# Joe Henein – President & CEO, NewBridge Pharmaceuticals

***It takes a great deal to become number one in a field, but the harder challenge is staying there***

21.07.2026

Tags: UAE, MEA, Newbridge, Access, Rare Diseases, Partnerships, Commercialisation

*Joe Henein, CEO of Dubai-headquartered NewBridge Pharmaceuticals, has built one of MENA's most distinctive specialty pharma platforms over the past 15 years. With over 300 people across MENA, a pan-regional footprint that extends into North Africa, and a rapidly expanding rare disease portfolio, NewBridge is now entering what Henein describes as a period of "unstoppable momentum" as the global pharma industry's growing appetite for trusted regional partners continues to open new doors.*

**Since we last met in 2023, NewBridge has gone through a significant period of growth and evolution. What have been some of the key developments and milestones that have shaped the company over the past three years?**

Where we are today is the result of two driving forces coming together – one internal, one external. On the internal side, we have scaled dramatically. The products, the countries, the partners we represent; we have reached a scale not seen before in our model, We have built a very successful business that has earmarked NewBridge as a go-to partner for MENA , not only from a performance standpoint, but also in terms of compliance, regulatory, and governance.

On the external side, we started to see a fundamental shift in how global pharma companies think about their geographic footprint. The old theme was a global presence everywhere – companies

were effectively penalised by Wall Street if they were not in China or in emerging markets. Today, however, these companies are now focusing their resources on the strategic markets that are most critical to them – such as the US, the big five European markets, China, and Japan – and looking to trusted partners like NewBridge to continue delivering value to their portfolios and brands, and to reach patients in need across the rest of the world.

When these two forces converged, it created what I call an unstoppable momentum for us. We had reached the scale, the reputation, the performance, and the expertise precisely at the moment when the pharma market moved more in the direction of our model. The result has been very strong growth in partnerships, in value creation, in value delivering and NewBridge purpose successfully achieving over the past three years.

**What do you see as the key elements that have allowed the model to scale, and what continues to differentiate NewBridge to potential partners?**

The NewBridge model immediately addressed a very prominent need in the marketplace. When we established the company, we identified two clear gaps. On one side, there was a surge of innovation coming from small and medium-sized biotech companies that wanted to access the 400 million people in the MENA region but lacked the resources, the focus, or the desire to do it themselves.

On the other side, the markets themselves were not ready to absorb these companies on a pan-regional basis. The Distribution network at the time  were locally focused only , and the then prevailing model – signing 15 separate partnership agreements across 15 countries for a region that still represents a modest share of global pharma trade – was becoming gradually obsolete.

NewBridge was built to fill that gap. The name says it all: “New” for innovative products, “Bridge” to connect that innovation from west to east and close the access divide for patients across MENA. We created an above-country platform – one partner, one contract, one point of contact – that could cover the entire region while bringing the brand-building capabilities, medical affairs and regulatory expertise, all under a strong MNC discipline, governance and compliance frameworks That combination of pan-regional reach and Big Pharma-calibre skill sets was the missing link , and it immediately resonated by global pharma and biotech .

The reason the model has continued to scale is straightforward: the supply of innovation never stopped. Many biotech companies remain independent and still want to reach patients in markets

like ours, but they need a reliable platform to do it. NewBridge has become that platform: one that partners can trust to execute on their behalf, build their brands, and deliver their medicines to patients with significant unmet medical needs.

**As more regional partnership platforms for your region are emerging, what sets NewBridge apart?**

First, NewBridge is not a family business, and neither is it a subsidiary of a manufacturing conglomerate with other priorities. Licensing and commercialising innovative specialty pharmaceuticals is our sole focus.

Second, we did not cut corners. We brought in heavyweight institutional investors from the outset, because I understood that if you want to partner with the big players, you need to be able to match their expectations in terms of investment, people, and systems. Our partners demand performance and sophistication as well as experienced talent across regulatory, medical, market access, and commercial functions. Today we have over 330 people across our markets and the head office, which is a sizeable organisation relative to our footprint, and the calibre of the team is genuinely top notch.

We have built sophisticated capabilities in regulatory affairs, compliance, finance, and market access that allow us to operate more like an affiliate than a distributor. Many partners who have been with us for 14 or 15 years treat us as an extension of their own operations. We also have a unique geographic footprint: we are the only platform with a significant presence in North Africa, and no competitive model offer this footprint until now . Put all of that together – investment, talent, systems, footprint, and consistent delivery on brand-building – and the differentiation becomes clear.

**As NewBridge continues to scale, what will it take to successfully integrate increasingly large and complex portfolios?**

The honest answer is that our systems, processes, and policies have reached a point where they operate almost on autopilot. We have built an integrated infrastructure capable of absorbing complex structures and large portfolios – and that capacity has been stress-tested repeatedly over the years.

A recent example illustrates this well. We have integrated tens of teams across multiple countries and our head office, managing the knowledge transfer and onboarding that comes with bringing significant new portfolios into NewBridge. That requires sophisticated HR policies that in many ways mirror those of a large pharma company – covering compensation structures, incentives, onboarding, training, and compliance integration. It takes a village, but a disciplined and skilled one that we have built methodically over time.

To put the growth in perspective: not long ago in our history we made an attempt to absorb a business equal to our current size back then, we were not lucky to get it as the partner thought it is a big bite to chew. The contrast with where we are today could not be starker. Our most recent integrations have involved much bigger revenue stream and more complex operation to integrate, big products, entrenched distribution networks, large headcounts, and multi-country footprints. It was a successful integration and seamless onboarding. New portfolios now plugged into NewBridge and quickly became strong, self-sustaining revenue streams within the broader operation.

