

# Which Manufacturer Fields the Best MSL Team?

20 oncology manufacturers benchmarked on MSL interaction quality and field reach — as rated by the oncologists they engage.

## KEY TAKEAWAYS

**FINDING 01**

**Roche/Genentech and AstraZeneca Set the Performance Standard**

- Roche/Genentech (83%) and AstraZeneca (79%) lead the field performance ranking
- AstraZeneca also leads on reach — 63% of oncologists interacted with their MSL team, more than double the field average of 28%
- A 50-point spread separates top from bottom — yet most manufacturers cluster in a narrow 60–72% band, competing for marginal separation

**Implication:** The 50-point spread is a direct measure of strategic gaps in how manufacturers execute medical engagement in the field.

**FINDING 02**

**Quality Score Is Driven by Two Attributes That Measure Different Capabilities**

- Scientific Depth (19%) and Responsiveness (18%) together account for 37% of the composite score
- They are not variants of the same skill — one reflects intellectual credibility, the other operational reliability
- Most coaching frameworks treat them as a single “quality” variable, systematically underinvesting in one

**Implication:** Both dimensions require separate feedback loops, training methods, and performance standards.

**FINDING 03**

**Proactive Outreach and Pipeline Depth Define MSL Impact**

- MSLs drive first contact — outreach (55%) and conferences (51%); only 1 in 5 interactions is HCP-initiated
- Pipeline & Investigational Data leads on content (55%), followed by Research Collaboration (49%)
- Outcomes follow: Knowledge Gap Closure (41%), Research Activity (39%), Peer Networking and Discussion (37%)

**Implication:** The journey is coherent when the content matches what oncologists engage for — teams measuring activity instead of scientific impact cannot tell whether it is.

**FINDING 04**

**Academic and Community Oncologists Define MSL Value Differently**

- Academic oncologists weight Scientific Depth first — expect near-peer scientific exchange
- Community oncologists weight Responsiveness first — want fast, practice-applicable guidance
- The same MSL profile that earns credibility in academic settings frequently underperforms in community practice

**Implication:** Hiring, coaching, and territory design should account for practice setting — a single engagement model will underserve one audience systematically.

## PERFORMANCE RANKINGS

### The Field, Ranked

Scores reflect oncologist-rated quality across seven weighted attributes, among those oncologists who interacted with each manufacturer’s MSL team in the prior three months. A 50-point spread separates the top from the bottom — yet most manufacturers cluster in a narrow 60–72% range, competing for marginal separation. Reach reflects the share of this panel who interacted.

**01 Roche / Genentech**

Roche/Genentech holds the quality ceiling. No single attribute drops below 70% top-box — Research Collaboration and Responsiveness both reach 83%. HCPs describe their MSLs as scientifically substantive and consistently accessible. This is the standard the rest of the field is measured against.

MSL PERFORMANCE SCORE: 80% 35% REACH

**WHAT'S WORKING**

"Presents clinical data clearly and in a friendly manner — convenient and non-disruptive to our clinical practice."

**AREAS TO IMPROVE**

No specific feedback recorded.

**02 AstraZeneca**

The only manufacturer combining top-tier reach with top-tier quality. At 63% HCP reach and 79% performance score, AstraZeneca’s MSLs are both the most visible and among the most effective in the field. Communication & Engagement and Quality of Materials both hit 84% top-box — scientific depth delivered without inaccessibility.

MSL PERFORMANCE SCORE: 79% 63% REACH

**WHAT'S WORKING**

"AstraZeneca reached out to me to set up a list of different meetings to talk about products, to talk about participation in their advisory boards, to talk about new NCCN updates. I feel like they are the most proactive out of all the brands."

"The MSL was helpful in initiating conversations about Investigator Initiated Trials and was available for discussions without overstepping or being overbearing."

**AREAS TO IMPROVE**

No specific feedback recorded.

**03 Bayer**

The strongest quality story with the narrowest reach. Among HCPs who interact with them, Bayer’s MSLs score 100% top-box on Research Collaboration — the highest single-attribute result in the field. At 12% reach, this impact is concentrated, not yet scaled.

MSL PERFORMANCE SCORE: 77% 12% REACH

**WHAT'S WORKING**

"The team did a really good job of getting us the information we need and connecting with our support staff."

"They were not overbearing and presented all the information that we needed."

**AREAS TO IMPROVE**

No specific feedback recorded.

