
LIFECYCLE MANAGEMENT STRATEGIES FOR OFF-PATENT BRANDS: MAXIMIZING MARKET SHARE POST LOSS OF EXCLUSIVITY

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INTRODUCTION

Challenge	LCM Response
High price sensitivity	Gradual discounts + branded generics
Physician-driven prescribing	Loyalty programs + KOL education
Rapid digitalization post-COVID	WhatsApp campaigns, e-detailing, vernacular content

Lifecycle Management in Pharmaceuticals

A strategic approach to sustain brand value after **Loss of Exclusivity (LOE)** through integrated commercial, regulatory, and digital interventions.

➤ Why It Matters:

- **Patent expiry** leads to steep revenue drops (40–90% in 1st year).
- **Generic competition** offers low-cost alternatives → brand erosion.

➤ **Lifecycle Management (LCM)** enables continued profitability through:

- Reformulations & FDCs
- Branded generics
- Strategic pricing & co-marketing
- Digital patient & HCP engagement

Problem Statement

1. Lack of Structured LCM Models

Many Indian pharma firms rely on ad-hoc tactics like price cuts or repackaging, lacking strategic LCM frameworks.

2. Reactive vs. Proactive Planning

Most local firms treat LOE as an endpoint rather than an opportunity for strategic renewal.

3. Generic Pressure & Regulation

Rising generic competition and strict regulatory norms demand deeper strategy integration.

4. Research Gaps

Limited empirical studies make it difficult to benchmark effective LCM practices in India.

Research Objectives

- Critically assess LCM strategies for off-patent brands in India.
 - Examine timing and alignment of LCM tactics on brand performance.
 - Explore stakeholder roles—physicians, patients, regulators.
 - Identify best practices and pitfalls in LCM execution.
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LITERATURE REVIEW

Global Trends

Grabowski & Kyle (2007) – USA

→ 40–80% market share lost within 12 months post-LOE.

Reiffen & Ward (2005) – USA

→ Price erosion differs across therapy classes.

Kesselheim et al. (2013) – USA

→ Authorized generics help retain partial volume and delay competition.

Berndt et al. (2007) – OECD

→ Line extensions increase stickiness in chronic disease brands.

Indian Trends

Kakkar & Dahiya (2014)

→ Indian firms often reactive; lack structured LCM planning.

Bansal & Maiti (2006)

→ Patent law lacks post-LOE innovation incentives.

Shah et al. (2018)

→ Physician connect and field engagement remain LCM anchors.

CHALLENGES IDENTIFIED

⚠ Reactive Lifecycle Planning

→ Many Indian firms plan LCM post-LOE instead of preemptively, leading to rushed, short-term tactics.

⚠ Weak Regulatory Incentives

→ Indian laws lack provisions like data exclusivity or patent extensions that support post-LOE innovation.

⚠ Limited Digital Adoption

→ Despite digital tools being available, firms underutilize webinars, apps, and e-detailing effectively.

⚠ Lack of India-Specific Research

→ Most LCM models are based on developed markets; India lacks localized frameworks with proven outcomes.

RESEARCH QUESTIONS

What types of lifecycle management (LCM) strategies are most commonly used post-LOE in Indian pharma?

How does the timing of strategic planning (e.g., >1 year vs. post-LOE) affect brand performance and sales erosion?

Which stakeholder factors (e.g., prescriber loyalty, field force engagement) drive long-term brand retention post-LOE?

How effective is simulated data in reflecting real-world LCM trends when live primary data is inaccessible?

Can a simulated sample framework provide valid insights into decision-making behavior across therapeutic areas?

RESEARCH METHODOLOGY

Research Design Flowchart

1. Define Research Objectives
↓
2. Select Descriptive Cross-Sectional Design
↓
3. Adopt Mixed-Methods Framework
 - Quantitative (Simulated Data)
 - Qualitative (Secondary Sources, Case Studies)↓
4. Develop Structured Questionnaire
↓
5. Construct 25 Simulated Profiles (Purposive Sampling)
↓
6. Analyze Data
 - Descriptive Statistics
 - Thematic Interpretation↓
7. Integrate Findings with Literature & Cases

➤ Research Design

• **Mixed-Method + Cross-Sectional**

Combines simulated quantitative data with qualitative secondary research.

Captures the current landscape of LCM practices at a single point in time.

