



HEALTHCARE MARKET
RESEARCH WORLDWIDE

A e-CongressTrack™

Social Media Impact of the ASCO Annual Meeting 2023

2023 **ASCO**
ANNUAL MEETING

Date of the event: June 02-06, 2023 – In-person + virtual

APLUSA June 2023



Objectives



The 2023 ASCO annual meeting took place from June 2nd to June 6th, 2023, in Chicago, IL, USA. This year's event was primarily an in-person event with virtual broadcasts available. The program at a glance is available [here](#). As has been the case since 2019 we will be assessing the impact of the conference online:



From the view of HCPs:

- Conditions and drugs most discussed during the listening period
- Posts that generated the most engagement
- Focus on multiple myeloma



From the view of pharma companies:

- Top pharma companies (in terms of mentions)

● SCOPE



The scope of the analysis is focused on mentions coming **worldwide**.*



A total of **86K** mentions were recorded during the listening period from **May 26th, 2023**, to **June 20th, 2023** (one week before and two weeks after the conference).



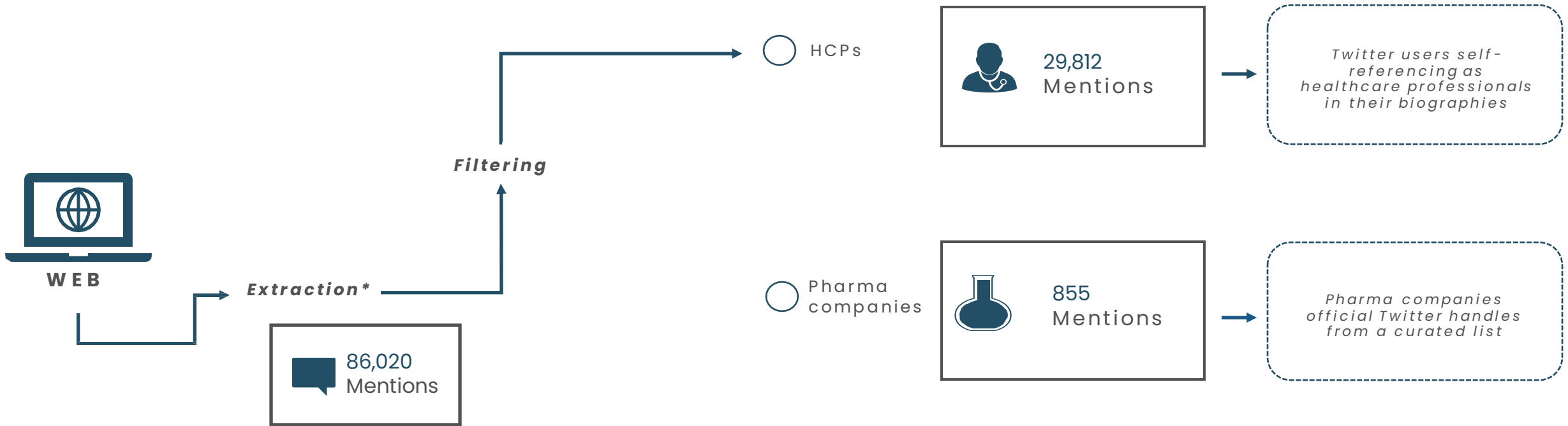
All mentions came from **Twitter**.



A total of **13K** unique authors were identified.

*#asco23 OR #asco2023 OR (asco NEAR/2 (2023 OR 23))

● Methodology



**#asco23 OR #asco2023 OR (asco NEAR/2 (2023 OR 23))



Listening period: May 26th, 2023, to June 20th, 2023



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#ASCO23

● CONTENT

01.

Social media performance:
HCPs

- Volume of conversation
- Top posts
- Top hashtags

02.

Disease landscape

- SOV disease and drug

03.

Key drug/disease focus

- Focus on KEYTRUDA
- Focus on OPDIVO
- Focus on TAGRISSO
- Focus on multiple myeloma

