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# WHO'S MAKING THE BIGGEST SPLASH?

A PHARMA MATTERS REPORT.

JANUARY – MARCH 2009

Expert, measured insight into organizations that helped to shape professional opinions on drugs and therapies, for the period of January through March 2009 using the unique insights of the *Thomson Message Mapping System*<sup>SM</sup>.



The international pharmaceutical industry is among the most important sponsors of scientific research, so it is understandable that some of the most widely published authors of scientific articles are affiliated with, or sponsored by, pharmaceutical companies.

In this quarterly review of the scientific literature on drugs and therapies, Thomson Reuters has assessed the quantity and quality of the materials published by pharmaceutical companies, research institutions and other non-commercial bodies in the last three months to identify which organization has made the biggest splash.

## OUR FINDINGS

The Organizations that have made the biggest impact in the leading sources of information on medical research (January–March 2009)

| RANK | SPONSOR                             | NUMBER OF SOURCES <sup>1</sup> | THOMSON SOURCE SCORE (%) <sup>2</sup> | THOMSON INSTITUTIONAL RECOGNITION SCORE <sup>2</sup> | RANKING DURING PREVIOUS QUARTER |
|------|-------------------------------------|--------------------------------|---------------------------------------|--|---------------------------------|
| 1    | Novartis                            | 60                             | 71                                    | 4260   | 1                               |
| 2    | AstraZeneca                         | 33                             | 79                                    | 2607   | 8                               |
| 3    | Pfizer                              | 30                             | 72                                    | 2160   | 2                               |
| 4    | Bristol-Myers Squibb                | 28                             | 72                                    | 2016   | 5                               |
| 5    | GlaxoSmithKline                     | 23                             | 74                                    | 1702   | 10                              |
| 6    | Sanofi-Aventis                      | 21                             | 71                                    | 1491   | 4                               |
| 7    | National Institutes of Health       | 17                             | 73                                    | 1241   | NR <sup>3</sup>                 |
| 8    | Merck                               | 15                             | 82                                    | 1230   | 15                              |
| 9    | Wyeth                               | 17                             | 72                                    | 1224   | 13                              |
| 10   | Eli Lilly                           | 15                             | 70                                    | 1050   | 7                               |
| 11   | Roche                               | 14                             | 68                                    | 952  | 12                              |
| 12   | Janssen-Cilag                       | 13                             | 69                                    | 897  | NR <sup>3</sup>                 |
| 13   | Schering Plough                     | 12                             | 74                                    | 888  | NR <sup>3</sup>                 |
| 14   | National Institute of Mental Health | 9                              | 77                                    | 693  | NR <sup>3</sup>                 |
| 15   | Daiichi Sankyo                      | 7                              | 79                                    | 553  | NR <sup>3</sup>                 |

Comparison of mean Thomson Source Scores for industry and non-commercial bodies (January – March 2009)

|   | MEAN THOMSON SOURCE SCORE (%) <sup>2</sup> | Total number of articles |
|---|--|--------------------------|
| Pharmaceutical industry                   | 73   | 374                      |
| Non-commercial organizations <sup>4</sup> | 71   | 127                      |

Notes:

- 1 These analyses span the more than 30 therapeutic areas currently covered by the *Thomson Message Mapping System*<sup>SM</sup>
- 2 For the meanings of these terms, see OUR METHODOLOGY section
- 3 Not ranked in the top-tier last quarter

For more information on the *Thomson Message Mapping System*, visit [thomsonreuters.com/products\\_services/scientific/tmms](http://thomsonreuters.com/products_services/scientific/tmms) or email [scientific.lifesciences@thomsonreuters.com](mailto:scientific.lifesciences@thomsonreuters.com)

## OUR METHODOLOGY

Clearly, no healthcare professional has enough time to review all the information that comes his or her way – in the form of medical journals containing thousands of articles, and abstracts or conferences at which researchers present their findings – but some publications and scientific posters carry more weight than others.

Thomson Reuters has developed a systematic means of identifying this key subset of resources with the *Thomson Message Mapping System*<sup>SM</sup> (TMMS). The TMMS applies inclusion criteria to identify the articles, abstracts and posters most likely to shape professional opinions about particular drugs and therapies.

Through the methodologies of the TMMS, Thomson Reuters can also evaluate the quality of the material included in its analyses:

1. Thomson Reuters assesses each article, abstract and poster in terms of its scientific content, the appropriateness of the methods used by the investigators and how well the information has been presented.
2. Thomson Reuters assigns each study a score (called the *Thomson Source Score*) ranging from 0% to 100%. 70% or more generally indicates a well written, thoughtfully designed, scientifically-valid study.

This unique model has been independently tested on a wide range of clinicians to ensure that it reflects the ways in which they think and assess the value of the information they receive.

In this way, Thomson Reuters can analyze both the quantity and the quality of the scientific information being published. It can also analyze the activities of individual companies or research institutions. This is done by first identifying the number of articles, abstracts and posters they have sponsored in key journals and at key conferences which meet the assessment criteria. Thomson Reuters then calculates the average *Thomson Source Score* for all these materials.

However, the impact a particular organization makes on the healthcare community is likely to be a product of both the quantity and the quality of the publications it issues. Thomson Reuters has therefore multiplied the number of each organization's published articles, abstracts and posters in our system by the average *Thomson Source Score* for those materials. The resulting *Thomson Institutional Recognition Score* provides an objective, quantitative measure of the impact the organization has made, and is used as the basis for the rankings in this document.

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Reviews the leading sources of information on medical research.

#### ABOUT THE THOMSON MESSAGE MAPPING SYSTEM<sup>SM</sup>

The *Thomson Message Mapping System* provides focused analyses of influential scientific information to assist brand managers, publication planners, and competitive intelligence department to make informed decisions based on independent assessments of these sources.

#### ABOUT THOMSON REUTERS

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Our Scientific knowledge and information is essential for drug companies to discover new drugs and get them to market faster, for researchers to find relevant papers and know what's newly published in their subject, and for businesses to optimize their intellectual property and find competitive intelligence.

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Susan Besaw

Phone: +1 215 823 1840

Email: [susan.besaw@thomsonreuters.com](mailto:susan.besaw@thomsonreuters.com)

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PH0901050b

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