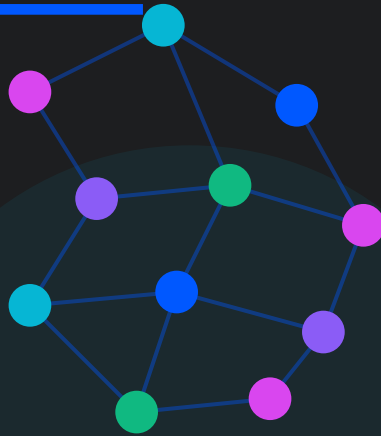




WHITEPAPER

The Hidden Risk in Pharma Field Effectiveness

The Connection Gap



Better Conversations. Better Outcomes.

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Executive Summary

Pharmaceutical commercial models are undergoing structural change. Pricing pressure, portfolio fragmentation, and tightening access are fundamentally altering how value must be generated from field engagement and shrinking the margin for error.

Field forces still represent one of the largest commercial investments, often 15-20% of revenue [16], and a multi-billion-dollar operating line in large organizations. Yet most organizations lack an early, objective indicator of whether those interactions are building adoption readiness or simply consuming access. The under-appreciated risk is false confidence: coverage looks healthy while influence quietly degrades.

This paper introduces NetKonnector®, a composite, conversation-level measure of connection that provides a leading indicator of influence. Drawing on behavioral science, healthcare communication research, and industry evidence, NetKonnector reframes field effectiveness around what matters most: the quality of interaction and the human dynamics that unlock behavior change.

For senior leaders and boards, NetKonnector offers a governance-ready metric that connects field behavior to adoption outcomes. Enabling earlier intervention, sharper resource allocation, and materially improved return on commercial investment.

Foreword

Pharmaceutical organizations invest more in field engagement than almost any other industry, and for good reason. Few decisions carry the same level of responsibility as those that affect patient outcomes. Changing clinical practice requires trust, relevance, and confidence built over time. In today's environment, the cost of a low-impact interaction is not just inefficiency; it is lost adoption momentum that may not be recoverable.

Yet the environment in which these conversations take place has fundamentally changed. Pricing pressure, portfolio fragmentation, and restricted access mean that field teams have fewer opportunities to engage, while expectations of value from each interaction have never been higher. Traditional measures of performance coverage, frequency, and activity provide a comforting dashboard, but they no longer explain why some interactions lead to adoption while others create polite disengagement.

Over the past five years, we have analyzed tens of thousands of life sciences conversations across multiple therapy areas and geographies using multi-modal conversation intelligence. What emerged was a consistent pattern: when connection is strong, progress follows; when it is weak, even compelling clinical evidence struggles to land.

NetKonnector® was developed to make this insight actionable. It provides a single, composite measure of connection that reflects the balance of behaviors that strengthen or erode trust within real conversations. Importantly, it does not seek to replace human judgement, but to augment it. Giving leaders, coaches, and boards objective visibility into what has previously been invisible: the moments of connection and disconnection that predict outcomes.

This paper sets out the science, the evidence, and the practical implications of measuring connection. Our ambition is simple: to help life sciences organizations improve the quality of engagement with clinicians, accelerate appropriate adoption, and ultimately ensure that patients receive the treatments they need sooner, while protecting the return on one of pharma's largest operating investments.

David Williams

Founder & Chief Executive Officer

KAI Conversations

Afterword:

I'd like to formally acknowledge and thank the late John Parr for his significant influence in helping us understand emotional connection and the patterns that strengthen and weaken it. Rest in Peace, John.

1. The Pharma Vectors of Change

Executive summary:

- Structural pressures on pricing, portfolios, and access are re-setting the economics of commercial execution.
- Field forces remain the largest controllable commercial investment, yet impact per interaction is falling. Turning wasted calls into material value leakage.
- Traditional activity metrics (coverage and frequency) create false confidence; they measure presence, not progress.
- These forces converge on a single imperative: fewer interactions must deliver greater behavioral impact, and every call must earn its place.