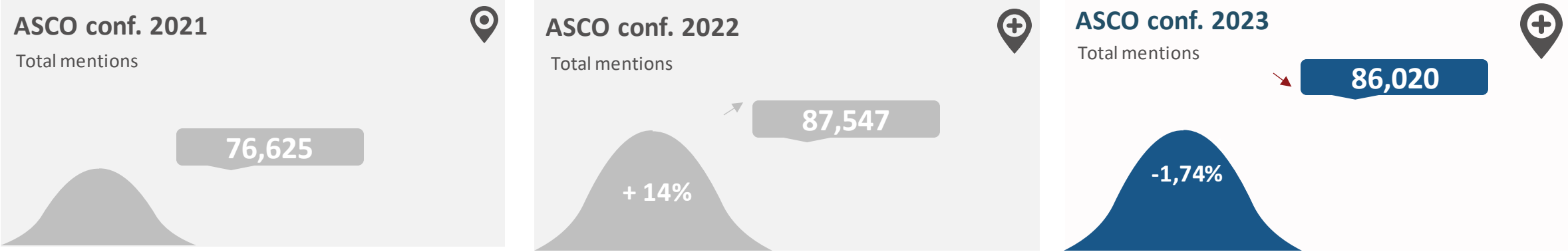
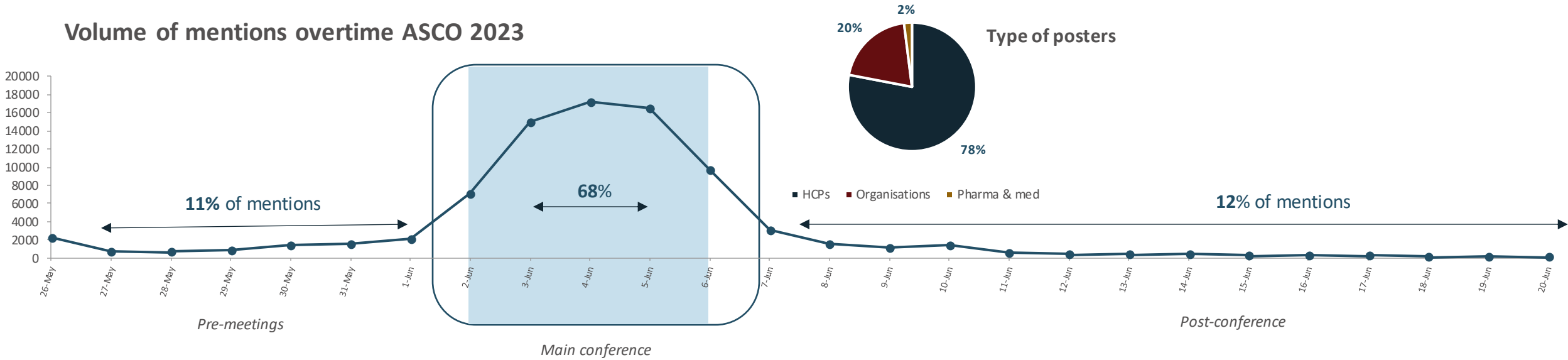
04.

Focus on pharma companies

- Top pharma companies (volume)

Volume of conversations

There was a slight **decrease** in overall mentions of **1,74%** when compared to ASCO 2022, with **HCPs** representing the bulk of conversations at **78%**. As usual, **the peak of conversations** happened during the conference, representing **68% of mentions** recorded during the listening period.



Top posts (from HCPs)



Most liked

This tweet references the **shortage of drug** experienced when it comes to chemotherapies. Something originally highlighted by colleague Dr Maura Barry.



Most retweeted

This post highlights **abstract 12005** which presented topical diclofenac as preventing hand-foot syndrome in pts receiving capecitabine.



Most replied to

The post receiving the most comments were congratulatory messages towards Dr. LoComte receiving the **FASCO designation**.

Most engagement

Most liked, retweeted and replied (Ctrl + right click to access tweets)



Likes: 416



Retweets: 145



Comments: 33

Some people say "nobody wants chemo" as if they've found the Achilles heel of medical oncology.

Right. Nobody "wants" chemo.

But the truth is that many patients "need" chemo which is in very short supply.

Kudos to @doctormbt for calling attention to drug shortages at #asco23

Traduire le Tweet

Look at these!!!

#ASCO23

D-TORCH: Topical diclofenac in prevention of hand-foot syndrome in pts receiving capecitabine

★ Topical diclofenac is effective in preventing all grades of HFS in patients receiving capecitabine.

New standard of care to prevent capecitabine associated HFS?
@OncoAlert

Abstract 12005: D-TORCH

Randomized, double-blind, placebo-controlled trial of topical diclofenac vs placebo for prevention of hand-foot syndrome in patients receiving capecitabine.

Topical diclofenac reduces incidence of gr 2/3 HFS

Diclofenac benefit seen across subgroups

Subgroup	Topical diclofenac	Placebo	Incidence of HFS (%)
All patients	42	48	12.5
Gr 1 HFS	42	48	12.5
Gr 2/3 HFS	42	48	12.5
Gr 1 HFS	42	48	12.5
Gr 2/3 HFS	42	48	12.5

D-TORCH: Takeaways

- Topical diclofenac significantly reduces the incidence of gr 2 or higher HFS in patients receiving capecitabine.
- Why this matters: HFS is a common reason for dose reduction or discontinuation of capecitabine.
- Secondary endpoints: discontinuation and QoL.
- Topical diclofenac is a low-risk, safety, available treatment.
- High adherence in this study.

Thank you @ASCO for the immense honor of the FASCO designation! For me, this is a professional dream fulfilled. What a great way to kick off #ASCO23!

