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The University of Southern Mississippi

Adaptive Selling: A New Direction for the Pharmaceutical Industry

by

Kristin Chmelicek

A Thesis  
Submitted to the Honors College of  
The University of Southern Mississippi  
in Partial Fulfillment  
of the Requirements for the Degree of  
Bachelor of Science in Business Administration  
in the Department of Marketing and Fashion Merchandising

April 2013



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## **Abstract**

The pharmaceutical industry is moving towards more adaptive selling methods for their sales people. This means that the scripted sales pitch must be adjusted for the personality of the customer. Doctors were interviewed to understand their opinions of the sales people that come into their offices. Through the case studies, it was found that the doctors liked the adaptive selling methods with the combination of relational and scripted aspects for the sales presentation. Doctors found that the most successful sales calls were those that were a good combination of relational aspects as well as the education that is within the script of a sales call. With a good combination, doctors found that sales people stepped into an advisor role opposed to just a sales role. This allowed the doctors to have a stronger relationship and more trust between those sales representatives that used their time wisely and got their point across in the way that each doctor preferred most.

## **Key Terms**

Adaptive selling, Scripted selling, Pharmaceutical Sales

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## **1. Introduction**

Due to the constant need for new, innovative ways for marketers to reach consumers, the pharmaceutical industry must also adapt to marketing changes. To be able to detect what changes need to occur in the industry, we need to understand the impact that pharmaceutical representatives have on the prescription-writing habits of doctors. Physicians are solely responsible in the prescription of pharmaceuticals. The pharmaceutical representatives are responsible for telling doctors the information about each medicine, so that the patient can get the best medicine for their problem. Both the physician and the pharmaceutical representative can have a large effect on the perception of a certain pharmaceutical from a certain company. Physicians also need to be educated by the pharmaceutical representative, and the pharmaceutical representative must find the best approach to selling their product based on the needs of the physician's patients.

Different companies have drugs that have very different chemical make ups, but they treat similar disease states. Only one drug can be prescribed for a single patient, so it is important for pharmaceutical representatives to point out how their medicine will best treat a certain disease state in a certain type of person. This in turn requires asking some questions on how the pharmaceutical representative can achieve their selling goals. What selling method makes one drug more desirable over the other? Do physicians respond better to a friendlier, more relational and educated sales representative? What kind of marketing methods are the most effective? Is the new method of adaptive selling better than scripted selling, and how do doctors perceive the different ways of selling?

This research was conducted by looking into the differences between adaptive and scripted selling techniques by pharmaceutical representatives. I want to see which

methods pharmaceutical representatives are using to get their drug to the most consumers. While pharmaceutical representatives have been known to use scripted methods to promote their company's drug, I want to look into the adaptive selling techniques more recently being used by pharmaceutical representatives. I want to see the adjustments that pharmaceutical representatives have made to their sales promotion and whether adaptive selling seems to be the best way of promoting pharmaceuticals. This should help to distinguish the best marketing method for pharmaceutical sales representatives, especially in today's industry.

## **2. Literature Review**

Doctors, patients, and pharmaceutical representatives all view the pharmaceutical industry differently. An understanding of this industry is crucial to understanding the marketing associated with it. The ability to understand the morale of the salespeople is important to the development of adaptive selling techniques. Adaptive selling can be a beneficial new direction for the pharmaceutical industry, but with the effects of something so new within the community of salespeople, the morale can be affected. The pharmaceutical salespeople are the intermediaries between the company (pharmaceutical company) and the consumer (doctor). If the salesperson is going to be effective in promoting their drug to a physician, the physician will need to value the opinion of the representative, and the representative in turn will need to be comfortable with adapting his relational strategies of adaptive selling. Knowing that pharmaceutical representatives might be trying new adaptive methods can give a new perception to the industry.



### ***Motivations for Sales Representatives and their Effectiveness in Selling***

Motivations for sales representatives are important to understand when finding the right promotional techniques. Sujan, Weitz, and Kumar (1994) found that within personal selling, it is important for companies to find sales representatives that have the ability to learn while on the job. The ability for someone to focus his goal on learning and a continued education in the sales process, opposed to performance, enables a sales representative to work towards the good of the company, while also improving him or herself for better future performance. The performance goal prevents further performance above and beyond the objective of the sale. The learning goal allows a sales representative to move past that original goal and to do better for the next sale. In a study done by Sujan, Weitz, and Kumar (1994) the learning goal showed that “salespeople enjoy the process of discovering how to sell effectively.” This gives a positive outlook on the behavior and of the salesperson. Learning new approaches is exciting for this goal-oriented group, and they want to be able to adapt their learning for future sales.

