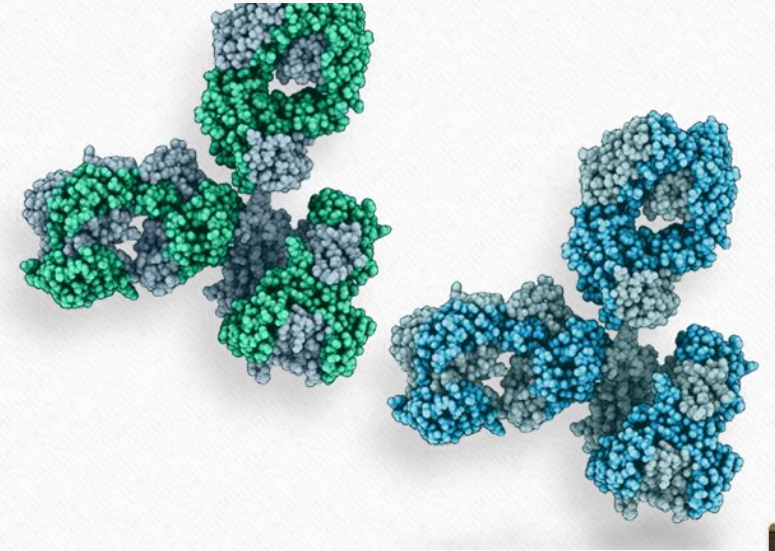
Regulatory support: **CDSCO–DBT guidelines** (2012, 2016)

Yet, **adoption in specialty care remains low**

Key reason: **Specialist doctors' limited trust & awareness**

Marketing often focuses only on **price**, not on **clinical confidence**

Need for an **Integrated Marketing Communication (IMC)** framework to improve perception and adoption



Problem Identified:

Limited scientific understanding among HCPs

Prescriber hesitation in switching stable patients

Inconsistent marketing (too price-focused, not educational)

Uncoordinated communication among stakeholders



Objective of the study :

Primary Objective

To develop an **Integrated Marketing Communication (IMC) framework** to enhance biosimilar adoption in specialty care in India.

Secondary Objectives

To assess **awareness, attitudes, and perceptions** of healthcare providers (HCPs) regarding biosimilars.

To identify **key barriers and enablers** in prescribing biosimilars.

To review **existing marketing strategies** used by Indian biosimilar manufacturers.

To explore the **impact of regulatory frameworks** (e.g., CDSCO, DBT) on market trust and uptake.

Literature Review – Global & Indian Context

Biosimilars: Biologic medicines similar to an approved reference biologic; no meaningful difference in safety, purity, efficacy (WHO)

Regulatory pioneers:

EMA: Approved 1st biosimilar (Omnitrope) in 2006

US FDA: Approved Zarxio (filgrastim-sndz) in 2015 under BPCIA

India: CDSCO–DBT biosimilar guidelines (2012, updated 2016)

Require comparative studies, clinical trials, and post-marketing surveillance

Adoption & HCP Perceptions

EU: Up to 70% price reduction due to biosimilar competition

US: Slower adoption concerns about interchangeability & reimbursement

IN Indian Scenario

Top players: **Biocon (CANMAb), Dr. Reddy's (Hervycta), Zydus (Exemptia)**

Regulatory gaps: No formal **interchangeability** defined

Challenges:

- HCP misconceptions
- Preference for originators
- Poorly trained sales reps & fragmented messaging



IMC & Research Gaps

Integrated Marketing Communication (IMC) in Healthcare

Definition: Unified messaging across education, PR, sales, and digital platforms

Hierarchy-of-Effects Model:

- Awareness → Knowledge → Preference → Conviction → Adoption

IMC Tools for Biosimilars:

- CME programs, KOL endorsement, RWE distribution
- Sales force training, patient support programs

