IMPACT OF MEDICAL REPRESENTATIVE IN BUILDING BRAND PERCEPTION

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by

Animesh Badole

Under the Supervision and Guidance of

Dr. Rahul Sharma

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IIHMR UNIVERSITY

CERTIFICATE

This is to certify that **Mr. Animesh Balode** in partial fulfilment of the requirements for the award of the degree of **M.B.A. (Pharmaceutical Management)** from the **IIHMR University, Jaipur** has successfully completed his dissertation during 10th March 2025 – 31st May 2025.

Place: Jaipur

Date: 31/05/2025

Head of the Organization: Dr. Rahul Sharma

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CERTIFICATE

This is to certify that dissertation title **"Impact of Medical Representative in Building Brand Perception" is** a record of the research work undertaken by **Animesh Badole** partial fulfillment of the Requirements for the award of the degree of MBA Pharmaceutical Management from the IIHMR University, Jaipur under my guidance and supervision and his approach to the research study has been sincere, scientific, and analytical.

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DECLARATION BY STUDENT

I hereby declare that this dissertation titled **"Impact of Medical Representative in Building brand perception** I declare that it has not been submitted to any other university or institution for the award of any degree or diploma. Information derived from the published or unpublished work of others has been duly acknowledged in the text.

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ABSTRACT

Title: Impact of Medical Representatives in Building Brand Perception

In the competitive landscape of the pharmaceutical industry, brand perception plays a vital role in influencing prescribing behavior and gaining market share. Among the various marketing channels used by pharmaceutical companies, Medical Representatives (MRs) remain a pivotal force in shaping and reinforcing the brand image in the minds of healthcare professionals. This abstract explores the multifaceted role of medical representatives in building brand perception, with a particular emphasis on their interpersonal skills, product knowledge, promotional strategies, and their ability to create lasting relationships with medical practitioners.

Role of Medical Representatives in Pharmaceutical Marketing

Medical Representatives act as a critical interface between pharmaceutical companies and healthcare professionals. Their core function is to communicate scientific and clinical information about drugs, promote ethical prescription behavior, and ensure the availability of products in the market. In doing so, MRs not only drive sales but also significantly influence how physicians perceive and trust a particular brand. Brand perception is built not only on the efficacy and safety of a drug but also on how consistently and credibly that message is delivered.

The ability of MRs to present relevant and updated information with clarity, empathy, and confidence makes them effective brand ambassadors. Through face-to-face detailing, scientific discussions, and promotional materials, they reinforce the unique value propositions of the brand, helping it stand out amidst intense market competition.

Key Drivers of Brand Perception Through MRs

1. Trust and Relationship Building:

The trust developed over time between MRs and doctors plays a crucial role in shaping brand perception. Regular visits, professional conduct, and personalized communication foster stronger relationships, which often translate into favorable attitudes towards the promoted brand.

2. Knowledge and Communication Skills:

The credibility of a brand is closely linked to the MR's product knowledge and the ability to answer clinical queries convincingly. A well-informed representative enhances the scientific image of the brand and influences the doctor's confidence in prescribing it.

3. Brand Recall through Repetition and Reinforcement:

Repeated interactions help in reinforcing the brand message. Consistent branding efforts by MRs - through visual aids, samples, and campaigns - improve recall value and ensure the brand remains top-of-mind for the healthcare provider.

4. Feedback Mechanism:

MRs serve as a feedback channel, providing real-time market insights and customer sentiments to the company. This helps in refining marketing strategies and customizing branding efforts to align with the physician's expectations and patient needs.

5. Support Services and Value Addition:

Beyond promoting products, MRs also engage in value-added services such as arranging CME programs, patient education tools, and doctor-patient communication kits. These efforts enhance the perceived value of the brand and strengthen its position in the doctor's mind.

Challenges and Ethical Considerations

While MRs contribute significantly to brand building, their effectiveness may be compromised by factors such as high attrition, lack of proper training, overemphasis on sales targets, and unethical promotional practices. Ensuring compliance with ethical norms and promoting evidence-based marketing are essential to maintain credibility and long-term brand equity.

