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February 15, 2018

Dear Regina,

Welcome to BioMarketing Insight's monthly newsletter.

We have a new look to our newsletter. Love to receive your [feedback](#).

In November, I covered "Why Parkinson's Disease is so Hard to Diagnose and Treat." If you missed last month's article, click [here](#) to read it. This month we'll cover "Eliminating the Stereotypes of the Elderly."

Read on to learn more about this topic and other current news. The next newsletter will be published on March 15th, 2018.

We encourage you to share this newsletter with your colleagues by using the social media icons below, or by simply forwarding this newsletter or use the link below.

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Please email [me](#), Regina Au, if you have any questions, comments, or suggestions.

Sincerely,
Regina Au
Principal, New Product Planning/
Strategic Commercial Consultant
[BioMarketing Insight](#)



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Developing a Product? Commercializing a Product?

If you are developing a product and have not conducted the business due diligence to determine commercial viability or success, contact [me](#) for an appointment. For successful commercial adoption of your product or looking to grow your business, contact [me](#) for an appointment.

For more information on our services, click on the links below:

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Save the Date: February 13 - 14, 2018 - Healthcare Internet of Things

The healthcare industry is at the advent of a digital evolution, spurred by a growing community of web-enabled products and services including the Cloud, smart and connected devices, and a more health-conscious and tech-savvy population. According to Frost & Sullivan, the internet of medical things is expected to grow at CAGR of 26.2% to reach \$72 billion by 2021.

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and Wearables – Product Adoption (Compliance) and Market Access" at the Healthcare IoT Conference in San Francisco, CA. For more information, click [here](#). But stay tuned for more details to come.

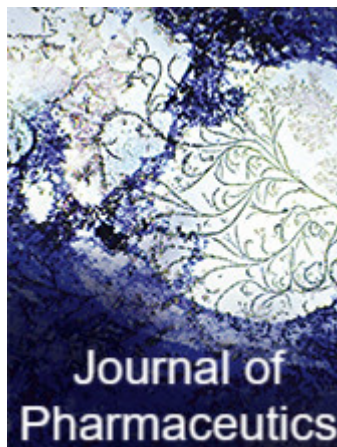
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**International Journal of
Clinical Pharmacology
& Pharmacotherapy**
Open Access



Why Our Microbiome is Important to Our Physiology and Diseases

I am pleased to announce that my article entitled "Why Our Microbiome is Important to Our Physiology and Diseases" was published in the International Journal of Clinical Pharmacology & Pharmacotherapy. This article reviews the results of the Human Microbiome Project and the factors that affect our microbiome in relation to our healthy state and dysbiosis or disease state. To read the article, click [here](#).

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Antigen Receptors T-Cell Design Be Made to Cure All Types of Cancers and Will It Be Covered?

I am pleased to announce that my article on "Immunooncology: Can the Right Chimeric Antigen Receptors T-Cell (CAR-T) Design Be Made to Cure All Types of Cancers and Will It Be Covered?" has been published in Journal of Pharmaceutics. This article reviews the mechanism, design and administration of CAR-T cells, and whether payers will pay for this new technology. To read the article, click [here](#).

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Eliminating the Stereotypes of the Elderly

Whether we know it or not or even want to admit it, we all have stereotypes of all types such as gender, race, age, appearances, intelligence etc. Unfortunately, most stereotypes are negative and they are in both our conscious and unconscious mind. Our conscious mind is termed "reflective" and our unconscious is termed "automatic" for the very reason that our stereotypes is automatic and we are not aware that it is happening; sometimes it's that "gut feeling" that you have.

There may be many occasions where our reflective mind may not believe in certain stereotypes, but our automatic mind may and there is a conflict between the two called "Dissociation." This is when there is an occurrence in one and the same mind, of mutually inconsistent idea that remains isolated from one another.

The reasons why the automatic mind may have stereotypes that are contradictory to our conscious mind is because we possess these stereotypes from repeated exposure to relevant propaganda in images, in stories, in jokes, in ordinary language, and in the inference that exist in society. These automatic stereotypes are imprinted in our automatic mind from birth, throughout childhood and are permanent even though we may not currently or consciously believe in these stereotypes.