Traduire le Tweet

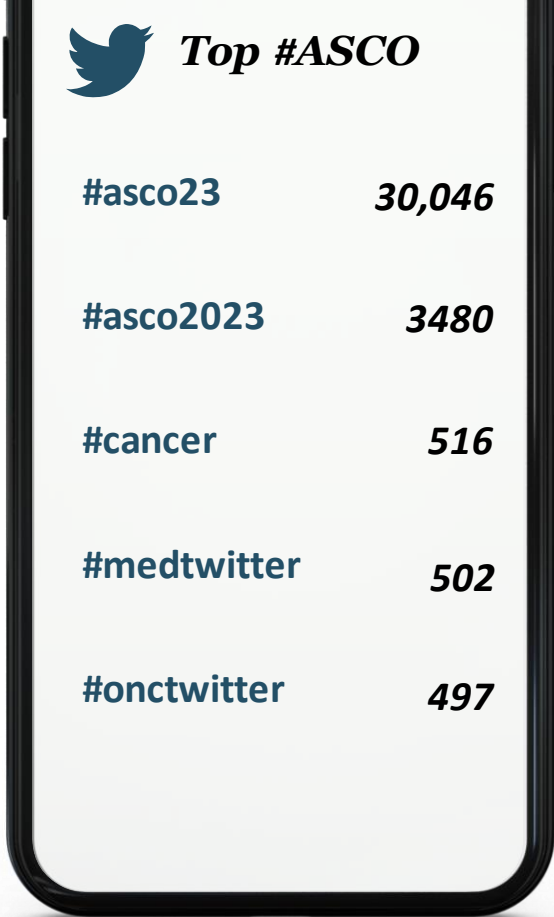
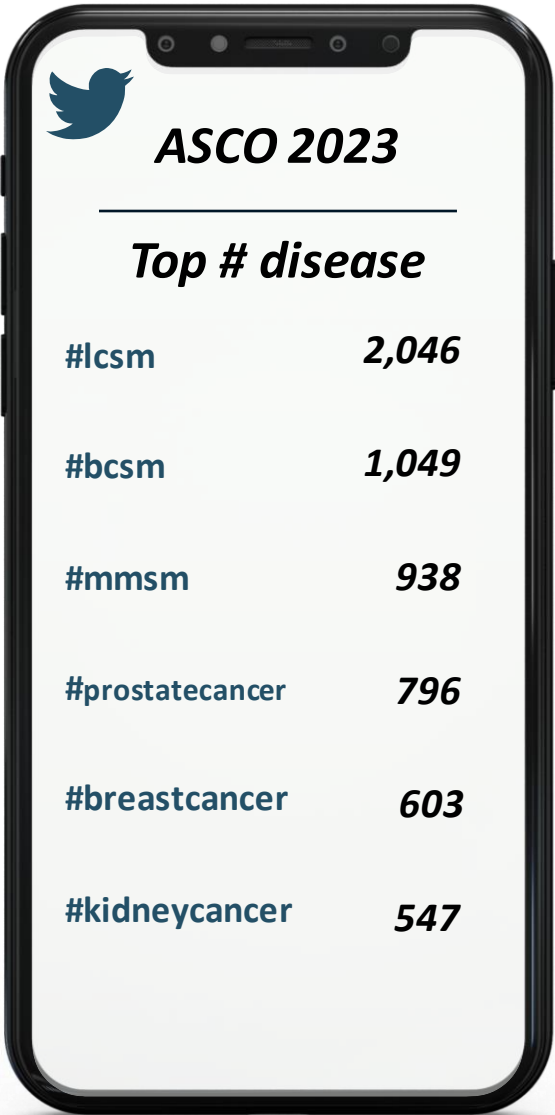
Top hashtags (from HCPs)

The top hashtag was
#lcsm

(lung cancer social media).

