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## Reasons of Brand Switching and Preference in prescription Medicines: A Comparison between Physicians' and Pharmacists of Karachi'

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### Abstract

Brand is one of the most important tools for difference and use to gain the competitive advantage. The contact of sponsorship and endorsement of prescription drugs is impact on the physician's choice behavior. Regardless of doing anything for the quality and efficacy of the drug in patients' care point of view; most of the companies rely on the betterment of the marketing strategies to sell their medicine.

The study aim is to explore the reasons of brand switching and brand preference of prescription medicines near the Physicians and Pharmacists who are working in the hospitals and pharmaceuticals companies of Karachi.

In order to conduct this study, data is collected from 30 respondents, 15 from physicians and 15 from pharmacists from these two sectors of Karachi. This is an exploratory research.

Data source is primary and collected in the form of in-depth audio recorded interviews. After transcribing each respondent's opinion relevant themes came out addressing the research objective.

This is suggestive evidence that the doctors in the Karachi setting recommend expensive brand names if they offer incentives. Our results also suggest that quality, cost, source of material, manufacturing practices, experience of the physicians, allergic reaction and aggressive marketing are the factors which influence doctors to prescribe medicines. The best way to promote medicines is organize informatory seminars and research related information to the doctors.

**Keywords:** Prescription medicines quality, toll manufacturing, Brand preference, brand loyalty, brand image, aggressive marketing, quality and cost effective medication.

### Introduction

Customer satisfaction, after consuming the product, is the most important object <sup>[1]</sup>, after which entire marketing realm as well as marketers are working a lot to achieve and then sustain this satisfaction for their products. The relationship with customers are fetching more widespread at this instant <sup>[2]</sup>. Today, mainly focus in marketing activities is Brand and it's branding.

Brand is one of the most important tools for disparity that a company can use to gain the competitive advantage. Brand preference, patient satisfaction and brand image are the greatly add to brand loyalty <sup>[3]</sup>. Therefore, companies are working hard to differentiate as brand from the rest of their competitors and gain the brand loyalty of patrons in the form of contentment.

The re-purchasing behavior of customers is a signal of loyalty with the brand <sup>[1]</sup>. A part from the customer satisfaction, service quality also necessary for the customer retention <sup>[4]</sup>. In the meantime, different grounds may be effective in the formation of brand loyalty. Brand loyalty has been shift on the way to actions and outlook of the brand loyalty <sup>[5]</sup>; but, forthcoming brand loyalty only in the edge of these two magnitudes is not very dependable.

In health management three P's play very important role. One is Physician, second is patient and third is Pharmacist. Physicians are the health experts. They have enough knowledge about the disease management as well as diagnosis of the disease. Physicians are the actual customers of the medicines. On the other hand, Patients are the consumer about the medicines. Patient is usually an ordinary person, sometime does not have enough knowledge about the affectivity of the medicines and its adverse effects. Patient completely relies on the physician's prescription. Whatever prescribe by the physicians to them he/she believe on it. Pharmacist is the drug expert, not only in term of drug manufacturer but also in the drugs selling into the market. They are mostly in the field of hospital pharmacy to dispense the medicines <sup>[6]</sup> to the patients prescribed by doctors or in the field of marketing and selling of medicines in the pharmaceutical company marketing. Pharmacists should have enough knowledge about the medicines to sell out because he or she acts as connection between doctors and patients. Hence

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This profession needs high consideration in the health management so that it would be good connection between the physicians and patients. From now to own wards in this study, Pharmacists mean product managers or brand managers who involve in drug selling and spend their day and night in developing marketing strategies for the brands.

Pakistan has a very energetic and forward looking Pharma Industry. In the present day Pakistan has about 300 to 400 pharmaceuticals industrialized units including those operated by about 25 multinationals present in the country. The Pakistan Pharmaceutical Industry illuminated around more of the country's claim of Finished Medicine. In local pharma point of view, the share market is more or less by and large consistently divided between the local and the Multinationals [7].