\$300bn

in prescription drug revenues will lose exclusivity 2025-2030

- Evaluate

Margin pressure is compounding. The tolerance for low-impact calls has disappeared.

Pharmaceutical commercial models are being reshaped by a convergence of structural forces. While each vector is well understood in isolation, their combined effect is creating a step-change in how value must be generated from HCP field engagement.

First, pricing pressure is intensifying. Policy interventions such as reference pricing and most-favored-nation mechanisms are compressing margins in major markets, particularly the United States. These measures introduce top-down constraints that cannot be offset through volume alone, increasing the strategic importance of efficiency and effectiveness in go-to-market execution.

Second, the industry is entering an unprecedented patent cliff. [12] A significant proportion of blockbuster brands will lose exclusivity over the next five years, while the innovation pipeline increasingly consists of more specialized, targeted therapies. With notable exceptions, many new launches address smaller, more stratified patient populations. The commercial challenge is therefore not expansion of reach, but precision of influence.

Third, access is tightening. [13] Clinicians are under growing time pressure, with fewer opportunities for in-person engagement. Despite this, face-to-face interaction remains highly valued by healthcare professionals for complex clinical decision-making. [14] This creates a paradox: fewer interactions are available, yet their quality matters more than ever.

Finally, the cost base has limited flexibility. Pharmaceutical companies continue to invest between 15 and 20 percent of revenues in field forces [16], a multi-billion-dollar operating line in large organizations. Reflecting a belief supported by decades of experience that human interaction plays a decisive role in changing clinical practice. However, as interaction volumes decline, traditional productivity levers are exhausted. The promise that omni-channel and digital channels would 'solve' access constraints has largely failed because it scaled activity, not relevance. Reach increased, but the quality of interaction remained unmeasured, industrializing noise rather than influence. [17] This is a structural problem without a shared, conversation-level metric that spans channels. Organizations cannot learn what works, personalize at scale, or intervene before adoption momentum is lost.

Increasing call volume is no longer feasible; increasing impact per call is essential.

Taken together, these vectors expose a structural weakness in how field performance has historically been measured and managed. Coverage and frequency describe activity, but they do not explain influence. They indicate presence, not connection and visibility into effort, not effectiveness. In a commercial environment defined by constraint, what matters most is not how often a conversation occurs, but what happens within it.

2. The Connection Gap

Executive summary:

- A significant proportion of HCPs report that interactions with pharma field teams do not meet their needs. [4]
- This gap represents lost influence, delayed adoption, and growing execution risk hidden until it appears in lagging sales data.
- The issue is not intent or effort, but an unmanaged variable: connection remains intuitive, subjective, and therefore uncoached at scale.
- Closing the connection gap requires moving from anecdote to evidence: objective insight into what happens inside conversations.

72%

of interactions do not meet HCP needs

- Deloitte

Despite sustained investment in commercial capability, a persistent disconnect exists between pharmaceutical field teams and the clinicians they engage. Multiple independent studies indicate that only a minority of healthcare professionals believe their interactions with industry representatives consistently add value. When 72% of interactions do not meet HCP needs [4], the majority of field engagement is at best neutral, and at worst a repeated signal that future contact will not be worth the time.

From the clinician's perspective, time is scarce and cognitive load is high. Interactions that do not rapidly establish relevance, credibility, and alignment with patient needs are filtered out. From the organization's perspective, however, performance management systems remain largely focused on observable activity rather than experienced impact.

The result is a **connection gap**: A divergence between the presence of interaction and the effectiveness of influence. This gap has material commercial consequences. Behavior change: whether adoption of a new therapy, modification of treatment sequencing, or reconsideration of clinical assumptions, depends on trust, relevance, an emotional engagement. When these elements are weak adoption slows, even when the underlying clinical evidence is strong.

Critically, this gap has proven difficult to address using traditional tools. Coaching based on sporadic observation, annual audits, or self-reported assessments lacks both scale and objectivity. Human judgement, while valuable, is inherently constrained by bias, limited sampling, and low frequency.