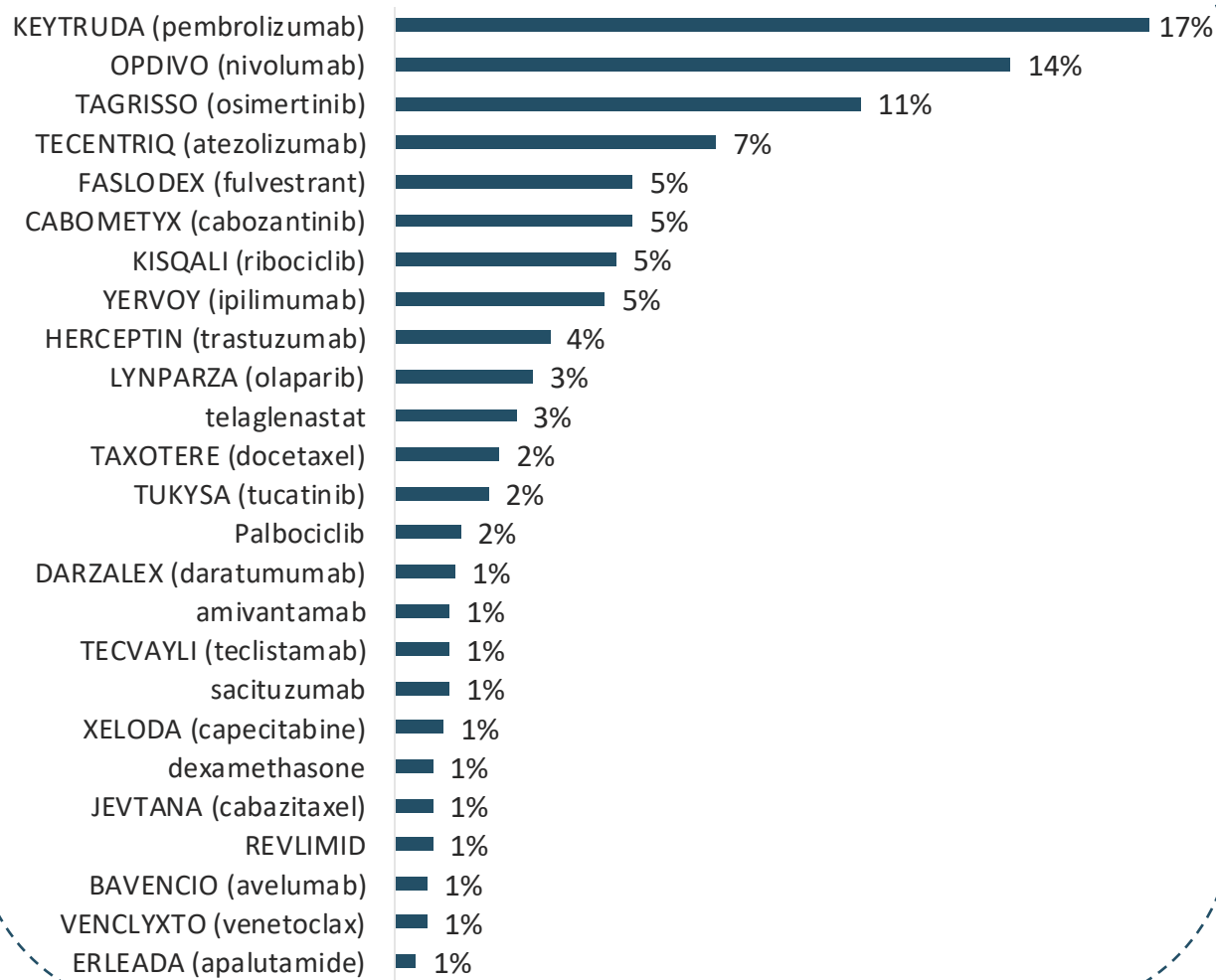
This list is in line with the most discussed diseases during the conference namely lung and breast cancers as well as multiple myeloma.

The official hashtag #asco23 was the most used one with the variation #ash2023 in second place. Note the use of rallying hashtags such as #medtwitter and #onctwitter used by HCPs to facilitate connection.