And the impact runs in both directions. Taking on large portfolios creates significant leverage for NewBridge across finances, scale and footprint. But perhaps equally important is what it signals reputationally: that we have the skill and the organisational maturity to absorb large, complex integrations successfully.

**How does managing such an extensive and diversified portfolio strengthen NewBridge's capabilities across medical affairs, market access, and stakeholder engagement?**

All integrations or portfolio additions strengthen our expertise, drawing talent from the incoming organisation as well as external hires. To put the growth in perspective: I ran Wyeth Pharmaceuticals across the region before Pfizer acquired us, NewBridge today is now fast approaching the peak revenue I reached there. That is remarkable for a company that was a startup little over a decade ago. And if you look at medical affairs alone, we have built what is probably one of the largest medical affairs functions in the region, maybe comparable to many established multinational companies.

The volume of science-driven products we handle, across the number of countries we operate in, demand heavy medical team involvement, which is today is probably five times the size of the equivalent team I managed at Wyeth. That is a significant investment – but it is exactly what our partners need. The medicines being brought to market today carry increasingly sophisticated science, and our partners need a regional organisation that can match that sophistication in

education, disease awareness, and clinical engagement.

**Many partnerships you have signed in recent years were in rare diseases – Kyowa Kirin, Agios, BioCryst, Pharming, and Hansa Biopharma among them. What has been driving this strategic focus, and what criteria guide your selection of new partners and disease areas?**

Our journey into rare diseases goes back close to ten years. Those early years were not without their challenges; we did not get everything right, and we learned a great deal along the way about what it truly takes to operate in this space. Slowly and deliberately, we built the capabilities and brought in the external expertise needed to navigate these new waters, and over time rare disease became a clear strategic priority for us, given the profound medical importance, the high disease burden in MENA, and the depth of unmet need across so many of these areas.

Our entry point was within therapeutic areas we already knew well. One of our earliest rare disease partnerships was in oncology, and the success we achieved there encouraged us to go further. Neuroscience followed – another area where we had strong existing relationships with the specialist community, which made it easier to find our footing. From there we began moving into areas of highly prevalent serious diseases of – a case in point, would be Thalassemia, and soon Sickle Cell through our partnership with Agios. These are conditions with enormous patient need, and Saudi Arabia in particular represents a critically important market for companies operating in these indications. The MENA region’s significance for rare disease partners is substantial, driven by well-documented factors including consanguinity rates and the resulting prevalence of certain genetic conditions across the population.

Each new partnership brought its own opportunities and challenges – not least the work of identifying patients and building the creative access solutions needed to reach them and support governments in addressing the treatment gap. Our most recent addition, a partnership with Madrigal on MASH, reflects both the severity of disease burden that condition carries in the GCC and our confidence in our ability to move quickly to bring meaningful treatment options to medical institutions across the region.

Beyond these headline partnerships, we also have a growing number of rare disease products within our metabolic specialty’s portfolio. These address conditions whose long-term sequelae and chronic burden on patients are often underappreciated, and we are equally committed to finding and delivering solutions in these areas.

**As increasingly sophisticated and high-cost rare disease therapies enter the region, what types of creative access and reimbursement models are becoming necessary across MENA, and how is NewBridge helping shape practical pathways to bring these therapies to patients?**

As increasingly sophisticated and high-cost rare disease therapies enter MENA, traditional reimbursement pathways are often insufficient, as healthcare systems were not designed for rare or even ultra-rare diseases with small patient populations, limited clinical evidence, and urgent treatment needs that do not align with government budget cycles. This requires flexible and pragmatic access solutions tailored to each market.

We're advancing one of firsts regional structured managed entry agreements and implementing innovative programs across multiple MENA markets to ensure patients receive treatment while reimbursement and funding mechanisms are being finalised. We use differentiated and innovative account-level contracts to balance affordability and sustainability.

Ultimately, there is no single access model that works across MENA; NewBridge's strength lies in understanding the unique needs of each payer and institution and in deploying the right solution to accelerate patient access while protecting the long-term sustainability of the healthcare system.

**As you think about the next chapter for NewBridge, where do you see the company focusing its efforts over the next two to three years?**

NewBridge is not going to change its skin anytime soon. Our path remains exactly what it has always been – licensing and commercialising innovative therapies across MENA – and our job now is to keep doing it better than anyone else.

I always tell my team: it takes a great deal to become number one in a field, but the harder challenge is staying there. This what drives us keep adding to our skills, strengthening our muscles, deepening our footprint, and delivering operational excellence as we bring new innovation and new partners into the portfolio. MENA is our core, our centre of excellence, and it must remain unassailable.

Beyond that, we are beginning to establish a presence in new markets, as we receive queries from some of our existing partners about whether NewBridge could extend its presence into adjacent

territories. We will continue to explore those possibilities carefully and without rushing. With strong growth capital behind us, expanding our footprint over time is a natural next step. The ambition is to replicate what we have built in MENA in new regions, slowly but surely.

The promise we make to our partners is simple: We deliver on your mandates. Keeping that promise, across every front, every year is our aspiration and obligation. But more importantly is to ensure these innovations reach the patients in need, and that is the most important part of this whole equation and the most fulfilling purpose in our journey.

**See more interviews**