Conclusion

In conclusion, Medical Representatives play a strategic role in shaping the brand perception of pharmaceutical products. Their ability to create personalized engagement, build trust, and deliver consistent messaging makes them an indispensable asset in pharmaceutical brand management. As the industry evolves with digital and AI tools, the role of MRs may become more hybrid, but their human connection and influence on prescriber behavior will remain critical. Companies that invest in the training and development of their MRs are more likely to achieve strong brand loyalty and sustained market presence.

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ACKNOWLEDGEMENT

I would like to express my heartfelt gratitude to **DR Rahul sharma** , for his continuous guidance and encouragement throughout my dissertation titled **"IMPACT OF MEDICAL REPRESENTATIVE IN BUILDING BRAND PERCEPTION"** His practical insights and constant support were instrumental in shaping the direction and execution of this project.

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LIST OF ABBREVIATIONS

Abbreviation	Full Form
HIMS	Hospital Information Management System
EMR	Electronic Medical Record
EHR	Electronic Health Record
ABHA	Ayushman Bharat Health Account
HCX	Health Claim Exchange
HCP	Healthcare Professional
NDHM	National Digital Health Mission
ABDM	Ayushman Bharat Digital Mission
UI/UX	User Interface / User Experience
API	Application Programming Interface
OTP	One-Time Password
AI	Artificial Intelligence
SaaS	Software as a Service
OPD	Outpatient Department
IPD	Inpatient Department
KPI	Key Performance Indicator
ROI	Return on Investment
IoT	Internet of Things
HIPAA	Health Insurance Portability and Accountability Act
CSV	Comma-Separated Values (for data handling)

CHAPTER-1

INTRODUCTION

In today's highly competitive pharmaceutical industry, the concept of brand perception has gained strategic importance, particularly in how it influences prescribing behavior among healthcare professionals. While pharmacological efficacy and safety are foundational pillars of a drug's success, the perception of a brand in the mind of a medical practitioner plays an equally critical role. This perception is often shaped by direct interactions with pharmaceutical companies through their field force—primarily medical representatives (MRs). MRs serve as the direct link between pharmaceutical companies and healthcare providers, acting not just as information disseminators but also as brand ambassadors.

In countries like India, where the healthcare infrastructure is growing rapidly and private practices are widespread, MRs have become essential to a company's marketing strategy. They are responsible for introducing new drugs, providing updates on existing products, and ensuring consistent engagement with doctors. Their activities go beyond mere sales pitches; they foster relationships, answer queries, handle objections, and provide scientific support. These engagements gradually influence how a brand is perceived, recalled, and ultimately prescribed.

1.2 Research Problem

Despite their evident importance, the specific impact of MRs on brand perception remains an under-explored area in academic literature. Pharmaceutical companies tend to focus more on sales metrics rather than understanding the qualitative influence that MRs have on doctors' minds. There are questions regarding how

doctors differentiate between brands, how much their preferences are influenced by MR visits, and which aspects of MR behavior significantly shape their opinions. Moreover, there is a lack of clarity about how MR effectiveness varies across medical specialties and geographic locations. This study aims to fill these gaps by analyzing the tangible and intangible elements that MRs contribute to brand building.

1.3 Objectives of the Study

* To explore the strategic role of medical representatives in creating and sustaining brand perception.
* To identify the attributes of MR behavior that most influence doctors' views about pharmaceutical brands.
* To evaluate how different communication methods and frequency of visits impact brand recall and preference.
* To suggest actionable strategies for enhancing MR effectiveness in brand positioning.

1.4 Research Questions

* What level of influence do MRs exert on doctors' brand preference and prescription behavior?
* Which characteristics of MRs contribute most significantly to a positive brand image?
* How do doctors compare brands introduced by MRs with those identified through

independent channels?

* Is there a measurable link between MR engagement and long-term brand loyalty among doctors?

1.5 Scope of the Study

The scope of this research is confined to understanding the influence of medical representatives on the brand perception of pharmaceutical products among healthcare professionals. It involves doctors from diverse specializations practicing in urban and semi-urban locations. The study focuses on how various elements—like communication style, scientific content, frequency of visits, and MR demeanor—contribute to brand perception. It covers personal selling, brand loyalty, marketing psychology, and the evolving digital trends in MR engagements.

