

An Exploratory Study of Product and Brand Positioning Typologies with Respect to Pharmaceutical Companies

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— *Review of* —
**Integrative
Business &
Economics**
— *Research* —

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ABSTRACT

Research objectives: Pharmaceutical Companies are adopting various positioning strategies. The current research paper is based on conceptual understanding of various positioning typologies with respect to pharmaceutical companies. The basis for clarification is numerous definitions and a practice of positioning. The main objective is to explore numerous positioning typologies.

Methodology: This research paper presents initial work done for the doctoral study. Exploratory study is done through various case studies and past research. Strength of Brand positioning and financial performance is explained through literature review.

Preliminary findings and potential contributions to the literature: The major findings are presented in the form of summary literature. Pharmaceutical companies are mainly focusing on condition positioning as a brand positioning typology. The changing scenario with respect to pharmaceutical companies is rarely studied with implications to its end consumer that is its patients. The above understanding will help marketers to design the marketing activity in such a pattern that suits the requirement of the today's patients. The findings of the paper will help the industry for promoting the medicine for condition in which it needs to be taken. The results also help pharmaceutical companies to contribute towards better health and improve the positioning strategy.

Keywords: Branding, Positioning, Brand trust

1.1 INTRODUCTION

India is one of the fastest-growing pharmaceutical markets in the world, and by now, its market size has nearly doubled since 2005 and is further expected to reach \$20 billion by 2015, growing at a compound annual growth rate (CAGR) of 11.7 percent during 2005-2015 and establish its presence among the world leading 10 markets. According Barclays Capital Equity Research report on India Healthcare & Pharmaceuticals in 2010, India is also the third-largest market in the world in terms of volume and fourteenth in terms of value. India accounts for 8 percent of global pharmaceutical production in 2011. Indian firms produce about 60,000 generic brands across 60 therapeutic categories. In addition, Indian firms manufacture approximately 500 different active pharmaceutical ingredients (APIs) (Modern Pharmaceutical, 2012).

In 2003, China and Brazil were the only two countries that featured among the top ten pharmaceutical markets worldwide. However, by 2015, four of these emerging markets are expected to rank among the top ten global pharmaceutical markets, with China and India emerging as the largest gainers. The other emerging markets are forecasted to be Brazil, Russia, Venezuela, Turkey and Korea. (Ernst and Young, Progression Building pharma 3.0,2012)

The Indian Generic market, which has attained a prominent position in the global scenario, is also growing domestically. Only a little over 35 per cent of the Indian population has access to modern healthcare, which provides a huge population with unmet healthcare needs. These people are not looking for high end niche products but require the basic products, thus giving the generic market a growth opportunity. Growth will be further fuelled by increase in the government expenditure on healthcare from the present 1.2 per cent of Gross Domestic product, which will result in higher spending on medicines and building hospital infrastructure.

1.2 BRAND MANAGEMENT IN THE PHARMACEUTICAL INDUSTRY

The pharmaceutical industry has often modeled itself on the fast moving consumer goods industry (FMCG) where brands are viewed as the key assets of a company and all assets are utilized to create and develop brands. According to Schuiling and Moss (2004), pharma companies have not worked proactively in identifying a brand identity for their products and then communicating this identity to consumers. The big difference in strategies may come because of Defining the branding involves identifying what key differences might exist between the pharmaceutical industry and the fast moving consumer goods (FMCG) industry. Brand is defined as a name or a symbol given to products that will differentiate it from other products and that will register it in the mind of the consumer as a set of tangible (rational) and intangible (irrational) benefits.

Brand represents a way to differentiate product against competitors. Brand will also generate consumer loyalty as brands signal a certain level of quality that the consumers will find on a regular basis on marketing and selling.

1.3 POSITIONING WITH SPECIAL REFERENCE TO PHARMACEUTICALS

Establishing the pharmaceutical brand position the advantageous location that a product owns in the mind of physician is the challenging component of marketing campaign development. At present the traditional approach to pharmaceutical brand, positioning involves customers essentially reacting to statements developed by the marketing organizations. Vanderveer and Pines (2007) have explained the concept of customer driven positioning. The methodology followed includes problem statement i.e. articulating a specific unmet need in the market place that is being met by the brand in question, functional benefits i.e. the essential clinical property of the medication that intrinsically differentiate from other medications. The next step is providing to believe i.e. reference to some scientific or mechanistic aspect of the brand that substantiates its main clinical benefits. Further, emotional benefits may strengthen the positioning statement robustly. Once the positioning statement has been established author recommends a similar process called as information architecture.

