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Evidence generation and communication: a guide to getting started in HEOR/market access medical writing

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Foreword

I’ve been running MedComms Networking activities for more than 10 years and along the way collected together a wide range of free resources at www.FirstMedCommsJob.com to provide insights into MedComms and related businesses, and into working life in the agencies. Agencies constantly evolve to deliver more specialist services that match the specific needs of their clients and the marketplace, such as supporting HEOR and market access activities. Whilst some agencies offer a broad range of communications services, others focus in on those individual specialist areas and inevitably they vary in their approaches and in the ways they describe their services. This is the third in a series of careers guides, first published in 2018, that aims to help you navigate your way through to your ideal first job. We’ll update the information on an annual basis, and we welcome your feedback.

Peter Llewellyn
For more information see: www.linkedin.com/in/networkpharma

About the author

Linda is a freelance HEOR/market access consultant and writer providing a wide range of consultancy support to pharmaceutical/medical device companies and HEOR/market access agencies. Linda gained a postgraduate certificate in health economics from Aberdeen University in 2007, and has over 18 years of experience in the HEOR/market access arena. Prior to setting up her freelance business in 2014, she spent 14 years working for a large HEOR/market access agency, latterly as Director of the HTA business unit.

Linda Harrison
For more information see: www.linkedin.com/in/linda-harrison-a5089019

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Introduction

Health economics and outcomes research (HEOR) and market access agencies provide specialist consultancy support to pharmaceutical and medical device companies throughout the lifecycle (early phase, pre-launch, launch and post-launch) of a technology (pharmaceutical drug or medical device).

The types of agencies that offer HEOR and market access consultancy support vary widely. They include medical communications (MedComms) agencies that offer these specialist services, and other companies that are dedicated exclusively to either HEOR or market access work (some provide integrated support across both disciplines).

In any of these agency types, as a medical writer working alongside team members with a wide range of skills, you will be involved in the generation and communication of evidence to demonstrate the added value of a technology, and its potential in clinical practice, to healthcare decision makers.

HEOR and market access agencies provide specialist consultancy support to pharmaceutical and medical device companies throughout the lifecycle of a technology

About this guide

This guide focuses on medical writing roles in the HEOR/market access arenas, but will be of interest to anyone who wants to understand more about the business of ensuring access to new medicines and devices for patients. If you have an interest in the commercial aspects of healthcare delivery and in helping deliver value to patients, a passion for writing and enjoy working in a fast-paced environment, then working in HEOR/market access might be for you. This guide will provide you with an in-depth introduction to this specialist area.

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www.FirstMedCommsJob.com
What is HEOR/market access?

As a consequence of global healthcare system cost constraints and the increasing number of new and often expensive technologies coming to market, additional evidence, beyond clinical trial data, is required to demonstrate the value of a technology and its potential in clinical practice. To ensure successful reimbursement (i.e. funding) and subsequent uptake of a technology, it is critical to generate and communicate evidence that demonstrates the added value of a technology compared with available alternatives to relevant stakeholders, such as payers (e.g. government, insurance companies) and healthcare professionals. HEOR and market access, though two separate functions, work in partnership towards this goal.

Examples of evidence generation include health economic evaluations and systematic literature reviews (SLRs); ways in which this evidence can be communicated include global value dossiers (GVDs), health technology assessments (HTAs), reimbursement dossiers and market access tools (all described further on pages 10–11).

HEOR

HEOR is a function that focuses on evidence generation in terms of clinical, economic and humanistic outcomes.

The ‘HE’ element primarily refers to health economic evaluation whilst the ‘OR’ element primarily relates to research and the tools required to evaluate the real-world effectiveness of a technology in terms of clinical and humanistic outcomes (e.g. patient registries and the development or validation of patient-reported outcome measures to assess aspects such as health-related quality of life and patient-reported symptoms).

Market access

Even if a technology receives reimbursement, this does not necessarily mean that all eligible patients will get access to it. Market access activities are aimed at ensuring that patients who are eligible for treatment receive rapid and continuous access to effective technologies at an acceptable cost (in line with the added value of the technology). Market access specialists within pharmaceutical and medical device companies are tasked with communicating the value of technologies to relevant stakeholders to avoid barriers to uptake.

Harrison L. Evidence generation and communication. June 2019. For more information about careers in MedComms, see www.FirstMedCommsJob.com
So what does HEOR and market access involve?

Health economics and health economic evaluation

Health economics applies economic theory to healthcare. In the current economic climate, healthcare systems have limited budgets (scarcity of resources) making it impossible to meet all patient demands for healthcare. Therefore, a choice must be made as to which healthcare needs will be met and who will consume them (i.e. which new technologies will be reimbursed, and which patients will be eligible for treatment). In making these choices, healthcare decision makers have to trade-off one healthcare good (e.g. a technology or a service) for another (opportunity cost).

Health economics applies economic theory to healthcare (e.g. pharmaceutical drugs/medical devices or healthcare services)

Health economic evaluation is a comparative analysis of all the costs and outcomes of two or more competing goods (e.g. a new technology versus existing technologies) to inform decision making, introducing the concept of ‘cost effectiveness’ or ‘value for money’.

