Doria Oughlis – General Manager North West Africa, Lilly, Algeria



It is absolutely no coincidence that we have been working to shift the local offering away from a focus on some of our more conventional treatments like antibiotics into newly emerging therapeutic areas such as autoimmune disease

25.10.2018

Tags: Algeria, Lilly, Africa, Strategy

Doria Oughlis, Lilly's GM for North West Africa, outlines the company's historic presence in Algeria, current priorities and Lilly's overarching contribution to the health of the region.

Could you please start by describing Lilly's legacy in Algeria to date?

Lilly's presence in Algeria actually long predates the setting up of a local affiliate and representative office in 1996 as, since many years previously, we have been making our products available for use in the public health sector. Prior to having any employees on the ground, we had established longstanding contracts with the government for supply of medicines to the public hospital segment; so Algerian physicians have been familiar with the quality of our products for quite some time.

It's important not to underestimate Lilly's incredible impact on public health around the world during the company's 140 years of dedication to the development of innovative and life-changing, breakthrough medicine. We were, for example, the first company to manufacture insulin back in 1923, prior to which there had been no real treatment for diabetes. We are also proud to have been one of the first drug developers to pioneer the use of antibiotics. What remains unchanged, however, is our overarching mission to improve the lives of patients all around the world and to render our therapies as accessible as possible.

So what does the local portfolio look like today? Which are the key areas of focus?

Lilly enjoys a large and broad portfolio spanning a wide range of therapeutic areas, but undoubtedly, one of our primary target areas in the Algerian marketplace is diabetes. our key products in this category are Insulins. which having been the first analogue insulin worldwide. However, our contribution stretches far beyond just offering up products in diabetes, and we have simultaneously rolled out both digital and physical support and educational tools to help Algerian patients and their families manage the condition and live as normal a life as possible. Lilly strives to be much more than just a purveyor of medicines and is dedicated towards both supporting the patient care pathway and rendering our therapies as patient-centric as possible. To this effect, we have managed to set up a public-private partnership (PPP) directly with the Algerian ministry of health with a view to training up healthcare professionals and in facilitating diabetes management within the public health apparatus.

Our second big target area is oncology given Lilly’s strong pipeline in this field. As a company, we have been expanding the scope of our offering from areas like bronchial cancer to also deliver cutting-edge therapies fornew cancer types with significant medical need. We have been collaborating closely both with the oncology society and respective health authorities to ensure that Algerian patients gain access to these innovative treatments as soon possible. Our priority has been very much to scope in on those areas where there are considerable unmet needs and where we can provide a holistic package whereby we provide an innovative medicine that really delivers substantial clinical and societal added value, and also where we can truly support and optimize the management of daily life conditions.

Our third area of local focus is countering the onset of osteoporosis. Here we have a product in bone fracture that meets significant medical needs. We have been collaborating very closely with the authorities, HCP and particularly the PCH, to ensure that this drug is available in the public hospitals throughout the country.

In the light of Algeria’s rapid epidemiological transition towards non-communicative, lifestyle diseases such as diabetes and cancer, your portfolio would appear very well aligned to meet the needs of the moment. Do you agree with this assessment?

Most definitely. It is absolutely no coincidence that we have been working to shift the local offering away from a focus on some of our more conventional treatments like antibiotics into newly emerging therapeutic areas such as autoimmune disease. We have always made a point of adapting the local portfolio to mirror and reflect closely the local market requirements so that we are always contributing to the specific areas where we can deliver the highest impact. Diabetes and cancer are some of the most prevalent illnesses in Algeria right now so these have been our focal points. Meanwhile we always keep one eye trained on the future so as to be able to anticipate and prepare for the disease burden of tomorrow. Autoimmune disease is one of those areas that we strive to be heavily involved in the future, even though we don't yet have any products in this category on the market. We have also identified neuroscience and pain management as other areas of growing unmet need so will be closely monitoring those too and adapting accordingly.

The other way in which our portfolio is aligned to the moment is in the way in which we strive to make our products offer true value for money spent. Currently, the Algerian national economy is under a certain amount of stress related to the country's heavy reliance on hydrocarbons sales at a moment when the global price of oil has been flagging. This means that there is limited money available to spend and that the government has found itself compelled to tighten its belt. As a company, we are very sensitive to the needs of the state apparatus to make the national health system more financially sustainable. We therefore put much thought into bringing products to the market that can help take costs out of the system and achieve better pharmaco-economic performance. Our osteoporosis solution is actually a great example of this. The bottom line is we are offering smart solutions to present day problems.