The pharmaceutical industry has been very successful since the late 1980s, achieving impressive annual sales growth rates in excess of 10 per cent per annum and enjoying the resultant growth in profits. The success has relied mainly on strong research and development (R&D).

There is great number of different definitions of positioning in scientific literature of marketing. The concept of positioning seeks to place a certain position in the minds of perspective buyers. Marketers use a positioning strategy to distinguish their firm's offerings from those of competitors and to create promotions that communicate the desired positions (Boone and Kurz, 2001)

Scientists Etzel, Walker and Stanton (1997) refer to marketing as to management's ability to bring attention to a product and to differentiate (position) in its favorable way from similar products.

Ries and Trout (1986) distinguish from all other marketing theoretic, stating that positioning is not what is done to product, positioning is what you do to the mind of the prospect, a piece of merchandise, service, a company, an institution and even a person. However, Kotler in 2006 defines positioning as the act of designing the companies offer so, of at it occupies distinct and valued position in the consumers relative to competition products. The purpose of positioning is to create a unique and favorable image in the minds of target customers (Bhat, 1998). Positioning therefore is a natural conclusion to the sequence of activities that constitute a core part of the marketing strategy (Fill, 2006).

Product positioning refers to the decision and activities intended to create and maintain a certain concept of the firm's products in the customers mind (Ferrel, 1997). Positioning is

developing a specific marketing makes to influence potential customers overall perception of a brand, product line, or organization in general (Lamb, Hair, Mc Daniel 2004). To sum up the position of a product is customer's perception of the product's attribute relative to the attributes the competitive products. Scientists Hooley, Sounders, Piercy(2006) state that competition can take place at various levels. Competition with products analogous qualities, competition in the same product group, competition with other product that satisfies the same or very similar consumer demand. In addition, competition in the same demand level is possible.

According to Pranulis (1998) survey techniques like scales of graphic evaluation, Likert's scale, and semantic differential scale can be proposed to identify the current position of product and other competing products. A positioning map provides a valuable means to position product by graphically illustrating consumer's perception of competing products and the product their positioning. Positioning map develops understanding of how the relative strength and weaknesses of different product are perceived by buyers. It builds knowledge about the similarities and dissimilarities between competing products. It assists the process of re-positioning of existing products and the positioning of new products.

Positioning map is an important tool in development and tracking of promotional strategy. It enables manager to identify gaps and opportunities in the market and allows monitoring of effects of past marketing communications (Arora, 2006). A good number of studies have been conducted on selection of positioning strategies. Positioning strategies is the choice of target market segments which determines Scholars Doyle, Stern (2006). Product positioning strategies are product features, price/quality, product class dissociation, user, competition, benefit, heritage or cultural symbols (Fill 2006, Kotler 2007, Armstrong 2004, and Doyle 2006). On the other hand qualities, competitors, product users, product class, applications forms positioning strategies (Boone, Kurz 2001). Inadequate positioning is studied in detail by Grancutt, Leadley, Forsyth (2004). They have defined risky positioning as under positioning, over positioning, confused positioning, and doubtful positioning. Similarly, many studies have been undertaken on positioning statements. Positioning statements is highly interactive process often involving many cut and try attempts before satisfactory results are achieved. According to Kalafatis , Tsogs, Blankson (2000) positioning statements play a vital role in helping to guide and co-ordinate the firms efforts in the market place. They are crucial internally and externally.

1.4 INNOVATIONS TO DIFFERENTIATE PRODUCTS

Following are the innovations that pharmaceutical companies are adapting to differentiate the product. For comfort and convenience of the product, pharmaceutical companies are trying for differentiation in products. Various formats are available which are being studied in New product development in consumer health 2012, Euro monitor .The formats are differentiated based on the delivery system that could be once a day or twice a day it could be nature of the medication , modification in formulation , component combination etc. in the following chart.

This differentiation of product helps companies in designing a positioning strategy for the product.