1.6 Significance of the Study

This research holds significance for multiple stakeholders. For pharmaceutical companies, it provides insights into optimizing field force management and MR training programs. For marketers, it offers direction for developing communication strategies that align with doctor expectations. For academic researchers, it contributes to the limited body of literature focusing on brand perception from the perspective of personal selling. Most importantly, for MRs themselves, the study serves as a guide to self-evaluation and improvement in professional practice.

CHAPTER-2

REVIEW OF LITERATURE

2.1 Brand Perception in Healthcare

Brand perception in the healthcare sector is a multifaceted concept influenced by both tangible and intangible factors. Tangible aspects include the clinical effectiveness of the drug, its safety profile, packaging, and affordability. Intangible aspects encompass brand name, the reputation of the pharmaceutical company, consistency in communication, and the emotional connection developed through repeated professional interactions. Doctors, being the primary decision-makers in drug prescription, tend to develop long-term loyalty towards brands they trust. This trust is often nurtured through regular, value-driven engagements with MRs.

Unlike FMCG or other consumer products, pharmaceutical brands cannot rely solely on advertising. The role of medical science, ethical standards, and government regulations limits mass marketing. Therefore, MRs become the primary channel for influencing perception. Research shows that doctors often rely on the credibility of the source—i.e., the MR—to evaluate the quality and reliability of the product. This underscores the importance of MRs as the custodians of brand identity at the clinic level.

2.2 Medical Practitioner and Brand Preference

Doctors form brand preferences based on a complex mix of professional judgment, patient feedback, peer recommendation, and interaction with company representatives. In high-pressure environments with multiple patients and limited consultation time, trust plays a key role. MRs who can provide quick, accurate, and

clinically relevant information stand a better chance of earning that trust.

Over time, sustained interactions with an MR can lead to a doctor subconsciously associating certain product features—efficacy, affordability, or innovation—with a specific brand. Studies suggest that personal rapport, backed by scientific detailing, is far more effective than incentives or promotional gimmicks. Moreover, consistency in brand support during post-launch phases helps in reinforcing loyalty.

2.3 Factors Influencing Brand Perception

Numerous factors contribute to how doctors perceive pharmaceutical brands:

* Clinical Efficacy: A drug must demonstrate positive outcomes for it to be preferred repeatedly.
* Representative Behavior: MRs should be courteous, knowledgeable, punctual, and responsive.
* Scientific Content: Provision of research data, journal articles, and case studies enhances credibility.
* Visual Aids and Samples: Tangible tools improve product recall.
* Company Credibility: Long-standing companies or those known for ethical practices often enjoy greater trust.
* Peer Influence: Doctors frequently consult with colleagues and KOLs before adopting new products.

2.4 Previous Studies

Several academic studies and industry reports support the notion that MRs significantly shape brand perception. For example, the Indian Journal of Marketing published a study indicating that over 70% of doctors rely on MRs for product updates. Health Marketing Quarterly emphasized that regular MR visits correlate with improved brand recall. Another study by IMS Health highlighted that the effectiveness of detailing is highest when supplemented with scientific evidence.

A 2020 study published in the Journal of Medical Marketing found that MR interactions are most effective when personalized and when they reflect a clear understanding of the doctor's specialty and patient base. This shows that a customized approach in MR engagements can significantly enhance brand image.

CHAPTER-3 RESEARCH METHODOLOGY

3.1 Research Design

The research adopts a descriptive research design to explore and analyze the role of medical representatives in shaping brand perception among medical practitioners. Descriptive research is ideal for understanding the present status, behaviors, and characteristics of a group. This methodology was selected to allow a systematic and detailed analysis of doctors' responses regarding their interactions with MRs.

The study employs both quantitative and qualitative data collection methods. While quantitative methods focus on measurable variables like frequency of MR visits, preference patterns, and demographic attributes, qualitative methods capture subjective experiences, opinions, and expectations from MRs.