The performance side of the spectrum only “seek(s) favorable evaluations of their skills from their managers and colleagues” (Sujan, Weitz, and Kumar, 1994). These people are not as apt to want to go beyond their recognition for performing well to learn something beyond the sale. This can also be viewed as scripted selling. Performance orientated representatives are more disciplined towards making sales and having a good review from their employers (Sujan, Weitz, and Kumar, 1994). This behavior is less desirable for a new, smart, and hardworking group of salespeople. After Sujan, Weitz, and Kumar (1994) performed their research, they found that the two goals, learning and performance, in the sales sense, work together without interfering with performance. It

was shown through the study that the learning goal (adaptive selling) would help with performance but not inhibit the ability to do a job properly (Sujan, Weitz, and Kumar, 1994). Although, “we find that a learning orientation is raised by positive and negative feedback, and a performance orientation is raised by negative feedback.” A performance orientation is not affected by positive feedback (Sujan, Weitz, and Kumar, 1994). The lack of positive feedback for the performance orientation leaves little room for improvement and few ways to fix the selling techniques, which stops the adaptive selling potential. Since salespeople do not learn from the situation, they would appear to have a lower quality of work life. It seems to be seen that “working smart” and learning are quite beneficial for marketing methods to shift towards the new area of adaptive selling.

Blackshear and Plank (1994) wrote an article about sales performance based on adaptive sales techniques, and they looked into the salesperson’s behaviors. Their research showed that “rapid adjustments by the salesperson during a sales presentation to respond to these needs were an integral part of adaptive skills” (Blackshear and Plank, 1994). These “rapid adjustments” were seen as very important for the sales personnel to be able to be promoted by their managers. Sales representatives that were able to adjust to the new methods easily were thought to have better sales performance. By looking into the behaviors of the sales representatives, Blackshear and Plank (1994) wanted to see how behaviors affected performance, whether negatively or positively. This is important because the behavior of a sales representative needs to be positive to make the customer want to invest in the product. In the experiment done in this study, two groups were observed for their performance results. One group had task-specific behaviors (scripted) that they had to follow to make their sales pitches, and the second group had to adjust

their performance (adaptive) within a sales pitch depending on the customer to whom they were pitching ideas (Blackshear and Plank, 1994). These behaviors would eventually be shown in sales presentations to the customer, showing that behaviors affect the results of a sale.

Once the experiment was performed, it was found that “the strongest relationship exists between task-specific behaviors and performance, adaptive behaviors deserve consideration because they contribute significantly to the model which describes performance” (Blackshear and Plank, 1994). It was shown that people who were ‘planners’ were better salespeople for this study. The salespeople who felt more prepared demonstrated behaviors that were more positive in their sales performance. These people performed better in the task-specific situations because they knew their product and were able to perform better because they were more comfortable with knowing what to do next in their sales pitches. This shows that scripted sales techniques might be more effective amongst some sales representatives, which means that the sales representatives who were more comfortable knowing what they had to do were more personable to customers. With “careful planning and support” by management, the sales force might be able to adapt to new techniques with a more detailed plan (Blackshear and Plank, 1994). If a sales force can combine both the education involved in learning a new skill, adaptive selling, and behaviors and attitudes that are positive, then adaptive selling can be a beneficial new aspect of selling.

### ***Benefits of Adaptive Selling***

Today, adaptive selling has become the new approach for businesses to reach out to their customers. Adaptive selling is a custom approach for directing sales to certain consumers, based on their likes and dislikes. “Adapting to customers entails focusing on their individual needs and preferences” (Franke and Park, 2006). In Chakrabarty, Brown, and Widing’s (2010) research, the approach is specifically described as, “Salespeople adept in practicing adaptive selling can tailor the sales message to fit the unique needs of the customer and the selling situation.”