Closing the connection gap therefore requires a fundamentally different approach: one that captures what actually happens inside conversations, at scale, and translates it into actionable insight. It is this requirement that creates the conditions for a new class of performance metric. One that measures connection itself, before opportunity is lost.

3. The Science of Connection and Behavior Change

Executive summary:

- Behavior change is driven as much by emotional and relational dynamics as by rational evidence and leaders systematically under-measure this variable.
- Trust, empathy, and mutual understanding are prerequisites for influence in high-stakes decisions.
- Decades of research across psychology, neuroscience, and negotiation converge on a common insight: connection precedes persuasion.
- AI now makes these previously invisible dynamics measurable at the level of each conversation, across every team.

29%

increase in win rates with AI-powered personalized coaching

- G2/Forrester

Connection is not a soft skill; it is a measurable driver of behavior change.

Human decision-making is not purely rational. In contexts involving risk, uncertainty, and professional identity such as clinical practice decisions are shaped by a complex interaction between evidence, experience, and emotion. Behavioral science has repeatedly shown that trust and emotional safety are prerequisites for openness to change.

Attachment theory, transactional analysis, and modern emotional intelligence research all converge on a central principle: individuals are more willing to explore new options when they feel understood and respected. Conversely, when interactions trigger defensiveness or disconnection, resistance increases, regardless of the quality of the underlying information. [5] [6] [7]

Research in negotiation psychology reinforces this dynamic. High-stakes influence models emphasize active listening, empathy, and rapport-building as sequential steps toward behavioral change. These frameworks demonstrate that persuasion does not begin with argumentation, but with alignment establishing a shared understanding of perspective and intent. [10]

In healthcare, this pattern is particularly pronounced. Clinicians operate under conditions of cognitive load, time pressure, and accountability for patient outcomes. In this environment, interactions that reduce uncertainty and reinforce professional judgment are favored. Those that increase friction or challenge identity without trust are resisted.

Despite its centrality, connection has historically been difficult to observe and measure. It manifests in subtle behaviors: tone, pacing, responsiveness, acknowledgment of concerns, and balance between advocacy and inquiry. These signals accumulate over time, shaping whether a clinician perceives an interaction as credible and valuable.

Artificial intelligence changes what is possible. By analyzing language, acoustic patterns, and interaction dynamics at scale, AI makes it feasible to identify consistent behavioral signatures associated with high connection and successful influence. What was once intuitive becomes observable; what was once subjective becomes measurable.

Most critically, all legacy approaches shared a common constraint: they required physical presence or human recall. As a result, sample sizes were small, feedback cycles were slow, and insights were detached from day-to-day execution.

4. From Counting Calls to Measuring Impact

Executive summary:

- Behavior change is driven by the quality of interaction, not the volume of activity.
- Traditional KPIs create false confidence: they track effort, not influence.
- Measuring impact requires understanding connection, trust, and emotional alignment, the gateway conditions for adoption.
- Conversation-level intelligence provides a leading indicator of adoption readiness, not just activity.

46%

more likely to improve quota attainment with real-time feedback

- Highspot

Coverage and frequency describe activity. They do not explain influence.

Clinical decision-making is inherently conservative. Clinicians adopt new therapies only when they are confident that change will benefit their patients and align with professional standards. This process is rarely linear and seldom driven by a single interaction. It unfolds through a sequence of conversations in which evidence, experience, and trust accumulate over time.

Historically, pharmaceutical organizations have attempted to manage this process indirectly. Call volume, reach, and frequency have been used as surrogates for influence because they were visible, comparable, and historically defensible. The problem is not that these metrics are wrong; it is that they are incomplete. They measure presence, not progress.

In environments where clinicians are overburdened and access is restricted, incremental exposure delivers diminishing returns. Repetition without relevance trains disengagement. By the time underperformance becomes visible in lagging sales data, the window for intervention message correction, coaching, stakeholder mapping has often closed.