The promotion and selling of pharmaceutical products are far different from the selling of other goods. This is because of the reason that actual customers of the pharmaceutical products are doctors and physicians. They have a pretty good acquaintance about the products. Pharmaceuticals are launching their products with little or no change in existing marketing mix of product rather they minor modify in their marketing strategies to sustain their position in the market. This effort for competitive marketing line of attack put all pharmaceuticals in great competition especially national/local pharmaceuticals. Pharmaceuticals are spending lot of their money on promotion and selling strategies. Brand manufacturers are looking forward to save their brands and want to make their brand worthy enough so that, their brand can be prescribed by the physicians and at the same time expect that these physicians will remain loyal with their brands for longer time. Still, pharmaceuticals need to revisit the marketing strategies to sustain their brands in the competition, near to the customers (i.e. doctors, physicians and general practitioners).

One of the factors which are involved in achieving a competitive advantage is that, Pharmaceuticals spend a lot more money which directly increases the cost of the medicines. Due to this small hospitals and nonprofit, health set ups moves from one brand to the next available and less expensive brand [8].

On contrary to this, Physicians and general practitioners get a lot more choice of different brands in one generic. Examine the benefit of switching of drug awareness [9]. This switching of one brand to another brand leaves pharmaceuticals into a great trouble. Ambiguity and knowledge in pharmaceutical require by exploring in prescription of antiulcer agent [10].

These convention and practice of switching brands are not only common in OTC drugs by consumers [11] but also in other prescription of the medicine [12].

Another trend is promoting medicine nears to the expiry by pharmaceuticals [13]. This reason causes physicians in great ambiguity. With regard to this, what should prefer what should not prescribe? This may perhaps the cause of the decrease in the brand loyalty of pharmaceutical products in the eye of the doctors, general practitioners and physicians.

Many studies [11, 14, 15] have been accomplished related to the brand loyalty of medicines. Similarly, switching of one brand of the medicine to another by many physicians has also been examined [16]. The contact of sponsorship and endorsement of prescription drugs on the physician's choice behavior and also its implication [17]. It is a huge challenge being faced by the pharmaceutical companies. Regardless of doing anything for the quality and efficacy of the drug, most of the companies

rely on the betterment of the marketing strategies to sell their medicine. So still there is need to expand the study to know the determinants of brand loyalty of medicines along with the reasons of decreasing brand loyalty of medicines in accordance with the perspective of health experts (i.e. Physicians) as compare to drug experts (i.e. Pharmacist) of Karachi.

**Methodology: Ethical Consideration:**

Memon Medical Institute Hospital Ethical team signed consent to execute the research in their Hospital. Consent has been obtained from each interviewee through emails. Confidentiality of identity is to be preserved in the study and write-up by restore interviewee identity with a code. Authenticity of the participants of target populations Through their emails etc. in the appendix which will be used for reference and record after publish it will be scrub out from the record.

### **Key Informant Interviews**

Data source is primary in which in-depth face to face interviews have taken from specialists and general physicians having experience of 3 years or more from Public, private and nonprofit hospitals. For the comparative analysis interviews of different marketing/product managers and product specialists belonging to different pharmaceutical companies holding degrees of Pharm D or Pharmacy along with MBA and has relevant experience in pharmaceutical company for 3 or more years, have been approached. 30 respondents have been interviewed for this study in which 15 interviews have taken from doctors and 15 from pharmacists who are product manager/product specialist.

### **Conceptual Framework**

Marketer tries to find a strong acquaintance with their customers. Brand consumer connection [18], in which superiority as an additional room to the conventional concept of brand loyalty. This is because of that customer brand relationship turns out to be well- built forceful fundamental standard of marketing world [19]. which is also in the case of doctor's fig1. In this frame of work, the main thing is to know about the brand preference or switching of medicines. This is very common in pharmaceutical products on contrary to FMCG products. The reasons would be so many, but would be different in the physician's point of view and pharmacist point of view. Past studies have done in between physicians and patients [20]. or on patients only [21]. or in pharmacists only [22]. But it is necessary to know what marketers of the drug say about this declination as compared to the doctors who prescribe it. The communication between customer and marketer results the emergence of personal information [11] that lead to strategically relationship between customers and marketer. This study would be also beneficial for the pharmaco economics to save the unnecessary cost on branding of medicines and also it effects on the decision of the brand of medication near to physicians and pharmacists fig2. Toproduce safe and quality medicines, expert's opinions would be significant. There would be some more factors also waits to reveal behind the depiction along with the Aggressive marketing fig 3. Toll manufacturing is also one of the factors of brands switching and brand preference of prescription medication fig 4.