• **Exploratory + Descriptive**

Aims to uncover patterns, planning behaviors, and brand strategies post-LOE.

➤ Sampling Framework

• **Technique:** Purposive Simulated Sampling

• **Rationale:** Simulates industry diversity when direct survey responses are unavailable.

• **Sample Size:** 25 profiles (Product/Brand Managers, Marketing Heads, etc.)

• **Therapy Focus:** Cardiology, Diabetology, Anti-infectives, Neuropsychiatry, Dermatology

Data Collection Methods

1. Primary Data (Simulated):

Simulated profiles of pharma marketing professionals.

Roles: Product/Brand Managers, Marketing Heads, Strategy Leads.

Segments: Indian firms, MNCs, generics, specialty brands.

Tools: Structured questionnaire with Likert scales, open-ended inputs.

2. Secondary Data:

Industry Reports: IQVIA, McKinsey, EY.

Real case studies (e.g., Cipla, Dr. Reddy's, GSK).

Peer-reviewed literature on LCM.

Research Objectives:

01

Identify most common LCM strategies post-LOE.

02

Assess impact of planning timelines on brand outcomes.

03

Explore retention drivers like prescriber loyalty & digital adoption.

04

Propose a framework for Indian pharma's post-LOE sustainability.

DATA ANALYSIS, INSIGHTS & IMPLICATIONS

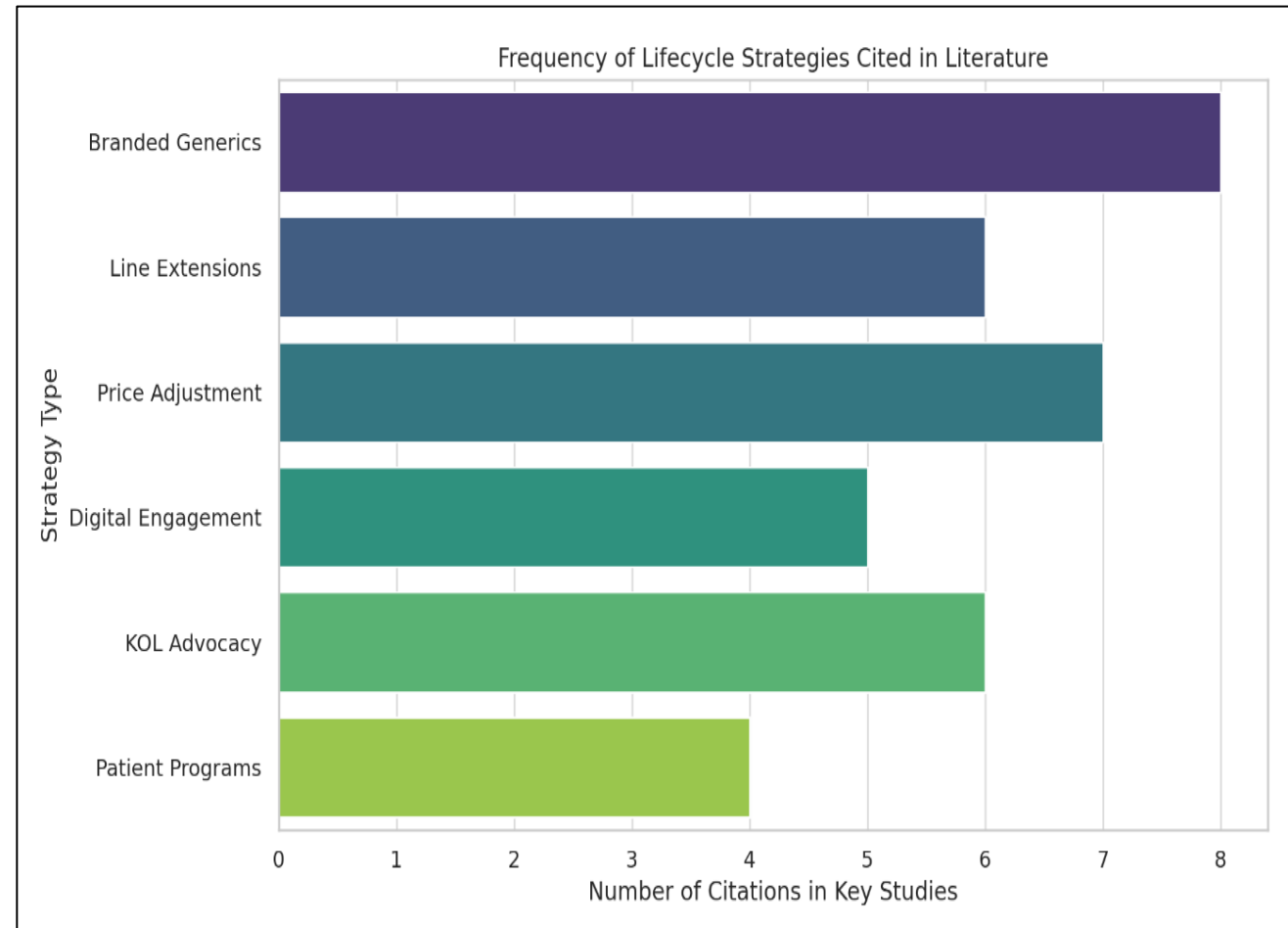
Analysis Methods

Descriptive Analysis:

- Brand retention linked with strategy layering + therapy segment.
- Chronic therapies (Foracort, Thyronorm) outperformed due to adherence tools and brand equity.
- Acute segments like gastro/cardio saw sharper erosion.

Comparative Analysis:

- Sales curves reveal that innovation (device-linked), HCP trust, and early planning matter.
- MNCs focused on loyalty-building; Indian firms led in pricing & FDCs



Comparative Strategic Themes Across Cases

Strategy Domain	Pfizer	Sun Pharma	Abbott	Dr. Reddy's	GSK	Cipla
Branded Generics	✓	✓	✗	✗	✓	✗
Digital Engagement	✓	✓	✓	✓	✗	✓
Co-Marketing/FDC	✗	✓	✗	✓	✗	✗
Field Force & KOLs	✓	✓	✓	✓	✓	✓
Patient Support	✓	✗	✓	✓	✓	✓
Adherence Technology	✗	✗	✓	✗	✗	✓
Institutional Strategy	✓	✗	✓	✗	✓	✓

Strategy Trends: What Indian Firms Do Post-LOE

An analysis of strategy trends across 20 top pharmaceutical firms revealed the following patterns in LCM behavior:

Strategy Type	Adoption Rate (%)
Price Adjustment	90%
FDC or Line Extensions	70%
Digital Promotion	65%
Branded Generic Launch	50%