**04 AbbVie**

AbbVie operates above field average on both dimensions with a profile of reliable execution rather than competitive separation. Objectivity & Trust is the standout attribute at 78% top-box — consequential in a specialty where oncologists are acutely sensitive to promotional bias. No dominant spike, but no critical gap either.

MSL PERFORMANCE SCORE: 72% 35% REACH

**WHAT'S WORKING**

"I rank AbbVie the highest because of the scientific depth and ability to translate complex clinical data into actionable practice."

**AREAS TO IMPROVE**

"Difficultly getting hold of the person and leaving messages. Would like to have better communication."

**05 Amgen**

Amgen scores 83% top-box on Responsiveness — one of the highest in the field — but Scientific Depth sits at 50%, a meaningful gap in oncology where scientific credibility is the primary MSL value driver. The accessibility is working: the scientific substance is not keeping pace with it.

MSL PERFORMANCE SCORE: 70% 24% REACH

**WHAT'S WORKING**

"MSL professionalism and knowledge level."

**AREAS TO IMPROVE**

"Although they did not do poorly, they were unable to connect me with patient specific data that was applicable to the information I needed."

"They need to bring more people who are medical people and less sales people."

**Hide ranks 6–20**

**06 Johnson & Johnson** 67% Reach 45%

**WHAT'S WORKING**

"I speak with myeloma therapies. I interact with their MSL frequently on bispecific and CAR T therapy. They answer questions in a timely fashion."

"The representative brought relevant clinical information on side effect management. She took my concerns seriously and would follow up with additional recommendations or people I could talk with."

**AREAS TO IMPROVE**

"I feel they're not as fast sometimes as other companies."

**07 Gilead Sciences / Kite** 66% Reach 20%

**WHAT'S WORKING**

"Gilead's MSL team helped close gaps in knowledge and are highly responsive. They provide exceptional real-time support for complex patient management."

"They provide great service to my staff, introduce new clinical data and present opportunities for clinical involvement."

**AREAS TO IMPROVE**

"The portfolio didn't align well with my core area — the team didn't demonstrate sophisticated command of the emerging therapeutic landscape."

**08 BeOne Medicines** 65% Reach 18%

**WHAT'S WORKING**

"He went in depth about the data and was well versed about logistics around access and coverage."

**AREAS TO IMPROVE**

"They do not follow up with the emails. Makes it hard to remember and follow up on their product updates."

"The inconsistent cadence of communications and unclear reason for visit requests."

**09 Bristol Myers Squibb** 64% Reach 43%

**WHAT'S WORKING**

"Dependability and follow up on the requested information."

"They were thoughtful, worked around my schedule, and very willing to engage in appropriate connectivity with my research and scientific interests."

**AREAS TO IMPROVE**

"They seem to be a little less prepared and it's unclear who is taking charge — our point person?"

"They have less frequent interactions with me and not as many research opportunities in my area of interest. Sometimes they have not followed up when I have asked questions."

**10 Merck / MSD** 64% Reach 55%

**WHAT'S WORKING**

"They were very good at setting up meetings quarterly with me to go over new data or talk about research or other things."

**AREAS TO IMPROVE**

"They were very good at setting up quarterly meetings — but this has fallen through in recent months even after I've reached out."

"Given a new indication better for one of their key drugs in my specialty, I expected better follow-through and proactive outreach."

**11 Astellas** 63% Reach 20%

**WHAT'S WORKING**

"Clinical trial involvement, patient access support programs."

**AREAS TO IMPROVE**

"Less data-driven story telling — not much trial discussion. Less focus on pathway biology and resistance mechanisms."

"Representatives seemed disinterested and wanted to leave quickly."

**12 Eli Lilly & Co.** 61% Reach 31%

**WHAT'S WORKING**

"They have reached out to interact when needed."

**AREAS TO IMPROVE**

"I feel like I don't get any invitations to the advisory boards — not always speaking to the same person when I engage with them."

**13 Daiichi Sankyo** 60% Reach 31%

**WHAT'S WORKING**

"Provided slightly better information about potential upcoming clinical trial opportunities."

**AREAS TO IMPROVE**

"They were not able to satisfactorily answer my questions."

"I'd expect them to organize more educational events — come to conferences, have a visible presence, and host discussions about their cutting-edge research with oncologists in the field."

**14 Regeneron** 58% Reach 28%

**WHAT'S WORKING**

"The way she presents the information — especially clinical data indications for the medication, and follow-up on previous conversations."

