# A Case Study in Al-enabled Media:

# IBD Patient Journey Mapping & Omnichannel Campaign Planning

August 2025 New York

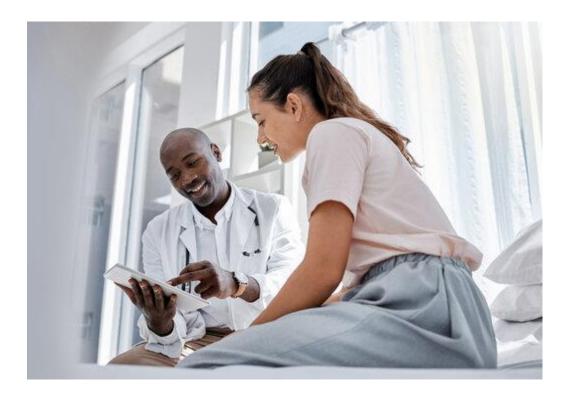
By Joy Joseph Managing Partner



©2025. All Rights Reserved.



## **Executive Summary**



The Inflammatory Bowel Disease (IBD) treatment market is highly competitive, and patients face long, fragmented journeys before initiating advanced therapies like biologics. They may cycle through multiple care providers, research both conventional and alternative treatments, and navigate complex insurance hurdles before starting—and staying on—therapy.

This case study shows how a structured, data-driven patient journey mapping approach uncovered the most influential touchpoints from early wellness awareness through diagnosis, treatment initiation, and long-term adherence.

Mapping the patient journey allows brands to focus resources on the few moments that truly shift patient behavior toward advanced treatment.



### **POC Fast Facts**

1.25 Million IBD sufferers in the US

15-30 Typical onset age range

Asymptomatic or undiagnosed sufferers

Median months to remission, post-therapy initiation

Source: Syneractiv research

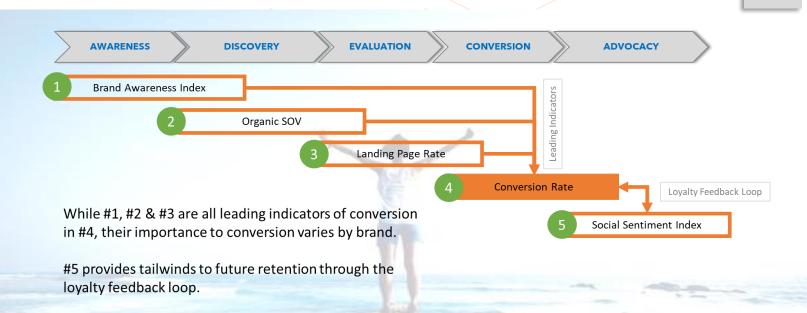
# The Challenge...

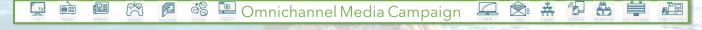
This case study is set in the backdrop of a campaign kickoff for moderate-to-severe IBD, with the goal of improving engagement and increasing biologic initiation. The brand was running into challenges on both new patient starts and adherence rates.

The IBD patient journey is fraught with friction:

- Symptom-to-diagnosis delays often exceed one year.
- Significant drop-off before patients reach a gastroenterologist or discuss biologics.
- Misattribution of symptoms to IBS or stress (on average, 10% of IBD cases are misdiagnosed).
- Competition from other therapies and alternative remedies.
- Insurance complexities that slow decision-making.

**Objective**: Build an IBD-specific patient journey map to identify and address these friction points, ensuring more patients reach timely diagnosis, informed treatment discussions, and ongoing adherence.





In IBD, the biggest opportunity lies in speeding the path from symptom recognition to specialist consultation.



### Phase I: Hypothesis Development via Stakeholder Interviews

Stakeholder interviews are essential to grounding the journey hypotheses in real-world experience, delays, decision points, and treatment barriers. Patients offered first-hand accounts of triggers and drop-offs in care. Together, these perspectives inform the initial hypothesis journey map, identifying key barriers and inflection points to validate in later research.