In HEOR/market access agencies health economists develop mathematical health economic models (typically in programmes such as Microsoft Excel®). These models synthesise all the costs (e.g. treatment costs, adverse event costs) and all the outcomes (e.g. benefits or adverse events) associated with two or more technologies over a specific timeframe (e.g. lifetime of a patient) to derive an estimate of cost effectiveness. The most common types of health economic models are decision trees and Markov models. Uncertainty surrounding the cost effectiveness (results of the model) can be tested using sensitivity analyses (varying model inputs such as a specific cost) to determine the impact on the result.
There are five main types of economic evaluation.

<table>
<thead>
<tr>
<th>Type of analysis</th>
<th>Cost measurement</th>
<th>Outcome measurement</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost-effectiveness analysis (CEA)</td>
<td>Monetary</td>
<td>Single natural unit (e.g. life-year)</td>
<td>Cost per unit (e.g. cost per life-year gained)</td>
</tr>
<tr>
<td>Cost-utility analysis (CUA)</td>
<td>Monetary</td>
<td>Quality adjusted life-year (QALY)</td>
<td>Cost per QALY</td>
</tr>
<tr>
<td>Cost-minimisation analysis (CMA)</td>
<td>Monetary</td>
<td>None; outcomes are considered equivalent</td>
<td>Least cost alternative</td>
</tr>
<tr>
<td>Cost-consequence analysis (CCA)</td>
<td>Monetary</td>
<td>Multiple</td>
<td>Range of outcomes separated from costs</td>
</tr>
<tr>
<td>Cost-benefit analysis (CBA)</td>
<td>Monetary</td>
<td>Monetary</td>
<td>Net cost:benefit ratio</td>
</tr>
</tbody>
</table>

HEOR/market access agencies predominantly report on the methods and results of cost-utility analyses (CUAs). Many global HTA bodies use CUAs to inform decision making. An advantage of a CUA is that it allows comparisons of results across technologies and disease areas providing a wider context in which to make decisions about ‘value for money’.

In a CUA the effectiveness of a technology is measured in terms of the impact it has on quantity (length) and quality of life, combined into a single unit – the quality-adjusted life-year (QALY). QALYs are calculated (Box 1) by weighting each year (or part year) of life with a quality-of-life (or utility) score, where death has a utility score of ‘0’ and perfect health has a utility score of ‘1’. One year of life lived in perfect health equals one full QALY.

**Box 1: QALY calculation**

Current treatment results in an additional 5 years of life per patient and the quality of life during that time is 50% (utility score 0.5) of that of a healthy person (quality of life 100%; utility score 1)

Treatment A produces $(5 \times 0.5)$: 2.5 QALYs

New treatment results in an additional 6 years of life per patient and the quality of life during that time is 60% (utility score 0.6) of that of a healthy person (quality of life 100%; utility score 1)

Treatment B produces $(6 \times 0.6)$: 3.6 QALYs

New treatment results in 1.1 additional QALYs compared with current treatment

The result of a CUA is expressed as an incremental cost-effectiveness ratio (ICER) – the ratio of the difference in costs to the difference in effects (QALYs) (i.e. cost per QALY). The ICER is calculated by dividing the difference in costs by the difference in QALYs (Box 2). Using the QALY calculation in Box 1, and assuming the current treatment costs £14,000 and the new treatment costs £20,000, the ICER for the new treatment relative to the current treatment is £5,455 per QALY (i.e. an additional £5,455 would need to be spent on the new treatment to gain one additional QALY compared with the current treatment).

**Box 2: ICER calculation**

\[
\text{ICER} = \frac{\text{Difference in costs}}{\text{Difference in QALYs}} = \frac{\£6,000}{1.1} = \£5,455 \text{ per QALY}
\]
Value communication and the ‘payer value story’

A key underlying principle of market access is the communication of value. Many new technologies come with higher costs than available alternatives. Therefore, it is important for payers and decision makers to understand the added value that this extra cost will deliver to patients, healthcare systems and society as a whole, so as to assess if the new technology offers true ‘value for money’ versus current technologies.

Health economic evaluation is critical to demonstrate the cost-effectiveness of a new technology. However, it is also important to communicate other associated benefits (e.g. the clinical value). The added value in terms of cost and benefits is communicated to relevant stakeholders as a ‘value story’. The value story is usually in slide format comprising value messages and supporting evidence (typically information on the disease, and the patient and economic burden associated with it, its current treatment, any unmet needs, clinical and safety data for the new technology, and cost-effectiveness and budget impact analyses). These will help to establish an understanding of the disease, but also provide a foundation for presenting the value of the new technology and how it addresses current needs. The technology is therefore described in terms of:

- clinical value – through efficacy and safety endpoints
- patient value – through patient-reported outcomes, etc.
- economic value – through cost-effectiveness and budget-impact analyses.

This important market access tool may be used to inform formulary packs as well as specific payer discussions and advanced planning notifications (APNs). The ‘value story’ slide deck is usually supported by a GVD (see page 10).

The ‘value story’ for a new technology aims to communicate its added value in terms of cost/benefits to relevant stakeholders.

Also available from www.FirstMedCommsJob.com

From academic to medical writer: a guide to getting started in medical communications
Written by Dr Annick Moon
Updated annually

The business of medical communications: a guide to getting started in account management
Written by Lindsey Heer
What will my role be?