Research Gaps Identified

1. Lack of **India-specific IMC frameworks** for biosimilars
2. Scarcity of **longitudinal HCP perception studies**
3. Absence of **stakeholder-aligned communication strategies**
4. Limited data on **behavioural drivers** of biosimilar adoption
5. Existing studies focus more on **policy & manufacturing**, not clinical behaviour



Methodology: Mixed-Methods Approach

Study Design

Mixed-methods: Literature review + Simulated & Physical survey
PRISMA-guided secondary research (PubMed, WHO, CDSCO)
35 relevant sources selected from ~1250 records

Survey Design

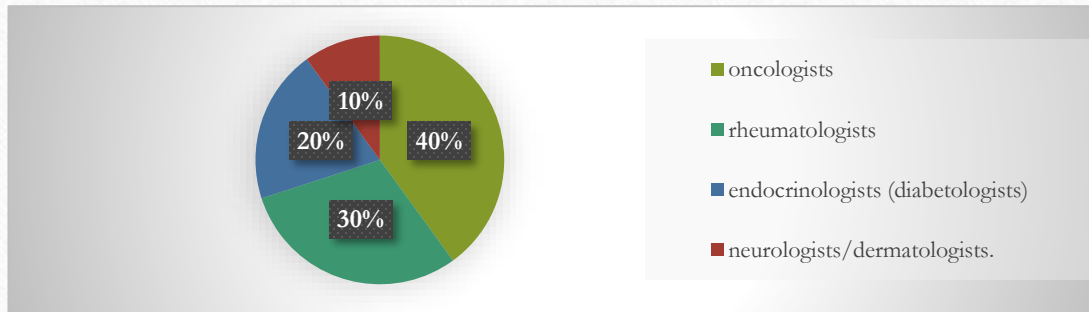
Structured questionnaire: Demographics, Knowledge, Attitudes, Info channels

Data Collection (n = 100)

Physical Survey (n = 40): 16 Oncologists, 14 Rheumatologists, 10 Endocrinologists

Simulated Survey (n = 60): Based on literature & field insights

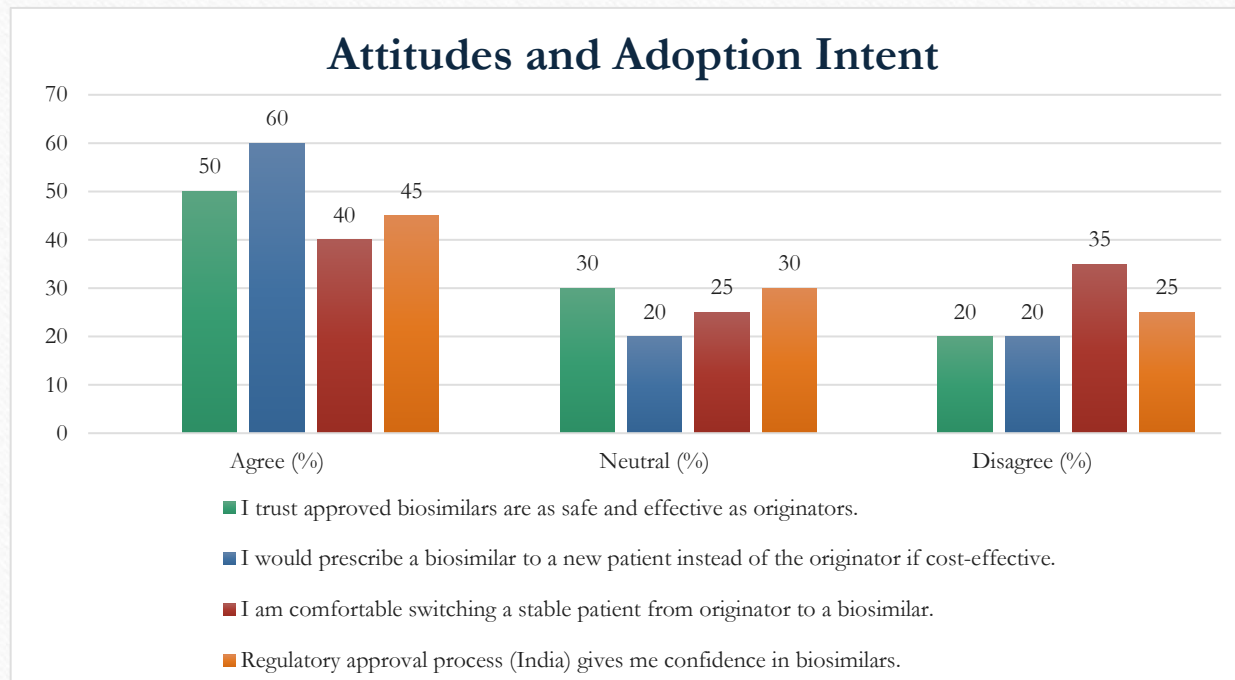
Biosimilar Adoption in India: Key Findings & Strategic Insights



