

Nurturing peer-to-peer interactions in a virtual world

The serendipitous nature of face-to-face peer interactions is hard to recreate in digital contexts but a focus on small, two-way interactions can yield fruitful peer-to-peer engagement online

Written by Lucy Fulford

As medical events pivoted from conference centers to virtual meeting rooms, learning opportunities continued. Lectures and presentations translated across to the new digital world, but with one notable exception.

The ‘small talk’ that leads to big talk was lost. From snatched conversations in passing, through to group debates, peer-to-peer interactions are the number one thing that physicians and key opinion leaders (KOLs) say they miss about physical events.

“Peer interaction is essential for information exchange and to better understand trends in management of disease states from around the country,” says gastroenterologist Dr Paul Feuerstadt, Assistant Clinical Professor of Medicine at Yale-New Haven Hospital, who, like most physicians, formerly met up with his peers at national and international conferences, as well as when participating in regional meetings and advisory boards.





Dr Paul Feuerstadt,
Assistant Clinical
Professor of Medicine
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Hospital



Nathan Kelly, PhD,
General Manager at
MedscapeLIVE!

“As we get further into our careers, we become products of our surrounding micro-environment, so discussing how others handle different situations make us better diagnosticians and providers. This communication is an essential tool in keeping us up to date with our practices and using the most optimal diagnostic and therapeutic tools.”

Face-to-face conversations with peers have offered tangible benefits beyond socializing for Feuerstadt in the past. “At an in-person conference, several of my colleagues and I were discussing the limitations and strengths of various diagnostic tools,” he recalls. “This discussion changed my practice and I now use the diagnostic test much more frequently to trace out the trajectory of the patient case, whereas previously, I felt this would be unnecessary.”

Practical insights

In the absence of physical events online providers rushed into the vacuum to replicate in-person events online. For organisations like Medscape, understanding the value of peer-to-peer conversations has been crucial to developing resources of value to clinical communities.

“Our member and market analysis has shown that peer-based learning is highly valued amongst practicing clinicians,” says Nathan Kelly, PhD, General Manager at MedscapeLIVE! “It’s not just dissemination of information and education via journals, online resources and conferences that’s impacting the behavior of providers, it’s also the practical insights and validation they receive from engaging with colleagues in their peer group.”

When moving events into online settings, it’s tempting to attempt to directly replicate in-person

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experiences in a new medium – somewhere event organizers have been going wrong in the medical meetings space, says Kelly.

“We found ourselves having to really go back to the *objectives* of the clinician and reformat and retool these events,” he says. “It’s not as simple as taking something like an exhibit hall and making an online exhibit hall. We’ve got to go back to the objective that the exhibit hall met in the in-person environment and ask, ‘Can we meet that objective in a different way online?’”

So many factors make the online space a markedly different entity to face-to-face interactions. From reducing the length of conference discussions from full days down to a few hours, split over multiple days, through to creating breakaway rooms to encourage collaboration, organizers have to work hard for engagement, knowing attendees face a full gamut of distractions

– from their inboxes and Twitter feeds through to caregiving and homeschooling.

“Audiences are no longer ‘captive’ to the degree they were in the physical event setting, necessitating product, format, and temporal adjustments to enhance experience and impact potential,” says Kelly. “We’ve had to adjust the events to be more in line with what we see with online behaviors.”

And after so many months spent staring into screens, there’s also ‘Zoom doom’ to contend with. “The requirement to use a web-based platform was initially exciting but after a year of meeting in this format, it is fatiguing,” says Dr Feuerstadt. “I just attended the first in-person GI conference that was held and when I finally met some people in person that I only knew from virtual meetings, I had to joke that I do not walk around with a bookshelf behind me.”

The benefits of virtual meetings are clear, including time saved on travel and being able to schedule something else momentarily when a meeting ends, but they are still lacking, says Feuerstadt.

“There is an important element to an in-person meeting that might be lost with these interactions, including the ability for a larger group to meet and discuss a common topic,” he says. “Also, it is much more challenging to ‘read the room’ in terms of tone and feeling via a web-based platform.”