**AREAS TO IMPROVE**

"An interaction I had felt rushed — limited interactions overall with their team."

"It felt like they were there with their script and not going to deviate from it — even if I had an unrelated clinical question."

**15 Novartis** 57% Reach 28%

**WHAT'S WORKING**

"Very approachable, easy to speak to, down to earth, warm and friendly."

**AREAS TO IMPROVE**

"What could be improved is consistency and continuity, plus more rapid follow-up."

"They're very good at talking about efficacy and response rates, but less good about discussing serious safety considerations like myelodysplasia."

**16 Jazz Pharmaceuticals** 53% Reach 20%

**WHAT'S WORKING**

"They were the most prepared and had the most robust information to present."

"They were able to provide details on administration, clinical follow-up, and concerns regarding toxicities."

**AREAS TO IMPROVE**

"More long-term data — more relevant to the various indications we're discussing"

**17 OSK** 53% Reach 28%

**WHAT'S WORKING**

"Bullet pointed trial inclusion/exclusion and methods, followed by a review of clinical data and how it builds on prior studies."

"Strong support for research, responsiveness, and scientific neutrality."

**AREAS TO IMPROVE**

"Slightly less command of very specific scientific questions — the gap was narrow but noticeable at a granular level."

"They need to better address how to mitigate toxicities and side effects — guidance on safe and effective use in a broader patient population has been lacking."

**18 Takeda** 51% Reach 12%

**WHAT'S WORKING**

"Overall quick to answer emails, provided good data and help when needed."

**AREAS TO IMPROVE**

"Other teams were a little better in terms of answering questions in a timely manner."

"I felt like the topics discussed were not as clinically relevant or interesting as some of the other manufacturers."

**19 Sanofi** 42% Reach 20%

**WHAT'S WORKING**

"They were time-efficient in general, follow up with me, and are able to answer questions that are posed to them."

**AREAS TO IMPROVE**

"The MSL didn't spend enough time in detailed reviews."

"Each time that I see them, it's a new experience. So you're starting from ground level each time."

**20 Pfizer** 31% Reach 20%

**WHAT'S WORKING**

"They provide great clinical opportunities and have a great product pipeline."

**AREAS TO IMPROVE**

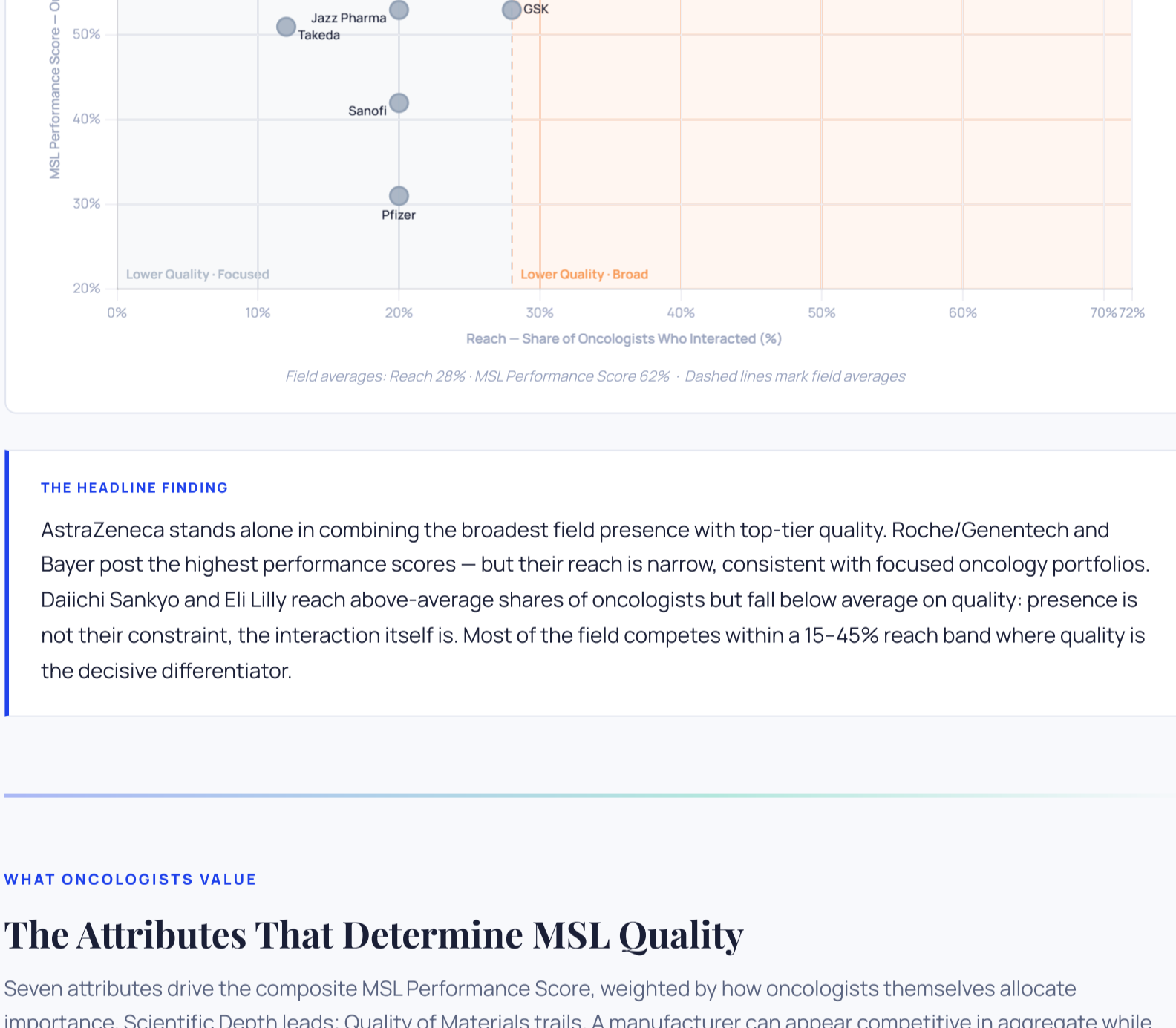
"Not responsive to participating in Investigator Initiated Studies."

