



A STUDY TO DETERMINE HOW A DRUGSTORE OWNER WOULD LIKE A MEDICAL REPRESENTATIVE TO IDEALLY BE

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ABSTRACT

A medical representative is today just like a business man. Gone are the days when one would look up to a medical representative and consider him as an agent or messenger of drug knowledge. The click of a button can give you all the desired information on the internet which you may be looking for. So for what the MR is really required, to provide information or just to settle expiries. Further wishing to learn as to what will make a MR welcomed at a drugstore, the study was conducted. Five parameters were considered, namely dress, mannerism, regularity, time consciousness, and ability to provide help. The owners of the drugstores were made to rank these characteristics from 1-5 and it was analyzed using Thurstone Case V scaling. 1 was most desired and 5 was least desired. The findings were that a MR is desired for information, and the attributes of a MR were ranked as Ability to provide help as the most desired by a drugstore owner followed by regularity, mannerism, dress and time consciousness.

KEYWORDS: Medical representative, drugstore, pharmacist, retailer, prescriptions

INTRODUCTION

Medical representatives play an important part in any company. They can be said to be the lifeline of a company because if they fail the company will run at a loss. It was considered as a noble profession earlier. However of late many medical representatives are found to be taking up the job with a business type of an attitude with no efforts to have a rapport with doctors or pharmacists whom they meet. In order to find out from retailers as to how frequently they visit them, the characteristics of an ideal medical representative, and ways by which a medical representative can improve his or her visit at the retailer, the study was conducted. Five factors were considered as the ideal characteristics of a medical representative. They were dress, mannerism, regularity, time consciousness at the drug store and ability to provide help.

Dress is important because if a person is not well dressed, he or she will not be respected. Nowadays many MR's are so casual that they are even seen wearing jeans and sports shoes. A well dressed MR is always liked and respected.

The second characteristic was mannerism. Since everyone likes an individual who is well mannered, a MR should also be well mannered. Calling the owner or pharmacist, 'Sir' can go a long way in developing a good rapport with the pharmacist and thereby information too can be derived.

Regularity is yet another important factor which has to be taken into consideration. A MR who is regular at the drugstore is always appreciated. Whenever a new product is introduced, a price revision is made a scheme is to be given, the presence of a MR will always carry weight. In other times too the presence of a MR will give confidence to the pharmacist to store goods of the company which the MR promotes.

Time consciousness is important because the drugstore is running on the prescriptions or purchases of the public. Service to the public is of prime importance, even at the cost of the MR. If a MR takes a lot of time asking the retailer questions it will only cause the retailer to lose his patience with the MR. Knowing when to talk is therefore an important criteria.

And finally ability to provide help refers to the ability of the MR to provide guidance and assistance to the pharmacist when he asks of it. Although the pharmacist will know more of the drugs as compared to the MR, answers to certain things such as how to use a certain device or storage conditions or other technical related questions which a MR only knows is appreciated.

A question relating to importance of a MR in providing information or settling of expired goods is also put because many a time a MR is seen as an individual who settles expiries rather than a conveyor of information.

LITERATURE REVIEW

The Literature review focused on doctors opinion of medical representatives as no relevant literature was available on drugstores or pharmacist. According to McKinney, Schiedermayer, Lurie, Simpson, Goodman, and Rich(1990) the faculty and residents had a negative attitude towards the representatives in terms of detailing and information given, but indicated that representatives supported conferences and speakers. They felt that residents were more likely to be influenced by MR's. "Residents were more likely than faculty to perceive contacts with sales representatives as potentially influencing physician decision making"(1693-1697). Wertheimer (2007) also had negative feedback of representatives in the sense that a conflict will always be

there between companies and pharmacists. However he goes on to state that both parties will be there existing for a long time and as such a healthy relationship if maintained will benefit both parties.

Further Anderson , Silverman, Loewenstein, Zinberg, and Schulkin (2009) mailed questionnaires to 515 randomly selected physicians in the American College of Obstetricians and Gynecologists’ . “Participants were asked about the information sources used when deciding to prescribe a new drug, interactions with sales representatives, and views of representatives’ value”. (pg 994-1002). 49% of the questionnaires were returned of which seventy-six percent of participants see sales representatives’ information as at least somewhat valuable where as twenty-nine percent use representatives often or almost always when deciding whether to prescribe a new drug. Says Anderson et al “Physicians in private practice are more likely than those in university hospitals to interact with, value, and rely on representatives; community hospital physicians tend to fall in the middle” (pg 994-1002)

IMPORTANCE OF THE STUDY

The study is important because it helps us to understand what a drugstore owner wishes a Medical Representative to ideally be

STATEMENT OF THE PROBLEM

Many medical representatives are found to be taking up the job with a business type of an attitude with no efforts to develop a rapport with doctors or pharmacists whom they meet. In order to find out from retailers as to how frequently they visit them, the characteristics of an ideal medical representative, and ways by which a medical representative can improve his or her visit at the retailer, the study was conducted

OBJECTIVES

1. To find out how often a medical representative visits a drugstore
2. To find out what a drugstore owner looks for in a medical representative.
3. To find out if settling of expiries or information is desired of the medical representatives by the drugstore owners

RESEARCH METHODOLOGY

The chi square hypothesis was made use to find out if a statistical difference exists between desiring information from the medical representative (A) and wishing that the expiries are settled (B). The Null hypothesis states that no relation exists between two variables A& B.

$$\text{Formula: } \frac{f1 - F1}{A} \quad \frac{(f1-F1)}{B} \quad \frac{(f1-F1)^2}{50}$$

Where A & B are the variables, f1 is the observed frequency, F1 is the theoretical frequency, and (f1-F1)/50 is the final result. The final result of both A and B are added together to arrive at the calculated chi sq value. If the calculated chi sq is less than the tabular chi sq at (k-1) degrees of freedom where K stands for number of variables and at 95% confidence level, then the null hypothesis is said to be true.