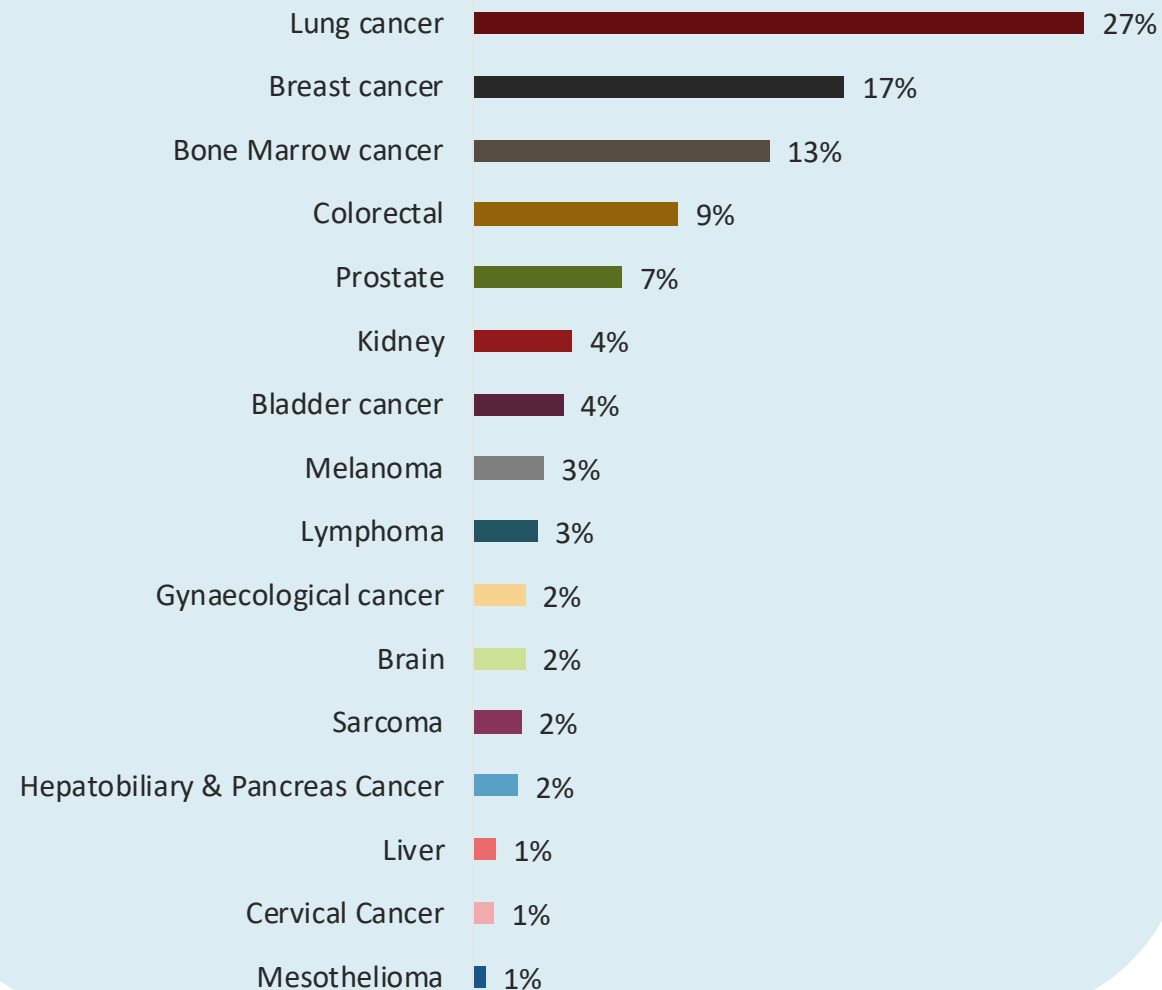


SOV Product and cancer type amongst HCPs

SOV products



SOV cancer type



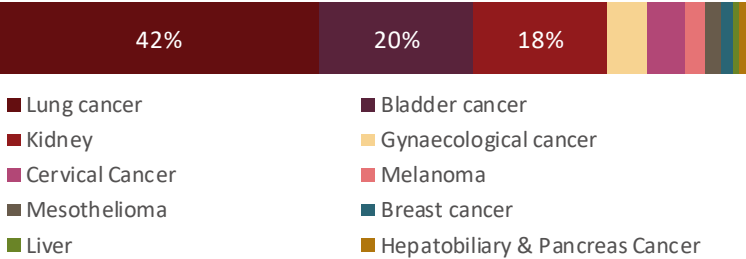
HCPs Product SOV N= 797 HCPs mentions & Cancer type SOV: 2838 (exc. RT)
Listening period: May 26th, 2023, to June 20th, 2023

Note: Stomach, Carcinoma of unknown primary, Head and neck cancer, Esophageal, Bile duct cancer, Skin, Thymic, Blood cancers at less than 1%

KEYTRUDA (pembrolizumab)

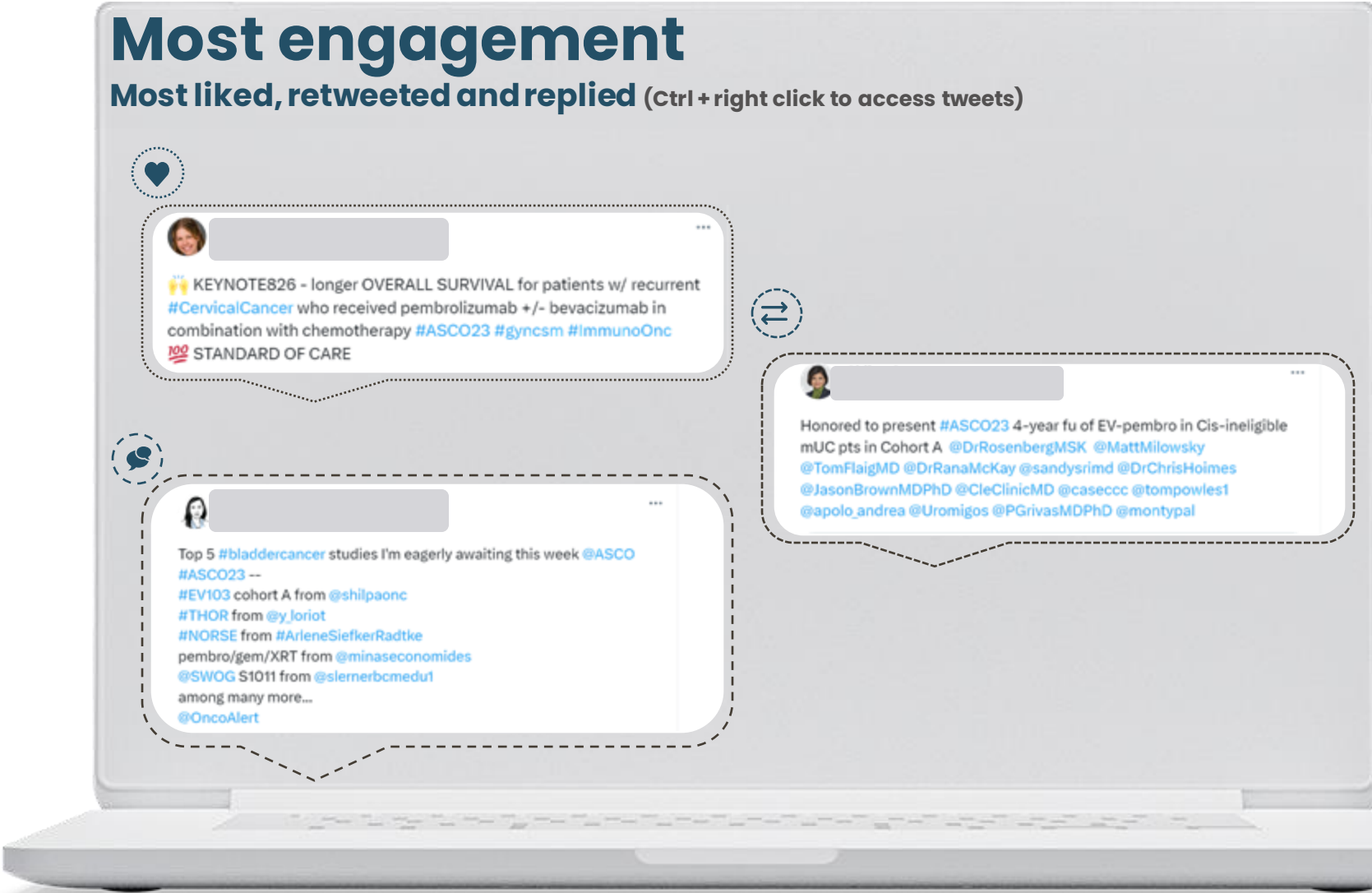
Keynote 671 was of particular interest to HCPs, showing **improved event free survival** as well as a **reduced risk of disease recurrence, progression or death by 42%** in resectable stage II, IIIA or IIIB **non-small cell lung cancer**.