What differentiates high-performing field teams is not how often they speak to clinicians, but how effectively they connect when they do. Connection operates as a gateway to behavioral change. When clinicians feel understood, respected, and aligned, they are more receptive to

new information and more willing to reconsider established practice. When connection is weak, even compelling clinical data struggles to gain traction.

Measuring impact therefore requires visibility into the human dynamics of interaction: clarity of communication, empathy, accountability, alignment, and mutual understanding. These factors cannot be inferred reliably from activity metrics or self-reported assessments.

In parallel, performance management increasingly defaulted to activity metrics. Coverage, frequency, and reach became proxies for effectiveness not because they measured influence, but because they were easy to observe and report. Over time, these metrics hardened into targets creating a system that can optimize for busyness while missing influence.

The industry now faces the limits of this paradigm. When access is constrained and interaction volumes decline, activity metrics lose explanatory power. What matters is not how many conversations occur, but whether those conversations create trust, relevance, and readiness for change.

Recent advances in artificial intelligence fundamentally alter what is measurable. AI-enabled conversation analysis makes it possible to observe behavior directly, at scale, across thousands of real interactions. This shifts performance measurement from proxy indicators to primary evidence, what actually happens inside the conversation. [2]

Conversation intelligence enables a shift from lagging indicators to leading indicators. By analyzing real interactions at scale, organizations can identify the behaviors that consistently precede successful outcomes, and the behaviors that reliably derail them. This creates the foundation for predictive performance management: intervening earlier, coaching more precisely, and allocating resources based on evidence rather than assumption.

5. NetKonnector®: A Composite Measure of Connection

Executive summary:

- Single metrics fail to capture the complexity of human interaction.
- Composite measures are widely used in elite performance environments to predict outcomes.
- NetKonnector® integrates multiple dimensions of connection into a single, interpretable score.
- The result is a board-ready leading indicator of influence and adoption.

5x

more likely to achieve high-quality behavior change outcome

Conversations with NKS ≥ 71 (NetKonnector® Score) - KAI Analysis

NKS ≥ 71 : NetKonnector® Score of 71 or above indicates strong connection quality. Conversations achieving this threshold are five times more likely to result in meaningful behavior change.

When connection is strong, adoption accelerates; when it is weak, even compelling evidence struggles to land.

Human interaction is multi-dimensional. No single behavior determines whether a conversation succeeds or fails. Connection emerges from the balance between behaviors that strengthen trust and those that erode it.

High-performance domains have long recognized this reality. In elite sport, composite indices integrate physical, technical, and psychological factors to predict outcomes more reliably than any individual metric. Financial institutions rely on composite risk scores to guide capital allocation. In each case, the objective is the same: reduce complexity without oversimplifying reality.

NetKonnector® applies this principle to human connection. It synthesizes behavioral signals across twelve foundational dimensions of interaction, capturing both positive contributors to connection and behaviors that create friction or disengagement. These signals are aggregated into a single score, scaled from zero to one hundred.

The score functions as a balance sheet of connection. Behaviors that strengthen alignment add to the score; behaviors that weaken alignment subtract from it. The resulting NetKonnector Score reflects the net quality of connection experienced within a conversation.

Crucially, this approach preserves nuance while enabling action. Leaders do not need to interpret hundreds of behavioral variables. They can track a single, consistent indicator while retaining the ability

to drill down into the specific behaviors driving performance.

Used appropriately, NetKonnector® becomes a leading indicator. It does not simply describe what has happened; it signals the likelihood of future behavioral change. This shifts performance management from retrospective analysis to proactive intervention coaching earlier, allocating resources more intelligently, and accelerating adoption through better conversations.

6. The NetKonnector® Framework: Twelve Dimensions of Connection

Executive summary:

- Human connection is multi-dimensional and cannot be reduced to a single behavior.
- The NetKonnector® Framework identifies twelve dimensions consistently associated with connection quality. [11]
- These dimensions are grounded in behavioral science and healthcare communication research.
- Together, they provide a practical lens for diagnosing and improving real-world interactions.