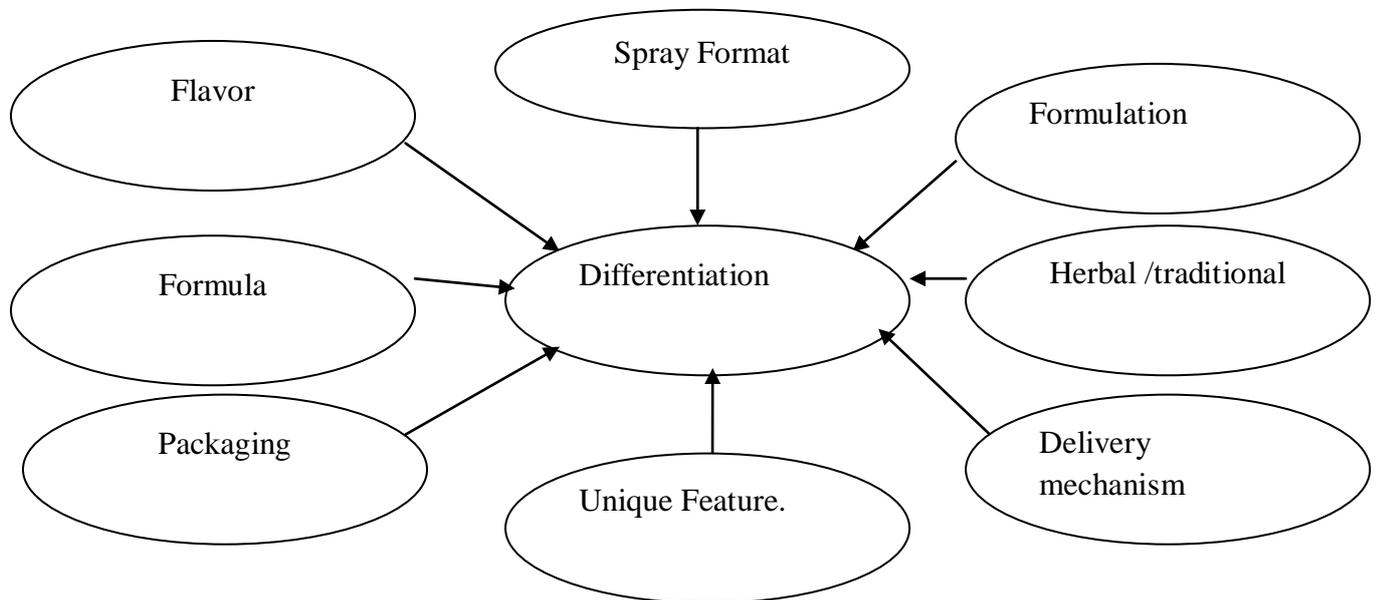


FIGURE 1: PRODUCT DIFFERENTIATION FOR POSITIONING PHARMA BRANDS

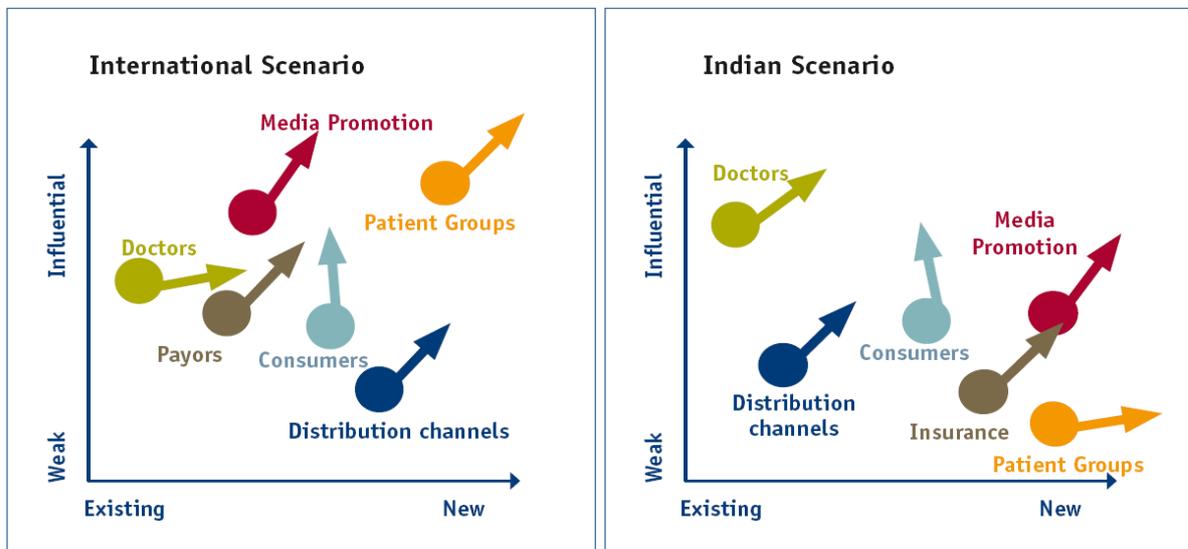
Source: New product development in consumer health 2012, Euromonitor