What have been your priorities in the two and a half years you've had as Lilly's North West Africa cluster manager?

The mission that I have been given by my global management board essentially revolves around three axes. Firstly, my aim has been to continue to develop Lilly as a strategic partner in Algeria with a view to enhancing the overall patient experience and improving lives in a tangible and meaningful way. Much headway has been made on this front: notably the ongoing collaboration with the Ministry around optimizing the way that diabetes is managed, and our work alongside the PCH to ensure a smarter and more sustainable treatment of osteoporosis. Secondly, my objective has been to build an efficient and effective launchpad for the speedy introduction of new innovations into the Algerian marketplace. This remains very much a work in process but we have already managed to achieve an acceleration in our product launch timeframes. My third and final

important task relates to assembling a local team ready and able to execute the Lilly growth strategy for North West Africa with enthusiasm, excellence and high integrity.

Putting in place the right competencies and human resources for Lilly to deliver good on its aspirations has been one of the most intellectually stimulating parts of my job. Here in Algeria, Lilly is always looking ahead at the evolving needs and readying itself to move the dial to where we can realize the biggest impact. This means that we continually have to reevaluate our skill sets and capabilities and fill in any gaps. There is also a certain ethos within Lilly about focusing on the patient and the science and, as a manager, it is essential that my selection of new personnel takes into account whether people will be good brand ambassadors that project the Lilly core values of integrity, respect for people and Excellence.

If I reassess our performance over the past couple of years, I think it is fair to say that we have realized great progress both in terms of upgrading our quality processes, putting together the right team to get the job done and maturing the relationship with Health Care Professionnals and authorities to the point where we are already regarded as a long term strategic partner. It is important to understand that, here in Algeria, we have been a ‘scientific office’ as opposed to a purely commercial entity and therefore our performance is evaluated as much by our customer satisfaction scores and the profundity of our interactions with the ministry and public health apparatus, as by our revenue turnover.

Lilly globally is in the midst of a strategic restructuring and the early stages of a new growth period in the wake of Dave Ricks’ appointment at global CEO in January 2017. How have these changes trickled down to the local affiliate level?

I would say that the appointment of Dave Ricks confirmed a strategic willingness to invest in R&D and establish global and local partnerships while at the same time aggressively making the product pipeline and portfolio more broadly available. Africa is on Lilly’s priority list and that, not only do we obviously have to implement global partnerships locally, but that we also have the leeway and freedom to engage in local regional partnerships that fit with our strategy to meet the needs of patients.

These are exciting times for the North West Africa cluster. We are resolute in our ambition to put in place the requisite capacity to distribute cutting-edge biomedicines. This is no mean feat because, aside from market access considerations, even the delivery and distribution of sensitive biologics requires a certain special technical knowledge and infrastructure. One of the positive aspects of the

strategic restructuring is the reaffirmation that we will be getting the necessary resources and that we will be empowered to materialize this vision. Furthermore we will be looking to elevate our levels of localization of clinical research, which also coincides well with the global Lilly strategy of pivoting towards even greater R&D activity.

What is the strategic importance of the Algerian market relative to the rest of the North West Africa cluster and beyond?

Within Lilly, Algeria is considered to be especially strategic, both because of the immense scale of the market and the longstanding willingness of the authorities to support patient programs in the sorts of critical therapeutic areas where we are most active: namely oncology and diabetes for both of which there are dedicated nationwide plans. What also makes Algeria attractive is the local knowledge base and indigenous levels of expertise. At the end of the day, Algeria has been blessed with a certain scientific and academic base modeled on the manyInternational education systems, which means that the aptitude of practitioners and pharmacists is actually rather good. Moreover even patient societies tend to be more active and better established. All of this lends itself rather well to our ambition of evermore localization of clinical research. Here we are able to source the right people to carry out these sorts of tasks.

Algeria has not always been considered the obvious location for situating a regional office, but while a multitude of administrative and logistical complications remain, the argument for doing so is evermore apparent. Firstly, the market is growing at a frenetic pace, which is not the case in either Morocco or Tunisia or even much of Europe for that matter. As soon as you start to factor in the rapid population growth and the epidemiological shift, then the envelope of opportunity to get involved with this market is immense. Regulatory reform, of course, has not been evolving at a commensurate pace, but we nevertheless do identify willingness on the past of the authorities to proceed with structural adjustments and enter into public private partnerships that reconfigure public health provision. In that sense, Algeria is very much open for business. The fact is that we don’t have PPPs on issues like patient and practitioner education in the other North West Africa cluster states and it is testament to the vision of the Algerian ministry of health that we are able to roll out such programs here.