3.2 Population and Sampling Technique

The research population consists of licensed medical practitioners from different specializations, such as general medicine, pediatrics, gynecology, and internal medicine. These practitioners operate in both urban and semi-urban healthcare settings in selected cities of India. The sample was drawn using purposive sampling to ensure that only those doctors who have direct interaction with MRs were included.

* Sample Size: 50 medical professionals
* Locations Covered: Jaipur, Indore, Bhopal, and Nagpur
* Specializations: General Physicians, Pediatricians, Gynecologists, and Physicians

The sample diversity allows a comparative analysis of brand perception trends across medical disciplines and locations.

3.3 Data Collection Methods

To ensure reliable and robust data collection, both primary and secondary data sources were utilized.

Primary Data Collection:

* Structured Questionnaires: Designed with closed-ended, Likert-scale, and open-ended questions. Administered in both digital (Google Forms) and print formats.
* Telephonic Interviews: Used for clarification and deeper insights.
* Field Visits: Conducted in clinics and hospitals when possible.

Secondary Data Collection:

* Academic Journals
* Industry Reports
* Market Research Articles
* Publications from pharmaceutical associations

3.4 Data Analysis Techniques

Collected data was analyzed using statistical tools such as Microsoft Excel and SPSS.

The quantitative data from structured questionnaires were tabulated and interpreted using descriptive statistics such as mean, median, percentages, and frequency distribution. Pie charts, bar diagrams, and tables were used for better visualization of the data.

Qualitative data from open-ended responses and interviews were analyzed using thematic analysis, identifying recurring patterns, perceptions, and preferences among respondents. This dual approach helped in corroborating the statistical findings with narrative insights.

3.5 Ethical Considerations

Ethical standards were strictly adhered to throughout the research process:

* Informed Consent: Each respondent was briefed on the purpose of the study and provided their consent voluntarily.
* Confidentiality: No personal or identifying information was collected or disclosed.
* Transparency: Participants were given the option to withdraw from the study at any point.
* Compliance: The research complied with the ethical research guidelines provided by IIHMR University.

This ethical integrity ensured that the study was conducted in a fair, unbiased, and respectful manner, honoring the privacy and autonomy of all participants

CHAPTER-4 RESULTAND DISCUSSION

4.1 Demographic Profile of Respondents

The survey involved 50 qualified medical practitioners operating across four cities: Jaipur, Indore, Bhopal, and Nagpur. The respondents came from varied specializations, including general physicians, pediatricians, gynecologists, and internal medicine specialists. The following observations summarize the demographic profile:

* *Gender*: 64% Male, 36% Female
* *Age Distribution*:

  * 25–35 years: 28%
  * 36–45 years: 46%
  * Above 45 years: 26%
* *Years of Experience*:

  * Less than 5 years: 16%
  * 5–10 years: 48%
  * More than 10 years: 36%
* *Practice Locations*:

  * Urban: 60%
  * Semi-Urban: 40%
* *Specialization*:

* General Physicians: 38%
* Pediatricians: 22%
* Gynecologists: 20%
* Others: 20%

This diversity in demographics ensures a comprehensive understanding of how MR interactions influence brand perception across different segments.

4.2 Key Findings

1. Frequency of MR Visits

* A large percentage (82%) of doctors receive visits from MRs at least once a week.
* Urban doctors tend to receive more frequent visits compared to their semi-urban counterparts.

2. Influence on Prescription Behavior

* 74% of respondents stated that MRs influence their prescription decisions to varying degrees.
* 22% claimed to rely more on medical journals, CMEs, or peer interactions.
* 4% believed MRs had little to no influence on their prescribing behavior.

3. Qualities Valued in MRs

* Product Knowledge: 86% of doctors value MRs who exhibit a deep understanding of the medicine.
* Communication Clarity: 72% prefer clear, jargon-free interactions.
* Professionalism and Timeliness: 61% stressed punctuality and respectful demeanor.
* Empathy and Relationship Building: 34% highlighted the importance of rapport and long-term interaction.