As a medical writer in a HEOR/market access agency you will usually be assigned to several projects simultaneously and will need to multitask. In addition, you will also be expected to quality check the work of other medical writers. You will probably have a client-facing role and will be expected to travel to meetings (in locally or globally based offices) and participate in conference calls. You will form part of a project team, and as you progress, opportunities will arise to take the lead on specific projects.

Who will I work with?

A medical writer in a HEOR/market access agency is a core member of a cross-functional project team, the precise make-up of which will depend on the size of the agency and the types of services it offers. Depending on the project/agency in question, as a medical writer you may work with health economists, systematic review analysts, digital designers and other medical writers. Each project will be overseen by a project/account manager.

As a medical writer you will be a core member of a cross-functional project team.
What types of materials will I develop?

You will primarily be involved in projects that generate evidence to support and communicate the added value of new technologies across a wide range of therapeutic areas. In a small HEOR agency the deliverables will primarily focus on health economic evaluation. In a medium-to-large HEOR/market access agency work will be more varied. The time spent on producing materials will vary, with a combination of short- and long-term projects. Although the variety of deliverables is too large to list here, some examples are provided below.

**Health technology assessments**

Every healthcare system must make decisions about which technologies should be made available to patients. HTA is a process used to inform this decision making. HTA processes differ in each country; however, in general the efficacy, safety, clinical effectiveness and cost of a technology (typically, a new technology) is systematically evaluated and compared with other, currently available technologies.

In some countries HTA bodies rely on the manufacturer to submit the evidence required to evaluate the technology (referred to as the evidence submission) and typically provide a template for completion (e.g. the National Institute for Health and Care Excellence [NICE]).

**Medical writer’s role:** Preparation of country-specific HTA submissions for a technology, and completing the clinical and economic sections of a submission on behalf of the pharmaceutical or medical device company.

**Global value dossiers and reimbursement dossiers**

GVDs, also referred to as core value dossiers, are detailed, internal documents developed for a new technology to support reimbursement. A GVD incorporates all the evidence and supporting key value messages required to internally align company affiliates and externally communicate (to payers and healthcare professionals) the added value of a technology.

Reimbursement dossiers are a central, internal resource to support company affiliates at a national level in developing HTA submissions or reimbursement applications. Key value messages are included as appropriate for this type of dossier. The focus is primarily clinical and economic information developed in a format that makes it easy to copy and paste into individual country templates for HTA submission/reimbursement applications.

**Medical writer’s role:** Developing evidence-based value messages and writing the content of GVDs/reimbursement dossiers.
Systematic literature reviews

SLRs are undertaken to answer a specific research question by identifying all published and unpublished evidence using prespecified inclusion/exclusion criteria. Many HTA bodies stipulate that SLRs should be conducted to identify evidence (e.g. clinical, quality-of-life and economic data) to inform HTA submissions.

Medical writer’s role: Succinctly and accurately describing the methods and results of SLRs, typically as standalone reports or as manuscripts/posters, or for incorporation into HTA submissions.

Health economic evaluations

Health economic evaluations are incorporated into HTA submissions or reimbursement applications and are often published as manuscripts or presented as abstracts/posters at conferences.

Medical writer’s role: Describing the methods and results, predominantly of CUAs, as standalone reports or as manuscripts/posters, or for incorporation into HTA submissions.

Market access tools

Tools to support local market access discussions with clinicians and payers include APNs, formulary packs and business cases.

Advanced planning notifications notify payers about the budgetary implications of a new technology if it is likely to make a significant impact on expenditure (higher or lower cost than current alternatives) prior to marketing authorisation.

Formulary packs contain information to support the inclusion of a new technology in local formularies (e.g. at hospital level) and are supplied by pharmaceutical companies to healthcare professionals who complete the formulary applications. Content includes details of the technology (e.g. formulation, indication); evidence of efficacy, safety and cost effectiveness; and local patient population and place in therapy compared with existing technologies.

Business cases are developed and typically attached to digital budget impact models (developed by the agency) and are used by field representatives in discussions with payers. Generally, developed for use via an iPad, these models allow the user to customise inputs to make them relevant to the local situation (e.g. patient population size). The business case is prewritten and dynamically attached to the model, feeding through local inputs and generating results. The tailored business cases can then be printed and left with payers.

Medical writer’s role: Developing the content of APNs, formulary packs and business cases.

A variety of deliverables can be used to generate and communicate evidence
How do I apply for a medical writing role in HEOR/market access?

If you have an interest in the commercial aspects of healthcare delivery and a genuine desire to work in the HEOR/market access arena, have a passion for writing and enjoy working in a fast-paced and challenging environment, then becoming a medical writer in a HEOR/market access agency will appeal to you.

Success criteria

To be successful in this arena you:

- are a team player, yet confident to work on your own
- are able to write clear, succinct and compelling content for a range of documents and presentations, delivering consistently high-quality deliverables within budget and on time
- can interpret and simplify complex data
- can offer your own solutions to problems
- are happy to accept constructive feedback.

Entry requirements

The ability to display an understanding of health economics and health economic evaluation will give you some bonus points; however, this is not a prerequisite. Most agencies offer in-house and/or external training in health economics. The usual entry requirements are a relevant biomedical or life-science degree (some agencies prefer a PhD graduate), confidence dealing with mathematical/statistical data and previous academic or pharmaceutical writing experience, although the latter is not essential.

