

INVESTIGATING PHYSICIANS' LOYALTY TO PHARMACEUTICAL COMPANIES IN KLANG VALLEY

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Abstract: *Top pharmaceutical companies recognize the importance of developing strong relationships with their customers to gain a competitive edge in the long run. As most sales are from prescription drugs, physicians comprise the major customer group for these firms. Thus, this study seeks to investigate the factors that influence physicians' loyalty to pharmaceutical firms. Survey data was collected from private clinic physicians located in several districts around Klang Valley, Malaysia. Subsequently, the collected data was analysed using the SPSS software. The results showed that three out of the four factors investigated have a significant relationship with the physicians' loyalty. Lastly, there is a discussion on the implications and recommendations for future research.*

Keywords: *promotional activity, quality, physician, loyalty*

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INTRODUCTION

Top pharmaceutical companies understand the importance of building strong relationships with their customers to get long terms benefits and cost reductions. Strong customer relationships usually lead to repeat sales and customer loyalty for the pharmaceutical company. Through this way, the company will gain a competitive advantage over its competitors in the long run. Moreover, this advantage cannot be easily duplicated by the competitor companies.

In general, pharmaceutical companies market two categories of products i.e. over-the-counter (OTC) and prescription drugs. According to the report by the Malaysian Competition Commission, in 2016 the market share for Malaysian prescription medication made up 79% of

the total market, while OTC took the remainder of that market share (Ka-Min, 2017). The pharmaceutical industry is unique compared to other industries, particularly in the category of prescription drugs, as this type of medication cannot be sold directly to the end-consumer. The medication must be prescribed by medical doctors to the patient (end-consumer). Supporting evidence from many countries worldwide shows that pharmaceutical companies have limited direct communications with the patients (Klimanov & Frolkina, 2015). Thus, physicians play a critical role as a bridge between pharmaceutical companies and the end-consumers. Due to this, pharmaceutical companies typically approach physicians as the target market for their sales activities.

Loyalty by physicians tends to be greater when the doctor is highly involved in the goods or services, and where there is an element of personal interaction, the customer physicians are willing to engage in the relationship building activities. Being dependent on repeat business from the physicians, firms have to be committed to sustaining loyalty and cultivating enduring relationships with their customers (Vesel & Zabkar, 2010).

While a few past studies have attempted to explore the influences on physician loyalty, research on this area is lacking in Malaysia. Therefore, this study aims to investigate the factors that influence physicians' loyalty towards pharmaceutical companies in Klang Valley, Malaysia. Understanding these factors will enable the sales force of pharmaceutical companies to strengthen their customer relationships, and develop loyalty among their customer physicians.

LITERATURE REVIEW

Loyalty

Loyalty can be interpreted as a deeply held commitment to repurchase or prioritize a preferred product or services consistently in the future (Hsu, 2007). According to Huang et al. (2011), customer loyalty should include actions such as regular and repeat purchases, support of various products and services offered, word-of-mouth recommendations, and finally defence against other competitors in the pharmaceutical industry.

Currently, physicians are knowledgeable about the options available in the market, and prefer to buy those medications that they feel have the right qualities to meet their needs, and affordable price. Although cheaper options may be available, physicians will not purchase lower cost medications as they are not disloyal to their choice product (Ahmed et al., 2014).

To gain loyalty, firms need to exceed the expectations of their customers about the quality of the product and service received by them. There is a high tendency for customers to switch to other suppliers or competitors if their expectations are not met. Reichheld and Schefter (2000) suggested that organizations must try to win customers who are worthy of an investment and work towards earning their commitment. It is more worthwhile to retain existing customers to increase business profits than to capture new customers. As a physician's loyalty increases, there will be more purchases, the organization's product volumes grow and customer referrals will increase (Reichheld & Teal, 2001).

In context for this research, physicians' loyalty is defined as faithfulness towards the pharmaceutical company from the medical practitioner's prescription behaviour. Loyalty could

be value-based and rely on presently accessible information about the company and its medications and the patients' condition.