"I did not get very personalized attention. I often felt like I got generic handouts with very little attention to what my clinic's patients actually need."

## THE REACH DIMENSION

### Quality Rankings Don't Tell the Whole Story. Here's Where Reach Fits In

Two dimensions determine competitive position: how many oncologists each manufacturer’s MSL team reaches, and how those oncologists rate the quality of those interactions. Reach varies by portfolio scope, indication focus, and team investment — and by how proactively MSL teams initiate contact; outreach and conferences account for the majority of interactions. Quality reflects what actually happens once contact is made.



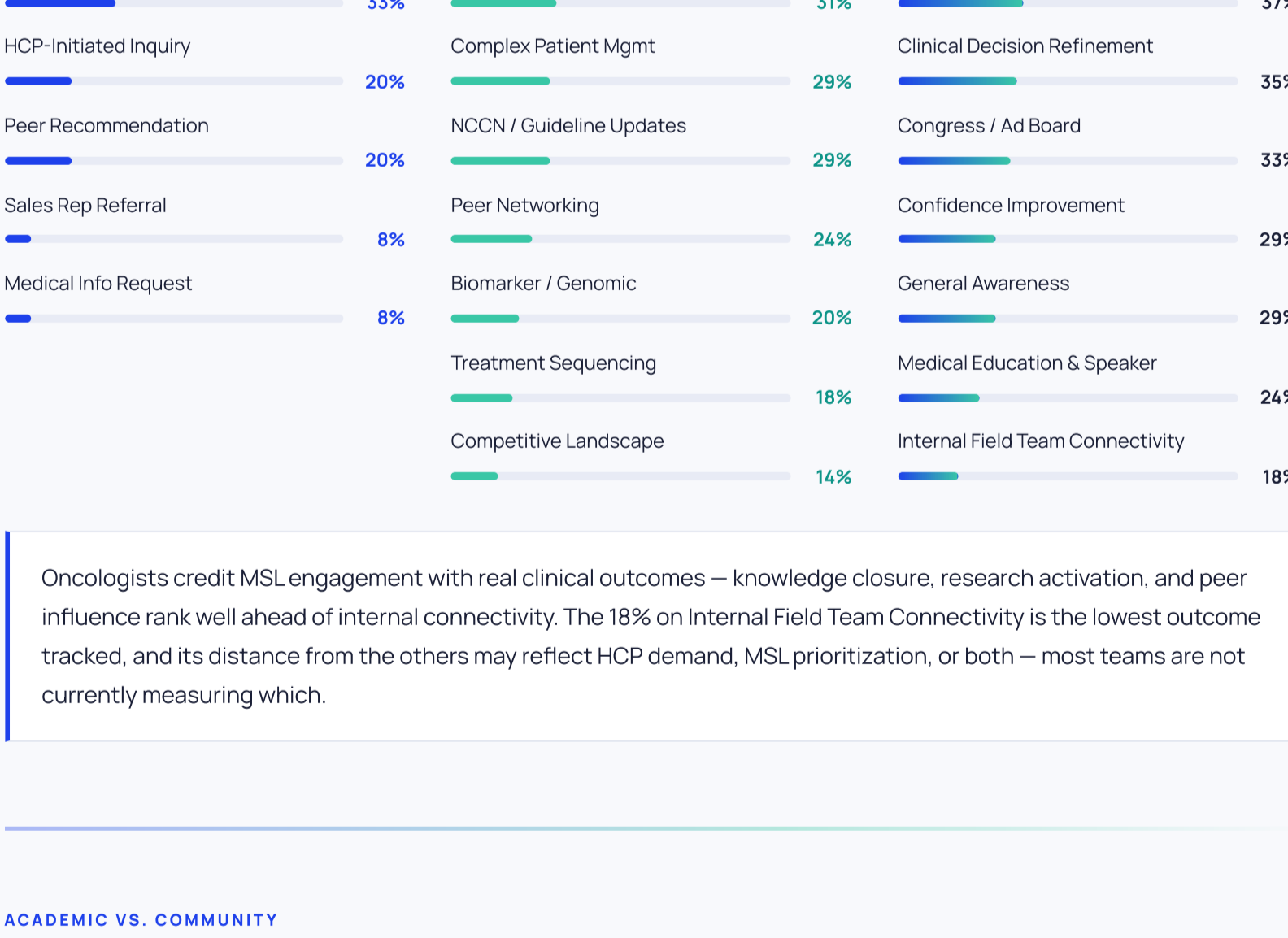
## THE HEADLINE FINDING

AstraZeneca stands alone in combining the broadest field presence with top-tier quality. Roche/Genentech and Bayer show the highest performance scores — but their reach is narrow, consistent with focused oncology portfolios. Daiichi Sankyo and Eli Lilly reach above-average shares of oncologists but fall below average on quality: presence is not their constraint, the interaction itself is. Most of the field competes within a 15–45% reach band where quality is the decisive differentiator.

## WHAT ONCOLOGISTS VALUE

### The Attributes That Determine MSL Quality

Seven attributes drive the composite MSL Performance Score, weighted by how oncologists themselves allocate importance. Scientific Depth leads. Quality of Materials trails. A manufacturer can appear competitive in aggregate while posting critical gaps on the attributes oncologists weight most.



