

# TO REACH PATIENTS WITH HIGH CHOLESTEROL YOU NEED TO SPEAK THEIR LANGUAGE

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“ But I don’t  
feel sick.”

## AS CONDITIONS MULTIPLY, DIFFERENCES ARISE

Our research showed that the biggest differentiator among high cholesterol sufferers is the presence or absence of other metabolic conditions. Patients who suffer only from high cholesterol — and no other comorbidities — view the condition and its treatment quite differently from those who have high cholesterol and other problems such as hypertension or diabetes.

We also found that there are three key behavioral levers that move high cholesterol sufferers to manage their condition. A solid understanding of patients’ **illness perceptions**, **treatment beliefs**, and **motivation factors** can help marketers move these levers in the right direction.

## GENETICS, NOT GREASY FOOD

Patients who suffer from just high cholesterol tend to view it as chronic and more severe than those with cholesterol and other metabolic conditions. Perhaps because they view it as an inherited burden rather than the result of poor nutrition choices, a majority of this audience reported that their high cholesterol is always present. Curiously, although they see it as chronic and severe, they also see it as something that has little impact on their lives. This may be why they don't see much benefit in taking medication to lower their cholesterol

## CHARACTERISTICS OF HIGH CHOLESTEROL ONLY SUFFERERS

### Illness Perceptions

- View their high cholesterol as chronic as, and more severe than those with metabolic comorbidities.
- Don't feel very threatened by their high cholesterol
- Believe that their high cholesterol is something that stays with them all the time
- Are more likely to say that high cholesterol has little impact on their lives

### Treatment Beliefs

- Are less likely to believe that medication has helped their high cholesterol
- Are less likely to believe that their cholesterol medication has made their life better

### Motivation Factors

- Are self-motivated. They are more likely to use lifestyle changes to manage their cholesterol because they personally want to improve their overall health (not because someone else tells them to).

Once we understand the psychology of this audience, we can begin to devise effective communication strategies to engage them. To reach the **High Cholesterol Only group**, you need to make the condition more visible and real. For example, show them an image of hardened arteries. Discuss the more serious health problems such as heart disease and stroke that may result from untreated high cholesterol. Then, demonstrate how treatment can minimize these risks.

## CHECKLIST FOR REACHING THE HIGH CHOLESTEROL ONLY GROUP

Pharmaceutical and healthcare marketers who are trying to influence this group should evaluate their communications and programs against several criteria to have the greatest impact:

- Use facts to reiterate the consequences of uncontrolled cholesterol. Rather than conveying that high cholesterol is “bad,” discuss the more tangible problems that can happen if it’s left untreated.
- Give them experiential ways to help them feel the impact of high cholesterol — for example, an image of hardened arteries
- Acknowledge the role that genetics plays in high cholesterol, but also convey specific facts about the impact that medication can have on reducing cholesterol levels
- Use imagery and messaging that reflect the intrinsic mindset. Play into their empowerment and desire for personal control over health.

## BIGGER FISH TO FRY

While patients with multiple metabolic comorbidities care about the fact that they have the condition, high cholesterol often takes a back seat to the more pressing and visible problems presented by conditions such as diabetes. Unlike the **High Cholesterol Only** group, they are more likely to see the condition as something that comes and goes. This may reflect the changing priorities of those with multiple metabolic conditions and explain why they are more likely to be non-adherent with their cholesterol-lowering medication.

## CHARACTERISTICS OF THOSE WITH HIGH CHOLESTEROL AND OTHER METABOLIC CONDITIONS

### Illness Perceptions

- Feel much more threatened by the potential consequences of their high cholesterol — but cholesterol falls much lower in importance in the presence of other conditions
- Are more likely to see high cholesterol as something that comes and goes

### Treatment Beliefs

- Are more likely to be non-adherent with their cholesterol medication

### Motivation Factors

- Are externally motivated. They are more likely to manage their cholesterol because a health care provider or a family member wants them to

Understanding how patients with **High Cholesterol and Other Metabolic Conditions** think about and manages their high cholesterol can help inform communication strategies. To connect with patients suffering from multiple metabolic conditions, you need to stress the importance of cholesterol as part of their overall metabolic risk. Address the problems that can arise when multiple metabolic co-morbidities work in tandem. And demonstrate how cholesterol medication can improve this overall pattern of illness. Finally, don't forget to take into account the influence that the patient's friends and family can have on treatment adherence.

## CHECKLIST FOR REACHING THOSE WITH HIGH CHOLESTEROL AND OTHER METABOLIC CONDITIONS

For marketers who can identify patients with comorbidities, several strategies are important:

- Communicate the importance of high cholesterol as part of their overall metabolic risk.
- Provide “cues” to convey the presence of high cholesterol even though the symptoms are silent
- Use imagery and messaging that reflect an extrinsic mindset. Acknowledge the important role that key influencers have on managing health

Behavioral science provides the insight and guidance to marketers who are trying to help high cholesterol patients achieve improved health outcomes. Because it's not enough to simply focus on the attributes of the drug. To effectively reach your target audience, you need to give the silent symptoms of high cholesterol a voice. And make sure you're speaking the right language.



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Jessica uncovers insights that connect patients with health care providers. She blends clinical knowledge and behavioral models to develop strategies that change both patients' and health care providers' behavior. Jessica joined MicroMass in 2000 and currently leads our behavioral services team. She brings experience in nursing and consumer health behavior, with emphases in renal disease, hypercholesterolemia, osteoporosis, COPD, asthma, neurohealth, overactive bladder, erectile dysfunction, allergies and cardiovascular health.

Jessica is a certified health education specialist. She has a Master of Public Health from the University of North Carolina at Greensboro and a Bachelor of Science in nursing from the University of North Carolina at Chapel Hill.



**About MicroMass Communications, Inc.**

Founded in 1994, MicroMass offers unrivaled capabilities in the application of behavioral science to marketing challenges. The company's approach is founded on the belief that understanding the critical factors that influence individual behavior is the best way to create dialogue and build enduring relationships between customers and brands.

Unlike traditional agencies that are structured by discipline, MicroMass brings together under one roof the expertise and services for building sophisticated, multi-channel programs that span the full marketing continuum.

Headquartered in Cary, N.C., MicroMass is one of the fastest growing agencies in its field. With experience in dozens of therapeutic categories, the company has a roster of clients that includes some of the most respected names in the health care industry.

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