What do HEOR/market access agencies look for in a medical writer?

The agency will be looking for your ability to demonstrate numerous core skills throughout the recruitment process.

Attention to detail

The prices charged by agencies are based on an estimation of the amount of time required for each team member to complete an assignment. Therefore, it is necessary for agencies to deliver high-quality deliverables on time and within budget to generate profit. Attention to detail is very important to avoid unplanned, additional drafts of material, which not only delay timelines but also incur additional costs that potentially can’t be charged on to the client. Although you may tell a potential employer that you pay great attention to detail you will have a much better chance of success by demonstrating it (e.g. by avoiding obvious errors on your cover letter and/or CV). In addition, you could create an opportunity to refer back to points made earlier in an interview to demonstrate that you are paying attention.
Teamwork
As you will be primarily working within cross-functional teams, it is important that you work effectively as a team member. The agency will be looking to employ medical writers who are able to express ideas, ask questions when unsure about something, effectively manage conflict and develop solutions with others. Think about ways you can demonstrate your ability to work as an effective team member in your application or interview (e.g. your experience in a sports or quiz team).

Communication
Medical writers liaise with clients and colleagues via face-to-face meetings, conference/telephone calls and emails. Your verbal and written communication should be clear and succinct. Listening to others and being able to clarify your understanding of what you have heard are essential when providing accurate reporting and adapting your writing style to different audiences. Potential employers will evaluate your communication skills throughout the recruitment process starting with a review of your application.

Organisation
As you will be working on multiple projects simultaneously it is essential that you are able to manage your own time and prioritise your workload effectively (this requires you to micro-manage your own time, to the hour or even quarter-hour in some instances!). Throughout the recruitment process, you should use examples to demonstrate that you are flexible and can deal with new situations as they arise.

The recruitment process
Application
Entry-level medical writers typically apply directly to an agency advert by sending in a CV or completing an application form. As you are applying for a writing role, reviewers of your CV/application will be highly critical. It is therefore essential to ensure there are no grammatical errors or spelling mistakes. A short cover letter alongside a CV is recommended and provides an opportunity to succinctly express your understanding of, and interest in, the role.

Alternatively, you can look out for annual graduate recruitment programmes.

Interview process
The interview process differs across agencies and may or may not include an initial, short interview by telephone and/or a written test. The reviewers will gain a good understanding of your medical writing capabilities from your CV, so whilst it may be tempting to seek help do not ask someone else to do the test for you. You may also be required to undertake a further test during the interview; you will normally be given a time and word limit. Some examples include:

- writing an abstract for a poster or a manuscript
- comparing/contrasting clinical trials and summarising under specified headings
- writing a disease background summary, including epidemiological estimates (using web-based resources).

The total number of interviewers will vary depending on the size of the agency (expect at least two) and may include a mix of agency personnel.

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Some agencies may require you to deliver a presentation in the interview about yourself or on a specific topic (prepared by you in advance). The interviewers will ask you questions about yourself and your experience, and you will also have an opportunity to ask them questions about the role and the agency.

The time scale for an offer or rejection is generally short. Notification of an offer or rejection is normally via telephone followed by written confirmation by post/email. In the event you are not selected for the role, most agencies will be happy to supply you with feedback, which you can apply to future applications.

**What is my earning potential?**

Initial salaries vary across agencies and will depend on your experience, skills and qualifications. New graduates can expect a starting salary of ~£20K. Starting salaries for trainee writers with a PhD range from ~£25 to 30K. The rate at which your salary will increase is dependent on how well you progress as a medical writer.

**What are my future prospects?**

You will usually receive in-house training on medical writing and health economics; some agencies may, in addition, send you on short external training courses. Your writing as you progress will be assessed by more senior medical writers, and feedback on other aspects of your work will be sought from project/account managers. You should expect to be a trainee for a minimum of 12 months. The trainee writer role typically moves to medical writer and then senior medical writer. There is the potential to manage a team of writers and lead on specific projects as you progress. Working in an agency that offers many services provides an opportunity to cross train in other areas of the business (e.g. conducting SLRs).

*Working in an agency that offers many services provides an opportunity to cross train in other areas of the business*
Further information

Useful books

Professional bodies
• Association of the British Pharmaceutical Industry – www.abpi.org.uk
• European Medical Writers Association – www.emwa.org
• Health Technology Assessment international – www.htai.org
• International Health Economics Association – www.healtheconomics.org
• International Society for Medical Publication Professionals – www.ismpp.org
• International Society for Pharmacoeconomics and Outcomes Research – https://www.ispor.org

Pharmaceutical industry news, views and information
• MedComms Networking – www.medcommsnetworking.com
• Pharmaceutical Executive – www.pharmexec.com
• PharmaFile – www.pharmafile.com
• pharmaphorum – www.pharmaphorum.com
• PharmaTimes – www.pharmatimes.com
• PMLiVE – www.pmlive.com
• The Publication Plan – www.thepublicationplan.com

Careers support
• FirstMedCommsJob.com – www.firstmedcommsjob.com
• NextMedCommsJob.com – www.nextmedcommsjob.com