## THE MSL-HCP JOURNEY

### How Interactions Start, What They Cover, What They Produce

The dominant pattern: proactive MSL outreach triggers the interaction, the medical conference is the venue, and investigational pipeline data is the content that earns sustained engagement.

WHAT TRIGGERS THE INTERACTION	TOPICS OF VALUE (N RANKED TOP-3)	OUTCOMES REPORTED
MSL-Initiated Outreach	Pipeline & Investigational	Knowledge Gap Closure
Medical Conference	Research Collaboration	Research Activity
Research / Clinical Trial	Clinical Evidence	Peer Networking
Speaker / Ad Board	Scientific Narrative	Peer Discussion
HCP-Initiated Inquiry	Complex Patient Mgmt	Clinical Decision Refinement
Peer Recommendation	NCCN / Guideline Updates	Congress / Ad Board
Sales Rep Referral	Peer Networking	Confidence Improvement
Medical Info Request	Biomarker / Genomic	General Awareness
	Treatment Sequencing	Medical Education & Speaker
	Competitive Landscape	Internal Field Team Connectivity

Oncologists credit MSL engagement with real clinical outcomes — knowledge closure, research activation, and peer influence rank well ahead of internal connectivity. The 18% on Internal Field Team Connectivity is the lowest outcome tracked, and its distance from the others may reflect HCP demand, MSL prioritization, or both — most teams are not currently measuring which.

## ACADEMIC VS. COMMUNITY

### Two Audiences. Two Different Definitions of MSL Value.

Academic oncologists are evaluating MSLs against a scientific peer standard. Community oncologists are evaluating speed, practicality, and applicability to their patient volume. These are not nuanced variations on the same preference — they are structurally different engagement models, with different implications for hiring, training, and territory design.