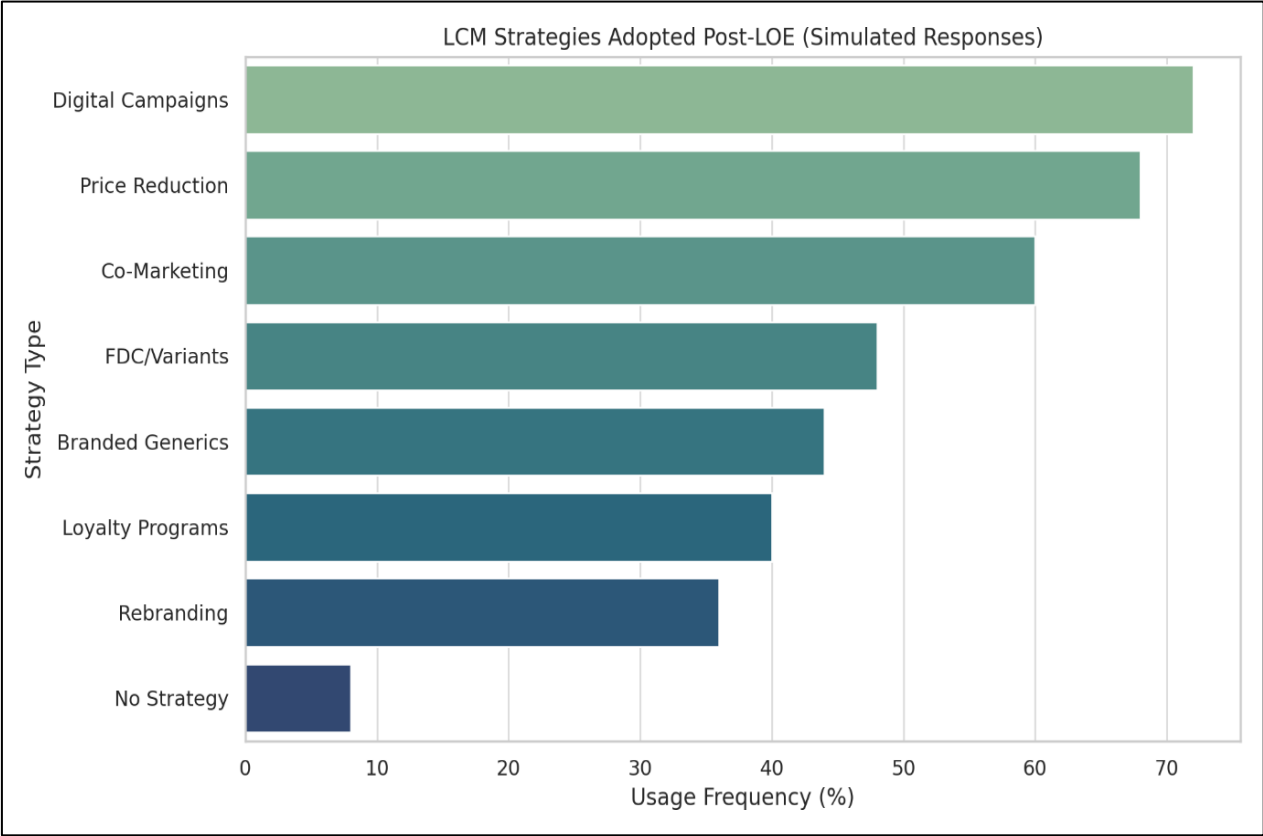
RESULTS AND DISCUSSION

Respondent Profile Summary

Attribute	Distribution
Designation	Brand Manager (36%), Product Manager (24%), Sales/Marketing Lead (40%)
Experience	0–2 years (12%), 3–5 years (20%), 6–10 years (40%), 10+ years (28%)