Simulated Survey Results

Awareness: 80% heard of biosimilars.

Knowledge Gaps: Only 40% knew biosimilars $\neq$ generics.



Trust & Willingness:

50% trust biosimilar efficacy

60% willing to prescribe for new patients

40% comfortable switching stable patients

57% said they would adopt more if educated properly.

Major Challenges to Biosimilar Adoption

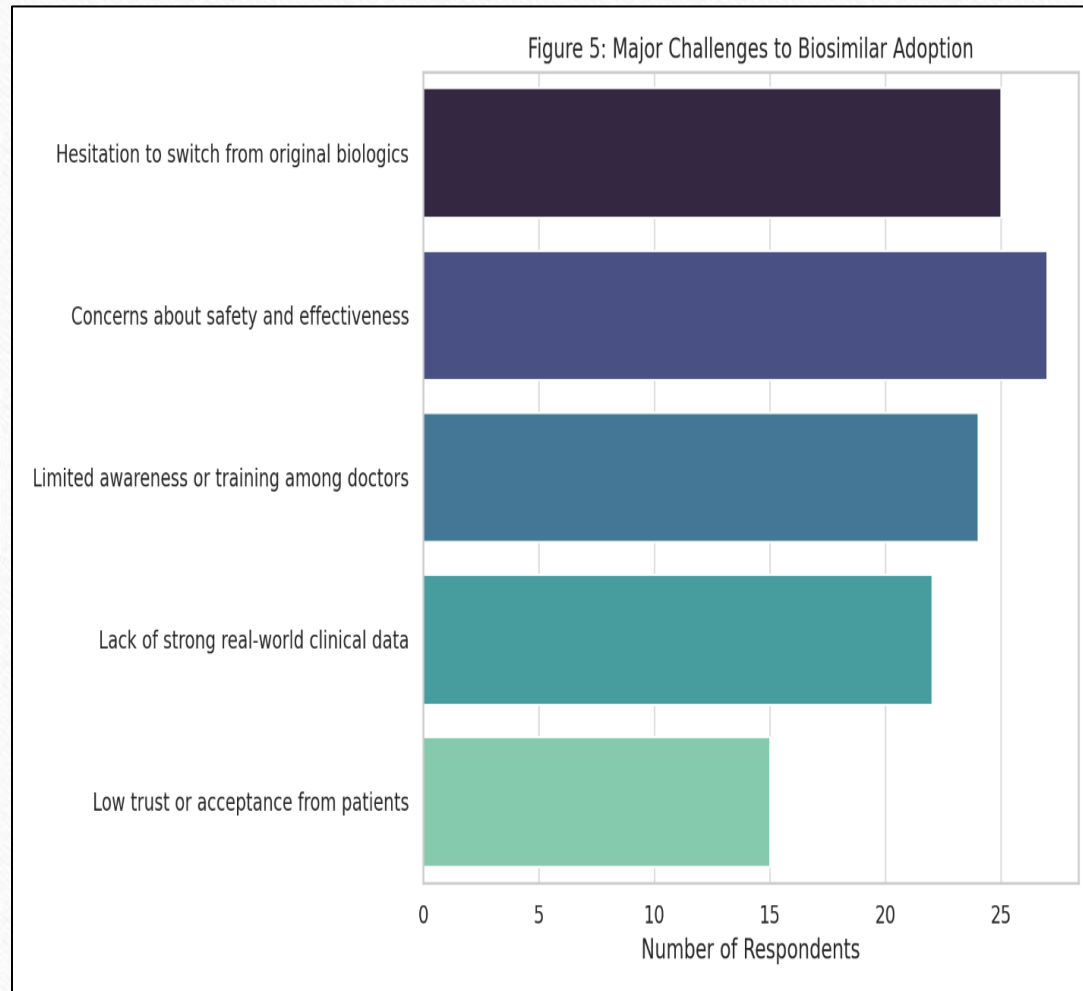
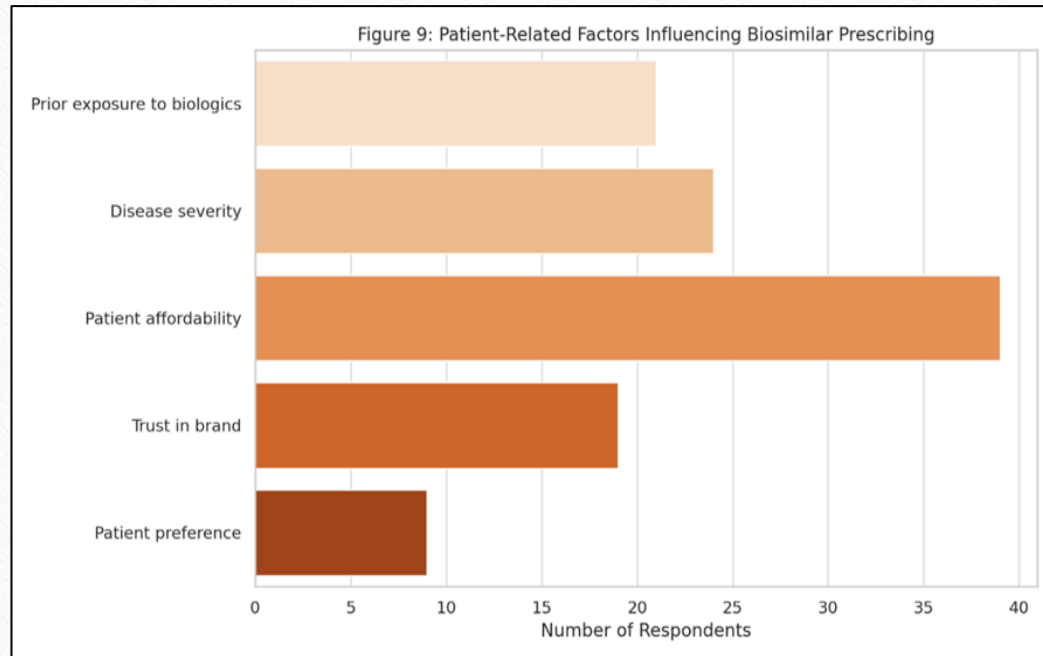


Figure 5 : Major challenges to Biosimilar Adoption

- **Safety & Effectiveness**
- **Reluctance to Switch**
- **Lack of Training**
- **Limited Real-World Data**