Type of cancer mentioned



Most engagement

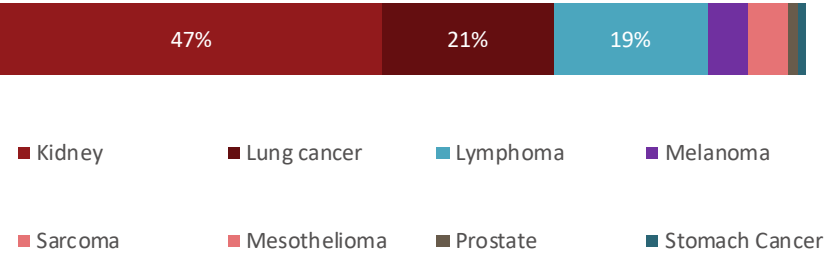
Most liked, retweeted and replied (Ctrl + right click to access tweets)



OPDIVO (nivolumab)

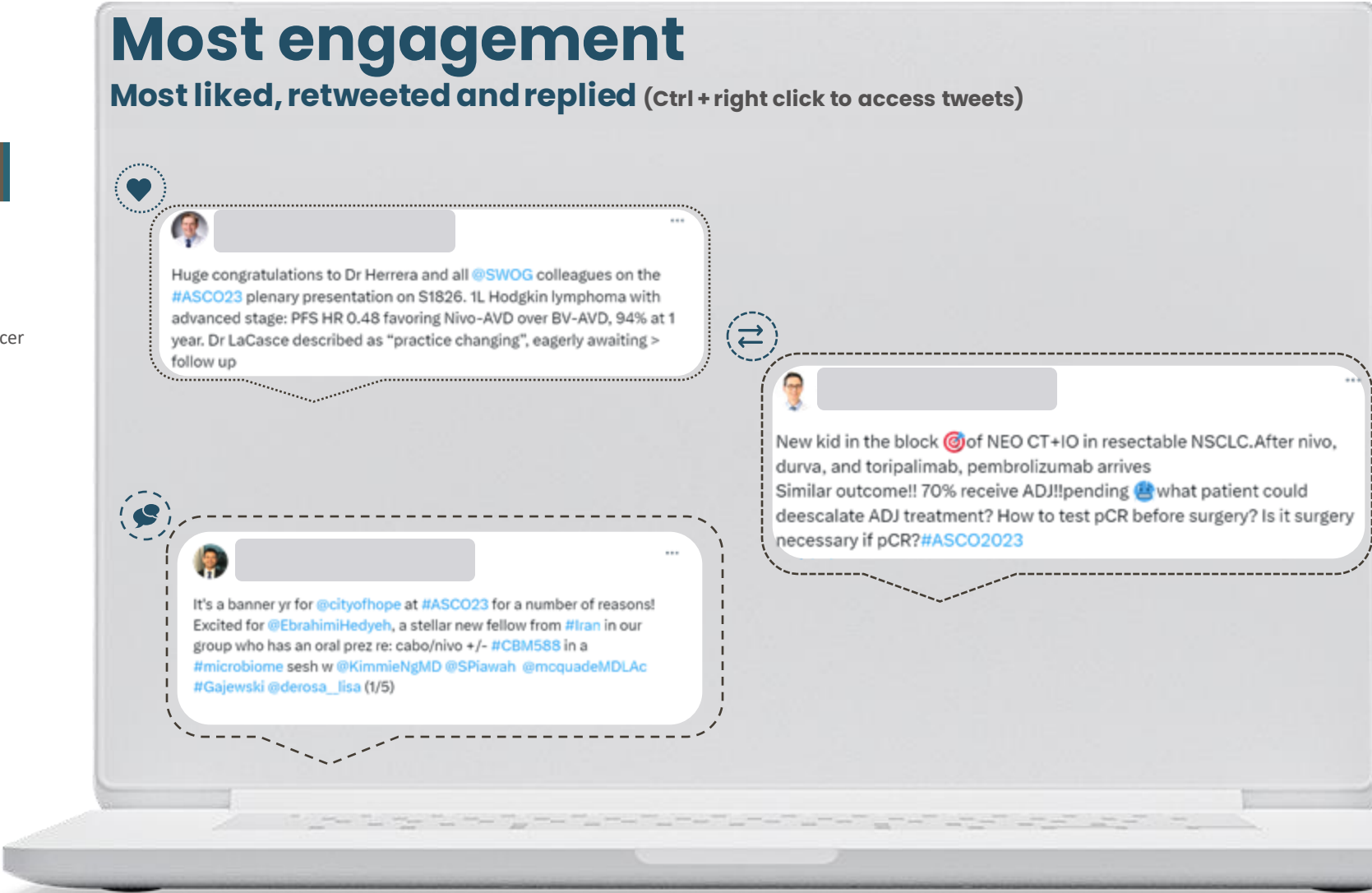
Several results from clinical trials in RCC cancer were presented. Of note **checkmate 914** reporting subgroup analyses benefiting some RCC patients. Other clinical trial mentioned include checkmate 214 and checkmate 9ER.