Promotional Activities

Promotional activities by pharmaceutical companies play an important role in informing physicians about the options available in the market. These activities mainly offer precise details about the product (Kalyanaram, 2009), and impact the perceptions and expectations of the prescription medication, thus becoming the deciding factor for the physician concerned. In other words, promotional activities may influence the decision maker such as private clinic physicians (Barone et al., 2005).

Pharmaceutical companies devote significant effort to inform, convince and prompt the medical practitioners about the characteristics, features and advantages of their medicinal drug with the aim of influencing the doctor's perspective in a beneficial way (Diehl et al., 2008; Delorme et al., 2010).

Due to government imposed restrictions on product commercialisation, the Malaysian pharmaceutical industry has little choice but to concentrate their marketing efforts on physicians in order to influence the prescription process. While product information may be accurate, the promotional effort involves disseminating scientific know-how within constrained norms by the medical sales representatives, to provide additional statistics to health care professionals (Shamim-Ulhaq et al., 2014).

In the context of persuasion, pharmaceutical promotional activities may additionally exert large persuasive influence on health care professionals' decision-making. Hence, it is suggested that:

H1: Promotional activities and physician's loyalty to the pharmaceutical company are positively related.

Product Quality

According to Kotler and Keller (2016), a product with good quality is one that accommodates the expectations of the customers. Quality of a product is a crucial factor for a company in the pharmaceutical industry, which enables the firm to succeed and expand its business operations. Pharmaceutical companies compete for quality medicinal products, and challenge each other in terms of their product offerings to secure physicians' loyalty to prescribe their products (Valverde, 2013).

Physicians have certain expectations about treatment outcomes and consider their own personal experiences with a particular treatment. The expectations from the social environment which indirectly forms the perception of product quality, further increases the physician's product choice from any particular pharmaceutical organization (Denig et al., 1988). Physicians have improved perceptions about high quality products based fundamentally on the outcomes that they look for in their treatments using those products. If the pharmaceutical firm's products are observed to be efficacious, the physician will be very likely to prescribe the same product to the next patient who has a comparable ailment. Thus, it is hypothesised that:

H2: Product quality and physician's loyalty to a pharmaceutical company are positively related.

Medical Representative Effectiveness

In the opinion of physicians, the most common source of information to help them decide which pharmaceutical company's products to prescribe to patients is the medical sales person (Alkhateeb et al., 2009). Day (2000) noted that medical sales people are polite and first-rate humans with brilliant product understanding and verbal exchange proficiencies, who are able to successfully offer right and impartial information about their products. Pharmaceutical companies provide relevant and suitable training for their medical sales representatives that allow them to respond to any queries from health care professionals about the product features and functions, as well as how to communicate effectively about the fundamental product information to the medical practitioner as a remedy to their patients.

According to Wilson (2002), a medical representative's personal traits or beliefs influence his/her attitudes, which, in turn, influence outcomes. The beliefs held by medical representatives play an important role in their communication and conviction in a sales call which are more important for the individual operating in the private clinics field in Malaysia as they are highly specialized pharmaceutical products. Medical representatives can show their effectiveness with their knowledge on the latest trend in the industry, innovations, new drugs and new remedy administration techniques, which attracts the physicians to interact with them (Ahearne & Schillewaert, 2001). Knowledgeable medical representatives possess higher developed expert and cognitive abilities that assist them to predict customers' reactions and regulate their own responses as a result (Jones et al., 2003).

Another study by Ahmed (2014) found that expertise or product knowledge of the medical representative has a significant impact on physicians' prescription loyalty. This is due to the medical representative's expertise which provides the physicians with a sense of credibility in the information exchanged about a product class, which is evaluated highly by the physicians in their prescription loyalty (Clark et al., 2011). When doctors perceive a medical representative as having high professional values, it enhances the trustworthiness of that sales person, which translates into the continuous prescription of the company's medicinal products (Doney & Cannon, 1997). Thus, it is suggested that:

H3: Medical representative effectiveness and physician's loyalty to a pharmaceutical company are positively related.