NKS ≥ 71

indicates strong connection quality

Conversations at this threshold are 5x more likely to achieve behavior change - KAI Analysis

The NetKonnector® Framework is built on the premise that connection is neither accidental nor ineffable. Across healthcare, negotiation, and performance psychology, consistent patterns emerge that distinguish interactions which build trust and alignment from those that generate resistance.

Drawing on longitudinal analysis of life sciences interactions and established behavioral research, KAI identified twelve dimensions that collectively shape how connection is experienced within a conversation. Each dimension captures a distinct aspect of interaction quality, ranging from clarity of communication to emotional attunement and accountability [11].

These dimensions are not weighted equally in every context. Their relative importance varies depending on the purpose of the interaction, the stage of the relationship, and the clinical or commercial objective. However, across contexts, imbalance consistently correlates with weaker outcomes.

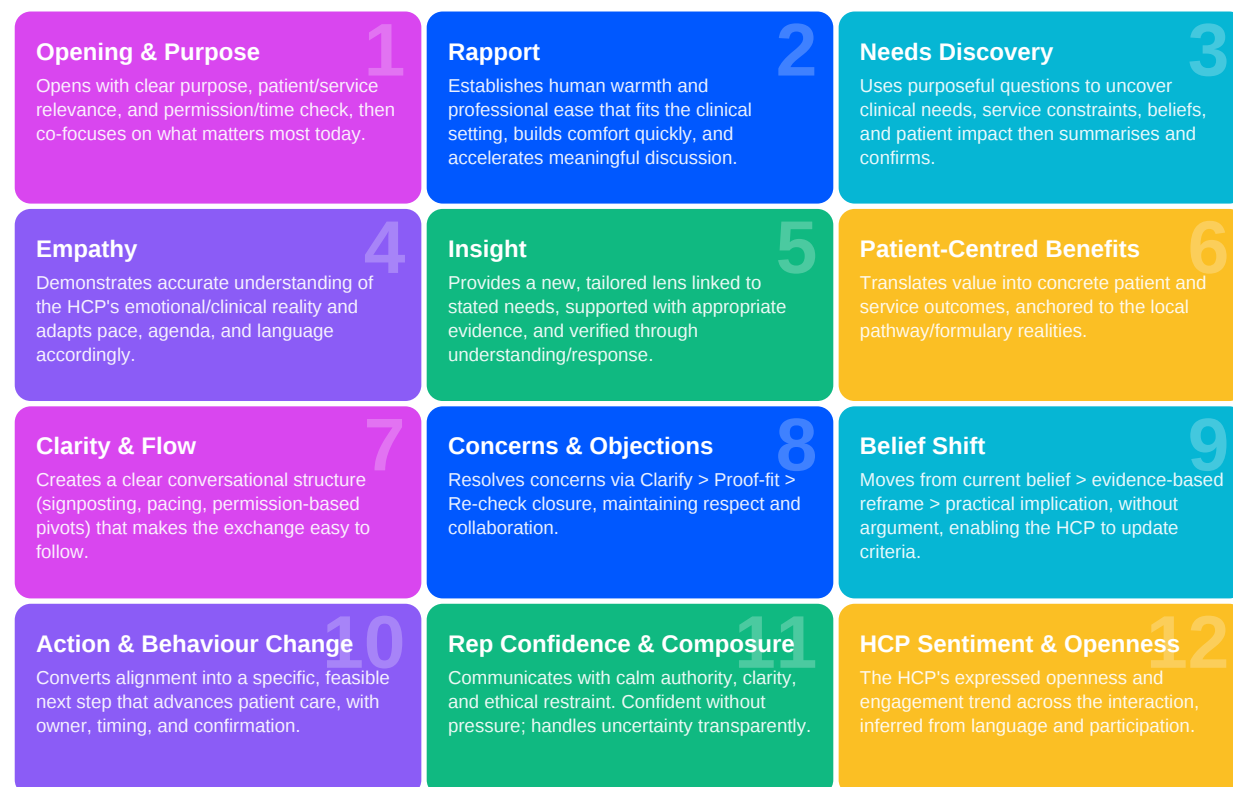
Connection is not a soft outcome; it is the enabling mechanism. Both John Parr's Emotional Assertiveness Model [9] and the FBI Behaviour Change Stairway Model converge on the same principle:

