Niels Abel Bonde – Managing Director, Novo Nordisk Sweden



[Sweden] presents the ideal environment to run pilot launches for innovations thanks to its advanced and highly digitalized healthcare syste

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Niels Abel Bonde, general manager of Novo Nordisk Sweden, explains the strategic significance of the Swedish market as an innovation-driven environment ideal to run pilot launches and real-world studies. He also breaks down the performance of the affiliate in its main therapeutic areas, as well as the positives and negatives regarding market access in Sweden.

Even though Novo Nordisk is headquartered in neighbouring Denmark, on the other side of the bridge, what role does Sweden play in the global strategy of the group?

Novo Nordisk has a long-standing presence in Sweden. In diabetes, the main driver of the group's performance, we enjoy a high market share and distribute the entire portfolio, something quite unique in Europe where market access has proven challenging in certain countries.

Even though Sweden is a mid-sized market, the country remains strategic for the group as it presents the ideal environment to run pilot launches for innovations thanks to its advanced and highly digitalized healthcare system. For instance, we were the first affiliate to launch Novo Nordisk's durable *smart insulin pen* which automatically records when and how much insulin was injected and is equipped with Near Field Communication technology to move the data off the pen and to another device. In the Swedish pilot, the pens were downloaded in the healthcare provider's office using a kiosk with the goal to improve the conversation between the diabetes patient and the

healthcare provider, combining insulin data with glucose data. The pilot shows improved care in terms of reduced blood sugar control.

In addition, Sweden presents another strategic asset, namely its unique quality registries. We run many real-world studies based on data from the quality registries in order to prove the value of the products we launch on the market and show they can deliver what the clinical trials promised. This we have done in a collaboration with Swedish Authorities (TLV).

The headquarters definitely recognize the value the Swedish affiliate can bring to the overall group by leveraging these assets.

What have been your strategic priorities since taking over in 2017?

My priority is to grow the affiliate in terms of having more patients in treatment with Novo Nordisk products. While historically we have been growing at an average annual growth of about six to seven percent, we are now experiencing double-digit growth. This performance is driven by the introduction of our innovative diabetes & hemophilia products that have been included in the regional guidelines for diabetes care. Our latest launch was Ozempic® (semaglutide) for the treatment of type 2 diabetes, a very strong product experiencing rapid uptake in Sweden resulting in improved diabetes care.

In general, Sweden is an attractive market to operate in right now with many therapeutic areas experiencing growth thanks to investments in innovative medicines.

According to a report by the Swedish Institute of Health Economics, the societal costs of Type 2 diabetes in Sweden are high and are projected to rise to SEK 21 billion in 2030. How does Novo Nordisk's innovative solutions help alleviate the burden of diabetes on society?

The pharmaceutical industry is sometimes seen as part of the problem and is blamed for driving up costs. However, our whole approach is to be part of the solution, not the problem. We do this by engaging in dialogue with the key stakeholders on how we can improve diabetes care together. Novo Nordisk offers innovative solutions, but if they are not used in the right way to treat the right patients then we become part of the problem. Thus, we must support primary care centres in providing better quality treatment and improving diabetes care. When we talk with the

management of primary care centres about their challenges in diabetes care, the conversation rarely revolves around products and is often about education and structured patient care to achieve an efficient clinic that achieves the results that is required. As a result, we are increasingly providing education to lift different capabilities.

Novo Nordisk is committed to treating obesity not just as a lifestyle issue but as a medical issue involving a combination of genetic, behavioural and socioeconomic factors. Do you feel this perception is shared by Swedish society and its healthcare professionals?

I think this perception is shared to some extent. In Sweden, bariatric surgery is an integrated part of treatment for obesity and is routinely performed on obese patients, more so than in many other countries historically. However, pharmaceuticals have not yet been accepted as a part of the standard of care. Nevertheless, things are starting to change. There is an increasing realization that treating obesity needs a holistic approach and that surgery is not the only medical solution. We need a clear basis in terms of priority in healthcare and also guidelines including improved knowledge.

Along with diabetes and obesity, Novo Nordisk is also committed to introducing innovative haemophilia treatments. NovoEight® was introduced in Sweden last year through a three-party agreement, and Esperoct® recently received positive opinion by the EMA. How advanced is the Swedish affiliate with regards to the roll-out of the haemophilia franchise?

Novo Nordisk Sweden has taken a huge step forward in haemophilia. Before signing the three-party agreement with the regions and TLV for NovoEight®, we were only a small player with a market share of a few percentage points. As we had a lot to offer and a lot to gain, we chose to enter the three-party agreement proactively and break into the market at a competitive price point in order to make the product available to as many patients as possible. In two of the three main regions, we are now close to being market leaders with NovoEight® in terms of the number of patients treated. We currently have a market share of about ten to twelve percent. The success of NovoEight® can also be attributed to its many benefits. It is designed for portability with features allowing patients to treat on-the-go. For instance, it is the only Factor VIII with stability up to 40°C for up to three months, which means patients have more storage flexibility and travel options. We have also

launched Refixia® in Sweden making this innovation available to Swedish patients. So all in all, we have managed to achieve a clear strengthening of our position in haemophilia.

Sweden is known to have a rather difficult market access environment due to its regionalized healthcare system. How has this impacted Novo Nordisk's business?

There are two sides of the coin. The strength of Sweden's regulatory process lies in its transparent value-based system. Historically, this system has made it possible to predict with a high degree of certainty whether a product will be reimbursed at the national level by the TLV. The process is clear and decisions are relatively fast. In our case, all of our diabetes products are approved and reimbursed by the TLV, some of them with limitations which is impacting the benefit we are able to provide to patients, for instance with our long-acting insulin. In recent years, however, there are increasing price pressures and barriers to market access. In addition, on the regional level, each of the 21 regions has its own list of recommended products which is simply not efficient.

Besides its advanced healthcare system and quality registries, what other assets does Sweden boast?

I would say one of Sweden's greatest asset is its incredible innovation landscape with world-class academic institutions such as Lund University, Gothenburg University and the Karolinska Institutet in Stockholm. The Novo Nordisk group collaborates extensively with these innovation hubs on basic research. For instance, Novo Nordisk is working with Lund University on the development of stem cell-based treatment for Alzheimer's disease.

Globally, Novo Nordisk tries to base decisions on the seven guiding principles of the Novo Nordisk Way based on the Triple Bottom Line concept. At the local level, how does the affiliate strive to implement this philosophy?

The Novo Nordisk Way is embedded in everything we do and is a natural way of working at Novo Nordisk. It means being open, transparent, honest, but most important of all being patient-centric. We need to remind ourselves every day that we come to work to give patients a better life. Business derives from helping patients, and not the other way around.

What are your top priorities for Novo Nordisk Sweden over the next few years?

The next step will be the launch of the first orally available GLP-1 which is close to receiving approval. As injection remains a barrier for use for same patients, it has a huge potential for growth and expanding the use of GLP-1 in diabetes care in Sweden. In Sweden, we see a strong focus on improving diabetes care which is fueling the introduction and use of innovative diabetes treatments. As a result, it is the perfect time to launch a tablet formulation, and Sweden will hopefully be one of the first countries where we launch it. More generally, I want to continue being at the forefront of how a pharma affiliate should operate in the future.

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