Email, a Means to an End?

Email has historically been, and continues to be, a profitable channel, with a return on investment of 44:1. Email is a favorable channel due to its low cost and the ability to make updates quickly, react to label changes and continually optimize based on test blasts. But even though it's an inexpensive and easy way to communicate with “hand-raisers,” many pharma brands struggle to maximize the channel. Other sectors, like retail, rely on timely emails to encourage conversion. Retail brands send birthday emails to existing customers and emails about abandoned shopping carts to nudge interested users into completing purchases. Pharma brands, however, seem much less inclined to send timely emails. During the study period, analyzed brands either didn’t send any emails at all or sent them, on average, 18 days after a user signed up.

Emails in pharma tend to fall into two camps. Some brands use email to drive traffic to their websites, treating email as a means to an end. These brands show a short teaser or overview of a message, with the intent of sending patients to the website to learn more. Such emails, like those from Ozempic, tend to be short; quickly introducing topics before directing users to the website.

Other brands, such as Humira’s stRAight Talk Newsletter, provide fresh information and resources within the body of the email, or as an attachment. While these emails often drive patients to the website, their success is determined not just by high click-through rates, but on engagement with the email itself. Companies must determine the role email plays for their brands by deciding if they would rather ensure the message comes across immediately, or if they’re willing to risk drop-offs by sending patients to the website. Brands using either strategy should implement best practices to ensure they are receiving the greatest engagement from their audience.

Key Findings

- Pharma emails fall short of being truly user-centric, prioritizing the brand’s needs (like collecting data) over creating a truly optimal user experience for patients.
- While some brands have mastered technical email best practices, most have not yet found optimal email layouts. Many emails place calls to action (CTAs) below the fold, lack options like click-to-call and drive users to the websites where they have already signed up for more information.
- Email personalization and customization is basic, when brands do it at all, including only the recipient’s first name in the subject line or email body. Far fewer brands respond to user behaviors or anticipate what users might be going through during their journey, despite soliciting information at registration.

Key Recommendations

- Apply best practices to ensure emails are opened, engaging enough to be clicked through and providing value beyond driving site traffic. Consider creating an editorial calendar to ensure there is a steady flow of fresh content, anticipating and reacting to patient needs.
- Implement a test-and-learn approach to develop hypotheses, test various features and continuously adapt to changing preferences and behaviors.
- Personalize emails beyond just including a first name. Check in to see how patients are doing, provide content in response to information provided and ask questions throughout to acknowledge when users change status from considering treatment to starting treatment.

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