The position of the product is formed by customer’s perception of a product relative to attributes of competitive products. Product positioning is an inseparable and most important part of STP model. If these two steps viz. segmentation and targeting contain flaws or are inadequately or incompletely performed, successful product positioning is doomed to fail.

1.5 INTERNATIONAL VS INDIAN SCENARIO

Comparative international and Indian scenario has been discussed in a graph format. The focus is on doctors, payers, consumers, distributors, media promotion and patient group. The arrow indicates movement of groups from exiting to new and weak to influential. A valid point noted here is doctors are existing and influential and patients are new and weak in Indian scenario.

GRAPH 1 : INTERNATIONAL VS INDIAN SCENARIO



Source: New product development in consumer health 2012, Euromonitor

1.6 NEED FOR THE STUDY

Pharmaceutical branding deserves serious attention from Scholars and practitioners. Literature lacks empirical studies based on positioning strategy and success of the firm in Indian scenario. Branding strategies are studied in detail for the pharmaceutical companies. Numerous formulations added makes difficult for physician to remember the brand name and prescribe.

To understand the positioning of major companies the study has been incorporated. The partial part of dissertation is being discussed in this study.

2.1 REVIEW OF LITERATURE

In this section of dissertation identification of published and unpublished work from secondary data sources on the topic of interest is done. Literature review has helped in discovering few concepts those were already thoroughly researched. A literature review has helped in preventing in waste of resources in reinventing the wheel. It has also helped in facilitating creative integration of the information gathered from structured and unstructured interviews found in earlier studies. This has given a good basic framework to proceed further with the investigation by providing the foundation for developing a comprehensive theoretical framework from which hypotheses have been developed for testing. Literature review ensured inclusion of important variables, considering issues of parsimony and stating

a problem statement with precision and clarity required for enhancing testability and reliability of the findings of the current research.

While conducting literature review Data sources, Textbooks, Journals, Conference proceedings, unpublished manuscripts, Reports and Internet is accessed.

2.2 Branding in pharmaceutical industry

Kotler, Adam, Brown and Armstrong (2001) defined brand as a “name, term, sign, symbol or design, or a combination of these, intended to identify the goods or a combination of these, intended to identify the goods or services of one seller or group of sellers and to differentiate them from those of competitors”. AMA redefined “brand” in 2009 as “name, term, design, symbol or any other feature that identifies one seller’s goods or services as distinct from those of the other sellers. The legal term for brand is trademark. A brand may identify one item, a family of items or all items if that sellers. If used for the firm as a whole, the preferred term is trade name” (AMA 2009). Conceptual framework, which served as the platform for the statements we used, was constituted of existing definitions for AMA.

Ambler (1992) takes a consumer-oriented approach in defining a brand as: the promise of the bundles of attributes that someone buys and provides satisfaction. The attributes that make up a brand may be real or illusory, rational or emotional, tangible or invisible.

The brand helps customers to make choices by delineating the unique qualities and value that the product or services provided to the customer (Van Auken2003). Brand are argued to assist customers to make purchase decisions in increasingly cluttered retail environments, providing useful clue as to product quality, attributes and “personality” (Aaker,1997; Maleswaram, Mackie, and Chaiken,1992, Park and Srinivasan, 1974).

Clark (1987) on the other hand, offered another definition relating Brands with “values”, i.e. “Brand is values that provide the important link between consumers and marketers” while Kapferer (1992), approaching Brands under a holistic view, claims that “A brand is not a product. It is a product’s essence, its meaning and its direction and it defines its identity in time and space, too often Brands are examined through their component parts: brand name, logo, design or packaging, its central concept is brand identity, not brand image. Few more definitions of brands are as follows,

“A Brand is a product of a specific producer/ manufacturer which is differentiated from the competition by its name and its appearance”. –Definition similar to the one of AMA (1960). The focus of this definition focuses on differentiation of the product.