Company Type	Indian (52%), MNC (28%), Specialty or Branded Generics (20%)
Therapeutic Areas	Cardiology, Diabetology, Neuropsychiatry, Anti-infectives, Dermatology

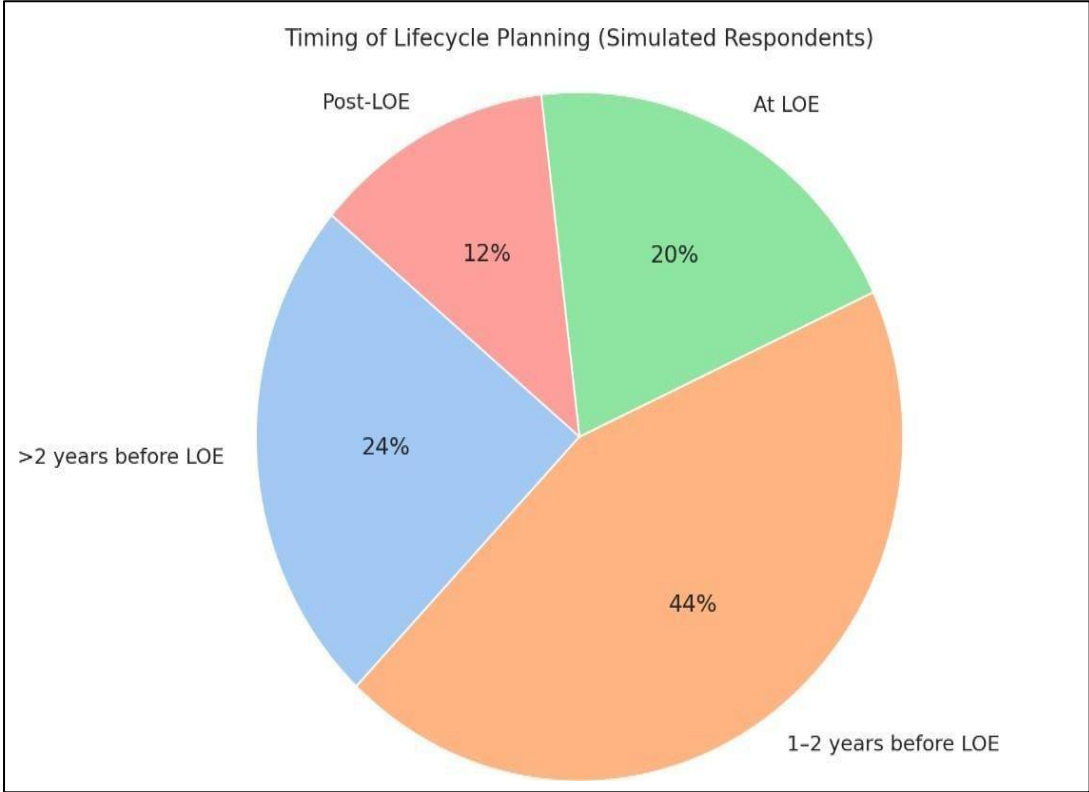
Lifecycle Strategies Employed:

