

RCT vs. RWE

Randomized Controlled Trial

(Clinical Trials)



Real World Evidence

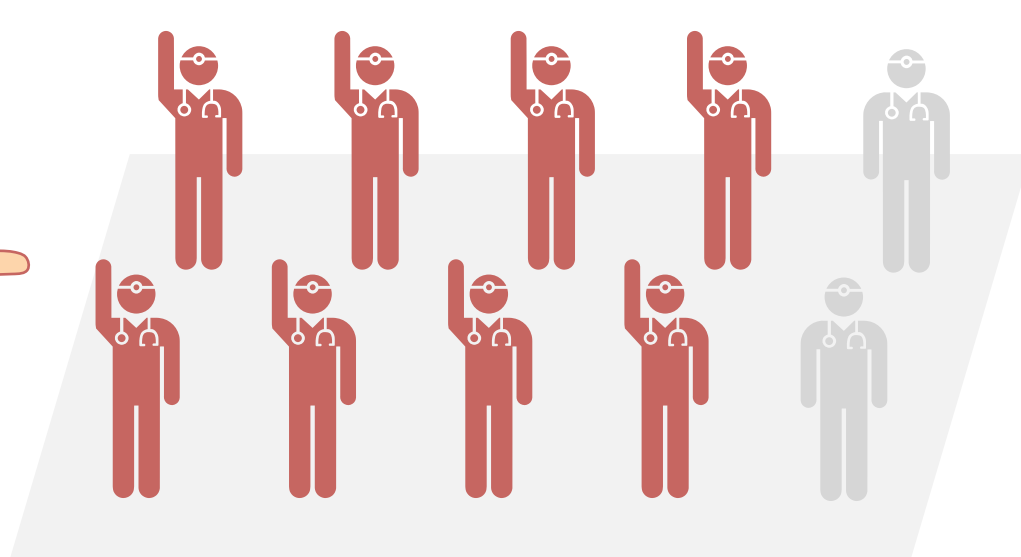


Real World Evidence,

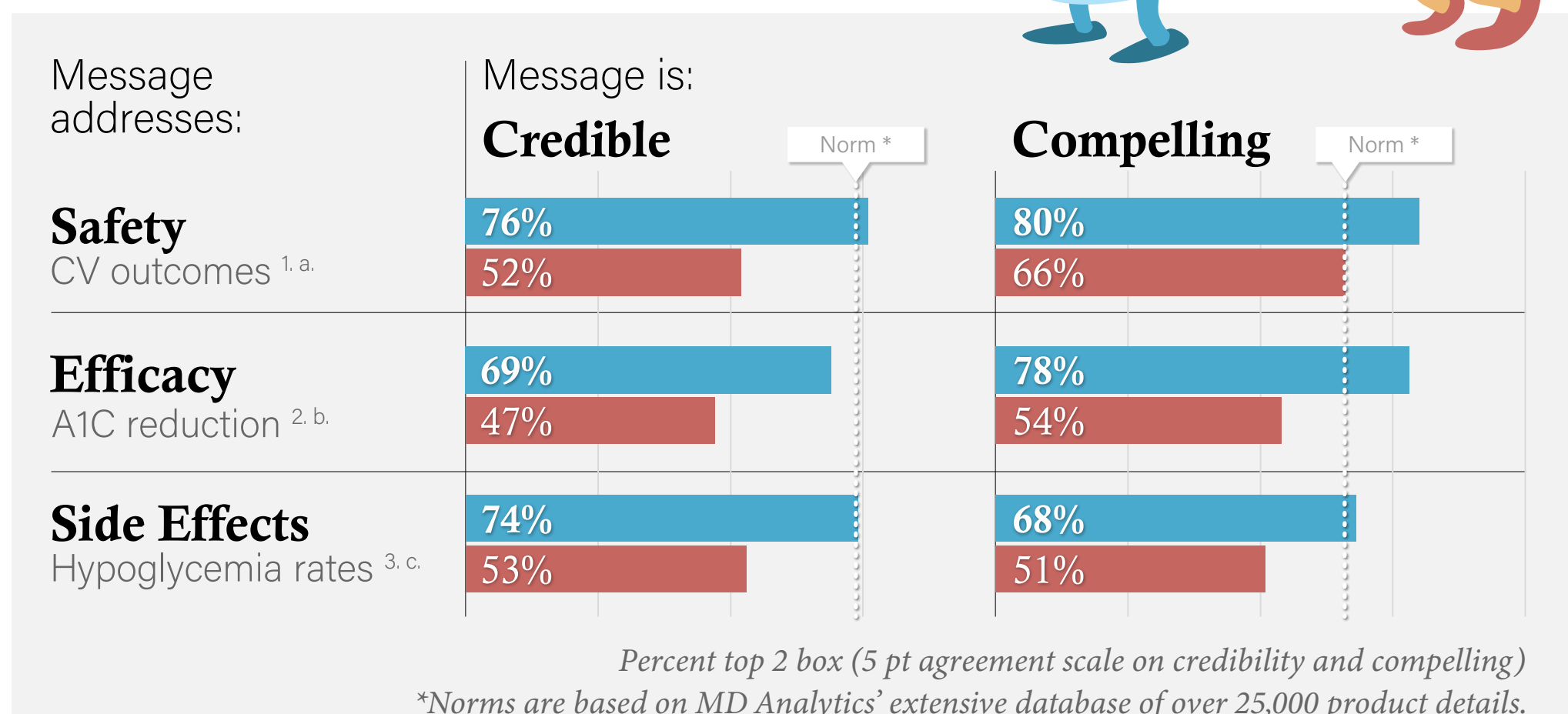
formed from years of patient data, has a growing impact on the healthcare industry, and pharmaceutical manufacturers are increasingly investing in this emerging area.