## Result

### 1. Main determinants in Physicians' point of view

According to the Pharmacists' and Physicians' opinion the possible determinants may be quality, Cost of medicines, Ineffective of medicines, Affordability issues, Hypersensitivity or allergic reaction. Experienced of the Physicians also partake in brand switching and brand reliance. However the Physicians mostly rely on one brand "reported efficacy, quality of medicines, cost effectiveness of medicines, Availability, No drug resistant is reported or hypersensitivity which is vary from patient to patient (Interviewer: D4.). This is because of their confidence level on that brand and trusts its affectivity which comes from year to year practice. "Physician's experience matters when I started my career, I've no idea which medicine is better and which is not but with the time I have come to know that which medicine which should be described, from which brand and which shouldn't be which has no effect on the Patients" (Interviewer: HE1). If due to other circumstances, the medicine is not producing the desired outcomes or there is some allergic reactions or there is some other cost effective alternative brand present instead of the present brand then physicians rely on switching.

### 2. Main determinants in Pharmacists' point of view

In Pharmacists point of view the main reasons are Source of raw material, Quality of the raw material, Cost of the medicines, and Difference ways of manufacturing practices "Firstly patient's care point of view. If according efficacy is reported in patients then it is in main criteria, quality of medicines is the second most important criteria which is somehow related to reported efficacy, cost effectiveness of medicines, fourthly availability of the medicines, if there is no resistant or allergic reaction or hypersensitivity to the patient of the present medicines so all of the above are the main criteria" (Interviewer: DE1). While Physicians emphasize that the main difference is due to the source of material, manufacturing practices, quality and then cost. "Important factors include manufacturing practice. If I am using a brand that's manufacturing is not good then I will switch it. Second is its source of raw material okay? If its raw material is not appropriate then we will switch" (Interviewer: HE1).

### 3. Importance of Brand in Prescription medicines:

Branding is important in Pharmacists point of view because according to them it gives identity and characteristics to the medicines "in my opinion it is important. Without brand how will anybody recognize that brand is related to what company? Obviously, multinational and brand leaders are recognized with their company names so as medicines. If anybody goes to pharmacy and requires some medicines then he or she has to mention its name so that shop keeper can easily recognize it. Brand plays very imperative role not only in medicines but other products" (Interviewer: DE12), while physicians perceive that brand is less important for patient care point of view "brand is not important because our basis aim of the basic importance of our school life and college life is the code of generics. Branding is done to make out those generics easier" (Interviewer: HE8)

### 4. Impact of continuous switching

There is negative impetus on continuous switching of the brands near to the Pharmacists "usually it happens that doctor's loss patient's trust because of this switching. Patient presumes that doctors are just practicing or trials on patients and by luck if patient become alright then everybody say that doctors is good or medicine is effective. So this is the disadvantage which is usually goes to the patients" (Interviewer: DE2, 5) while there are no such disadvantages near to the physicians on brand switching "I don't think there is the disadvantage of switching of one brand to another. However if you perceived a theory that the people who are actually delivering brand for one generic of different brand and we believe that the cheaper one is actually not given out the proper dose yes it will help otherwise, if the both brands of one drugs they are given out equal amount of drugs they should not be any difference" (Interviewer: HE3, 7).

### 5. Advantages of prescription medication brands' switching

There are number of advantages on brand switching near to the drug experts which include affordability issues or non-availability issues so that doctor prefer to switch and on the other hand sometime patients become reluctant to pay high for branded medicines so they insist doctors to write alternate then doctors switch "In cost point of view, certain kinds of effects are usually observed that certain expensive brands physicians usually do not prescribe it because the patient comes from poorer areas so that doctors usually do not prescribe expensive brands. Hence main cause of switching is another reason is price of the medicines" (Interview: DE5). While health experts also think the same that there are options because of the availability of so many brands and more importantly is resistance that cause on the consequence of continuously use of one medicines, this is happen in case of antibiotics "Brand switching has one significance that if you have no sensitivity of one brand then you can switch it to other. If someone has resistant of penicillin then I will not give him penicillin but amoxicillin or 3rd or 4<sup>th</sup> generation." (Interview: HE1).