Without Connection, Influence fails

With Connection, Outcomes improve

The Pharma-HCP NetKonnector® Dimensions

Based on KAI's database and insights we observe connection and disconnection across the following dimensions in Pharma-HCP interactions:



Individually, each dimension represents a necessary but insufficient condition for strong connection. It is their combined effect the net balance between reinforcing and eroding behaviors that determines whether an interaction advances or hinders behavioral change.

This framework creates a shared language for connection. It allows organizations to move beyond vague notions of 'good conversations' toward precise diagnosis and targeted improvement, without reducing human interaction to a script.

7. From Measurement to Performance: Coaching, Capability, and Insight

Executive summary:

- Measurement alone does not change outcomes; the speed of feedback and action does.
- Conversation-level insight enables frequent, objective, and personalized coaching, without waiting for ride-alongs or quarterly reviews.
- Aggregated patterns reveal what leaders are systematically missing: which messages land, where trust erodes, and why adoption stalls.
- The result is faster improvement cycles and more consistent field performance, even as access tightens.

76%

quota attainment for teams coached weekly vs 47% quarterly

- MySalesCoach

Real time Post call Personalized Nudges empower field teams to improve their own performance

The value of measuring connection lies not in observation, but in application. When insight is timely, specific, and personalized, it becomes a catalyst for change.

At the individual level, conversation intelligence enables continuous development. Field professionals receive objective feedback on specific behaviors within their own interactions, rather than generic advice or infrequent anecdotal coaching. This shifts development from episodic intervention to ongoing refinement, closing the gap between what is taught and what is actually done.

At the managerial level, coaching becomes evidence led. Managers no longer rely on sporadic ride-alongs or self-reported assessments. Instead, they can identify consistent behavioral patterns across interactions, prioritize coaching effort, and track progress over time. This increases both coaching effectiveness and credibility.

At the organizational level, aggregated insight reveals systemic strengths and weaknesses. Patterns across therapy areas, brands, or geographies highlight where messaging resonates, where objections persist, and where capability gaps constrain performance. These insights

inform training design, content strategy, and medical engagement models.

Critically, this creates a closed-loop system. Insight from real-world conversations feeds back into commercial and medical strategy, improving alignment between field execution and organizational intent. Improvement cycles compress from quarters to weeks, enabling faster response to market dynamics.

In this way, NetKonnector® functions not as a reporting tool, but as performance infrastructure: a measurable feedback loop connecting individual behavior to organizational outcomes through connection. [3]

8. The Business Case for Measuring Connection

Executive summary:

- Improving connection quality accelerates behavioral change and adoption.
- Even small reductions in the number of interactions required for adoption create material, compounding value.
- Conversation intelligence is a substitutive, not additive, investment: it replaces low-signal activities with a high-signal feedback loop.
- Returns are driven by revenue uplift, cost efficiency, and faster time-to-impact.

3-15%

revenue increase when implemented in a transformational way

- McKinsey

The commercial value of connection lies in its relationship to behavioral change. Adoption of new therapies is rarely driven by exposure alone; it emerges through repeated interactions in which confidence, relevance, and trust accumulate. When connection quality is higher, this accumulation occurs more quickly, and fewer conversations are required to reach readiness.

Industry experience suggests that multiple interactions are typically required before clinicians are willing to change established practice. The precise number varies by therapy area and context, but the principle is consistent: each interaction carries an opportunity cost. Reducing the number of interactions required to achieve the same outcome has a direct and compounding effect on productivity.

From a value perspective, even marginal improvements are significant. For high-revenue brands, small percentage uplifts in adoption translate into substantial absolute returns. Importantly, these gains do not require additional field capacity; they arise from improving effectiveness within existing activity levels.