In the sales industry today, many businesses are moving towards finding that ‘unique fit’ to bring their customers into their sales promotion. Being more customer-oriented can help with adaptive selling (Schwepker, 2003). Building an environment that is more customer-oriented can improve sales and help representatives understand the customer’s wants better, building a form of adaptive selling (Schwepker, 2003). Throughout Chakrabarty, Brown, and Widing’s (2010) research, the authors talk about the positive factors associated with adaptive selling as a whole. This article also went deeper into the association of adaptive selling and education. To understand the importance of adaptive selling and education, this article showed that “education was significantly positively related to the practice of adaptive selling” (Schwepker, 2003). Continued education throughout the job is mentioned in the studies and appears to be a good platform for people using the adaptive selling method, especially when salespeople must learn how to be relational.

Weitz, Sujan, and Sujan (1986) present adaptive selling to have both positive and negative results. In their article, the authors state “Adaptive selling is effective only

when these variables result in the benefits outweighing the costs of practicing adaptive selling.” This brings up both positive and negative sides of adaptive selling. It shows that things like the morale of the staff affect the ability of staff to use adaptive practices. While adaptive selling has been a good method for building a relationship with the consumer, it sometimes does not have the same effect on the sales representative who is approaching the customer. These three points, “(1) the variety of customer needs and types encountered by the salesperson, (2) importance of the typical buying situation encountered, and (3) the resources provided by the company to the salesperson”, must be approached properly to have the best effect on the sales force (Weitz, Sujan, and Sujan, 1986). Being able to understand and learn the methods of effective adaptive selling techniques is crucial in the changing marketing place for selling. Sales management noted that, if there are intrinsic rewards for the salespeople, adaptive selling was more manageable for the staff to approach (Weitz, Sujan, and Sujan, 1986). With the ability of staff to use adaptive selling, the salespeople are able to work smarter and value themselves more because of all the rewards they will get from their work. With rewards, they can get that target market to buy into their promotion.

### ***Adaptive Selling in the Pharmaceutical Industry***

More specifically associated with the pharmaceutical industry and adaptive selling, the Jonathan Rockoff (2012) wrote an article for *The Wall Street Journal*, which specifically referenced Eli Lilly about their move to adaptive selling methods with their pharmaceutical sales representatives. Not only has Eli Lilly adjusted their sales forces in the area of adaptive selling, but also “some 18 of the top 40 drug makers have reorganized

their sales forces to reduce duplication” (Rockoff, 2012). For many companies the shift to adaptive selling has forced the industry to reduce its’ sales jobs by large percentages, like AstraZeneca’s reduction by 24% (Rockoff, 2012). “GlaxoSmithKline PLC, Merck & Co. and Lilly are also asking their representatives to switch from making forceful, tightly scripted sales pitches to acting more like a resource supporting physicians’ treatment” (Rockoff, 2012). The relational marketing strategies take fewer representatives because of the personal relationship built with the doctor and his or her office. The move from quick-paced scripted sales routines is slowly leaving many pharmaceutical companies, and the relational adaptive approach is infiltrating many companies. Many companies are realizing that the relationship pharmaceutical marketing approach is going to be the most effective (Clark, 2007). The research supports a shift in the market to a more relationship market to keep up to date with the current most effective pharmaceutical companies.

### **3. Methods**

This qualitative study was done to determine if adaptive selling is the new and more effective way to go in selling. From current literature and research, adaptive selling is perceived as a new, helpful way to help with selling objectives in businesses. For this study, I asked certain questions to doctors about their experiences with certain pharmaceutical representatives from different companies. Then, I compared the responses of the different doctors to the research previously done on adaptive selling.

## ***Research Design***

In order to figure out the most effective methods of selling to doctors, interviews were conducted with three different doctors. This is a suitable number of interviews for the case studies that I performed. Edwards and Baker (2012) said, "... a small number of cases, or subjects, may be extremely valuable and represent adequate numbers for a research project... It may simply be that is as many people to which one can gain access among these types of groups." Because doctors have very busy schedules and are a hard group to interview due to time purposes, this size of a sample will be adequate for this study.

In these interviews, the doctors answered questions about their experiences with pharmaceutical representatives that come to sell their company's drug. The interviews helped me to understand the feeling of doctors about the different techniques that sales representatives use while promoting their pharmaceutical products. I wanted to find out the good and bad ways that representatives have used scripted and adaptive techniques in their promotions, so that sales representative will know the key factors that make a doctor more receptive to their company's drug.