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affect our actions towards others that you don't even realize it is happening.

A perfect example is the elderly who have been basically ignored. We are well aware of the stereotypes of race or gender due to public discussion and action taken around these two stereotypes.

When I asked by students, to describe the elderly, here are some of the statements that first came to their mind:

- 1) they are forgetful, have dementia, or Alzheimer's and don't know what is going on;
- 2) they are fragile;
- 3) they are very dependent and can't live on their own;

Statements from others:

- 4) they are a burden to society;
- 5) they have nothing to contribute to society; and
- 6) they are sickly and account for the largest expense in the healthcare system.

These are all negative stereotypes. And while this may be true for some elderly, this is by far not true for all elderly people depending on how you classify elderly. If you are classifying elderly as over 50 years of age, which was elderly 100 years ago when people didn't live to 50 years of age, then yes. But they didn't have the advance technology and medicines that we have today, where people are living longer and healthier. So the new "50" is really 70 years old since you can't collect full social security benefits until 66 and half years old. But even today, 70 is not old.

However, this notion of elderly at 50 is imprinted into our unconscious mind and affects how we treat the elderly especially when it comes to healthcare. Not everyone has this mind set, but there are far too many which I have witnessed with both of my parents.

Already lived a full life

I have had doctors and nurses question whether my parents want to pursue a full code (do everything possible to revive the patient) once they reach a certain age every time they're end up in the emergency room for any reason. For example, I had a physician tell me that my father is old and has already lived a productive life, so why do you want a full code? Needless to say I wasn't too happy with him and asked for another physician. You have every right to ask or switch to another doctor. Another physician told me that he felt uncomfortable about my mom having a full code order when she was in rehab. Well, it's not about him, it's about my mother's wishes.

Poly-pharmacy

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way medicine is practiced today, with all the pressures around cost from both legislation and insurance companies, physicians are forced to see more patients in a shorter period of time with more paper work. Physicians are not able to spend adequate time with their patients to investigate their ailments and physicians are short staffed.

Therefore, for the elderly, if they complain too much about a multitude of problems or their ailments are too complex, the first thing some physician will do is put the patient on an antidepressant to keep them quiet or they think it is all in the patient's head. Not all physicians will practice this way, but to me one is too many. Some physicians will prescribe medications to treat symptoms because family member or caregivers are complaining, not because the patient is complaining.

Elderly abuse

Too often, we will hear about elderly abuse from family member and caregivers or a family will put an elderly family member in a nursing home and rarely visit them because they are too busy or don't want to deal with the situation.

This all stems from our automatic or unconscious stereotypes of the elderly most of the time and unfortunately, the unconscious takes over and the elderly gets ignored or not treated as well as a young person. It may not be intentional but the consequences are very troubling.



Closing Thoughts

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we constantly have to consciously work at it, since this stereotype is permanent. It is what psychologists call "stamping in" as ducklings do at birth, when the first they see, they think is their mother, and no matter how hard you try to change it, it won't change.

I believe we need to give more credit to the "elderly that do contribute to society" in order to change people's impression or lessen the stereotype that elderly ≠ bad to elderly = good. When you think of past Presidents, majority of them become President over the age of 60 trying to lead our country for a four (4) to eight (8) years. Mother Teresa was still contributing to society until the day she died at age 87. All our Nobel Laureates who receive a Nobel prize for significant scientific contributions throughout their careers are still contributing to society. Most doctors work until they are at least 70- 75 years of age. Other well known people are Walther Cronkite, Eleanor Roosevelt and the list goes on if we stop to think about it. Even the Beatles and the Beach Boys are still contributing with their music that is timeless.

So the next time you see, work with, or care for an elderly person, remember that whatever your unconscious mind is telling you elderly ≠ bad, ignore it and help that person. We are all going to grow old someday and we will be that "elderly person" and I'm sure, we all want to be treated with dignity.

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Should you have any questions or need of assistance with your business due diligence, determining your product's value proposition and economic value of your product, feel free to contact me at 781-935-1462 or regina@biomarketinginsight.com.

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