- Internal Stakeholders: Brand leads, market access team, medical affairs.
- External Stakeholders: Gastroenterologists, primary care physicians, IBD nurse specialists.
- Patients: Across stages—pre-diagnosis, newly diagnosed, and biologic-experienced.
- Output: Initial "hypothesis journey map" identifying suspected triggers, barriers, and drop-off points.

### Phase II: Hypothesis Development via Stakeholder Interviews

For this case study, a key data source we centered on were patient surveys, which were structured to test journey hypotheses. These surveys explored how patients first recognized symptoms and perceived their severity, the types of sources they consulted, including healthcare providers, family members, and online communities and the key decision factors that led them to seek care.

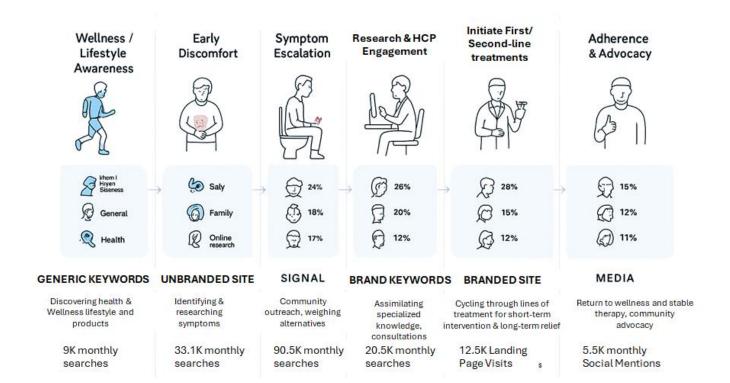
They also examined patient awareness, perceptions, and barriers to biologic therapy, as well as treatment adherence behaviors. Sampling included patients across different stages of diagnosis, with an intentional oversample of those in moderate to severe stages.

**Secondary data sources** complemented this with broader context and digital behavior insights. Search keyword analysis tracked organic trends related to IBD symptoms as well as IBD treatments and biologic brands.

**Additional sources included**, clickstream data on IBD-related site visitation patterns, dwell time and navigation flows. Online community discussions, such as those on Bezzy IBD and Reddit's r/IBD forum, were analyzed for sentiment and emerging themes. Finally, claims and EHR data were leveraged to understand the timeline from initial GI symptoms to diagnosis, therapy initiation, and switching patterns.



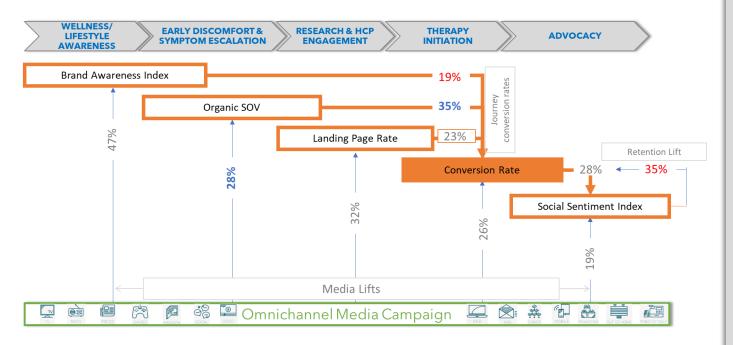
### Phase III: Journey Mapping



The IBD journey can be understood as a series of progressive stages. It often begins with wellness and lifestyle awareness, where individuals are focused on maintaining an active lifestyle and general gut health. This may progress into early discomfort, when mild gastrointestinal issues arise but are often misattributed to diet or stress. As symptoms worsen, patients enter the symptom escalation stage, experiencing more serious issues such as blood in the stool, urgency, and severe abdominal pain. In response, many turn to seeking relief through online research, over-the-counter medications, or alternative diets. When these measures prove insufficient, patients move toward medical engagement, typically starting with a primary care physician and often leading to a referral to gastroenterology and diagnostic evaluations. The next stage, treatment decision, involves reviewing first & second-line therapeutic options ranging from 5-ASA and steroids to biologics. Once a path is chosen, patients enter treatment initiation, which may include specialty pharmacy onboarding and injection training. Finally, in the adherence and advocacy stage, patients focus on managing flares, handling side effects, and integrating treatment into their daily lifestyle.