Other
• National Information Center on Health Services Research and Health Care Technology (NICHSR). Self-study courses with glossaries
• The ‘What-is’ series – a set of short and clear explanations on several important topics. It contains a range of titles covering not only health economics, but also statistics, evidence-based medicine and HTA – www.bandolier.org.uk/extra.html
People in the job – in their own words

Kate Anstee
Senior Value Analyst
Adelphi Values PROVE

Starting out at university I had a limited knowledge of the opportunities available in science other than working in a lab, academia or teaching. During my years of studying biomedical science, focusing on pharmacology and immunology, I tried out alternative areas, including working in a pharmaceutical company and science writing for the university paper. Overall these areas left me feeling unfulfilled with the prospect of a career in science. Looking for inspiration towards the end of my degree, I stumbled upon the field of HEOR and market access. It seemed to offer everything I sought in a career, combining scientific expertise with team work, creativity and business acumen.

Since then I haven’t looked back. In my role as an analyst, I am responsible for delivering high-quality materials that help support the reimbursement negotiations of a range of therapies across multiple global markets. No 2 days are the same; whether I am applying my writing skills to the development of a large global value dossier, interpreting clinical data for payer materials or creating interview guides for research with healthcare professionals, I am constantly challenged intellectually.

The additional opportunity to gain knowledge in health economics has been invaluable to ensure that I am gaining a diverse range of skills within my role. Alongside the scientific expertise, a good eye for detail and creativity has been beneficial, particularly when visuals are required to effectively communicate the value of a product to key decision makers.

Taking an active role in a commercial environment has provided context to my day-to-day tasks. The client-facing nature of a HEOR and market access consultancy can make it challenging to meet clients’ needs and deliver projects to meet tight timelines, but can also be rewarding with the knowledge that we have supported the client to ultimately benefit patients globally.

Overall, I always thought I would like a career that combined all aspects of my personality and allowed me to use my people skills, creativity and scientific knowledge; the opportunities in HEOR and market access have surpassed my expectations and provided me with business experience and technical expertise to grow professionally.
Martin Bell
Senior Writer
Envision Pharma Group

My initial route into MedComms followed a well-worn path: a PhD, a tentative toe dipped in MedComms waters by way of PhD-related publications and a brief postdoctoral position. I don’t regret my academic career, but over time I felt I’d ‘painted myself into a corner’. I identified my strengths as being able to quickly understand and write about new research areas, and began looking for something that would combine these.

After scanning a few job sites and some earnest Googling I stumbled upon medical writing. With almost complete ignorance of this industry, I completed a writing test, was interviewed and in no time at all was employed as a medical writer by a UK-based MedComms agency. So far, so familiar. Where I deviated from the set route was in my increasing interest in market access/HEOR. During my time as a medical writer, whenever the opportunity arose I’d gravitate towards these projects – I gained some experience in a market access/HEOR division of another company, almost exclusively working on publications, but it piqued my interest in the wider market access/HEOR setting.

All of this brings me to my current role – approximately 2 years ago I joined Curo, the specialist market access/HEOR division of Envision Pharma Group, as a senior writer. Since joining, I’ve worked on market access/HEOR-focused publications, producing internal real-world evidence reports for clients, and helping to generate bespoke online platforms to facilitate internal information sharing and value message development. I would say that market access/HEOR work tends to offer a more societal perspective. Whether comparing the cost–benefit of treatments or assessing the real-world impact of clinical practices, one must consider the ‘big picture’ and how these factors fit together to best provide evidence for the societal value of a treatment.

My industry peers are often quite surprised that someone would prefer to write in the market access/HEOR field than clinical, but in reality it’s a sideways step rather than a complete departure. In truth, it’s hard to define the differences between a clinically focused medical writer and a market access/HEOR writer. I still use the processes and skills I’ve learned as a medical writer on a daily basis, just in a slightly different context. Aside from the requisite writing skills, both roles require attention to detail, a willingness to grasp new concepts and therapy areas, and an ability to structure a coherent narrative.

I would say the beauty of my role is that it enables me to work on several therapy areas without becoming too entrenched in any one. The subject matter and project types change from day-to-day. I enjoy the ‘eureka’ satisfaction of persevering with a difficult data set until it finally makes sense! I’m also fortunate enough to have a supportive and friendly team around me, and that approachability extends throughout the wider company. Like any other job, it has its ups and downs, but I can see myself working in this setting for a long time to come.
James Davies
Market Access Writer
OPEN VIE (part of the OPEN Health Group)

Working within the pharmaceutical industry had always been my aim after doing a sandwich year in R&D during my degree in biochemistry. Following this, I took the same route as many other science graduates, and began a PhD in oncology, feeling that it would be a good route into R&D in the future. However, towards the end of my PhD I decided that I didn’t want to stay in research, but didn’t fully understand what options were available other than R&D or sales and marketing roles, neither of which I felt suited to. I began researching other roles in industry and quickly discovered MedComms, which seemed to be a perfect combination of scientific knowledge and communication skills.

My first role in MedComms was as an account associate at an agency with a long track record in market access. As well as account management, I was able to get involved with writing and editing, and quickly realised that this is where my strengths and interests lay. I joined OPEN VIE as a market access writer in 2017, which has allowed me to focus on writing full time, while also specialising in market access.