Type of cancer mentioned



Most engagement

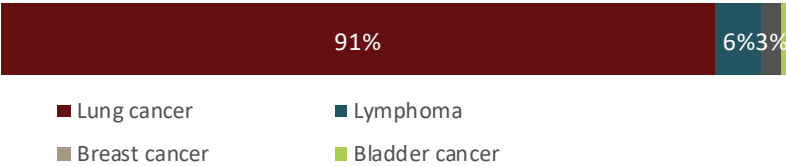
Most liked, retweeted and replied (Ctrl + right click to access tweets)



TAGRISSO (osimertinib)

The main news when it comes to TAGRISSO comes from the **ADAURA** trial which showed **improved survival** in resected EGFR mutated **NSCLC**. Results were deemed **groundbreaking, impressive and reinforcing adjuvant osimertinib as a standard of care** for patients with stage IB to IIIA EGFR-mutated **NSCL**

Type of cancer mentioned



Most engagement

Most liked, retweeted and replied (Ctrl + right click to access tweets)



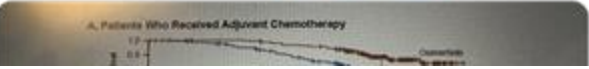
So only 79 of 343 patients (23%) in placebo arm got subsequent osimertinib in [#ADAURA](#). Would love to see OS results subgrouped by those who got subsequent osi versus those who did not. [#ASCO23](#)



MET IHC is a strong predictive factor for the efficacy of amivantamab + lazertinib in pts with EGFRmut NSCLC, independently of the resistance mechanism to osimertinib. PFS 12.2/4.2mo in MET+/- . Might be useful if the 1st line setting becomes crowded (FLAURA2, MARIPOSA...). [#ASCO23](#)



ADAURA; look at NEJM supplementary ; 7% 5y landmark advantage for those who got adjuvant chemo. My view will be to recommend adjuvant chemo before adjuvant osimertinib [#ASCO23](#) [#LCSM](#)



Focus on multiple myeloma

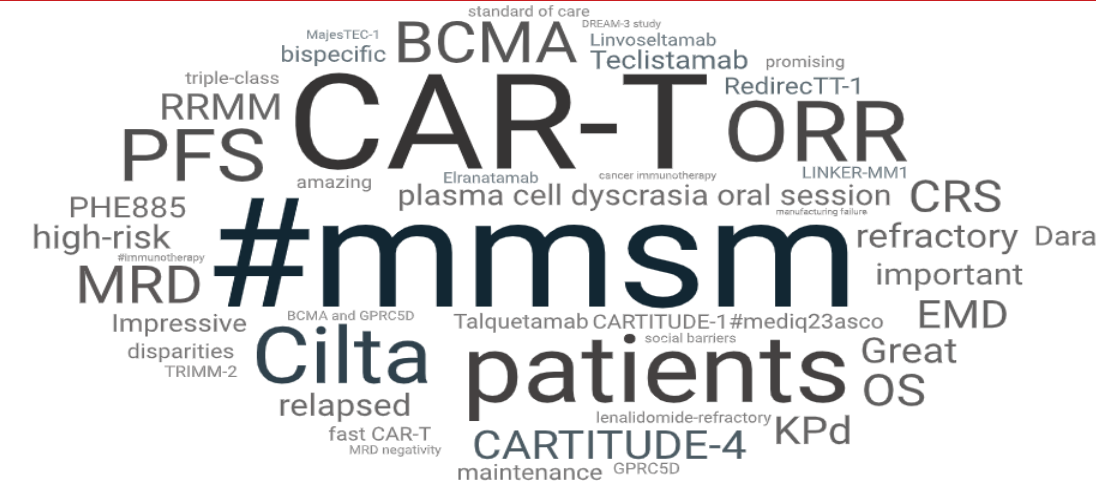
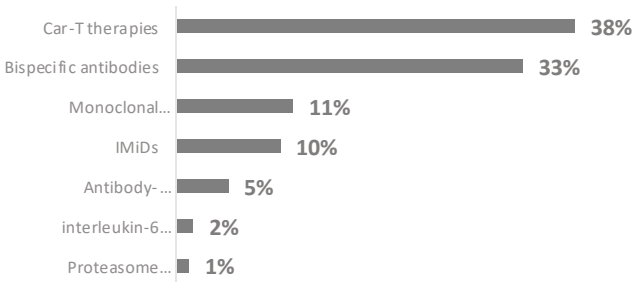
This year's edition was heavily focused on **CAR-T** cell therapies and **bispecific antibodies**.