### 6. Disadvantages of Prescription medicines Brands' switching

In drug experts' point of view, switching is not always good in patient's point of view "some good reasons then it is good but if doctors are switching from one brand to another but because of no reasons then it is obviously not good" (Interview: DE3) but the advantages may go to physicians in the form of their personal benefits "Doctors see their benefits or may be because of the experience over the product. If this is not, then it is undue benefit" (Interview: DE1). While in health expert's point of view, it is good because it overcome the patient's psyche and give options to the physicians to get rid of non-affordability or non-availability issue "the advantages are the superior quality, the generic is of the good brand, some national brand, so first one is the quality, I think second one is the Psyche of the Patient" (Interview: HE4).

### 7. Ethical method for prescription medicines Promotion:

Physicians think that informatory seminars should be conducted which help in promoting the knowledge of

newly launch medicines and this is the good way to promote

Medicines “they should be academically upgraded. The best thing is to promote the medicines is to organize the academic sessions” (Interview: HE1). While Pharmacists are emphasized the same along with the welfare which should be allotting to the patient rather give personal offers “if pharmaceuticals want to offer something, they should offer to the patients especially poorer or needy patients. Some kind of welfare is assigned in term of free of cost medicines after prescribing from the doctor to the patients who cannot afford the medicines” (Interview: DE4).

**Discussions**

The basis of this research is to explore the main determinants of brand loyalty of medicines from the perspective of physicians’ and pharmacists’. According to Physicians’ and pharmacists’: Quality and cost are the important determinants of brand loyalty Fig 2. Others related factors fig 3 are drug resistance [23], experience of the physicians [24] Fig 1, manufacturing practices, source of raw material, aggressive marketing of pharmaceuticals fig 3. Pharmaceutical companies spent their day and night on marketing and sales in prescription medicines [25]. With limited emphasis on the quality and efficacy some of the pharmaceutical companies rely on marketing rivalry with their competitor in term of marketing and promotion. Similarly Branding is still important because it gives identity to the medicines also differentiates the quality brands from substandard brands. As far as the advantages of brands switching are concerned they are of the opinion that it doesn’t affect the patient health but it is relevant for physicians’ and pharmacists’. A part from the other factors affordability factor is also main factor of switching and preference of the brands in prescription medication figure 2. Patients take their own decision in consuming of OTC medications [12] because of the high price of medicines [26, 27, 28] and they rather prefer their own medication than go to physicians and pay their fees along with the medicinal cost. Finally, the best way to promote medicines ethically is to organizing informative seminars and workshops in which doctors should be invited related to the specific specialty rather than emphasizing on aggressive marketing and promotion via social media [29].

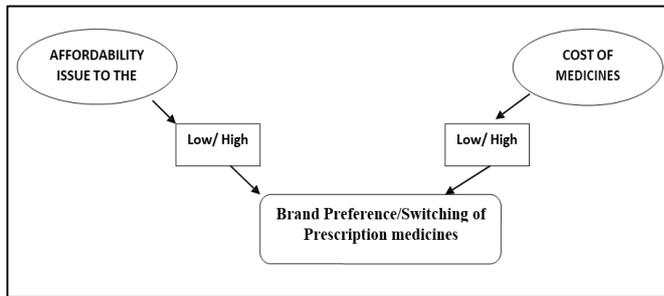


Fig 2.

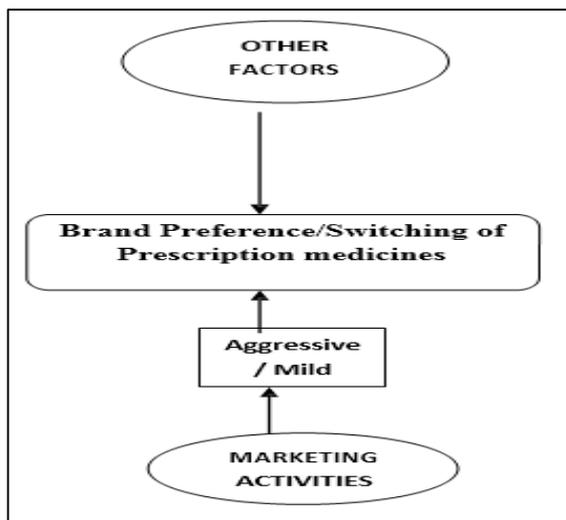


Fig 3.