Cost/Benefit Ratio

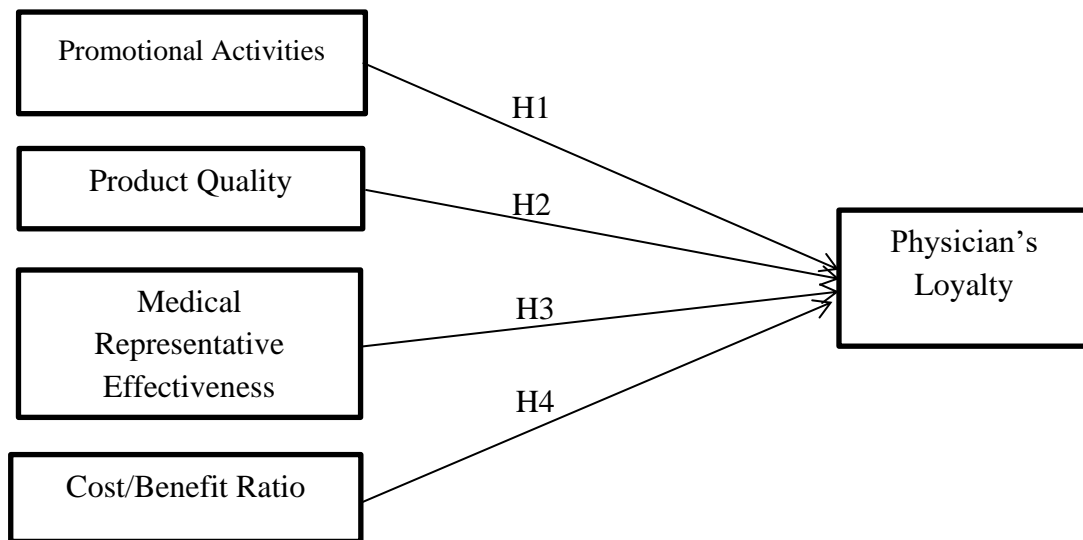
The cost-benefit ratio can be considered as the monetary expression of value for a product or service. Consumption of medicinal drug depends on the purchasing power of the patients. Hence, the cost-benefit ratio should be necessary at the time of the prescription (Miao-Sheng and Yu-Ti, 2008; Diehl et al., 2008). Kim and King (2009) stressed that medical practitioners need to be sensitive about the cost-benefit ratio at the time of prescribing the medications to their patients. This is because patients are often aware of the existence of cheaper, familiar medicinal drugs, and will seek these options instead. As a result, physicians regularly face the problem of having to weigh the value of a product against its cost, and tend to make a prescribing decision based on a price-to-performance ratio (Rizzo, 1999; Stros et al., 2009).

Physicians who operate private clinics are more inclined to satisfy their patients in order to maintain them as customers, as their earnings depend on the number of patients they keep (Granlund, 2009). Patients' satisfaction and trust in a physician does not come only from the healthcare decision of the doctor in terms of early recovery from disease. It can be enhanced if a physician shows more responsiveness and empathy by taking into account the patient's financial situation in their decision and choice of prescribing pharmaceutical medicinal products (Gönül et al., 2001). A study conducted by Al-Areefi, Hassali and Ibrahim (2013) found that the economic circumstances of patients and their capacity to pay influences the prescriptions given by physicians. Hence, it can be expected that the cost-benefit feature of a medication is very likely to affect medical practitioners' prescribing behaviour.

In the context of developing countries, it will be harder for pharmaceutical firms to persuade private clinics physicians to treat their patients with costly medication. It follows from this argument that:

H4: Cost/benefit ratio and physician's loyalty to a pharmaceutical company are positively related.

Figure 1: The research model



METHODOLOGY

Data was collected using survey questionnaire. Part 1 of the questionnaire requested for the demographic information of the respondents while part 2 comprised of questions about the variables. The question items have been adapted from past studies (ref). Responses from the survey participants are based on the 5-point Likert scale ranging from 1- strongly disagree to 5-strongly agree.

A pilot test was carried out on twenty respondents to assess the understandability of the questionnaire. Based on the pilot test results, minor amendments to some wordings were made before the final questionnaires were distributed. The target population consists of private clinic physicians located in Klang Valley, Malaysia.