Respondents selected multiple LCM strategies they had used or recommended. The data shows clear preferences.



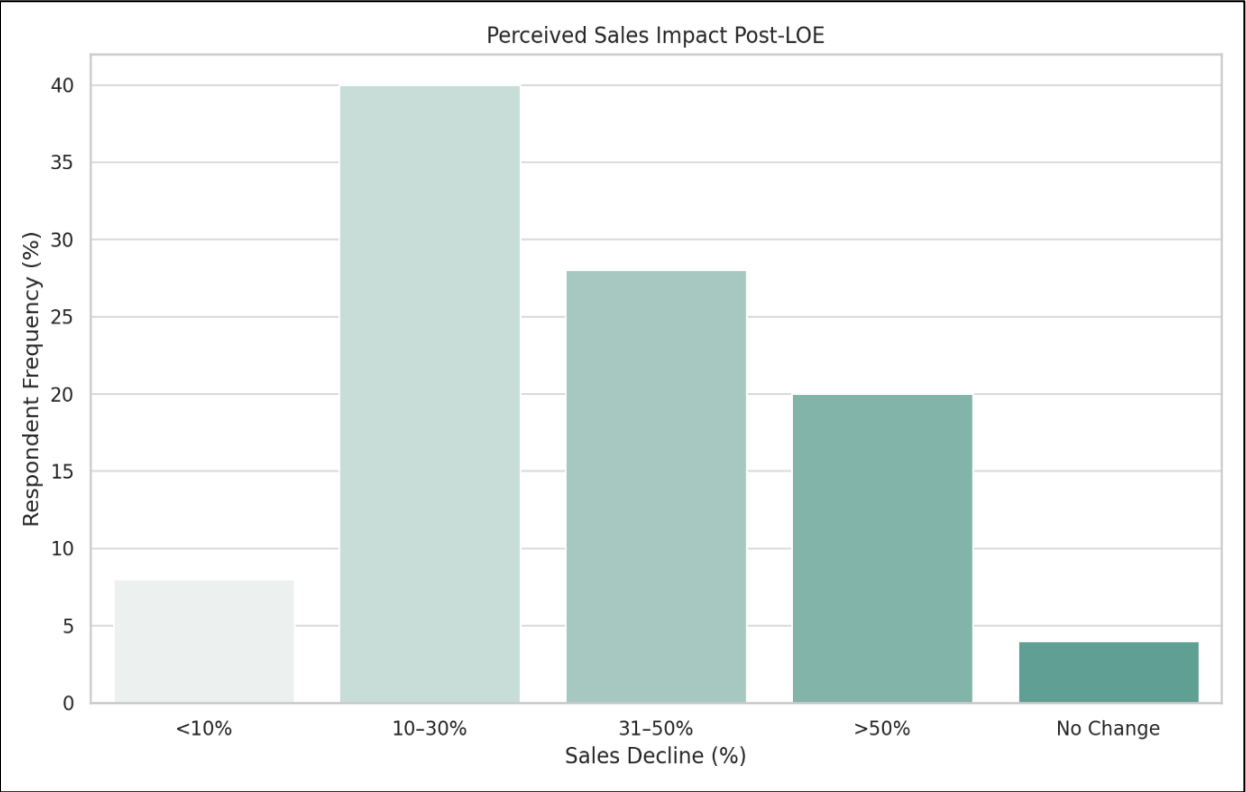
Strategic Planning Timelines

One of the most predictive indicators of post-LOE success is **when** LCM planning is initiated.



Sales Impact Post-LOE

Respondents were asked to estimate the sales drop of their brand post-LOE.