## ***Participants***

Research participants were chosen in the fall of 2012. They will be a convenience sample due to the size of this undergraduate project. Three different doctors were interviewed in the spring of 2013. Before the interviews are conducted, the doctors will be familiarized with the idea of adaptive versus scripted selling techniques so that they

will understand the interview questions better. These doctors will be from different specialties of medicine to keep variety in the group of participants in this study.

### ***Instrumentation***

This research is qualitative in nature. The results were observed through interview questions. During the interview process, I recorded the questions and answers to be able to analyze the content about the selling techniques. Qualitative research must be done in this study because case studies must be performed on the results of the doctor's interviews. These interviews contained information about the doctor's feeling towards the pharmaceutical sales representatives and their effectiveness in selling their products.

### ***Procedures***

Once the participants for the interviews had been chosen over the summer of 2012, the interviews took place in the spring of 2013. These interviews took place over the time span of a few weeks. Each interview lasted thirty to forty-five minutes. The interviews were digitally recorded and transcribed for the use of this research. These interviews were done to find out the doctors perceptions of the pharmaceutical representatives when they come into their offices. This helped to determine the methods that these sales representatives use to sell their drugs effectively. Once all of the interviews were conducted, the doctors were able to give a good assessment of the current selling methods of the pharmaceutical representatives that come into their offices.



### ***Data Analysis***

The research question in this study is the following: Is adaptive selling the new way to go in pharmaceutical sales and are pharmaceutical representatives really using these methods to get better results in sales? The data gained from the interview questions was analyzed to show the method used most by pharmaceutical representatives, whether scripted or adaptive. Based on what the doctors liked best in a sales pitch, I was able to see what is the most beneficial method for future pharmaceutical representatives. This data will show the most common and most effective methods that sales representatives use to make their sale. The data helped to show if the current literature was correct about the shift towards the adaptive selling method.

### ***Personal Interview Questions***

1. Think about the “best” and “worst” salespeople that call on you. What makes them different?
2. Are there any specific questions you like to ask pharmaceutical reps when they come to your office? (Relational questions or strictly pharmaceutical questions)
3. Can you describe the kind of sales presentation that pharmaceutical reps do when they visit your office?
4. Which method do you personally prefer in a sales pitch? (Educational, script, mixture)
5. What would be the ideal interaction with a salesperson?
6. Do you have any reps that come close to this ideal and could you describe what they do?

7. Approximately how many pharmaceutical reps come to your office each month, and how long do their visits generally last?

#### **4. Discussions and Analysis**

In order to see the current methods of pharmaceutical salespeople who come into doctor's offices, the qualitative findings from the cases studies showed some examples of both differences and similarities to the literature. The personal interviews with the three doctors from this study gave many examples of the qualities that they prefer from the sales people who come into their offices. The doctors also gave examples of the things that they disliked about the salespeople. From the doctors' interviews, we can see that the pharmaceutical salespeople who come to their offices indicated both scripted and adaptive selling techniques.

The research done by Schwepker showed a trend of moving from scripted selling methods towards adaptive selling methods. Some pharmaceutical companies have been focused on shifting towards this goal as well according to Rockoff's article from the literature. This consists of moving towards building a relationship first and individualizing the sale to each particular doctor. One of the doctors explained the relationship as:

They learn about me and what I want to know and what matters to me. If I keep asking about Blue Cross not covering their product, they will let me know as soon as they find out something new.

When the salesperson makes an effort to create that relationship and trust between their doctors, they have a better chance at getting their prescription written. Sales people who remember what the doctor said to them previously and mention those things on the next

visit accomplish more than those representatives that do not remember the little details. These things go a long way and help turn the selling method towards the adaptive selling style.

Some of the representatives that are considered good by doctors will adapt their presentation to fit the personality of their doctor and the doctor's interests, whether those interests are social or business. Doctors that are very interested in medicines that are covered by many insurance providers will want to hear more about the drug coverage in the selling pitch. Affordability is key in certain areas, depending on the doctor's specialty and clinic and location. One doctor specifically mentioned drug coverage saying this:

I am always mindful of what insurance the patient may have and whether or not they have prescription coverage with that insurance.