According to Kline (2005), a medium sample size should be between 100 to 200 responses while over 200 can be considered as large. To obtain a fairly reliable result, a total of 160 responses were set as the sample size. Out of the 160 questionnaires distributed to the target physicians, a total of 121 completed responses were received translating to a response rate of 76%.

DATA ANALYSIS AND RESULTS

SPSS version 21 was used to analyse the data collected. Descriptive analysis and inferential analysis were conducted.

Descriptive Analysis

The demographic profile of the respondents is presented in Table 1. There was an almost equal distribution of gender participation in the survey with 62 males (51.2%) and 59 females (48.8%). Majority of the respondents were from the 36-45 years old age group (38.8%), followed by the 46 - 55 age group (25.6%), 25 - 35 age group (24%), and lastly the 56+ age group (11.6%). As for working experience, most respondents have been working for 6 to 10 years (42.1%). This is followed by respondents with 11 to 15 years of working experience (23.1%). Next, are respondents having 16 to 20 years work experience (14.9%), and more than 20 years (11.6%). The lowest number of respondents has the least working experience ranging from 1 to 5 years (8.3%).

Table 1: Demographic Profile

	Number	Percentage
Gender		
Male	62	51.2
Female	59	48.8
Age Group		
25 – 35	29	24.0
36 – 45	47	38.8
46 – 55	31	25.6
More than 56	14	11.6
Working Experience (in years)		
1 – 5	10	8.3
6 – 10	51	42.1
11 - 15	28	23.1
16 - 20	18	14.9
More than 20	14	11.6

Inferential Analysis

Reliability test was conducted on each of the variables. As seen from Table 2, the values of Cronbach's Alpha are from 0.70 to 0.79. Since the Cronbach's Alpha values are all above 0.7,

the internal consistency reliability of the variables are considered to be acceptable (Nunnally, 1978).

Table 2: Reliability Statistics

Measures	Number of items	Cronbach's alpha
Promotional Activity (PA)	4	0.74
Product Quality (PQ)	7	0.79
Medical Representative Effectiveness (MRE)	4	0.70
Cost-Benefit Ratio (CBR)	5	0.75
Physician Loyalty (PL)	5	0.72

Multiple regression analysis was utilised to test for the relationships between the four independent variables and the dependent variable, physician loyalty. The results can be seen from table 3. The coefficient of determination, R^2 , of 0.419 indicates that 41.9% of the variance in physician loyalty is explained by the four independent variables. The F statistic has a value of 20.892 and significance at 0.000. Since $p < 0.05$, it can be concluded that the regression model has a good fit.

For the bottom table which shows the standardised and unstandardized coefficients, the independent variables are examined whether each variable is significant (Sig.) at the level of $p < 0.05$. This is to test if the four independent variables contributed to the dependent variable, physician loyalty. From table 3, it can be seen that three out of four independent variables are significant ($p < 0.05$) in the regression model. The three significant independent variables are Promotional Activity, Product Quality and Medical Representative Effectiveness. Furthermore, the beta (B) shows positive signs indicating positive relationships between the independent variables and the dependent variable. Therefore, the statistical results provide support for H1, H2 and H3. However, H4 is not supported.

Table 3: Results of the Multiple Regression Analysis

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.647 ^a	.419	.399	.24261

a. Predictors: (Constant), CBRTotal, PATotal, MRTotal, PQTotal

b. Dependent Variable: PLTotal

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	4.919	4	1.230	20.892	.000 ^a
Residual	6.827	116	.059		
Total	11.746	121			

a. Predictors: (Constant), CBRTotal, PATotal, MRTotal, PQTotal

b. Dependent Variable: PLTotal

Model	Unstandardized Coefficients		Standardized Coefficients Beta	t	Sig.	Collinearity Statistics	
	B	Std. Error				Tolerance	VIF
(Constant)	1.618	.321		5.039	.000		
PATotal	.537	.103	.690	5.241	.000	.289	3.455
PQTotal	.586	.120	.698	.869	.000	.244	4.100
MRTotal	.544	.098	.525	5.529	.000	.555	1.800
CBRTotal	.088	.071	.106	1.237	.219	.682	1.467

a. Dependent Variable: PLTotal

The multiple regression equation can be written as following:

$$PL = 1.618 + 0.537PA + 0.586PQ + 0.544MRE + 0.088CBR$$

where:

PL = Physician Loyalty

PA = Promotional Activity

PQ = Product Quality

MRE = Medical Representative Effectiveness

CBR = Cost-Benefit Ratio

The standardized coefficient (Std. Beta) indicates the relative importance of each independent variable. For this study, the findings suggest that “Product Quality” (Std. Beta = .698) is the most important factor that explains private clinic physicians’ loyalty to pharmaceutical companies. The second most important factor is “Promotional Activity” (Std. Beta = .690), and the least important factor is “Medical Representative Effectiveness” (Std. Beta = .525).

DISCUSSION

Findings of the current study demonstrate that product quality, promotional activity and medical representative effectiveness have significant positive relationships with private clinic physicians’ loyalty towards pharmaceutical companies. In particular, product quality of a pharmaceutical company has the greatest influence on physicians’ loyalty for that firm. This finding is quite similar to those found in past research (e.g. Lu et al., 2017; Moorthy et al., 2018; Xhema et al., 2018). In the context of this study, product quality refers to medicinal drugs which have lesser side effects, better efficacy and safety profile. Generally, physicians take into consideration the quality of the medications which they prescribe to their patients. According to Denig and colleagues (1988), drug quality is perceived as an essential aspect for doctors when prescribing or choosing drugs. Hence, if the drug is fine and effective, the medical specialists will keep on prescribing medications from the same company to their patients for the same type of ailment or infection (Waheed, 2011).

Another finding of this study is that promotional activities and physician’s loyalty to the pharmaceutical company are positively related. The results suggest that promotional activities conducted by pharmaceutical firms such as providing free samples for trials, offering supplementary valuable incentives, the provision of patient educational materials as well as financial incentives correlate with private clinic physicians’ loyalty to the pharmaceutical companies. It also implies that by increasing promotional activities, pharmaceutical firms may potentially gain more commitment from the physicians.

Thirdly, the study found that there is a positive relationship between medical representative effectiveness and physician's loyalty to a pharmaceutical company. This indicates the significant role played by medical sales representatives in convincing physicians to prescribe their company drugs. A medical sales representative may be perceived as an effective and efficient mediator between the physician and pharmaceutical firms. When medical representatives are effective in terms of building rapport with physicians, there is a greater likelihood that the physicians will increase their prescriptions to the patients. Frequent interactions with the physicians tend to remind the doctors about the significant usage of the medications, and it helps them to remember the names of the drugs to be prescribed. Thus effective medical representatives can persuade physicians to prescribe their company's drugs regularly.

However, the study did not find a significant relationship between cost/benefit ratio and physician's loyalty. Nevertheless, this finding is consistent with some previous studies. Past literature on medical practitioners' prescribing behaviour has shown no consensus that price-drug cost has a major influence on decisions about prescriptions (Kremer et al., 2008; Pinto et al., 2010). Doctors may be more concerned about the medicine prescribed than the cost of the drug. Pinto et al. (2010) argued that factors such as side effects and cost-benefit are considered as less relevant by physicians. On the other hand, some other past research found that the primary concern of most physicians is about the overall cost of the medicinal drugs (Rizzo, 1999; Stros et al., 2009). Meanwhile, other studies revealed that the cost-benefit of a drug and physicians' loyalty are moderately related (Kim & King, 2009; Laderia et al., 2011).

LIMITATIONS AND RECOMMENDATIONS

This study has some limitations. The sample is restricted to private clinic physicians in the area of Klang Valley only. Hence, the findings should be treated with caution as to the generalizability to all medical practitioners. Other than that, the study had only investigated four factors that affect physicians' loyalty namely promotional activities, product quality, medical representative effectiveness and cost-benefit ratio. Other factors may also play a role in influencing the loyalty of a medical practitioner such as key opinion leaders, the pharmaceutical company's reputation, the patients, and pharmacists. It is recommended that future studies include a larger sample from a wider geographical area in order to be more representative of physicians from all over the country. Besides this, the current research may be enhanced by including the other relevant factors as mentioned above.

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