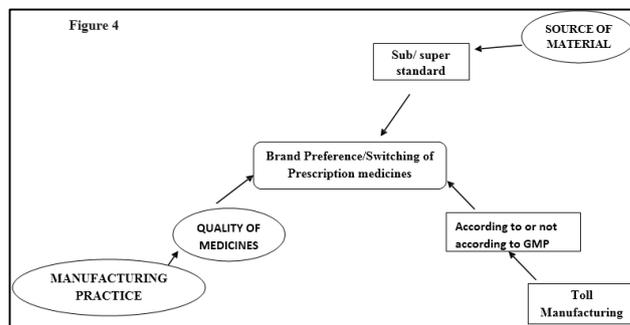


Fig 4.

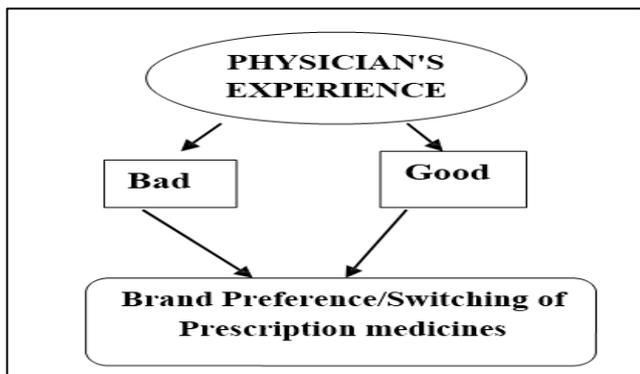


Fig 1.

**Recommendations & Future Recommendations**

The honest drug regulatory agency should be introduced because drug regulatory authority of Pakistan has been dormant since last few years and there is no check and balance for brand registration so that we can overcome substandard quality medicines [30]. because there are piles of dossier of numerous brands which have been stacked and are not addressed[31]. The ministry of health should also assigns law enforcement authority who can draw and define an ethical boundary of marketing activities of the companies, so that it control the bribery and unethical marketing. It would be good to introduce some welfare agency which should be run by pharmaceutical companies that can work for patient’s care instead of customer care or that can promote their medicines via offering free of cost medications to the patients rather than free offers to the doctors. For Toll manufacturing practices, drug regulatory agency should set some rules. Further research is necessary for pharmaceutical companies that should focus on addressing the other areas like toll manufacturing impact on the brand image of medicines and its merits and demerits,

pharmaco-economics, consequences of continuous switching of brands on the patients.

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### Competing Interests

Authors have declared that no competing interests exist

### Authors Contribution

Hina Sharif: Design of the study, data collection, data analysis, trans-verbatim, conclusion, future recommendations.

Sana Sharif: data analysis, conclusion and recommendations

Ms Isma Zaighum: research approved recommendations.

