

How a modality brand triples in two years without a new SKU.



During my time at an animal health therapeutics company, I saw revenue from a therapeutic modality roughly triple over two years while the product portfolio stayed essentially unchanged.

The growth did not come from a new SKU.

It came from better decisions about positioning, audience, use cases, education, and partnerships. The work was not to make the product louder. It was to make its value easier to understand, easier to recommend, and easier to use.

That distinction matters.

A product can remain the same while the business around it changes completely.

How can a modality brand triple revenue without launching a new product?

A modality brand can triple revenue by increasing the number of people who understand the product, the number of situations in which it is relevant, and the number of trusted professionals willing to recommend it.

The product was not the growth strategy.

The product was the foundation. Growth came from building a clearer commercial structure around it.

In practice, that meant:

- Choosing a specific problem instead of leading with features
- Mapping who influences the purchase

- Finding new clinical and commercial use cases
- Repositioning the product around outcomes
- Creating education that earned attention
- Working with partners who wanted the same result

The same device was always in the box.

What changed was what people believed it could help them accomplish.

Why is positioning the multiplier?

Positioning is the multiplier because the same product competes differently depending on the problem it is associated with.

A device presented as a piece of equipment competes with every similar device on price, specifications, and availability.

The same device presented as a solution to a defined clinical problem competes in a much narrower field.

Sometimes, it competes with nothing.

That was one of the most important lessons from the work. The discipline is not to describe everything the product can do. The discipline is to decide what it should be known for first.

Features are easy to list.

Problems are harder to choose.

A strong position answers four questions:

1. What problem are we helping solve?
2. Who feels that problem most acutely?
3. What does that person need to believe before taking action?
4. What proof would make the decision feel responsible?

The answers changed depending on the audience.

A veterinarian needed clinical relevance and confidence in application. A rehabilitation practitioner needed a useful role in a broader care plan. A pet owner needed clarity and trust. A distributor needed a category that could be explained and supported.

The product was the same.

The commercial meaning was not.



Who actually decides in animal health?

In animal health, the buyer, user, recommender, and payer are often different people.

That makes demographic targeting too simple on its own. You need to understand the decision system.

Depending on the situation, the relevant people may include:

- The animal owner
- The veterinarian
- The veterinary technician
- The rehabilitation practitioner
- The trainer
- The barn manager
- The practice owner
- The distributor or purchasing group

Most companies market to the person using the product. Then they wonder why adoption is slow.

The person using a modality may not have authority to purchase it. The person paying for it may not understand its clinical value. The person recommending it may need different evidence than the person receiving the recommendation.

Growth came from mapping who influenced the decision at each stage and giving each person a reason to continue.

That required more than a demographic profile. It required a decision map.

For each audience, we asked:

- What situation brings them to the category?
- What question are they trying to answer?
- Who do they trust?
- What creates hesitation?
- What would make the next step easier?
- What happens after the first purchase?

The order mattered.

Clinical education often came before owner demand. Professional confidence often came before clinic adoption. Clinic adoption often came before repeat usage.

You cannot skip the sequence and expect the same result.

How do you find new uses for the same product?

You find new uses by examining the problems, settings, and decision moments around the product, not by staring at the product itself.

The modality began with one clear area of application. From there, we looked for adjacent situations where the same underlying capability could be relevant.

That included different:

- Species
- Conditions
- Clinical settings
- Purchase occasions
- Professional users

The use cases could extend from companion animals into equine care, and where appropriate, into other animal-health settings. They could include post-surgical recovery, chronic pain, wound healing, performance, and recovery in working or sport animals.

The setting could change as well:

- Veterinary clinic
- Rehabilitation facility

- Mobile practice
- Home-care environment
- Training or performance setting

The purchase occasion could change too:

- An acute need
- A maintenance protocol
- A recovery plan
- A prevention-oriented decision
- A service offered by the practice

Each new use represented a new market opportunity.

None required a new SKU.

But each required its own message, proof, training, and partner strategy. Finding a use case is not the same as launching a use case.

