Bertrand Duquesne – Managing Director, Boiron Belgium



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Bertrand Duquesne, managing director of Boiron Belgium, elaborates on the challenges being faced by homeopathy manufacturers in western Europe and explains how the company and its peers are create dialogue about these products in the country with the newly formed Homeopathy Belgium Industry Association.

Please begin with an introduction to the scope and scale of Boiron operations in the Belgian market.

Boiron is the market leader of homeopathic products in Belgium. The Belgian affiliate is the fifth largest business unit in terms of turnover for the overall group. If we compare this figure to the population of the country the affiliate is second by proportion just after France. As a French company, it is logical that most of our business comes from the French-speaking Wallonia region of Belgium – 60 percent of our business comes from this region and 40 percent from Flanders.

Branded products represent 65 percent of our business with 35 percent being unbranded. Arnica in muscular pain relief is our flagship product which drives the growth of the affiliate as we continuously introduce new indications and dosage forms. Overall, we have a similar portfolio to France but in the upcoming years, we are aiming to launch new products in the market.

What has been your experience with the market access conditions of Belgium for homeopathic products?

Market access is a challenge because all of Boiron’s products are medicines, therefore we must follow all authorization procedures just like pharmaceuticals. The market authorization timeline in Belgium is quite long and to add to the complexity there are two types of authorizations for homeopathic products. There is also a difference between products which have been introduced before 2003 and those introduced after. For products launched before 2003, they have notification until 2025 and have to be authorized before the end of that year. Products introduced after 2003 must first go through a full authorization process before being launched. Homeopathic medicines were new to the agency (FAHMP) in 2003 and they only had a few people working in this area. We collaborated with FAHMP to define a product authorization calendar to help both parties to better prepare in advance

How would you describe the local homeopathy market in Belgium today?

We see that the homeopathy market is growing as the demand for natural treatments rises. In 2017, 44 percent of the Belgian population had already tried homeopathic medicines compared to 40 percent in 2011. So nearly one in two Belgians have already used these products today.

Homeopathic manufactures are coming under scrutiny in mature markets such as France and Belgium as we see with the halt of reimbursement for these products by the French HAS and Flanders Christian Mutuality. What kind of challenges is this creating for the affiliate locally?

This is a challenge for Belgium as 40 percent of the population is French-speaking and are often paying attention to what happens in France. Therefore, this decision also damages our reputation and capacity to do business in Belgium. We must keep an open conversation with our French business to monitor the situation and assess how we will shape our market strategy moving forward.

What steps are you taking to overcome these hurdles in the market?

Last year we created the Homeopathy Belgium Industry Association to promote the agenda of the sector and address collective challenges We have created a memorandum to draw the attention of the authorities to four major challenges we face in the market and also educate about what homeopathy entails.

The first priority is to provide accurate and objective information about homeopathy, improve patient access to this information to correct false information circulating on homeopathy. We also aim to help the government and authorities in setting up information and awareness campaigns on homeopathic medicines and promote their initiatives in this direction.

Second, the association wants to ensure the patient’s freedom of therapeutic choice and maintain the possibility of reimbursing homeopathic medicines via complementary insurance. We will encourage dialogue between various stakeholders, mutual societies and political decision-makers, in particular with regard to reimbursement. To support the sector, we will be available to political decision-makers and mutual funds to inform about homeopathic treatments.

Third, there must be a basic and continuous offer in quality training to health professionals that is in line with the legal framework surrounding homeopathic medicines. For example, compulsory, standardized, and objective university training in homeopathy for pharmacists, as a priority, as well as for doctors. Political support to implement this standardization is necessary to provide universities correct and objective information on homeopathy and homeopathic medicines. Each country has its own regulations on how to manage the education of homeopathy and in Belgium, there is no program to educate medical professionals even though all doctors can prescribe these products.

Fourth, we aim to raise the awareness that homeopathy is a way to meet the public health and budgetary challenges in Belgium by encouraging the political world and the authorities to conduct studies in Belgium in order to quantify and objectify the effects of homeopathy on public health and on the allocation of the health budget. For example, the use of homeopathic treatments can play an essential role in reducing the use of antibiotics and therefore reduce the issue of anti-microbial resistance. It is essential to make the latest data available to political decision-makers and support them in the conduct of studies.

How are homeopathic medicines created by Boiron complementary to the traditional pharmaceutical therapies in the treatment of patients?

If we take the example of oncology, there are several hospitals that have consultations in integrative oncology, including the use of homeopathy. Homeopathy can be complementary to traditional treatments just like other integrative therapies like dietary measures. This is not as a treatment or replacement, but to support patients in maintaining their health and enhancing recovery. However, homeopathy can be used in first-line treatments for other problems like colds for example.

How does Boiron ensure the quality and demonstrate the value of its products?

In 1992 the Council of the European Communities passed a directive to address this issue and ensure the quality and safety of these products. For Boiron, we use GMP standards of production just like any other pharmaceutical. Our products are medicines and therefore we take all the same steps to develop, manufacture, and register just like other industry players.

How do you create the agility in your organization that is necessary to compete in the OTC market?

Particularly within the last three years, we have had a lot of dynamism in the affiliate by changing our commercial activities and structure to have our team connected with all stakeholders, both physician and pharmacist- facing, to raise awareness and help educate and train these professionals in the use of homeopathy. We are in a complex time and we do not know what exactly to expect in the coming years. I expect a major change in the market and as a pharmacist myself, I understand the changing needs as there is an increasing role that pharmacists play in the continuum of care beyond just delivering prescriptions. Moreover, Belgium’s reimbursement system is structured so that pharmacists are incentivized to sell more drugs, which is very unsustainable. This must be addressed but will consequently impact the industry as fewer products will be sold.

We are not sure what the future will hold, but we must remain flexible and dynamic. We are even considering new business models for Boiron Belgium which can be implemented within the next three years.

Any final message you would like to deliver on behalf of Boiron?

I think public health issues concern everyone. Boiron, as a key player in homeopathy, has its place in medicine; a practice that has to become more and more evidence-based”. The focus must be on fostering a multidisciplinary approach, based on scientific literature and clinical expertise, taking into account the patient’s individuality.

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