### References

- Mittal V, Kamakura WA. Satisfaction, repurchase intent, and repurchase behavior: Investigating the moderating effect of customer characteristics. *Journal of marketing research*. 2001;38(1):131-142.
- Aaker DA, Joachimsthaler E. The brandrelationship spectrum. *California Management Review*, 2000; 42(4):8-23.
- Solayappan A, Jayakrishnan J. Key Determinants of Brand-Customer Relationship in Hospital Industry. *Petroleum-Gas University of Ploiesti Bulletin, Economic Sciences Series*. 2010, 1.
- Sureshchandar GS, Rajendran C, Anantharaman RN. The relationship between service quality and customer satisfaction-a factor specific approach. *Journal of services marketing*, 2002;16(4):363-379.
- East R, Sinclair J, Gendall P. *Loyalty: definition and explanation. Visionary Marketing for the 21st Century: Facing the Challenge*, 2000.
- Mott DA, Cline RR. Exploring generic drug use behavior: the role of prescribers and pharmacists in the opportunity for generic drug use and generic substitution. *Medical care*, 2002; 40(8):662-674.
- Pakistan pharmaceutical manufacturing association (official website)
- Kappe E. *Pharmaceutical Lifecycle Extension Strategies*. In *Innovation and Marketing in the Pharmaceutical Industry* Springer New York 2014, 225-254.
- Temin HM. Origin and general nature of retroviruses. In *The retroviridae* Springer US. 1992, 1- 18.
- Cram L. The European commission as a multi-organization: Social policy and IT policy in the EU. *Journal of European public policy*.1994;1(2):195-217.
- Shohel M, Islam T, Al-Amin MM, Islam A, Rahman MM. Investigation of Consumer Attitudes, Intentions and Brand Loyal Behavior on the OTC Drugs in Bangladesh. *British Journal of Pharmaceutical Research*. 2013; 3(3):454.
- Decollogny A, Eggli Y, Halfon P, Lufkin TM. Determinants of generic drug substitution in Switzerland. *BMC Health Services Research*, 2011; 11(1):17.
- Berndt ER, Kyle M, Ling D. The long shadow of patent expiration. Generic entry and Rx-to-OTC switches. In *Scanner data and price indexes* University of Chicago Press.2003; 1:229-274.
- Berndt ER, Aitken ML. Brand loyalty, generic entry and price competition in pharmaceuticals in the quarter century after the 1984 Waxman- Hatch legislation. *International Journal of the Economics of Business*.2011; 18(2):177.
- Rizzo JA, Zeckhauser R. Generic script share and the price of brand- name drugs: the role of consumer choice. *International journal of health care finance and economics*, 2009; 9(3):291-316.
- Coscelli A. The importance of doctors' and patients' preferences in the prescription decision. *Journal of Industrial Economics*. 2000,349-369.
- Fournier S. Consumers and their brands: Developing relationship theory in consumer research. *Journal of consumer research*. 1998; 24(4):343-353.
- Grönroos C. Keynote paper from marketing mix to relationship marketing- towards a paradigm shift in marketing. *Management decision*, 1997;35(4):322-339.
- Ongubo JN. Determinants of Brand Loyalty for Prescription Brand Medicine by Doctors in Nairobi. Unpublished MBA Project, University of Nairobi, 2003.
- Chressanthi GA, Khedkar P, Jain N, Poddar P, Seiders MG. Generic-to-branded drug switch-back patterns: exploratory analysis and insights from the statin class. *Journal. Of Pharmaceutical Health Services Research*. 2011; 2(4):217-26.
- Riquelme HE, Elthani M, Rios RE. Practice on generic medicine recommendation and dispensing among Jordanian pharmacists. *Journal of Islamic Marketing*. 2011; 2(1):43-54.
- Gönül FF, Carter F, Petrova E, Srinivasan K. Promotion of prescription drugs and its impact on physicians' choicebehavior. *Journal of Marketing*, 2001; 65(3):79-90.
- Nishtar S. *Choked pipes: reforming Pakistan's mixed health system*. Oxford: Oxford University Press, 2010.
- Ziaduaddin medical university hospital's periodicals marchno lab for drug testing, 2014.
- Seo JH, Woo HO, Youn HS, Rhee KH. Antibiotics resistance of Helicobacter pylori and treatment modalities in children with H. pylori infection. *Korean journal of pediatrics*. 2014; 57(2):67-71.
- Rizzo JA, Zeckhauser R. Generic script share and the price of brand-name drugs: the role of consumer choice. *International journal of health care finance and economics*. 2009; 9(3):291-316.
- Zack MH. Rethinking the knowledge-based organization. *MIT Sloan Management Review*. 2003; 44(4):67.
- Severin Benschmol C, Griffin T, Teichner W. How consumer health-care organizations can leverage social media in McKinsey & Company, 2012. [Online]. Available at:<<http://www.mckinsey.com>> [Accessed 6 March 2013].
- Chetley A, Hardon A, Hodgins C, Haaland A, Fresle D. How to improve the use of medicines by consumers. Genève: WHO, 2007.
- Gregorc J, Videmšek M, Štihec J, Karpljuk D, Tušak M, Meško M. The lifestyle of pre-school teachers and their assistants as an element of subjective theories. *Zdravstvenovarstvo*, 2012; 51(2):95-104.