MedComms offers the opportunity to work on many different types of projects, across a wide range of therapy areas. No project ever goes to plan, and every day brings new challenges, but market access is a particularly rewarding area of MedComms. Our work contributes to helping patients gain access to medicines that can significantly improve their lives, and knowing that you played a role in a successful early access or reimbursement submission is extremely satisfying.

As a writer, it’s my responsibility to ensure that complex information is conveyed clearly and accurately. At OPEN VIE, we work closely with our clients and internal stakeholders, and I particularly enjoy developing an in-depth knowledge of the product and clinical data. Every day is different, with the potential to be working on value dossiers, advisory boards, literature reviews, HTA/reimbursement submissions, economic models and publications, among many others. If you’re looking to apply your scientific knowledge and play a direct role in access to medicines, market access writing could be for you.
People in the job – in their own words

Sophie Doran
Principal Medical Writer
DRG Abacus

In the final year of my PhD, I stumbled across medical writing as a career option when a university alumnus gave a talk on it. While my PhD was in biological sciences, it was related to agriculture and I knew very little about MedComms. However, alongside sciences, I had studied English literature to A level and knew that I was good at writing so decided to apply for some medical writing jobs. It was then that I came across DRG Abacus (then Abacus International), an agency specialising in HEOR/ market access. Without any knowledge of HEOR/market access, I was not expecting my application for a trainee medical writer position to go very far. However, I got through the writing test and interview, and was offered the job.

Starting work in a completely new field was daunting but the training and support I received were incredible and no prior knowledge of HEOR/market access was assumed or needed – just willingness to learn. Five years later, I am still at DRG Abacus, still learning, and still thoroughly enjoying my job for lots of reasons:

◆ It’s varied and challenging: we work on countless different types of projects and across multiple disease areas. No two projects are the same and we are constantly being presented with new challenges and finding ways to overcome them.

◆ It’s worthwhile: the work that we do in HEOR/market access helps to make drugs and devices available to the patients who need them. For example, a successful HTA submission directly results in a drug being funded in the country in which the submission was made.

◆ You’re never on your own: the team atmosphere (both within and outside the medical writing team) is definitely one of the best parts of my job. When there are tight deadlines and challenging clients, people will go out of their way to help, and successes, however small, are always recognised and celebrated as a team.

◆ Career progression is flexible: as I’ve progressed at DRG Abacus, my role has become increasingly client-facing, including some project management and consultancy. For example, I recently had the opportunity to travel to Beijing and Tokyo to support a client in delivering training to their colleagues. It may not be for everyone (and nobody is forced down this route) but the client-facing element of the job can be really rewarding. For those who want to try a completely new role outside medical writing, DRG Abacus also offers secondments to different teams.

◆ It’s full of opportunities: DRG Abacus is part of a global company (DRG), providing opportunities to work with teams in different countries and with different specialties. During my time at DRG Abacus, I have twice visited the DRG office in Gurugram (near Delhi, India) to conduct some writing training and, of course, do a little sightseeing!

I haven’t looked back since starting my career in HEOR/market access writing and look forward to the challenges and opportunities that it brings in the future.
Caroline Freeman
Principal Consultant
Value Demonstration Practice
Oxford PharmaGenesis

Now that I have worked in the Value Demonstration Practice at Oxford PharmaGenesis for more than 5 years, it's probably safe for me to admit that I joined the company as an associate consultant with very little idea of what value demonstration actually entailed! I had done a certain amount of reading about the MedComms industry, and felt confident that I had some of the right skills for the role, but I was not sure what to expect from a job in market access. For someone coming from a career in academia, there was a lot to take on board at first – getting to grips with HEOR and consultancy, as well as new therapy areas – but I can look back now and say that I am delighted I was offered a job that has enabled me to keep learning and to develop my expertise in a new and evolving field.

My expectations of HEOR were perhaps skewed towards the health economics side, but I have since found that an awareness of patients' experiences and needs is inherent to much of our work, with many opportunities to understand and to communicate the impact of disease on people's quality of life. Also, contrary to my expectations, only part of the work that we do is product-specific or has a direct focus on market access, and some of the most rewarding projects that I have worked on have involved developing internal training and guidance for our clients. It has been fascinating to learn about the nuances of the markets in different countries and to interview our clients to find out what challenges they face. As with all our work, the breadth of our interactions has been amazing: over the past 4 years, the materials produced by our team have been used across nearly 50 countries.

From the very beginning of my time at the company, I have been lucky enough to work on a huge variety of projects, including congress publications, manuscripts, training workshops and evidence dossiers, among many other deliverables. These projects have spanned multiple therapy areas and clients, so there is always the opportunity to take my existing knowledge and apply it to something new. I feel especially fortunate to have found a role that lets me work in-depth with data and contributes to the scientific literature, but that also requires adaptability and creativity.

