

forming community partnerships) in reaching individuals who may not be regular Internet users. We also found it most helpful to engage physicians, nurses, and other health care workers in distributing the information. Particularly for a disease entity like MCL, where little collateral information is available, health care professionals value this support in communicating effectively with patients and families. Finally, our experience with MCL confirmed the importance of targeting outreach to specific groups of patients whose interest in the message is strong.

Another example of the multitiered approach can be found in LRF outreach efforts on RIT. LRF educates individuals about many types of treatment options. We are not advocating RIT over other methods but are invested in increasing awareness of it as 1 of numerous types of available treatments. Recognizing the underutilization of RIT and that a number of clinical trials had opened in the past year, we asked: How do we increase awareness of RIT as a treatment option for patients? We first aligned our relationships with relevant health care and nonprofit organizations to assist in getting information out to their patients. We decided to focus our efforts on the development of a portfolio of information that could link patients more closely to research and clinical trial opportunities, provide the latest updates, and work to dispel myths. Our initial work indicated that many patient questions about RIT centered on toxicity and subsequent treatment regimens, and we knew it would be important to create settings in which patients could interact directly with experts who could address these questions. Although we looked at a number of vehicles for outreach, we ultimately settled on teleconferences, which have proven an effective strategy for getting the message out. People who participate in these conferences only need a phone and can participate from any place at any time.

### **Suggestions for Delivering the Molecular Imaging Message**

At LRF, strategic partnerships that agree on a highly targeted message and appropriate ways to deliver that

message have proven successful at reaching thousands of patient throughout the United States and beyond. The multitiered approach can be applied to the current challenge to the SNM and molecular imaging community to educate patients and influence physicians and regulatory agencies on the importance of this rapidly developing field. Among the recommendations to implement such an approach are:

- (1) At the basic information level, prepare fact sheets and booklets with explanatory information, background, and definitions. One strategy would be to assess basic information for patients already available through SNM and consider turning this into a primer that can increase their awareness of molecular imaging options from diagnosis through long-term care.
- (2) At the disease-specific level, consider addressing individual areas in which molecular imaging is now having beneficial impacts and in which it is likely to do so in the future. At this summit we have heard lung cancer and lymphoma cited as areas in which molecular imaging and therapy have the potential to influence diagnosis, management, and treatment. SNM might consider developing lung cancer- and lymphoma-specific information for patients.
- (3) At the scientific/research outreach level, SNM could provide regular updates on research from professional meetings, trends in technology, and new approvals targeted at patients.

These resources, incorporated into a larger strategic plan identifying the most appropriate vehicles for getting this information to the right patients at the right times, should ensure wide exposure and high impact for the molecular imaging message.

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# Making the Case for Molecular Imaging

**D**espite many extraordinary advances, molecular imaging remains among the best-kept secrets in health care. Many physicians and many more patients are not convinced of the value of newer molecular imaging procedures over more familiar diagnostic approaches. Part of the problem is a lack of understanding about precisely what constitutes molecular imaging and molecular medicine and what the benefits are on a scientific and human level. The evidence of

this value, particularly in terms of clinical outcomes data, must be organized in a way that can be understood and then widely promoted. The challenge is to identify ways in which this important information can be disseminated. In short, how can members of the molecular imaging community serve as emissaries to the public? This presentation offers background information and suggestions, focusing in part on strategies for venturing into the blogosphere.

## Defining the Audience

When planning to deliver any message, an important starting point is to ask: Who is out there to receive this message? Our company has performed proprietary research in an annual survey of 12,000 consumers to identify key targets and best audiences. For health care and for nuclear medicine, we call the optimal group “active health information seekers.” This group (58% women, 42% men; 55% 35–64 y olds) are: 25% more likely than the average person to have visited a primary care physician in the past 12 mo, 50% more likely to have visited a specialist in the past 12 mo, 69% more likely to take initiative to learn more about a new medical test or treatment (i.e., are aggressive learners), 27% more likely to be first among their friends to find out about a new medical test or treatment (i.e., can be health “evangelists”), 20% more willing to try a new medical test or treatment after gathering information, and 38% more willing to let their doctors decide about proceeding to a specific test or treatment. I should add that this last statistic does not mean that the group is passive; instead, this suggests that they engage in purposeful dialog and have strong relationships with their physicians. Active health information seekers constitute not only a receptive audience but an influential audience with which to start. They are likely to pass information on, both to family and friends and as points of discussion with referring physicians.