Highly anticipated results from the **CARTITUDE-4** reflect this. Other development of note include **teclistamab** and **talquetamab** and corresponding trials **RedirecTT-1** and **MajesTEC-1**.

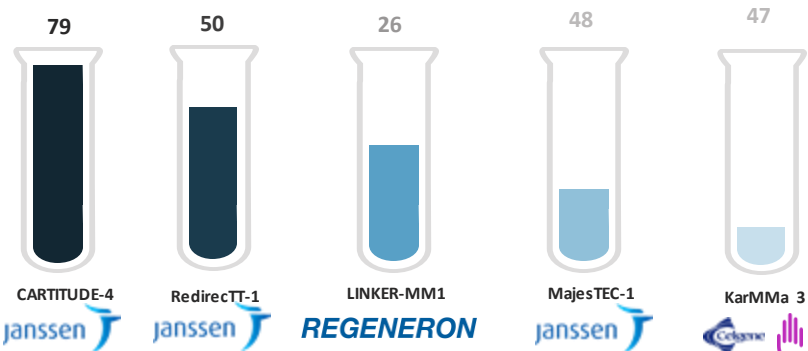
Volume of mentions



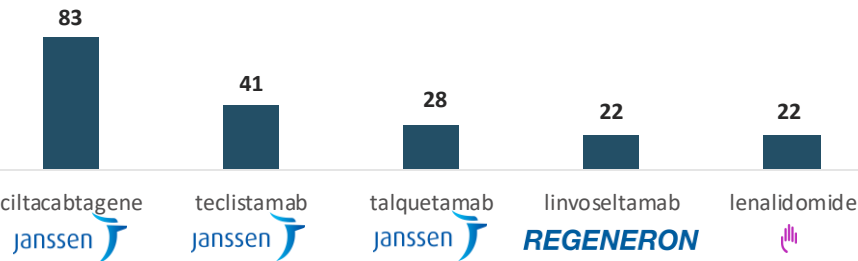
Topics of discussions (type of treatment)



Most mentioned clinical trials



Most mentioned molecules



Top posts from HCPs per engagement

Vincent Rajkumar @VincentRK
For #ASCO23
How I treat myeloma: a few slides.
Traduire le Tweet

Flowchart titled "Newly Diagnosed Myeloma: Transplant Eligible". It branches into Standard Risk and High Risk. Standard Risk: Vtd or DRd x 3-4 cycles, then Stem cell collection and transplant, then continue Vtd x 3-8 additional cycles, leading to Early ASCT, then Lenalidomide maintenance. High Risk: Same Vtd x 3-4 cycles, then Early ASCT, then Bortezomib plus Lenalidomide maintenance. Reference: Rajkumar SV © 2023.

Joseph Mikhael @jmikhaelmd
Can we speed up to CARs to arrive in less than 10 days? PHE885 may cross the finish line - and with an impressive response rate of 98%. Toxicity consistent with other CAR T. #ASCO2023 #MMSM #MedIQ23ASCO

Joseph Mikhael @jmikhaelmd
Is it time to bring the CAR home early? CARTITUDE-4 demonstrates dramatic benefit of cilta cel over standard of care in 1-3 prior lines. May also signal less toxicity in earlier lines. Impressive. #ASCO23 #MMSM #MedIQ23ASCO

Activity During ASCO 2022: Top 15 commercial twitter accounts by Volume of posts (original content, excl. retweets or comments)



- The total number of mentions related to ASCO 2023 was **down a mere 1,74%** when compared to the 2022 edition going from 87k mentions to 86K mentions in 2023.
- The volume of mentions from HCPs **slightly went down 3,91%** year to year going from 31 024 in 2022 to 29,812 in 2023.
- The volume of mentions from pharma companies **went down** when compared to last year, going from 1458 in 2022 to 855 in 2023, **a decrease of 41,36%.**
- The volume of mentions from organizations was **down** going from 10604 in 2022 to 8667 in 2023, **a decrease of 18%.**



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