



BRANDNEWS

JUNE 2018 - ISSUE

BRAND INSTITUTE ATTENDS 140th ANNUAL INTA MEETING.











MIAMI - Corporate Headquarters

200 SE 1st Street 12th Floor Miami, FL 33131 Telephone: (305) 374-2500 Fax: (305) 374-2504 www.brandinstitute.com

BASEL	BOSTON	CHICAGO	FRANKFURT	HOUSTON	LONDON	LOS ANGELES	NEW YORK
41(0) 61-204-4575	(781) 602-6044	(312) 475-9600	49(0) 6196-400966	(512) 369-9100	44(0) 207-240-2200	(310) 830-6111	(212) 557-2100
OTTAWA	RALEIGH-DURHAM	ROCKVILLE	SAN FRANCISCO	SEATTLE	SEOUL	токуо	TORONTO
(613) 482-1333	(919) 572-9311	(301) 984-1055	(415) 421-3200	(206) 204-5111	82(0) 6433-9555	81(03) 6861-7517	(416) 622-5777

FierceBiotech Radio Podcast Transcript

At the beginning of this year's #FierceMadness drug name tournament, FierceBiotech's Amirah Al Idrus interviewed Brand Institute's Scott Piergrossi, Vice President of Creative Development, for a peek into the drug-naming process. Below is a transcript of their conversation.

Amirah: To dive into a little deeper into how drugs get their names, we have a guest this month, and that is Scott Piergrossi of Brand Institute. Scott, welcome to the show.

Scott: Thank you Amirah. Great to be here, thanks for having me.

Amirah: So, to start could you tell me a little more about yourself and Brand Institute?

Scott: My name is Scott Piergrossi. I'm Vice President of Creative Development for Brand Institute. I'm essentially Creative Director for all of our verbal branding projects, or brand name development projects. I've been with the company for 15 years, in the creative department that entire time, so, as you can imagine, I've seen the pharma naming sector evolve over that decade-and-a-half. Brand Institute is a company that specializes in brand name and identity development. And just for some context we partnered on about 80% of the FDA approved brand names last year. We have a pretty big share of market and a wealth of experience naming drugs.

Amirah: Great and do you think naming drugs is more of an art or more of a science? Can you tell me about your general process?

Scott: It's very much a combination of the two. In the world of creative the old cliché is, "Think outside the box," but in the world of drug naming we have to be creative inside the box. That box is defined by a series of parameters or objectives that we hope to achieve with each project and that includes a marketing objective, we want the name to be supportive of the unique aspects of the product: easy to pronounce, likeable, etc. Legal, we want the name to be trademarkable in all the countries in which it will be marketed. Regulatory, the name ultimately has to be approved by regulators such as FDA, EMA, Health Canada, etc. Linguistics, we want to make sure the name is not inappropriate or offensive in any language that will be spoken by (people in the) countries in which the product is sold.

Amirah: Alright, so your job is to be creative but only within the certain box. So, could you walk me through some strategies that people use to name drugs?

Scott: Sure, absolutely. There's a world of styles. When we talk about styles we're talking about how the name is constructed versus strategy which is what the name is meant to communicate. General styles in pharmaceutical naming are coined

names, which are developed off a single concept. You have what we call hybrid or composite names which combine multiple concepts together. Then you have the more novel names which we're seeing more of lately, where it's completely unique. Names like Xiidra, HyQvia, and Sprix...these names are unique in and of themselves and because of that they have a higher likelihood of both trademark acceptance as well as regulatory approval.

Amirah: So, do you have a favorite name or names that your team have come up with?

Scott: Well it's very tough to pick a favorite. It's like picking a favorite child...if you had over 500 children. And how you actually define a favorite name is actually subjective as well. So if I was to touch on a few, obviously we have the bucket of top selling drugs, which we're obviously proud of, drugs like Neulasta, Tecfidera, Eylea, Avastin. These are names we're very proud to have partnered on, but if I were to get into the minutiae and look at some of the names you might not be super-familiar with I would say best pound-for-pound use of pharmaceutical nomenclature real estate would go the drug Privigen, which is a drug from CSL Behring.

Amirah: What do you mean when you say best use of drug naming real estate?

Scott: This utilizes every letter in the name to maximize communication. So the PRI- prefix is from Primary Immunodeficiency, which is the indication. You have the infix -IVIG-, which (stands for) Intravenous Immunoglobulin, describing the product. And you have the -GEN suffix, which is next generation. Not a single letter goes unused and the tonality of the name as well is very reliable, trusted, confident, very neutral and balanced. It hits all the marks we're trying to achieve when developing a name.

Amirah: It sounds like you're getting the best bang for your syllable with Privigen. What are some other styles?