“ Brand is the value added on a product’, according to de Chernatony and Mc Donald (1992), who postulate that a brand is something additional to a commodity product, suggesting that brands and added value are to some extent synonymous.

“ Brand is the combination of all of the elements (name, symbol, design and packaging) by which the product differs from the competitors, thereby lending is a unique identity, which represents Kapferer’s view.

“A Brand is the personality of a product, product group, or organisation, as it is formed in terms of consumers’ perceptions evolving from tangible and non-tangible characteristics”, (de Chernatony and McDonald proposed (1994), p.18) i.e. an identifiable product, service, person or place augmented in such a way that the buyer or user perceives relevant unique added values which match their needs more closely.

“A Brand is the name of a product”, is reflecting a distinctive position among the defining elements of the Brand (Rigopoulou, 2000). In this definition name of the product is a main aspect.

“A Brand is any symbol and/or design which is associated with a product”, which is an approach close to the references related with “legal instrument” (Crainer, 1995; Broadbent & Cooper, 1987. The emphasis is on logo, design, mark and so on.

Branding has persisted for centuries as way to distinguish one producer’s goods from another manufacturer’s products and services. It occurs when the consumer has a high level of brand awareness and strong favorable and often unique association with that brand. Pharmaceutical industry has often modeled itself on the fast moving consumer goods industry (FMCG), where brands are viewed as the key assets of a company and all resources are utilized to create and develop brands. While the core principles and strategies for branding medical products are the same as for any other product, the differences in regulations of marketing and selling drugs has challenged the pharma industry to find new strategies that are acceptable practices in healthcare is very well discussed by Zara Ladha(2005)

According to Schuiling and Moss (2004), pharma companies have not worked proactively in identifying a brand and identity for their products and in communicating this identity to consumers. They have not done market research to determine their brand identity and to verify if this is how consumers view them. Pharmaceutical companies must embrace marketing and branding strategies to a great extent than they have in the past. Even the most effective strategies implemented by a company could fail if consumers are very price conscious towards d reduces. . Therefore, it is important to discuss the presence of generic drugs on the market, and the effect they have on consumers’ decisions.

In particular, generic drugs in the competition, it is extremely important for pharmaceutical companies to understand the difference in consumer’s perceptions and purchase intentions between branded and generic drugs, as this understanding can help the pharmaceutical companies to better estimate the financial impact of drug when launching a more likelihood of consumers purchasing a branded drug, the more confident a pharmaceutical company will be in making an investment in the branding process. Zara Ladha in 2007 studied perceived difference between generic and branded drugs in terms of efficacy, willingness of people to pay for branded drugs and trust of people in doctor prescribed drugs.

Important factors studied were attributes like price, name, and doctor’s prescription, past experience, advertisement and promotion. The conclusions were like the only influencing factor given more importance for prescription versus non-prescription medicines was that of

physician's. Other factors like in store promotion, price, family/friend's, brand name and advertising play a significant role in purchase making.

Current strategies in the pharmaceuticals industry have shown significant differences compared with the FMCG sector. In the choice of brand names, the basic naming strategies are the same, but the focus on them is different. According to Schuiling and Moss, branding theory and practice in pharmaceuticals is still ten years behind the FMCG area. The authors expect that pressure towards globalization will continue, and this will effect changes in the pharmaceutical industry in time.

Pharmaceutical industry is the most regulated industry and that it is constantly under an attack from numerous interested parties trying to reduce the size of drug bill. It is true that, in other product categories, brands can exist forever if they are well managed, e.g. Coke. It is recommended that brand names be linked to corporate brand names and not exclusively to product names. There is strong need to create strong brand names with clear brand names with clear brand identity. The authors Giles Moss and Isabelle Schuiling (2004) considered that doctors would be viewed as consumers. They also look for quality, efficacy, reliability, and need to be reassured. They operate on the basis of limited information and are influenced by the image of the company, their attitude towards the disease and their patients.

They also make decisions for emotional reasons, not for rational one secondly deciding how to communicate this in a coherent way to target customers. Further, companies need to adopt a three-step process when developing brands: first, identifying the brand identity via in-depth research (how it will be differentiated); and thirdly to regularly monitor the brand image and manage it.