Everyone in the team gets the chance to work closely with our clients and contribute to discussions, and there is a great commitment to allowing everyone to continue building on their experience and move to the next stage of their career. The past 5 years have been a really exciting time to be at Oxford PharmaGenesis: the company has almost doubled in size, we have opened several new offices, including Oxford Central where I am now based, and we recently received the Queen’s Award for Enterprise and the Great Place to Work award. I am so pleased to have found a career with so much scope and opportunity for growth, and I am excited to see what the future holds.
Pin Lu

AMICULUM Asia

I came to the UK after completing my PhD in cell and developmental biology. The transition from being a PhD student in bustling Hong Kong to working as a post-doc in northeast England wasn’t hard for me; however, the uncertainty associated with the life of a fixed-term researcher took its toll. My love of research hadn’t changed, but I just couldn’t see a future for me in science; at that time, being a lecturer or lab researcher was the only option I was aware of. I became one of those disillusioned post-docs you often see in the corridors of academic institutes.

Unexpectedly, that was also the time I discovered my interest in writing. I was fascinated by the many aspects of life in the UK and started to write about them for myself, then for publications in China and the UK. This became so frequent that I began to think of it seriously as a career option. So, after 6 years and a second post-doc stint, I decided to quit research and become a writer. For a few years afterwards, I worked for a variety of publications, including The Guardian. I still write for a couple of newspapers and magazines to this day.

However, I felt that the scientist inside me had never left. I eventually came to the conclusion that what I wanted was something that would combine my science background with my passion for writing. The turning point was when a friend (now colleague) told me about the existence of MedComms. I’ve not looked back since.

I’m extremely grateful to the owner of a UK-based MedComms agency who took me in when I had no experience whatsoever in MedComms. Fortunately, my interest in market access and health economics matched the agency’s speciality. With an open-minded boss and a supportive team, I had many chances to learn from experienced writers and account managers.

Moving to Mudskipper, an AMICULUM agency, gave me opportunities to expand my horizons further. As a MedComms agency, our approach towards market access and HEOR is slightly different to that of more modelling-focused consulting firms. Our mission is to make complex health economic and outcomes data more accessible and to communicate value to a wider audience of payers, healthcare professionals and, increasingly, patients.

As a believer of universal healthcare, I take great interest in the diverse mechanisms many countries and regions have developed to make their healthcare system work within a limited budget. There is no silver bullet, and every country or region must find its own way and gain support from the public. This sometimes makes things awfully complicated but also very exciting, especially in Asia. I’d like to think that our work in some small way will contribute to the development of a fairer and more sustainable healthcare system.

So, after all these years, I do see a role for me in science. I envy current graduates who have access to much more support than I did before, including the good work by MedComms Networking. MedComms is certainly a career in science worth considering.
Gillian Sibbring  
Senior Consultant  
HEOR & Market Access  
Prime Global  

My path to a career in HEOR communications and market access

At school, whenever I was asked, “What do you want to be when you grow up?”, I never had an answer. My teachers often described me as “a good ‘all-rounder’”, but as time went on I discovered a passion for science and, more specifically, learning how the body works, what happens when it goes wrong and how medicines work to fix it.

Four A levels and a life-sciences degree later, I still had no idea what to do next but decided to take advantage of whatever opportunities came my way – an industrial sandwich placement in R&D at SmithKline Beecham, followed by a PhD and post-doc laboratory research. By now, I had realised that I wasn’t enjoying lab research. I found it too focused and repetitive in the day to day, and the long-term career options, such as lecturing, were not of interest to me. Then I saw an advert in New Scientist for a trainee analyst post in the Evidence Research Unit, a small group within a medical writing company.

My first job as an analyst

As an analyst, I could combine my research, language and organisational skills, scientific brain and passion for learning about disease processes and treatments. It was exactly what I had been looking for! I discovered a flair for systematic literature reviews, publications and value communications. I enjoyed working on and managing a variety of projects, spanning many different therapy areas, in a challenging team environment that was quite different to academia; striving to develop high-quality outputs while balancing scientific rigour with client communication needs, timelines and budget.

Where am I now?

Sixteen years on, I’m a senior consultant. Recently I have moved to Prime Global, a MedComms agency renowned for its publication excellence and expertise in meeting management and delivery. I am excited by the prospect of bringing my HEOR and market access expertise to an already successful HEOR publications offering and helping the company to expand further into payer-focused communications. I’ve joined a team of like-minded writers and editors who are committed to high-quality work and focused on delivering the best possible outcomes for our clients. My job is to support the HEOR and market access lead to ensure that this continues as we delve deeper into the market access arena.

Personal skills and attributes

I needed starting out

◆ A passion for science and healthcare  
◆ An analytical brain  
◆ Exceptional attention to detail  
◆ Ability to summarise and interpret complex information and data  
◆ Ability to communicate effectively with different audiences, in terms of both use of language and use of visuals  
◆ A desire to embrace change, seek continual improvement, keep learning and apply knowledge  
◆ Discipline and organisation to work to agreed timelines
Carolyn Steeds

Associate Director of Value Communications
Valid Insight

After graduating with a BSc (Hons) degree in biology, like many students, I didn’t really know what I wanted to do in my career or the options that were available. I worked for a year in research at the university but quickly realised that bench research wasn’t for me and I started looking at other options. I applied for a position in regulatory affairs in a pharmaceutical company and confess I didn’t fully know what the role entailed. However, I found I really enjoyed it; I worked with a great team of people and got a good understanding of the overall development of new pharmaceuticals. My position was focused on clinical data and so I obtained great insight into the clinical development of new products, designing study protocols to ensure the right endpoints were included and understanding the implications of getting it wrong!