Scott: Probably you're familiar with the drug Latisse, which is indicated for eyelash growth from Allergan. This is a very elegant image associated name. The LA- prefix is for lash and the suffix suggest Mattise, the artist or sculptor. So, a stylizing effect for your eyelashes. The last one I'll touch on is Hemlibra, which is a newly approved product for Hemophilia A from Chugai and Genentech. This combines the prefix HEM-, from Hemophilia A, with Libra, the constellation that represents the scales, connoting balance. So, restoring balance in Hemophilia A patients.

Amirah: You mentioned earlier that you've been noticing novel names lately like HyQvia. What are some general trends you've noticed in drug naming over the years?

Scott: We tend to look at drug naming in three distinct eras dating back to the approval of Prozac in 1987. When Prozac was launched that name represented essentially what we call the "Big Bang" of pharmaceutical brand names. It's a blank canvas or empty vessel name, it doesn't mean anything, but it came on the scene and it started this universe of drug names.

Amirah: What kind of names did we see after Prozac?

Scott: The 90s were very much defined by higher transparency names. Drug names that asked the question, "Tell me what it does?" Names like Flomax for maximum flow. Prevacid for prevent acid. Claritin evoking clarity. And then we saw the 2000s a shift towards more subtle/suggestive names with kind of a 'Latinized' feel to them. This would be names like Benicar for good cardiovascular. Avastin for the avascular/anti-vascular mechanism. There's a very distinct feel in the 2000s that was less transparent/more suggestive but still there's still a general feeling coming from the names.

Amirah: What about the present day?

Scott: Where we are now, the shift has really been from a regulatory standpoint on medication errors and name safety. Not that it wasn't before, but it's been a real concerted effort for FDA and other regulators to make sure names aren't confused with other drugs when they are prescribed. Then you see names like Xiidra, names that are intentionally crafted to be essentially distinct from everything else that's out there.

Amirah: So those are the three big eras as you said of drug naming. Have you noticed any smaller trends over shorter periods of time?

Scott: One thing would be what we call "real world clones" such as Harvoni, from harmony, that treats Hep C. Tremfya, from triumph, that treats psoriasis. And Simponi, from symphony, that treats Rheumatoid Arthritis. We're trying to coin close to a real word, but still do it in a way that is not perceived as overly promotional or exaggerative.

Amirah: What would be the reasoning behind going with a name based off a familiar word like Harvoni/harmony versus something that, to me at least, would be a weirder name?

Scott: (laughs) Well I wouldn't call them weird, but you're welcome to use that word. It's not so much about locking in or honing in a certain style of name. Now, with that said, clients often times come to us with a preference for name styles. They'll identify drugs that they like on the market and say, "We'd like to see that style represented in your creative." And we'll certainly explore that.

Amirah: But you do consider other styles in addition to what the client has highlighted?

Scott: An average drug naming project, we create a thousand names. To ultimately come up with 10 that are recommended for submission to regulators. So what that means is of the 1,000

names we create, through the gauntlet of filters, and client review, etc...with 10 coming out...any name has a 1% chance of making it through the entire process. If you look at it in that context, I think it illustrates that it's a bad idea to fall in love with any name or name style very early on.

Amirah: Do drug names ever backfire? Have you ever had a case where in your designing you've gone for one thing and they've rolled out the drug and found the public perception is something completely different?

Scott: There is a lot of diligence done in drug naming. When I tell people about my job they're fascinated by the extent to which these names are developed, tested, and screened. It's very rare that a name comes to market and something happens that was unanticipated or unforeseen. I wouldn't use the word backfire...I will say that some names, based on uniqueness, take a little longer to stick in the marketplace. In the end, drug names are no different than other types of product names. So if that product, and a drug is no different, delivers on its promise and the customers have positive experiences/interactions with it, then the name is generally going to be a neutral-to-positive ambassador for the brand, and that's regardless of style, strategy, etc. I always go back to the world's largest company, Apple. If I were to ask you what associations do you have with Apple the brand, Apple the company, what would you say your associations are?

Amirah: I guess I'd go with innovation. They're always re-iterating their devices and for better or worse their operating system and that's not something I've readily associate with the actual word apple.

Scott: Therein is my point. Whether its innovation, newness, positive interactions with their employees, the design of their retail locations...these are the touch points that define the Apple name. The brand ultimately defines the name more than the name defines the brand; and that's key to remember. And drugs are no different. Drugs are different in that they require regulatory approval of the drug themselves. So they have to meet certain efficacy and safety endpoints. When they come to market, we know to a large extent that they're going to be delivering on a base-level promise. That means that customers interact with it, positive association develop with it, and those inputs ultimately define that name. And names establish a positive marketplace identity.

Amirah: Thanks Scott, that's all I have for you today. Thanks for being on the show.

Scott: Thank You.