On the basis of exploratory research of literature, Elements of Ethical Brand Positioning, Sagar Mahim, Singh Deepali, Agrawal D.P. (2006) identified five fundamental elements of brand positioning, namely Brand awareness, Brand Identity, Brand Image, Brand Personality, Brand Communication All these elements of brand positioning can be then blended with the ethical elements.

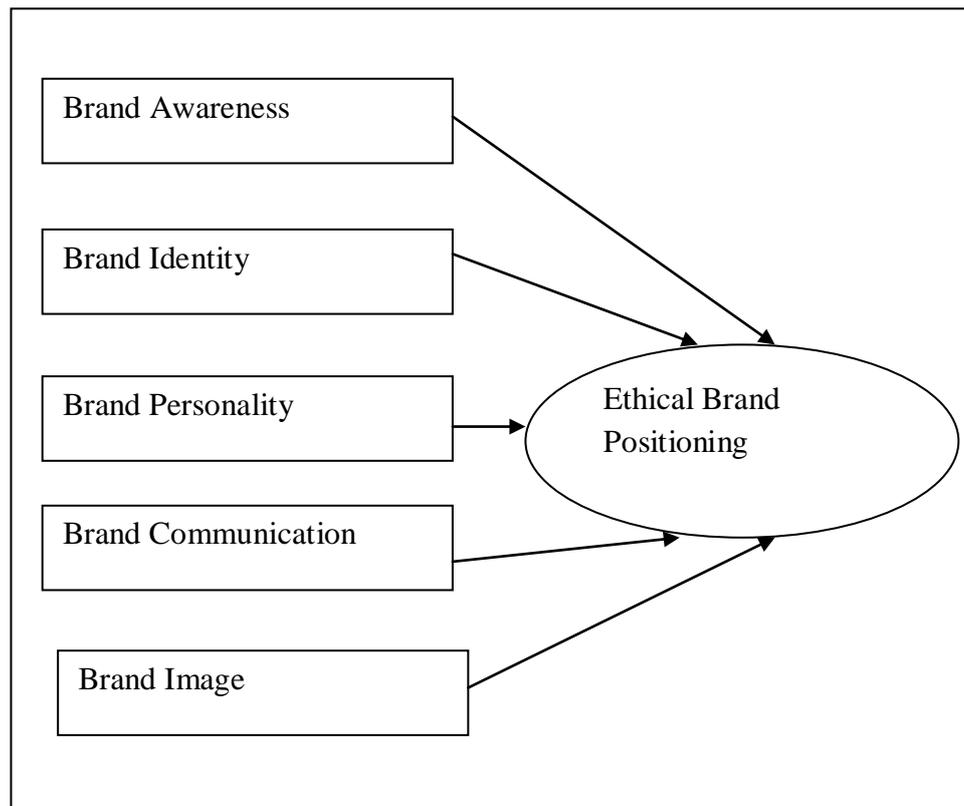


FIGURE 2: ETHICAL BRAND POSITIONING

Source: Conceptual framework of ethical Brand positioning Framework (Agrawal et al. 2006)

Brand Awareness consists of top of the mind recall, brand recognition, brand retention generation of faith and bond with the brand. It also says about rational and emotional metaphors associated with the brand. Elements of brand identity are products, social acceptability, consumer value satisfaction, ethical issues of pricing of the products, company's social trust, logo name and people's acceptance of the brand, acceptability in the society in terms of quality and delivery of required benefits, culture and geographical relevancy of the product.

Brand personality is studied as Sincerity about value delivery, technical competence, imaginative and innovative, cheerful, socially responsive and reliable. Brand image is associated thoughts with the brand, associated social metaphors, symbols, associated imagery with the brands, affordability. Brand communication is Advertisement recall , socially acceptable advertisement, culturally relevant advertisement, generation of emotional bond, no unreasonable cross brand comparison, gender sensitive advertisement, no fear appeal, sensitive for the children, no subliminal advertising, no surrogate advertising, no propagation of false and elusive claims, culturally sensitive, regional sensitivity, cross cultural sensitivity and no false association.

From the above literature on Branding few gaps were identified which are addressed in the present study. Brand personality is not studied in depth with respect to pharmaceutical companies. Further, the communication, brand imagery with respect to medicines has to be focused for further understanding.