### Phase IV: Signal Extraction via Machine Learning



Al-driven models identified the content and interactions that most effectively moved patients through the IBD journey:

- Early engagement via awareness content and symptom checkers,
- Mid-stage via targeted searches and HCP page visits,
- Late-stage via support program and rebate downloads.

Machine learning ranked high-impact touchpoints while separating noise, linking engagement to outcomes like HCP discussions. At the same time, patient-privacy-safe contextual targeting ensured stage-appropriate messaging reached relevant audiences without personal identifiers, enabling optimized, precise, and compliant engagement across the entire IBD journey.



### Phase V: Omnichannel Media Plan Development with agency partner

### **JOURNEY-CENTRIC MEDIA PLAN**

WELLNESS/ LIFESTYLE AWARENESS	EARLY DISCOMFORT	SYMPTOM ESCALATION	ENGAGE HCP	INITIATE THERAPY	ADHERENCE & ADVOCACY
SEO SEO	SEARCH ADS	RETARGETING	PAID SEARCH	HCP co-branded materials	EMAIL DRIP CAMPAIGNS
SPONSORED CONTENT	NATIVE ADS	SPONSORED O&A	YOUTUBE	PROGRAMMATIC TARGETING	PRIVATE FACEBOOK
PODCAST	PODCASTS	BLOGS	VILTIS TO TON	SPECIALTY PHARMACY	SMS REMINDERS
AWARENESS LIFT % ORGANIC SEARCH VOLUME GROWTH	CTR TIME ON SITE	CONTENT ENGAGEMENT RATE NEWSLETTER SIGN-UPS	VISIT&TO 'FIND A SPECI- ALIST" POF DOWNLOADS	HCP DISCUSSION RATES Rx STARTS	ADHERENCE %  REFILL PERSISTENCE

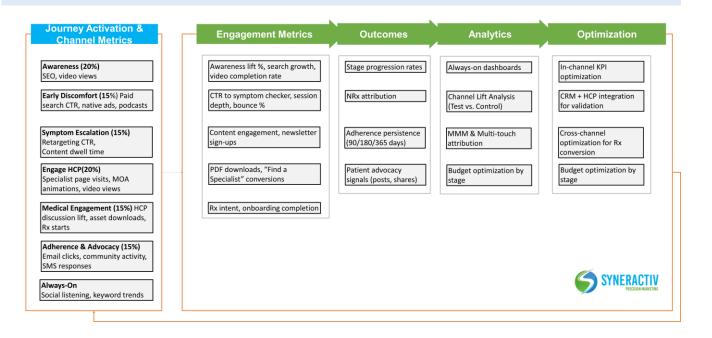
Support for media agency omnichannel media planning for the patient journey leveraged channel influence modeling to guide spend toward the most impactful touchpoints.

- Awareness and Early Discomfort stages relied on condition-led SEO and unbranded video content,
   with AI testing optimizing messaging and creative formats.
- Consideration (Symptom Escalation & Engage HCP) used sponsored content and targeted search ads, refined through Al insights to match patient segments.
- Initiate Therapy used conversion tactics, including HCP co-branded materials and specialty pharmacy emails, were personalized via AI to increase uptake. Adherence & Advocacy was supported by app push notifications and community webinars, with AI optimizing timing and content for engagement.

The overall framework combined data-driven allocation with AI-enhanced creative optimization, ensuring stage-appropriate messaging across channels while maintaining CRM alignment.