After working in regulatory affairs for three pharmaceutical companies, I had the opportunity to move into a new department that was being set up at that time, HEOR. This was a great chance to use my experience in interpreting clinical data but also work in a new and exciting area. At that time, NICE had just been established and many companies were initiating HEOR as a new function. Terms like ‘value propositions’ and ‘global value dossiers’ were being established and so my focus on value communications began. During this time, I realised my strengths were in developing the value story around clinical and patient outcomes but less so on the health economic side. Therefore, I completed a 1-year course in health economics which was invaluable in helping understand the development and interpretation of health economic evidence.

After 15 years in pharma, I embarked on a new venture as an independent consultant where I worked extensively on value dossiers for pharmaceutical companies, HTA submissions and many other different projects. I then moved to working for a market access consultancy where I further developed my experience, until the opportunity arose to move back into industry in HEOR/market access but in the diagnostic device sector. The issues are very different – I soon realised new devices don’t come with the extensive clinical studies that most new pharmaceuticals do; hence, there is a real challenge to develop a strong value story.

My current role is value communications for the award winning, global market access company, Valid Insight. In this position, I am able to use all the skills and experience I have acquired over my 30 years in the healthcare industry. I enjoy being able to work with clients worldwide, using evidence to support value communication and bring better products to market. Developing a value dossier, by building up the elements from the value messages and the supporting evidence to something that can be used as the basis of HTAs, reimbursement dossiers and value communications that tangibly support market access, is very satisfying to be part of.

I enjoy being able to work with clients worldwide, using evidence to support value communication and bring better products to market
People in the job – in their own words

“I work in HEOR/market access because the work is very varied. I wanted to use my medical-sciences degree without having to work in a lab. Working in market access allows this as I have to understand the disease area from a scientific standpoint and analyse new data, whilst understanding client/payer interests and priorities to distil a compelling value story.”

Anna Karakusevic, Value Analyst at Adelphi Values PROVE

“I work in HEOR/market access as I really enjoy the variety of work in different disease areas and communicating the value of new, innovative medicines that will benefit patients across the world.”

Victoria Last, Senior Market Access Consultant at OPEN VIE (part of the OPEN Health Group)

“I work in HEOR/market access because I can use my scientific understanding and language capabilities to help bring treatments to patients.”

Brigitte Moore, Principal Medical Writer at DRG Abacus

“I work in HEOR/market access writing to communicate how treatments developed in clinical trials are used and how well they work among patients in the real world.”

Karen Smoyer, Senior Strategy Lead at Envision Pharma Group

“I enjoy working in HEOR/market access because the work is so varied. You get involved in conducting and presenting scientific research, looking into legal and regulatory affairs, and learning the business of selling services and products. This part of the industry is certainly a good place for anyone aiming to develop diverse skills!”

Robin Wyn, Senior Value Analyst at Adelphi Values PROVE

“I work in HEOR/market access as I enjoy the exposure to a diverse range of projects. From costed pathway tools to launch programmes to pricing research, I have an opportunity to help patients gain access to medications whilst continually learning in my role.”

Sonika Awasthy, Senior Associate Market Access Consultant at OPEN VIE (part of the OPEN Health Group)

“I work in HEOR/market access because I want to help deliver promising therapies to patients. It’s exciting to read in the news that a product my team worked on has reached the market and now helps patients to address their needs.”

Federica Benassi, Consultant at Valid Insight

“I work in HEOR/market access because it is great to be able to use the skills I gained from my degree to be constantly learning about new products and indications. I really enjoy using that understanding and experience to develop a broad range of tailored deliverables, and the knowledge that the work that we produce can benefit patients in the long-term is also a huge highlight of the job for me.”

Daisy Bridge, Associate Value Consultant at Adelphi Values PROVE

“I work in HEOR/market access because I can use my scientific understanding and language capabilities to help bring treatments to patients.”

Obaro Evuarherhe, Principal Consultant, Value Demonstration Practice at Oxford PharmaGenesis

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Karen Smoyer, Senior Strategy Lead at Envision Pharma Group

“I work in HEOR/market access because it constantly allows creative thinking and requires close working across all key functions of pharma – HEOR, medical, strategic marketing, PR and communications. The marriage of access and commercial – getting other teams to understand the importance of, and align their activities with, the access strategy – is a constant challenge and requires people skills, patience and collaboration!”

Philip Drew, Market Access Consultant at OPEN VIE (part of the OPEN Health Group)

“I work in HEOR/market access writing because I find it rewarding to employ the deep analytical skills I learned in my economics training to support efficient patient access to healthcare technologies.”

Gauri Saal, Principal Medical Writer at Prime Global

“I work in HEOR/market access writing to communicate how treatments developed in clinical trials are used and how well they work among patients in the real world.”

Karen Smoyer, Senior Strategy Lead at Envision Pharma Group

“I work in HEOR/market access because I enjoy communicating scientific and clinical concepts; HEOR allows me to do this with a relatively rapid positive impact on society at large. It also offers an attractive career path with lots of scope for creativity and professional development.”

Obaro Evuarherhe, Principal Consultant, Value Demonstration Practice at Oxford PharmaGenesis

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