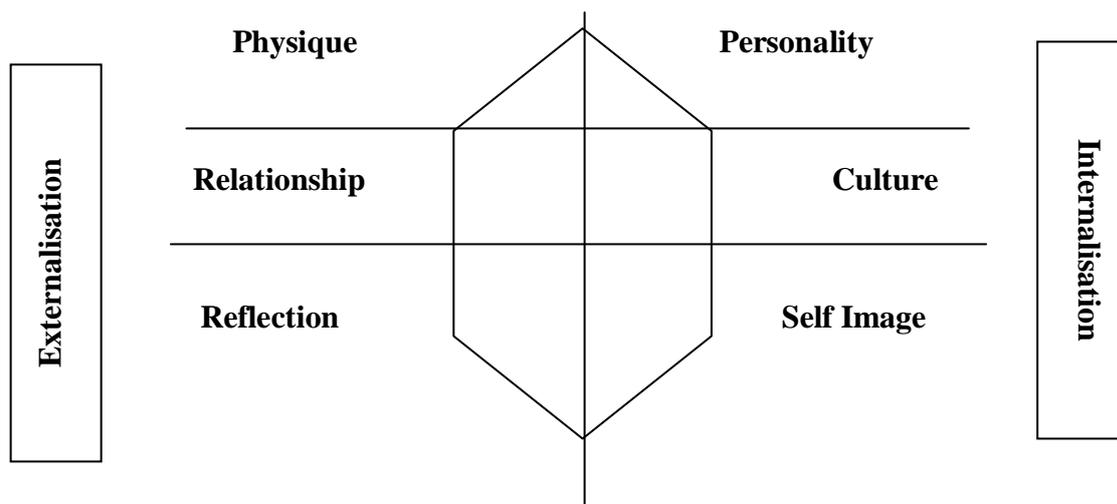
2.2.1 Brand architecture

The theory of brand architecture came from simple beginnings- new products could be associated with the first product offered by an enterprise or by association with the company name itself, or be created as an independent brand of its own. Proliferation of brands and the mergers of consumer's goods companies in the 1980 have then made establishing the theory behind brand architecture necessary. There are two main proponents of architecture theory, Jean-Noel Kapferer in Europe and David A. Aaker in America.

Brand architecture specifies the structure of the brand portfolio and the scope, roles and interrelationships of the portfolio brands. The goals are to create synergy, leverage, and clarity in the portfolio and relevant differentiated and energized brands. Thought has to be given to the structure of a portfolio to aide buyer recognition and understanding. In this way it will also guide the larger organization to make the right decisions through the use of rules concerning naming, symbols, colors etc. The strength of indicating the origin of the brand and the strength of product differentiation do categories the brand strategies.

Kapferer (2004) conceptualized brand identity prism, which can guide companies to develop strong brand identity for their brands. This model is based on articulating the brand based on six of the brand dimensions. Kapferer says "the identity prism derives from one basic concept that brands have the gift of speech". The six dimensions of the prism are physique, personality, relationship, culture, reflection and self-image.

Picture of sender



Picture of Recipient

FIGURE 3: HEXAGONAL IDENTITY PRISM MODEL

Source: Kapferer 2004

The physique of the brand denotes the physical qualities of the brand. The tangible attributes of the brand are communicated here. It is difficult to construe the relevance of “physique” in service branding. Ambience of service setting, decor, the visual appeal etc. Fall under the organization ns’s identity that the service. In services, the tangible attributes have been thus called as service escape (Lovelock, 1996). The personality of the brand is the human traits the brand demonstrates. Personality considers how brands can be ‘humanised’ through ‘traits’ and so reveals the brand’s character and attitude in a more emotionally oriented manner. Developing brand personality entails addressing questions such as if this brand was a person what type of a person would it be. Culture is that facet of the prism, which gives a peak into the values that are associated with the brand. Brand defines its relationship with its consumers by declaring that nature of relationship. A brand finds itself as a reflection of its customers. Self-image is the internal congruence of the customer with the brand.