Thurstone Case V Scaling was also used whereby the 5 variables are compared with one another . These values are then divided by the sample size and the fractions are then read on a table. The lowest value is then added or subtracted to itself to make the lowest value zero and this value is added to the other variables. The resulting values are potted on a one dimensional scale.

RESEARCH DESIGN

A random, direct, structured questionnaire was utilized wherein a personal interview was conducted on 50 drugstores of Goa. The research design was of an exploratory design.

FINDINGS AND ANALYSIS

The Thurstone Case V Scaling was used to analyze the data. The comparison between the variables was first made where in the variables A, B, C, D, and E were compared with each other.

- A - Dress
- B - Mannerism
- C - Regularity
- D - Time consciousness
- E - Ability to help.

1 represents most desired and 5 represents most undesired

Table 1

	A	B	C	D	E
A	0.5	30/50	38/50	16/50	42/50
B	20/50	0.5	42/50	14/50	42/50
C	12/50	8/50	0.5	8/50	32/50
D	34/50	36/50	42/50	0.5	44/50
E	8/50	8/50	18/50	6/50	0.5

Converting to decimals, we get

Table 2

	A	B	C	D	E
A	0.5	0.6	0.76	0.32	0.84
B	0.4	0.5	0.84	0.28	0.84
C	0.24	0.16	0.5	0.16	0.64

D	0.68	0.72	0.84	0.5	0.88
E	0.16	0.16	0.36	0.12	0.5

Finding the values from the Thurstone Case V scaling table, we get table-3

Table 3

	A	B	C	D	E
A	0	0.25	0.71	-0.47	0.99
B	-0.25	0	0.99	-0.58	0.99
C	-0.71	-0.99	0	-0.99	0.36
D	0.47	0.58	0.99	0	1.17
E	-0.99	-0.99	0.36	-1.17	0

Adding the values of each variable we get

Table 4

A	B	C	D	E
-1.48	-1.15	3.05	-3.21	3.51

Adding the least value which is 3.28 to all the variables we get

Table 5

A	B	C	D	E
1.73	2.06	6.26	0	6.72

If A-Dress , B -Mannerism, C- Regularity , D- Time Consciousness and E-Ability to help, We get a unidimensional scale with E on top followed by C, B A and D

CHI SQUARE TEST

Table 1

Formula	f1	F1	(f1-F1)	(f1-F1) ² /50
A	96	50	46	2116/50=42.32
B	4	50	-46	2116/50=42.32
				84.64

Where A & B are the variables, f1 is the observed frequency, F1 is the theoretical frequency, and (f1-F1)²/50 is the final result. If the calculated chi sq is less than the tabular chi sq at (k-1) degrees of freedom where K stands for number of variables and at 95% confidence level, then the null hypothesis is said to be true .As the tabular chi sq is 3.68, and the calculated chisquare is 84.64, the Null hypothesis is false and a statistical difference exists in terms of a drugstore owner desiring information and settling of expiries.

CONCLUSIONS

1. The medical representative on an average visits a drugstore once a week. That is almost 80% of the drugstore owners gave this answer.
2. The conclusions which can be drawn are that Ability to help is ranked no 1 . This may be on account of drugstore owners wanting MRs to assist them in information of drugs, of discounts and schemes and other related matters. Regularity is ranked no 2 because the presence of a MR gives confidence to the drugstore owner to stock the drugs of the company which the MR represents. Good manners is always

appreciated and the same can be said in the case of the MR wherein he or she exhibits courtesy and manners while dealing with the drugstore owner. Dress is ranked 4 because the drugstore owner may not necessarily be particular how the MR dresses up. And finally time consciousness is not considered as an important factor to drugstore owners because they will invariably not attend to the MR whne a customer comes to their drugstore.

3. A statistical difference exists in drugstores desiring information and desiring their expiries to be settled. That is drugstore owners prefer to get information from medical representatives.

LIMITATIONS

- a) The study was conducted on only on 50 drugstores in Goa
- b) Bias may have been present in answering the questions on account of not wishing to disclose information.

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SUGGESTIONS

A year later a study can once again be undertaken and the factors could be checked for any change.

REFERENCES

Donald cooper, Pamela S. , (2006), “ Business Research Methods” , Tata Mc Graw Hill, N.Delhi

Paul E Green, Donald S Tull, (1990), “ Research for Marketing Decisions”, Prentice Hall Int, INC, N.Delhi.

McKinney, W.P, Schiedermayer,L.D, Lurie, N, Simpson, E.D, Goodman, L.J, Rich, C.E. (1990). Attitudes of Internal Medicine Faculty and Residents Toward

Professional Interaction With Pharmaceutical Sales Representatives. *JAMA*,Vol(264) Issue 13, pg 1693-1697. doi:10.1001/jama.1990.03450130065028.

Wertheimer, I .A (2007). The Conflict between pharmaceutical industry and pharmacist. *Journal of Pharma Marketing and Management*, Vol (18) Issue 2,pg 11-19. doi:10.1001/jama.1990.03450130065028

Anderson, B. L, Silverman, G.K, Loewenstein,G F, Zinberg, S , Schulkin, J (2009) . Factors associated with physicians reliance on pharmaceutical sales represemntatives. *Academic Medicine*, Vol(84) Issue 8, Pg 994-1002. doi: 10.1097/ACM.0b013e3181ace53a