Equally, material is the cost structure. Conversation intelligence substitutes for multiple existing investments. Traditional training interventions, annual audits, and episodic coaching can be reduced or redesigned when continuous, objective insight is available. Manager travel requirements decline, administrative burden is reduced, and coaching ratios improve without loss of effectiveness.

Taken together, these dynamics position connection measurement as one of the highest-leverage investments available to commercial organizations: it improves revenue performance while simultaneously increasing operational efficiency and organizational learning.

9. Governance, Risk, and Board-Level Oversight

Executive summary:

- Boards require leading indicators, not retrospective reports.
- Traditional KPIs obscure risk by focusing on activity rather than influence - creating false assurance at the top.
- Measuring connection provides early visibility into execution effectiveness.
- NetKonnector® enables more informed governance of commercial investment.

12%

higher closed/won rate with CI and coaching capabilities

- Forrester

Leading indicators of execution quality matter more than retrospective sales reports.

Pharmaceutical boards oversee some of the largest commercial investments of any industry, often a multi-billion-dollar commitment in field engagement alone. Yet visibility into the effectiveness of these investments is often indirect and delayed.

Activity metrics and lagging sales outcomes provide limited insight into whether commercial strategy is being executed effectively in the field. They measure what was done, not what changed. By the time underperformance becomes visible in revenue data, opportunities for early correction have often passed.

Leading indicators reduce this risk. By surfacing how consistently field teams establish connection, organizations gain early warning of execution gaps. Weak connection signals misalignment long before it manifests as delayed adoption or lost market share.

From a governance perspective, NetKonnector® introduces a measurable link between field behavior and strategic intent. Boards can ask not only whether activity targets are being met, but whether interactions are likely to produce the intended outcomes.

Critically, this approach supports responsible oversight. It enables evidence-based decisions about resource allocation, capability investment, and operating model design, grounded in observed behavior rather than assumption.

10. Implications for Commercial Transformation

Executive summary:

- Measuring connection reshapes how commercial organizations operate.
- Performance management shifts from control to enablement.
- Coaching, training, and strategy become more adaptive and evidence led.
- Organizations that fail to evolve risk declining return on field investment - and will be forced to spend more for less influence.

Conversation Intelligence can accelerate improvement across the whole Commercial organization if processes follow the speed of insight

Embedding connection measurement requires more than technology adoption; it demands a shift in mindset. Commercial excellence moves from enforcing activity compliance to enabling behavioral effectiveness.

Leaders must redefine what good performance looks like. Success is no longer measured solely by volume of interactions, but by their quality and impact. This reframing aligns field professionals around outcomes they can influence directly.

Operating models evolve accordingly. Coaching becomes continuous and personalized. Training is informed by real-world evidence rather than theoretical best practice. Marketing and medical strategies are grounded in observed clinician needs and responses.

Organizations that embrace this shift gain resilience. They adapt more quickly to market change, deploy resources more intelligently, and sustain higher performance with fewer interactions. Those that do not risk increasing spend to achieve diminishing returns.

Connection, once implicit and unmeasured, becomes a managed capability one that differentiates leaders from laggards in an increasingly constrained commercial environment.

Appendix: Board-Level Interpretation of NetKonnector®

NetKonnector® is intended as a leading indicator of commercial execution quality. It complements financial outcomes by explaining them earlier in the adoption lifecycle.

Boards should use NetKonnector to:

- Assess whether field investment is translating into meaningful engagement
- Identify execution risk before it manifests in revenue performance
- Compare effectiveness across therapy areas, markets, or operating models

Important: NetKonnector should not be used as an individual performance target. It is a governance and capability signal designed to inform oversight, not prescribe behavior.

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Better Conversations. Better Outcomes.

KAI analyzes life sciences and healthcare conversations across
Top 20 Global pharma businesses across all major therapy areas and all languages.

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"Our ambition is simple: to help life sciences organizations improve the quality of engagement with clinicians, accelerate appropriate adoption, and ultimately ensure that patients receive the treatments they need, sooner."

- David Williams, Founder & CEO, KAI Conversations