**ACADEMIC ONCOLOGISTS**

Treat MSLs as scientific peers and research connectors. Value pre-publication data, pipeline access, and advisory board opportunities — judge credibility against a research-center standard.

**TOP PRIORITY ATTRIBUTE**

Scientific Depth (20.3 pts)

**TOP TOPICS**

Pipeline & Investigational Data

Research Collaboration | NCCN / Guideline Updates

**TOP OUTCOMES**

Knowledge Gap Closure | Research Activity

Peer Discussion

**COMMUNITY ONCOLOGISTS**

Treat MSLs as practical clinical advisors. Want help applying evidence to real patients in high-volume settings — judge value against speed and immediate practice applicability.

**TOP PRIORITY ATTRIBUTE**

Responsiveness (22.3 pts)

**TOP TOPICS**

Scientific Narrative | Pipeline & Investigational Data

Complex Patient Management

**TOP OUTCOMES**

Peer Networking | Clinical Decision Refinement

Peer Discussion

Academic (n=27) and community (n=24) sub-samples are directional. Segment-level patterns should not be treated as statistically definitive.

## STRATEGIC IMPLICATIONS

### Five Places to Close the Gap — or Widen It

What separates the field’s top MSL teams from the rest is not budget or headcount. It is how well teams are built, deployed, and measured against what oncologists actually value.

**IMPLICATION 01**

**Train on Two Attributes Independently — Not One “Quality” Variable**

Scientific Depth and Responsiveness together account for 37% of stated MSL importance and represent fundamentally different capabilities. Scientific Depth is about intellectual credibility. Responsiveness is about operational reliability. Each requires distinct training methods, feedback mechanisms, and performance standards. Most coaching frameworks collapse these into a single quality variable, which means development investments often improve one at the expense of the other. Audit your coaching model to ensure both dimensions are assessed and developed independently, with separate feedback loops and distinct performance standards.

**IMPLICATION 02**

**Treat Conference Deployment as a Relationship Strategy, Not a Logistics Exercise**

51% of HCP-initiated contact in this study originated from conference settings — second only to direct MSL outreach (55%) and well ahead of MSL-initiated contact (20%). Conferences are not the MSL field plan; for many oncologists they are the primary touchpoint. Leaders in this study — particularly AstraZeneca — use conferences to initiate relationships, not just reinforce them. MSL teams without a structured conference engagement plan are conceding ground to teams that have one.

**IMPLICATION 03**

**Pipeline Fluency Is a Competitive Differentiator — Not a Nice-to-Have**

Pipeline & Investigational Data ranked first in topics where oncologists say MSLs add value (55%), ahead of Clinical Evidence (31%) and Scientific Narrative (31%). Oncology HCPs are making sequencing and protocol decisions well before commercial launch — and they are evaluating MSLs on the quality of those early conversations. Companies that restrict MSLs to on-label content in these interactions remove themselves from the highest-value part of the engagement. Deploying MSLs with deep pipeline fluency early in the drug lifecycle is not a compliance question; it is a competitive positioning decision.

**IMPLICATION 04**

**Redefine MSL Success Metrics Around What Oncologists Say Actually Happens**

Knowledge Gap Closure (41%), Research Activity (41%), and Peer Networking (37%) lead the list of outcomes oncologists attribute to effective MSL interactions. Internal Field Team Connectivity trails at 18% — the lowest outcome tracked. Most MSL KPIs are still built around activity counts: calls made, decks presented, follow-ups completed. These metrics measure presence, not impact. Rethinking MSL measurement to include knowledge closure, research enablement, and peer influence would give medical affairs leadership a more honest view of where their teams are creating value — and where they are not.

**IMPLICATION 05**

**Segment the MSL Engagement Model — Academic and Community Are Different Roles**

Academic oncologists weight Scientific Depth first and report Research Activity as a primary outcome. Community oncologists weight Responsiveness first and cite Confidence Improvement and Clinical Decision Refinement. These are not variations on the same success criteria — they are different engagement models with different implications for hiring, training, and territory design. An MSL who excels at a KOL-focused academic relationship may be poorly calibrated for a community practice where speed and practical guidance matter more. Companies running a single MSL model across both settings are likely underserving one audience systematically. The data is clear enough on this: the organizational will to differentiate is key.