Kapferer’s (2004) model considers the six brand identity facets from four perspectives. First and second perspectives are from the view of the sender and receiver of brand identity. Third and fourth perspectives are internal and external by nature. The company and the external perspective lie in the minds of the customers control the internal perspectives. The sender controls physical appearance and personality whilst consumer reflection and self-image are concerned with the receiver. Culture and relationship link the sender and the recipient and in this sense act as common denominator between the brand (the sender) and in this (the receiver). Further author said, in terms of internalization and externalization, elements to the left of the model such as physical appearance, relationship and consumer reflection are social, provide brand with a form of external expression and are visible. Conversely, the facets to the right, which is, personality, and culture and consumer self-image are connected with the internal aspects of a brand and its ‘soul’.Pharmaceutical equivalents that can be placed alongside their consumer counterparts. Line brand and range brands are very poorly understood in the pharma area.

Pharmaceutical industry has missed its opportunities to move out of the product attribute trap; a problem, which is common in high tech and data drive industry sectors. The product has to focus on efficacy safety and side effects.

Kapferer’s model could be studied with respect brand medicine wherein brand identity is formed by a sender pharma company and the receiver physician. The image formed is brand, company and the sales person

2.2.2 Brand Function Hierarchy

Giles D Moss, in “Pharmaceuticals where is the brand logic?” has studied branding of pharmaceuticals in detail. Author has adopted a function hierarchy with the example of Viagra. The stages were Orientation and Charisma, need fulfillment and contract, authentication and differentiation. Gill moss has explained the brand logic by considering Viagra research example. Authentication- it's Viagra from Pfizer , Differentiation- Its Viagra not a herbal or inject able, Need fulfillment- Viagra works

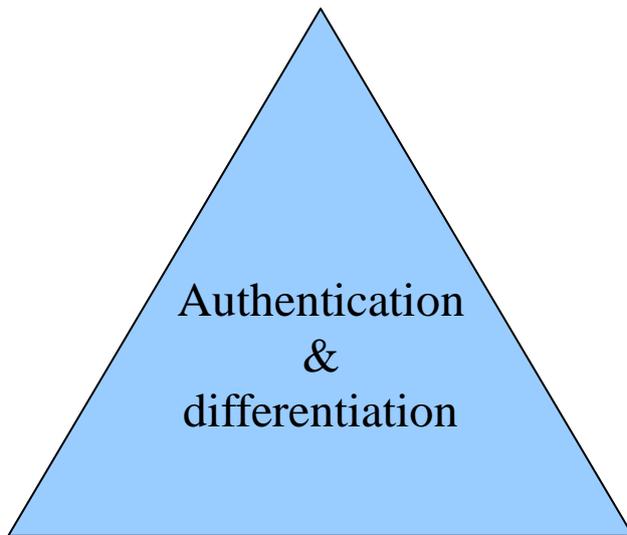


FIGURE 4: BRAND FUNCTION HIERARCHY

Source: Giles D Moss, Pharmaceuticals where is the brand logic?

Contract- Patients and their partners having their relationship helped.

Orientation- Allowing impotence to be discussed.

Charistama- A straightforward solution to a difficult problem.

From the above example is it clear that pharmaceutical brands do follow brand hierarchy where in the emphasis is lead on differentiation, need fulfillment and orientation.

3.PROPOSITIONS TO BE STUDIED

After through literature review following propositions can be put forward which further helps in formulating hypothesis and testing them using statistical technique.

P1: Success of a company is dependent on successful positioning typology.

Success of the company which is measured in terms of financial performance depends on positioning typology which majorly is Company image / reputation, product quality, efficacy, reliability and quality of the product.

P2: Success of the company is dependent on the trust in the company.

Trust is a measurable variable and is understood as reliable company, honest company and altruism.

P3: There is a significant difference between different positioning strategies in terms of output expected.

P4: More competent company generates more trust in physicians mind.

Trust in the company is reflected through financial performance of the company.

4. DISCUSSIONS

This paper has proposed propositions describing relationship between positioning typology and trust /loyalty. Each of the construct brand positioning, brand trust, brand performance and brand equity with reference to pharmaceutical company is explained. The specification of theoretical model addresses an important gap in the existing research, which also provides opportunity and direction for future research. Future research can carry out empirical studies to examine empirical support for the propositions specified in this paper. Propositions specified in this paper also have some implications for practice. Pharmaceutical companies may get benefitted with the knowledge of positioning and outcome of trust. The paper, however, has some limitations. It focuses on overall positioning concept. A therapeutic segment would have taken and positioning with respect to that could have been explored. This limitation can be overcome by future research on each of the therapeutic segment.

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