We surveyed Canadian General Practitioners, Endocrinologists, and Cardiologists to understand their receptivity towards product messaging supported by either **RWE** or traditional **Randomized Controlled Trials**.

8 in 10 physicians agree that investing resources in **RWE** would improve perceptions of a pharmaceutical manufacturer.



However, when rating comparable evidence-based messages for a diabetes product, **physicians favour those supported by RCT over RWE**.



¹ RWE suggests that Product X leads to positive CV outcomes in high risk CV patients.

² RWE suggests that adherence to Product X over a period of 3 years with diet and exercise demonstrates comparable A1C reduction to insulin.

³ RWE suggest that Product X reduces the risk of severe hypoglycemia relative to SUs.

^a RCT suggest that use of Product X leads to positive CV outcomes in high risk CV patients.

^b In a 28-week RCT with Type 2 diabetes adults, 75% of adults achieved A1C levels of 6.5% or less.

^c RCT suggest that rates of severe hypoglycemia are significantly lower relative to SUs.

While preference for **RCT** messaging is stronger, a product with evidence supported by **both RWE and RCT** would **more strongly influence prescribing decisions**.

96% of physicians feel more likely to prescribe a product with **RWE and RCT** support over **RCT** alone.

96%

64%

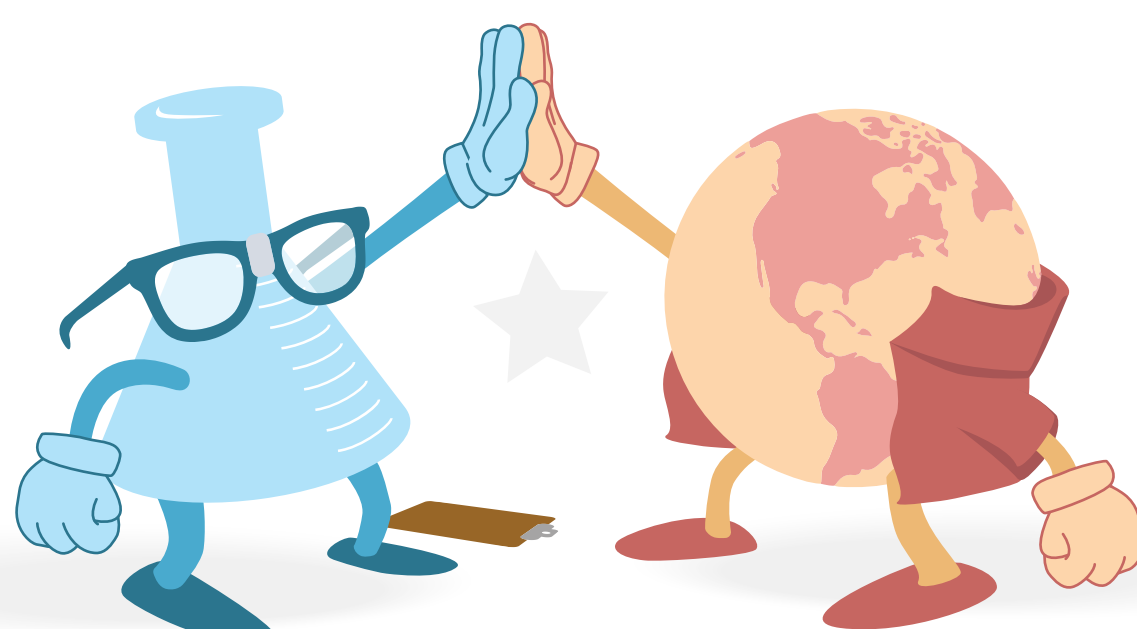
significantly

32%

somewhat



9 in 10 GPs & 2 in 3 Specialists agree that **RWE improves confidence** to prescribe a product (over one supported by **RCT** alone.)



RWE continues to influence the healthcare landscape from a regulatory and access standpoint, and will help shape the future of pharmaceutical marketing alongside **RCT**.



Data based on a survey of n=147 GPs and n=47 Specialists {n=28 Endocrinologists
n=19 Cardiologists
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