It was consistent amongst all of the doctors that drug coverage was a key factor that the pharmaceutical reps needed to address. Another doctor supported this by saying:

I always ask about cost, because a lot of the patients that I see can't afford some of the medicine. That has to be the forefront in my mind. Is this a brand new drug that will be very expensive and will not even be an option for my patient, or is it something that they will be able to reasonably afford?

This means that sales representatives that come into these certain doctors' offices should know that the doctor cares about drug coverage. They should adapt their presentation to hit on that point in order to be more successful.

Even though the literature of Schwegler points towards the path of more adaptive selling techniques, this does not mean that all pharmaceutical companies are adapting their techniques. Doctors still see many scripted calls with little to no personal relationships. While it varies from sales representative to sales representative, some

representatives will come into the office of the doctor, give the rehearsed speech, and then get a signature. One doctor mentioned this sales call as an example:

A sales rep will even come in to see the two different doctors that are in the office. They will give their whole spiel for five to ten minutes with each doctor, and then they will only give ten pills, which is not enough to give one patient one treatment.

This scripted and impersonal technique does not go over well with doctors, who find this a waste of their time. Some of these doctors have stopped allowing the pharmaceutical representatives to come to their offices anymore because of this technique. This is not a good trend for the pharmaceutical industry and would indicate a need for a change in strategy.

Some pharmaceutical companies have tried to change their strategy in order to get better results. This method involves some pharmaceutical companies that have stopped sending their representative to the doctor's office in exchange for a twenty-minute phone call sale. The doctor who has experienced this before explained its' effect like this:

They went into detail on every single one of their products, and they will send you ten pills in the mail. We were like you can forget this. There was one guy on a telephone sales call, and he sent pizza ahead of time. This was just corny. They don't want to spend the money to have a personal relationship with the doctor, but they will spend money on food.

This technique obviously did not go over well with this physician. This technique is the exact opposite of the adaptive selling direction, and because the results were not favorable, this can allow for the excuse that pharmaceutical companies may need to go towards the adaptive technique to not risk getting on the bad side of doctors even more.

On the other hand, some doctors do like some of the aspects that come along with the scripted selling method. As one doctor said:

I want to hear just about the facts. I like succinct, but that goes back to being respectful of my time. I want to know the facts in almost a bullet form fashion, very succinct.

This seems to occur in some doctor's offices when they do not have time to waste between busy days with patients. Some doctors prefer the 'no fluff' version of a sales call. Because doctors are so busy and put their patients first, there is a need for a sales representative to get straight to the point. While this requires a focused selling method, it does not mean that the doctors do not enjoy some conversation during the day. Another doctor said:

I love to get to know them personally because in the middle of the rat race of your day, it is nice, and I like them to know something about me.

There seems to be a happy medium between the scripted method and the relationship selling techniques that the literature points out. If a sales representative can be succinct and have the appropriate amount of personal time, their presence is no longer a burden and a waste of time but a nice addition to the day's work.

It appears a consensus amongst the doctors that they do enjoy the relationship with the pharmaceutical sales people, but the article by Weitz, Sujan, and Sujan does show that the degree of the relationship needed with the pharmaceutical representative does vary, depending on the client. In this case, the doctors mentioned earlier demonstrate this facet of selling. What also is indicated from that article is that all of these different degrees of relationship require the ability to adapt to what the doctors like the best. The doctors agreed that sales people who know their likes and dislikes, in terms of selling styles, and adapt accordingly are the most successful. Not adapting and strictly following a script has results like this:

I cannot stand canned drug rep talk. Meaning, “Ok, so, doctor, can I count on you for your next so and so scripts?” That is just awful. You cannot promise anybody anything.

This would indicate that doctors prefer the alternative adaptive selling technique.

Finding the balance is up to the sales person through developing relationships with all of their clients on each visit.