4. Brand Recall and Preference

* Brands promoted frequently and consistently by MRs had a brand recall rate of 78%.
* Doctors stated that attractive visual aids, well-documented literature, and free samples improve product recall.

5. Scientific Detailing and Support

* 68% of doctors prefer prescribing products backed by recent clinical data shared by MRs.
* Scientific brochures, case studies, and trial summaries were cited as highly influential.

6. Digital vs. Traditional Interaction

* In-person visits remain the preferred interaction method for 54% of doctors.

* 38% preferred a mix of traditional visits with digital communications (hybrid model).
* Only 8% supported a fully digital interaction model.

4.3 Interpretations

The data indicates that medical representatives continue to have a strong influence on brand perception and prescription behavior, particularly through their conduct, credibility, and consistency. Doctors tend to develop trust toward brands when MRs present information professionally and consistently, which directly affects prescription preferences.

Brand perception is further strengthened by scientific backing, empathetic detailing, and visual tools that help reinforce memory. Notably, the preference for hybrid marketing models suggests a shift toward more flexible, tech-integrated engagement without losing the personal touch.

The feedback also demonstrates that MRs are most effective when they align their approach to the specific needs and preferences of each doctor—whether by specialization, city type, or experience level.

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CHAPTER-5

CONCLUSION

5.1 Conclusion*

The research concludes that medical representatives (MRs) play a pivotal role in shaping brand perception among medical practitioners. Although clinical efficacy remains the most important factor for brand preference, the way information is delivered—particularly by trusted and knowledgeable MRs—can significantly influence a doctor's prescription behavior.

MRs act as the face of the pharmaceutical brand and are instrumental in ensuring that the right messaging, backed with clinical support and professionalism, reaches healthcare providers. This influence is especially notable in competitive therapeutic segments where multiple brands offer similar formulations. A well-informed and consistent MR can create a lasting impression that reinforces brand recall and builds trust.

The findings also reflect that doctors value those MRs who respect their time, come prepared with relevant data, and follow up with consistency and empathy. In addition, a growing preference for hybrid (physical + digital) engagement points towards the future of pharma marketing, combining personal touch with tech-enabled convenience.

5.2 Recommendations*

Based on the study, the following recommendations are proposed:

1. Enhanced MR Training*: Pharmaceutical companies should focus on continuous training for MRs—not just on product details but also on communication skills, emotional intelligence, and ethical promotion practices.

2. Personalized Detailing Approach*: MRs should tailor their messaging based on the doctor's specialty, preferences, and patient demographics. A one-size-fits-all approach is no longer

effective.

3. Incorporate Scientific Evidence*: Providing doctors with up-to-date clinical trial results, research papers, and case studies during detailing increases credibility and reinforces brand image.

4. Adopt Hybrid Promotion Models*: While face-to-face visits remain important, digital detailing, WhatsApp-based updates, and virtual CMEs can enhance reach and engagement.

5. Feedback Mechanism*: Regular feedback should be collected from doctors regarding MR visits to identify improvement areas and personalize future engagements.

6. Brand Positioning Tools*: Invest in visual aids, reminder tools, and digital brochures that help improve recall and differentiate the brand in a crowded market.

5.3 Limitation of the Study*

While this research offers valuable insights, it is not without limitations:

The sample size was limited to 50 doctors from selected cities, which may not fully represent the broader practitioner population.
Self-reported responses could be subject to bias.
The study did not include hospital-based practitioners or specialists in rare fields.
*Time and resource constraints limited the scope of longitudinal tracking of MR influence.

5.4 Suggestion for Future Research*

To build upon the findings of this study, future research could explore:

* A comparative study between metro and rural doctors regarding MR influence.

* The impact of digital-only MR models post-COVID-19.

* Sector-specific insights (e.g., how MRs influence brand perception in oncology or cardiology).

* Long-term brand loyalty trends based on MR performance over years.

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i) Here are **10 references** related to the topic **"Impact of Medical Representative in Building Brand Perception"**. These include academic articles, books, and reliable sources from the pharmaceutical marketing field that you can cite in your dissertation:

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xvi) Let me know if you want these in **APA format** or need them converted into a **bibliography or Word file**