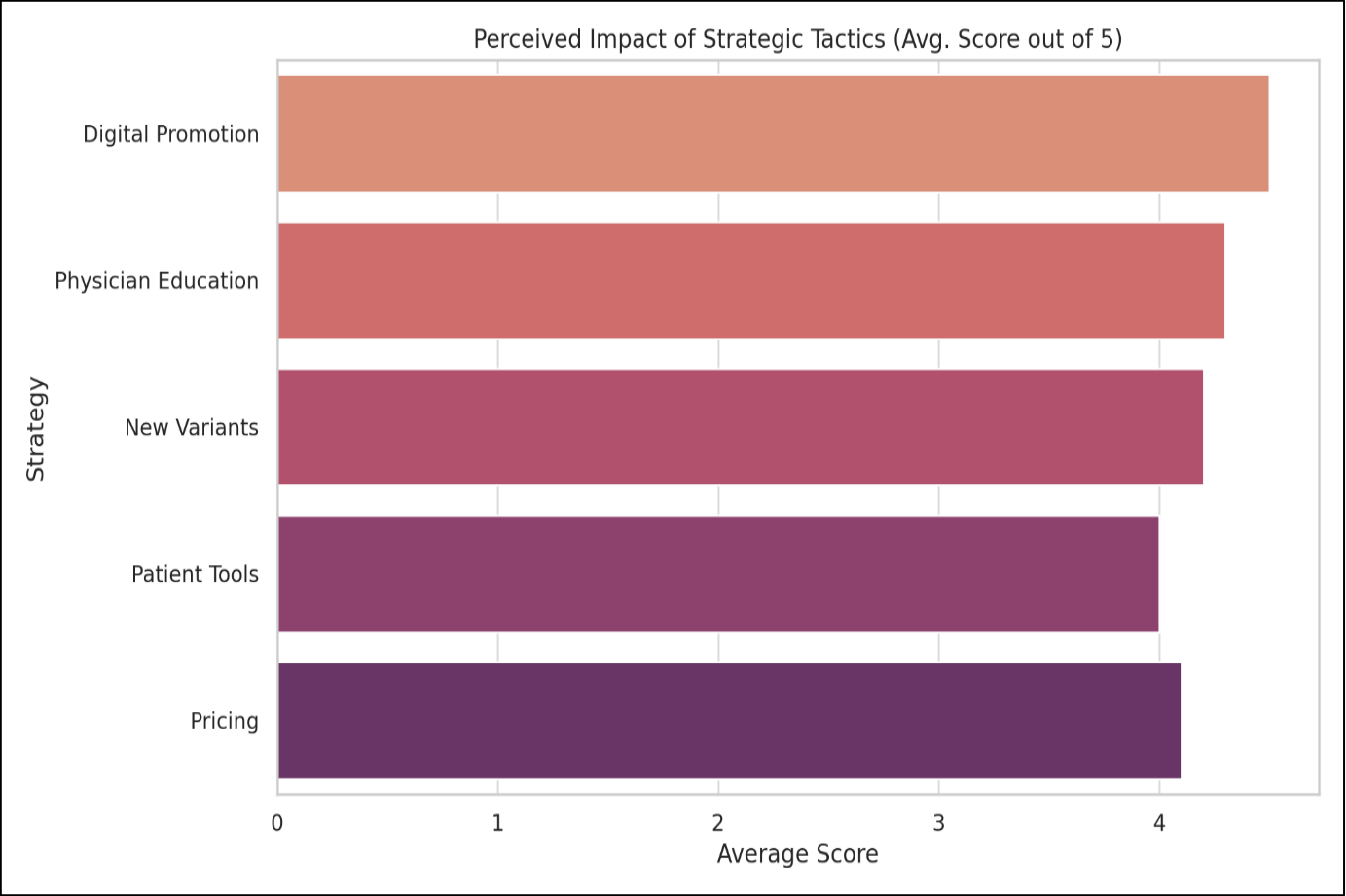
Key Drivers of Brand Retention

Respondents selected 3 critical factors that contributed to post-LOE brand sustainability.

Retention Factor	% Mentions (n=25)
Prescriber Loyalty	72%
Brand Equity	64%
Field Force Engagement	60%
Marketing Investment	56%
Patient Trust/Adherence	48%
Distribution Strength	36%

Strategic Outlook: Ranking of Future Tactics

Respondents were asked to rate strategies on a scale of 1 (least useful) to 5 (most impactful):



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