In some cases, pharmaceutical sales representatives that come into offices and focus only on the relationship aspect of the call have negative results in getting prescriptions written. Doctors want their representative to know their product cold, but if they come into their office and cannot stay on task, doctors find this a waste of time as well. Sales representatives that come in, talk to, and distract other staff while waiting to speak with the doctor are also not successful on their sales call. One doctor gave this example:

Bothering my nurses is the worst. Hanging out in the nurses’ station, lurking about, trying to befriend my nurse when I’m paying her on the clock for the work she needs to do or talking in the background, being loud is not good. It makes noise in the hall and the patients wait in the rooms hearing a party in the hall. The patients assume that the nice young person with the briefcase is taking my time, and the time the patient is paying for is being wasted.

From this, it appears that sometimes too much relationship in the office is not acceptable.

It is necessary for the sales representative to not waste the time of doctors and other staff members.

There are certain qualities of being adaptive in a selling situation that are successful. One doctor gave this example:

The ones that are good can read the situation, read the tone in the air that day in the office, and take a clue are usually very successful.

Being able to read the situation in an office on a given day is a necessary quality to adapting your sales call. This may require not just changing your tactic for the day, but rescheduling or merely asking questions that you can answer on the next visit. This may require changing your schedule to fit around theirs, but this tactic can build trust and a stronger relationship that can create better future business. This is not exactly the adaptive technique described in the different articles of literature, but it still requires knowing how to be adaptive, and knowing that adaptive selling techniques can increase your success in sales.

It appears that the adaptive selling style is received well by doctors. It also seems important to have a good balance between the script and personal aspects. Most importantly, sales people must know the clients that they are selling to in order to individualize their sales pitches. By doing this, the sales people are adapting their sales pitches to fit the personality and interests of the people that they are calling on. If a sales person can successfully adapt to the happy medium of their client, the results should be more favorable for that sales person.

## **5. Implications**

### ***Theory***

The research done by Schwepker shows the trend of changing selling techniques to fit the adaptive selling technique. This means that the pharmaceutical companies, after reading about the success of adaptive selling techniques, should adjust their sales procedures. In interviews with the doctors who see pharmaceutical representatives on a

daily basis, it appeared that some sales people did use adaptive selling techniques.

Although, there are still a number of representatives that do use older scripted methods.

The selling methods seemed to vary from representative to representative, but the majority of the adaptive sales people had a more positive effect on the doctors to whom they were selling. Between the hundreds of sales representatives that the doctors see each month, they commented that they genuinely enjoy their conversations with the majority of representatives that come into their offices. While the literature does point out the many positives of adaptive selling in today's market, one doctor noted that he enjoyed the sales people who did a mixture of their scripted sale with some relational parts, indicating adaptive selling. It appeared that all of the doctors enjoyed a happy medium of scripted techniques with some relational aspects thrown in there. Too much relational talk did turn off all of the doctors. They did not wish to listen to only life stories, but they wanted to hear some of the script and educational aspects of the sales pitch. This was shown by one of the doctor's comments about the value from the education of the sales pitch:

I like the educational side to be a little heavier on the front end. Preferably, a brief introduction on the new drug, just the basics, bullet points and the next time they call "Remember I introduced this last time, so can I tell you a little bit more about it?" I like the education to start with, but once they get the basic education, just hit the high points little caveats to fill in the details later.

This would show that doctors value the adaptive mix of education to fit the doctor's preference. By doing this, they have built an even stronger relationship with the pharmaceutical representatives that come into their offices, creating even more value. It would also imply that this technique would help to get more prescriptions written. This would suggest that the literature was correct in the benefits that come from the adaptive



selling techniques. It would also suggest that the educational aspects of a presentation are very valuable to doctors as well.

Other than just getting value from the sales representatives' adaptive selling style, the doctors were more likely to listen to the presentation if they were interested. One doctor supported this by saying:

Some of the stuff they get their reps to tell you, its so far off in left field, that why would you even listen to it.

If they do not adapt to what the doctor wants to know, then the doctor will not find the presentation valuable. If they find the presentation both valuable and beneficial for their patients, they would be more likely to prescribe that representative's medicine for their patients.

Just as the Rockoff's article stated the trend of pharmaceutical companies moving towards more adaptive selling techniques, it appeared that the pharmaceutical representatives are striving to work towards this goal. If the physicians have a representative that does the correct mix of relationship and script, they can be successful in making their sale for their company. The research done by Blackshear and Plank does show that sales people who are capable of being able to adapt their sales presentation appeared to be more successful. This ties back well with what the physicians have said. When a doctor found the sales presentation to be beneficial, it occurred when the sales representative adjusted their presentation to what they knew their doctor wanted to know. The doctors do not appreciate the 'canned' drug rep talk, and they would rather you adjust your presentation to fit them and not the script that corporate came up with for them to use.