### Phase VI: Measurement Planning & Framework



The IBD omnichannel campaign measurement framework combined stage-specific metrics with Aldriven insights to optimize patient journey progression.

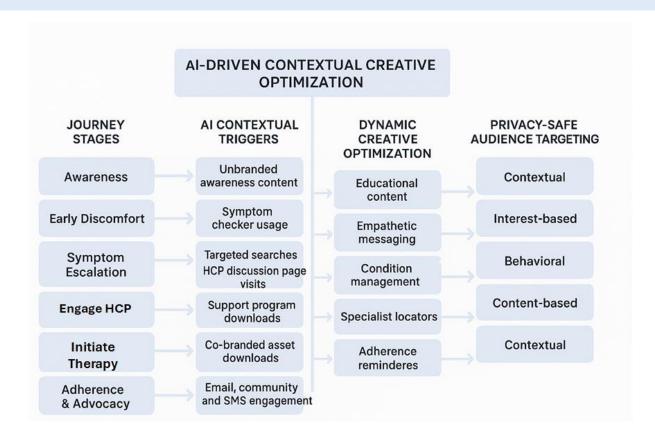
Awareness tracked SEO, impressions, and video views, with AI predicting which content variations would drive engagement. Early Discomfort and Symptom Escalation stages monitored search clicks, ad engagement, and forum activity, while AI clustered behaviors to identify high-intent segments. Seeking Relief and Medical Engagement stages measured specialist page visits, co-branded asset downloads, and Rx starts, with AI attribution models linking exposures to outcomes.

Adherence & Advocacy used email, community, and SMS engagement, with AI optimizing timing, messaging, and frequency. Intermediate signals, including engagement, content interactions, and onboarding completions were dynamically scored by AI to prioritize interventions and segment patients. Outcomes were measured in terms of campaign-driven progression, incremental Rx starts, adherence persistence, and advocacy, with AI estimating lift and predictive trends. Real-time dashboards, reinforcement learning for media allocation, and continuous feedback loops ensured underperforming touchpoints were quickly optimized, while CRM integration aligned digital behavior with HCP feedback and patient-reported outcomes.

Overall, AI transformed measurement from reactive reporting to a predictive, prescriptive, and continuously learning system, maximizing both engagement and business impact across the IBD patient journey.



### Phase VI: Al-enabled Dynamic Creative Optimization



The data layer we developed also supports the agency's creative orchestration plan.

### **AI-Driven Contextual Optimization**

Al models identify "moments of receptivity" by analyzing behavioral and survey data, enabling real-time creative and media adjustments. Dynamic Creative Optimization (DCO) customize messaging based on user context—e.g., symptom checkers trigger empathetic content, while forum activity leads to condition management resources. Generative Al further streamline the creation of compliant, channel-specific content.

### **Enhanced Patient Support and Education**

All extends beyond advertising into patient support via intelligent chatbots, personalized reminders, and virtual community engagement. Contextual triggers proactively address non-adherence risks, reinforcing educational outreach and brand trust.

### **Outcomes & Impact**

The integration of AI-driven targeting and creative delivery reduces media waste, improves ROI, and ensures privacy-compliant personalization. This transforms the campaign from a reactive model to a predictive, adaptive system that not only measures patient progression but actively influences it—boosting engagement, adherence, and long-term advocacy.



### Phase VII: Omnichannel Media Plan Development with agency partner



### **Expected Outcomes**

In the long term, the initiative is expected to lead to increased engagement on every stage of the journey-from higher engagement on branded and unbranded keywords, to higher Click-through and landing page rates. In the near-term, it has resulted in a shorter time to biologic initiation and improved completion rates for patient onboarding (measured via test vs. control, pre vs post). Over the mid term, the outcomes should include higher adherence rates, increased patient advocacy, and stronger brand preference.

### Next steps:

- Continuous monitor patient journey progression through a quarterly re-fielded survey and digital analytics.
- Expand the model to incorporate caregiver and payer perspectives to enable broader influence mapping.