Patient related factors influencing Biosimilars



74%

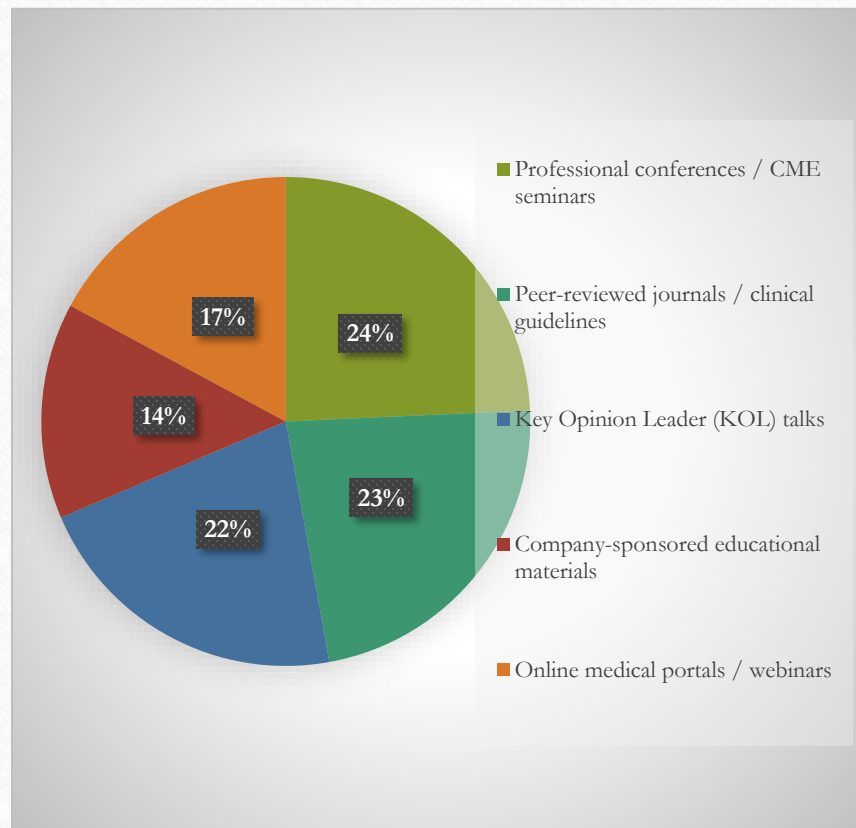
Cost to Patient
Major influence on
prescribing decisions

45%

Condition Severity
Impacts cautiousness
in prescribing.

40%

Prior Treatment
Influences decision to
switch or continue.



Key Barriers to Adoption

- ✗ No formal interchangeability pathway
- ✗ Poor HCP awareness & weak institutional support
- ✗ Overreliance on price, inconsistent scientific detailing
- ✗ Limited real-world evidence & weak digital presence

IMC Strategy for Driving Adoption

Trust Through Evidence – A Multichannel Approach

Regulatory Messaging: CDSCO-backed clarity

Medical Education: CME, KOL-led sessions

Digital Media: Webinars, interactive platforms

Advocacy: Patient groups, hospital policy briefs

Focus: Repeat, consistent messaging via trusted channels

RECOMMENDATIONS

1. National IMC Campaign

Consortium of CDSCO + AIIMS + industry leaders (Biocon, Zydus)

Unified message: “Trust Through Evidence”

Public webinars, journal features, expert panels

2. Structured CME Modules

Certified trainings via IIHMR, AIIMS

Progression: Awareness → Interest → Evaluation → Adoption

Regional workshops and YouTube-based CMEs for young HCPs

3. Policy Advocacy & Interchangeability Clarity

CDSCO to release official switching guidelines

Include biosimilars in institutional formularies

4. Real-World Data Sharing

Publish post-marketing studies

Showcase Indian success stories (CANMAb, Hervycta) in peer-reviewed platforms

CONCLUSION

India leads biosimilar production but lags in **adoption**

Knowledge gaps and **trust deficits** among HCPs are core barriers

Cost advantage is not enough—**scientific communication is essential**

Role of IMC:

Enables consistent, credible, and multichannel messaging

Aligns stakeholders—**Regulators, Industry, Clinicians, Patients**

Reinforces evidence-backed trust over price-based selling

"Reshaping HCP perceptions is not just marketing—it's medical education.

Through a unified IMC strategy, biosimilars can move from resistance to routine."

Thank You..