Through all of this, more research can be conducted to find out more specific examples of adaptability in sales calls. More research done on the pharmaceutical representative side can give further insight into adaptive selling techniques. By interviews on the other side, we can find out what motivates the pharmaceutical representatives to adapt their presentations. What are some key indications of a need for an adapted strategy in a sale? How do some pharmaceutical representatives handle switching gears into adaptive techniques? What are some ways pharmaceutical representatives find out what is important to the doctors that they call on? All of these questions can open up the other side of the adaptive selling issue to give further literature for pharmaceutical companies to use in training their sales force.

### *Practice*

Within the practice of pharmaceutical sales, it is important that managers know their role in dealing with the changes that are going on within the industry. In order to keep up with the change towards the adaptive selling style, managers must determine the appropriate steps to move their sales people towards the goals of their company.

It is implied, from the reaction of the doctors, that it is necessary for managers within the pharmaceutical industry to encourage adaptive selling techniques for their sales people. This does mean finding the balance between relational aspects and scripted aspects. A specific tip from one of the doctors stated:

I always tell some of the reps that are new or managers that come in the 3 B's of calling on me of being successful: 1) be sincere 2) be brief 3) be gone. From a business standpoint, time is money; on the other hand, no one who is sick wants me to be out there gabbing all day.

These three points can tie into knowing the doctor's personality and being able to adapt to it. By knowing that this doctor does not want to spend his entire day talking, the representative should know to stick to the brief scripted message, as well as being genuine.

Managers can take this example to encourage their sales people to spend the appropriate amount of time with their customers. This would require them to know their likes and dislikes within the workplace. It would be important for managers to make sure that their sales people undergo sufficient training in reading the emotions of people they call on. It would even be beneficial for these sales people to be adept at reading situations and adjusting for them. Managers can also get their sales people to learn what parts of their sales pitch need to be adapted. Most doctors like getting the informational side of the medicine, but if they have heard the details before, they want to learn other information. This information could be about insurance coverage or other factors affecting the doctor's prescription writing habits. Managers can also train their representatives to notice if the doctor appears to be uninterested, indicating that they have heard this message before. This would allow them to switch gears towards topics they want to know about. The managers could also encourage their representatives to ask questions of their doctor to know if they want to know any new or different information about their medicine on that day of their call.

The doctors also pointed out that some pharmaceutical representatives appeared too afraid that their sales presentation would go off-label if they adapted their speech. This point would be important for managers to address as well, because their representatives need to know the difference between off-label promotions and building a

relationship. Sales is a profession that requires relationships to build the trust that is important in making a sale. The research done by Blackshear and Plank show that confidence in your techniques are more successful in sales. To have a more confident sales force, management could give better examples of what is allowed or not allowed. This would also show the sales people how to adapt to become more successful for their company. This could also help reduce fear and ‘canned drug rep talk’ for the success of the sales person.

## **6. Limitations**

This study did have its’ limitations due to multiple different factors. This research could not be considered a perfect study because of the small sample of interviews. While a small sample is acceptable if the group studied is not easily accessible, it is still limited by the narrow range of medical specialties that were interviewed. The doctors also came from within the same area, meaning less diversity in the sample. This study was also done over a short period, and it did not allow for a larger and more diverse sample of research participants. Thus, the sample can be considered subjective to small population of doctors in South Mississippi.

## **7. Conclusion**

From the literature, it was shown that there is a trend towards adaptive selling techniques over scripted selling techniques. This research allowed us to see if the trend is moving in that direction. Through interviews with doctors, it appeared that the trend has been moving in that direction. Those sales people, who were not going in that direction,

were not as successful with the doctors. This demonstrated that the most successful sale representatives were those who were able to be adaptive in their selling presentations. This leads to greater success in getting prescriptions written as well as an overall, positive perception left of the doctor. This would mean that pharmaceutical companies should encourage their representatives to adapt their selling techniques to fit the doctor that they are selling towards. This should lead to greater success for sales numbers.

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