



AT THE HELM
Rich Levy, president

PERFORMANCE
2006 was a year of "significant growth"

HIGHLIGHTS
Won new business from Novartis consumer health, Merck's Emend, Hospira and Roche's transplant enterprise

Other business: Shire CNS product and global business from Berlex

CHALLENGES
Lost GSK's Avandia and Avodart due to consolidation

Decline in client selling cycles and sales rep materials

For contact details, service offerings and client roster, see Agency A-to-Z, beginning on page 143

Ferguson

Returning to its roots revitalizes CommonHealth's original shop



Ferguson, the founding CommonHealth network agency, sought last year to revitalize its brand and "get back to its roots," says president Rich Levy. "Ferguson has been a blue chip icon over 30 years. CommonHealth has gotten a great deal of notoriety, and we want the Ferguson brand and image at the forefront of the industry."

Though declining to report numbers, Levy says 2006 was a year of "significant growth" for the generalist agency, and staff increased.

Word-of-mouth proved productive, and a "significant amount" of hires are drawn from past relationships. Levy thinks agencies have to develop young people and motivate them to stay. The ability to move talent among agencies is a benefit of being in the CommonHealth network. "We can switch people without losing people," Levy notes. "We're still crying like everyone else, but it's helping us retain."

There were no client departures in 2006, but Glaxo-

SmithKline's Avandia and Avodart were lost due to consolidation. The agency saw significant organic growth, with new business coming in from Novartis consumer health (analgesia category, smoking cessation and dermatology); Merck's Emend; Hospira (device and diagnostic); and Roche's transplant franchise. Other business included a Shire CNS category product and a global assignment from Berlex (now Bayer) oncology. Forest Laboratories' Faropenem was won but evaporated due to non-approval.

Levy notes a "drastic" change in the communication triangle between patients, doctors and sales reps.

"All are spending less time communicating," he says. "It's that much more important that they're communicating and understanding the same dialogue. We've gone to great pains to bring that to clients. The single biggest marketing expenditure clients have is the sales force. If we're not taking that into consideration, we're leaving large part of audience out of the picture. Customer relationship marketing (CRM) and patient relationship marketing (PRM) allows us to communicate via permission-based marketing. We can customize and tailor the right information to the correct audience in the manner in which they want to receive it with CRM or PRM. That's a big trend because we know we're getting less and less face time in front of physicians."

A decline in client selling cycles and sales rep materials has changed ways in which the agency delivers. "The agency business is no longer based on putting a bunch of tactics in front of clients," he says. "We have to bring differentiating service, such as strategic initiatives, reality-based insights, CRMs and PRMs. Our business channel has changed drastically. Things have to be innovative."

"Five years ago clients would insist that there was not a doctor in the world that uses a computer," Levy continues. "Doctors are using computers and prefer getting information that way. Interactive presentations by reps on tablet PCs are becoming alluring. It has opened up a whole other medium. I don't think it will all be interactive and nothing else. It's become another medium that is being used and a way to educate, remind and reinforce about our products." —Tanya Lewis

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Above: Professional ad for Merck's Zolinza
Top left: Part of a journal ad for Bayer's Yaz