Finally, one very much gets the sense that Algeria is gearing up to become a regional role model for life sciences. If you look at initiatives underway to base a Pan-African Regulatory Agency out of Algeria, you get the impression that the country seeks to step out of the shadow and become more

of a life sciences leader and first mover. Already the local market stands out for the diversity of global, regional and local indigenous operators present. In certain respects we have the characteristics of a mature market, such as the existence of a universal health apparatus, whereas in other aspects, such as our level of access to innovation, we look much more like an emerging market. The reality is that Algeria is somewhere in between and that means you really need to adapt your local portfolio and business model accordingly. The “one-size fits all” template simply won’t work here.

A few years ago, there was quite a bit of noise in the local media about the possibility of Lilly setting up a local antibiotics manufacturing plant. Do you have any plans for establishing a local manufacturing footprint?

To be honest, the direction of Lilly in North West Africa has changed quite a lot since then. We see our role much more in introducing cutting-edge biotech therapies rather than antibiotics. These latest-generation medicines are generally highly complex to manufacture to the point where Lilly will usually possess only one production facility globally, most often in the US, and a backup for each product category simply because of the sheer complexity of the task at hand. I think the Algerian government understands this. While there remains a vision on the part of the authorities to build up homegrown biologics and biosimilars competencies, there is also a lot more realism, these days, about the length of time that will be needed to materialize this ambition. The initial 2020 biotech hub strategy presented by the Ministry in conjunction with PhRMA, now seems to have given way to more realistic, incremental goals and a decidedly more realistic timeframe. Lilly, of course, will be ready to play its own part in this process, as and when the time comes.

Successive Algerian governments have been staunch advocates of import-substitution and have been explicitly encouraging local production. Nevertheless, Lilly was not really impacted by the recent import restrictions, because the aim was to restrict substitutable molecules that could better and more affordably be manufactured locally, whereas the type of therapies we are bringing into the country are currently too complex to produce in Algeria yet nonetheless respond to areas where there are already uncontestably big patient needs.

For the moment, we want to focus on localizing when applicable clinical research, which means ramping up our activity around clinical trials. We identify Algerian clinical trial infrastructure to be comparatively good and have already been conducting a number of diabetes-related studies. We seek to be proactive in working alongside both the ministry and the industry to render Algeria even

more attractive as a clinical trials destination.

Where do you see your main challenges in Algeria?

Market access takes up a lot of our time and attention. The reference pricing rules stipulate that product prices must be at least 10% below that of European markets, which can present quite a barrier to launching new products. It is a delicate balancing act to simultaneously achieve your goals for increasing accessibility of your therapies and hitting revenue to continue to support R&D. As a manager, it is essential that I am able to understand and respond to the expectations for three sets of stakeholders: my company, the market and the Algerian state.

Nevertheless, progress is clearly being made. Lilly understands the need to adapt to local conditions and come up with creative solutions whether that be risk sharing, performance related agreements, price-volume deals or any other appropriate mechanism. Every time we introduce a new molecule we provide both the clinical and pharmaco-economic evidence. We are now working both as a company and industry to help the authorities put in place the necessary supporting infrastructure to make proper value judgments. Much of that will entail collecting data and being able to process it correctly. Under the auspices of the National Cancer Plan, we have been working hard alongside the Society of oncology to ensure new cancer clinics are connected to a national reference centre allowing for the compilation, exchange and sharing of data all of which will be a precondition of implementing robust HTA methodologies.

Meanwhile the authorities have demonstrated their intent to streamline and simplify the drug approvals and registration process through the implementation of reforms such as the establishment of a national drug agency. The hope is that this agency can eventually become a “one-stop-shop.”

Looking forwards do you have any concluding remarks for our international readers?

Quite frankly, I am excited about the future and confident about our ability to launch game-changing therapies in Algeria that will dramatically transform for the better the lives of many citizens. Lilly is proud and enthusiastic to be a lead protagonist, right at the forefront of this emerging health paradigm for Algeria and North West Africa.

See more interviews