Peer-to-peer online: smaller groups and bi-directional conversations

So if a large-scale physical event doesn’t translate online, what has proved successful in fostering relationships remotely? “I have found the ability to meet in smaller groups very effective,” says Dr Feuerstadt. “It is so easy to set up and makes the meeting efficient. If all parties are engaged, it will mimic an in-person meeting. We were all forced to innovate to learn about how to interact effectively, hold an audience’s attention and restructure what we do to optimize our presentations.”

Smaller groups offer a more intimate environment, which helps to foster meaningful conversations online. This

requires a change in focus, towards quality over quantity, says Kelly.

“One of the performance metrics that’s pretty standard in the live event space is audience size, and historically the name of the game has been quality over quantity. Driving open, risk-free discussions that promote clinical exploration is essential. Our intimate engagements are smaller in size, but allow for bi-directional discussion, not only with the facilitator and expert presenters, but also amongst the peer group.”

While a lot of live events claim interactivity through elements like polling or through Q&A sessions, the majority of medical meetings are essentially broadcast formats, where attendees are passive observers.

“We’re trying to produce events, or at least enhancements to our events, which allow for bi-directional conversations,” says Kelly. “That’s something that’s been missing from many events across the industry and it’s a facility that has been highly sought after from attendees, as well as pharma.”

Greater interactivity is at the top of Feuerstadt’s wish list when it comes to digital presentations. “Companies can use some of the innovative tools and add-ons to platforms like Zoom to make interactions more collaborative and active,” he says. “To increase peer-to-peer interactions, it’s important to establish fun and unique ways of presenting.”

He points to this year’s virtual Digestive Disease Week, where a rapid-fire Q&A offered improved dialogue, which was more engaging, so it did not feel like “your typical lecture.” Audience polls and real time feedback could be further developed, he says, to create better learning opportunities for participants online.



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At MedscapeLIVE!, peer-focused enhancements range from a so-called ‘backstage pass’ to traditional symposia, which opens up breakout rooms to have one-on-one or small group discussions, through to peer-to-peer clinical connection events bringing together eight to 12 clinicians with an expert in the field for an hour’s presentation and discussion. These all seek to facilitate opportunities for the casual conversations you’d experience in the real world.

“That’s where relationship building happens,” says Kelly. “That’s where in the past, in-person, there was a lot of organically-driven connection between people. Those things don’t happen as readily in the virtual environment, so we try to directly promote peer-to-peer points of engagement and create accountability with the audience for being participatory.”

Pharma’s future role in peer-to-peer

Where virtual interactions may at one point have seemed a temporary stop-gap, it’s increasingly understood that we’re moving towards something new, which will harness the unique advantages of both the online and in-person spaces. “There were some thoughts, early on, that maybe unifying the audiences would be the key to the future,” says Kelly. “The current thinking is that those two audiences are ultimately going to have different experiential tracks.”

The in-person and the virtual will both have value for different use cases, says Feuerstadt. “I believe initial contact is best in person, but follow-up dialogue can, and should, happen via web-based platforms. All conferences should offer the opportunity for remote learning and engagement so that doors are open to anyone. Many will still attend the conferences in-person to see friends, old colleagues and maximize their opportunity for in-person learning.”

Improved accessibility is something that Kelly is also keen not to wind

back on as some real-world events restart. “We’re seeing events that were really locality-driven in the past being consumed by global audiences two to four times greater than we had previously,” he says.

Medscape has seen interest from “all corners” of pharma, says Kelly, from commercial through to medical affairs but he sees the latter as standing to gain the most from enhanced live events.

“For medical affairs to become that strategic pillar, they must focus on information dissemination and creating actionable insights within the pharmaceutical organization,” says Kelly. “Live events really underpin both of those. They can be a hub of information transfer, but with smaller, intimate engagements, we’re also able to drive insights.

“I think the last 15 months have actually reconfirmed the value of live events in the medical communication space. We’ve seen that through increased audience sizes. I imagine that the volume of live events, especially in pharmaceuticals, will increase in the coming year.”