The work is only complete when the audience can see where the product fits into its existing behavior.



What does repositioning require?

Repositioning requires changing the language and category around a product without changing what is in the box.

We moved the conversation:

- From a device to an outcome
- From a purchase to a protocol
- From a product an owner buys to a service a practice offers
- From a feature to a clinical decision
- From a transaction to an ongoing relationship

That shift changed how the product was presented, taught, sold, and supported.

It also required retiring messages that still produced some revenue.

That is the uncomfortable part.

A segment can generate sales and still be the wrong place to concentrate future growth. A message can perform adequately and still limit the category. A use case can be commercially valid and still distract from the stronger opportunity.

Repositioning is not adding more language to the existing story.

It is deciding which parts of the story deserve to remain.

That decision should be based on evidence:

- Revenue by audience
- Conversion by use case
- Repeat usage
- Time to adoption
- Partner-sourced revenue
- Clinical or customer feedback
- Support and implementation requirements

If the category is unclear, more promotion will usually create more noise.

Clarity has to come first.

Why do the right partners matter more than the right campaign?

The right partners matter because trusted professionals can move a decision in ways advertising cannot.

The strongest partners were not simply distribution channels. They had their own reason to want the modality to succeed.

That included:

- Veterinary clinics
- Rehabilitation practitioners
- Distributors
- Professional associations
- Clinical educators
- Respected practitioners and champions

The relationship worked when we shared three things:

1. **A shared incentive**

Both sides could see what a successful implementation would do for their business, patients, or clients.

2. **A shared language**

We could explain the value in terms the partner already used with its audience.

3. **A visible benefit to the partner**

The partner received something that helped them look more capable, more informed, or more useful to their own clients.

That last point is often missed.

A partner does not want to carry your message simply because you need distribution. They want a message that strengthens their relationship with the people who trust them.

Partnerships failed when one side treated the other as a channel to be used.

They worked when both sides treated the relationship as an operating commitment.

That meant shared planning, defined responsibilities, training, follow-up, and visible checkpoints. Good intentions were not enough.

Neither was a co-branded campaign.

What would I measure first if I were doing this again?

I would measure growth by use case, audience, and partner, not only by total revenue.

The first metrics would include:

- Revenue per SKU
- Revenue per new use case
- Revenue per partner
- Attach rate to related services
- Repeat usage by account
- Time from education to first purchase
- Time from first purchase to repeat use

I would also watch where adoption stalled.

A strong amount of interest with weak conversion can indicate unclear positioning. A strong first purchase with weak repeat usage can indicate poor implementation. Strong partner recruitment with weak partner revenue can indicate misaligned incentives.

The numbers should tell you which problem you actually have.

Not every problem requires a new product.



What should the first ninety days look like?

The first ninety days should establish the commercial foundation before expanding the campaign.

Days 1–30: Diagnose

- Review revenue by segment and use case
- Interview customers, partners, and internal teams
- Map the buyer, user, recommender, and payer

- Identify where adoption slows
- List the messages that should be retired

Days 31–60: Choose

- Select the primary problem to own
- Define the highest-value audiences
- Prioritize two or three adjacent use cases
- Build the proof and education required for each
- Identify partners with aligned incentives

Days 61–90: Prove

- Test the new positioning with real customers
- Train selected partners
- Build practical protocols and sales tools
- Track conversion, usage, and repeat behavior
- Decide what to scale and what to stop

The sequence is important.

Do not launch a new product to escape an old positioning problem.

Do not add another SKU when the existing one is poorly understood.

Do not ask a sales team to create demand for a category the market cannot explain.

Start with the problem. Then build the proof. Then build the system around it.

That is how a modality grows beyond the product itself.

And that is how a brand can triple without putting anything new in the box.

If your growth has stalled, the next answer may not be another launch. It may be a clearer position, a better-mapped buyer, a stronger education system, or a partner program built around shared outcomes. That is the kind of work we help leadership teams clarify and execute.

The product may be unchanged.

The opportunity may not be.