A second essential question to ask in planning for outreach is: Where does this target group go for their information? Our survey indicated 2 main sources of information: physicians and the Internet. The Internet is a broad resource, so we focused in on which sites are most popular as health information resources. The number of “hits” per month received by the larger health sites suggests the scope of interest in these topics: WebMD.com (12 million hits/mo), NIH.gov (9 million hits/mo), MayoClinic.com (5 million hits/mo), MedicineNet.com (4.6 million hits/mo), everydayHEALTH.com (3.5 million hits/mo), HealthLine.com (3 million hits/mo), and revolutionhealth.com (3 million hits/mo).

## Approaching the Blogosphere

Our group of active health information seekers and many others are not only gathering data. They want to join an ongoing dialog about the health issues that are important to them. One extraordinarily popular approach is blogging. Health information seekers have their choice of blogs on specific disease and health issues (e.g., cancer, heart disease, Alzheimer’s disease) and on health topics associated with national and local news events (e.g., through newspapers, cable news outlets, and local sources). The blogosphere is crowded—more than 120,000 new blog sites are created every day.

Given the many blogs and many voices on these sites, the question for groups who want to communicate a strong message is: To whom should we pay attention and why?

In marketing, we look to the “law of a few” to answer this question. We know that in the retail market, 10% of

consumers influence the purchasing behavior of the other 90%. The trick, of course, is in accurately identifying the influential 10%. We do not have to sway everyone—only this target group. We also know from marketing research that 92% of people prefer word-of-mouth recommendations in making purchasing or consumer decisions. This offers a compelling explanation of the power of blogs—they constitute a virtual form of first-hand communication.

We also use the concept of homophily in honing our focus on where to target a message. Homophily, a term that comes from studies of social networks, is the tendency of individuals to associate and bond with similar individuals. In other words, birds of a feather flock together. People with like interests flock together online, creating larger target areas that are most promising for specific messages.

The Internet and the blogosphere provide powerful evidence of the successes that can be created once the virtual “meeting places” of the right target groups have been identified. If a single person on a single blog site with a relatively small network of 100 participants provides a powerful and compelling point of view, then through the participants’ other networks this single message could be linked to 5,000 people. If the blog had more participants (not at all unusual), the single well-crafted message could reach thousands and even hundreds of thousands of individuals. Moreover, the nature of blogs is that even those who receive this message at a second remove often view it in the same way as hearing it from “a friend of a friend.”

Guy Kawasaki, a venture capitalist and 1 of the original Apple computer marketers, defines a blogger as “someone with nothing to say writing for someone with nothing to do.” Despite this tongue-in-cheek description, Kawasaki believes in the power of the blogosphere—both as a cultural phenomenon and as a place where both commercial and public service messages can be strategically placed. On his *How to Change the World* blog site (<http://blog.guykawasaki.com>), he offers tips on “How to Suck Up to a Blogger.” These tips could prove useful in positioning information about molecular imaging in new ways. Among Kawasaki’s tips are: (1) Create a great product. Bloggers have low tolerance for dishonesty and exaggeration, so any message should be delivered honestly. (2) Cite and link. Because linking is the sincerest form of flattery, reciprocal links from one’s own blog or Web site to the targeted blog could be beneficial. (3) Stroke them. Compliment the targeted blog site. (4) Give “schwag.” Although this might be more difficult to do with a health care message, Kawasaki makes the point that little gifts (pens, mousepads, etc.) are often welcome inducements. (5) Make connections before they are needed. In the same way that experienced communicators maintain ongoing ties with the professional media, having long-term contacts in the blogosphere can prove helpful. Kawasaki says, “You can never know too many bloggers.” (6) Be responsive. The blog does not operate on a single individual’s schedule. (7) Use a rifle, not a shotgun.

The point here is not to “carpet bomb” many blogs with a message. This kind of tactic is spotted right away, and the individual or organization is seen as opportunistic and self-interested rather than as a contributor to a dialog. (8) Be a foul weather friend. Talk to other bloggers about successes *and* about less-than-positive aspects of the message. One of the cardinal rules is “Never lie to a blogger—authenticity is sacrosanct.” (9) Be a source. Be helpful in directing the blogger to other useful sources of information.

This focus on the blogosphere is not meant to obscure the importance of continuing to get the message out to the

traditional media through letters to the editor, op-ed pieces, and speaking opportunities at civic clubs and professional societies. One useful strategy is for SNM to designate specific molecular imaging experts to whom local and national radio, broadcast, and cable news and talk shows can go when relevant stories break.

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