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Karita Bekkemellem of Norwegian pharma association LMI highlights her work building up the profile of the industry in Norway, the market access and pricing challenges facing her member companies, and the country's enduring potential as a leading clinical trial destination.

You started your career in politics but became managing director of the LMI in 2009. What motivated you to make the move into representing the interests of Norway's pharmaceutical industry?

I was first elected to be a member of the Norwegian parliament when I was just 24 years old and served five terms as an MP for the Norwegian Labour Party, between 1989 and 2009. I was also leader of the Party's Women's network, and of course, a minister on two occasions, as Minister of Children and Families as well as Minister of Children and Equality.

I was recruited as managing director of the LMI in 2008, a year before I was able to actually start the job. I think the organisation wanted a leader that would act and increase the visibility of the industry. I used the time before starting to meet with some of the big companies and develop my understanding of Norwegian pharma; an industry that I had previously had very little interaction with.

After many years working in politics, this move represented an exciting new challenge. I have become a passionate advocate for Norway's pharmaceutical industry and, at the same time, very

focused on ensuring that Norwegian patients receive the highest quality treatment. I have always stood up for what I believe in and spoke up, too, and this new cause gave me something new to fight for.

My role at LMI has provided new leadership opportunities and allowed me to build broad and long-lasting partnerships between the pharmaceutical industry and the public sector. From the very beginning, it was important that we built bridges, because when I started, Norway's pharmaceutical industry was small and struggled with old prejudice. It was therefore always vital for LMI to be very strategic in our work. The Norwegian government is now increasingly focusing on policies that will allow Norway's pharmaceutical industry to excel— which will benefit the industry and patients.

During my early years at LMI, I used a picture of how the industry at that point was like a lonely child sitting alone in a sandpit. However, through diligent and long-term thinking, and building bridges and trust with stakeholders, we have established a close partnership with patient organisations and several new modes of collaborative working. Today, we are actively collaborating with multitudes of organisations and stakeholders, proving that we have come a long way. Now that lonely child in the sandpit has many friends to play with!

LMI is the umbrella association for Norway's pharmaceutical industry. What is the status of the pharma industry within Norway and what are the key items currently at the top of LMI's agenda?

The Norwegian government's White Paper on the Health Industry is a key item on our agenda. Going forward, LMI is committed to assisting the government in its efforts to build up Norway's healthcare industry and to develop the Norwegian national healthcare service.

At the start of 2020, our board of directors asked us to focus on three main issues: market access, the development of the Norwegian healthcare industry, and preparation ahead of Norway's upcoming 2021 general elections. The COVID-19 pandemic has not changed this agenda, but it has brought forward new challenges and opportunities and changed the way that we work.

Our industry is facing several significant challenges including the collaboration between healthcare professionals and the pharmaceutical industry, medicine pricing, and the access and use of real-world data (RWD). It is critically important that we can access and utilise RWD, as it enables great opportunities for a more efficient and improved healthcare service for patients as well as for

industry development.

What market access and pricing challenges are your members currently facing?

We need a new and improved dialogue on how we can utilise health data to everyone’s benefit in the regulatory processes. The Norwegian decision-makers have recently opened to include new price and payment solutions, which is an important step in the direction to modernise and adapt to future treatments.

We are working through our committees to provide input and to be a constructive partner in this process.

Our aim is to be a constructive partner and build trust because there is still a perception amongst some that pharmaceutical companies are seeking to take advantage of the Norwegian healthcare system.

Like with the rest of the world, the COVID-19 pandemic has also posed serious problems for Norway’s health department and its budgets. The Norwegian government’s spread prevention strategy has put the finance department under serious pressure. The sums are phenomenal, which means that —naturally — at some point, public spending will be impacted. I have emphasised and been fundamentally clear, that we need to respect what the authorities are facing right now, and what they must deal with. It is consequently imperative that we, as an industry, must display how we can help and contribute to society. And we have, at least so far, come out of it with improved trust and credibility.

LMI has also been seeking to engage with different types of stakeholders such as patient organisations in the fight against COVID-19 and we have been seeking out new ways of collaborating with these stakeholders. A lot of the time, we have the same interests and the same end-goals.

Norway has great potential as a clinical trials destination, with an advanced hospital infrastructure, good levels of clinicians, and a strong footprint in terms of electronic health record data and biobanks. Yet the number of clinical trials is falling. What is LMI doing to prevent this decline?

The Norwegian government gives Norwegian hospitals nearly NOK 20 million (EUR 1.79 million) each year to spend on clinical trials. LMI has been working closely with hospitals to demonstrate ways through which hospitals can spend this money effectively and show how clinical trials can lead to earlier patient access to innovative medicines. It is vital that we build partnerships between hospitals and the pharmaceutical industry, to make sure that hospitals and pharmaceutical companies trust each other and that they can work together productively. LMI has also been working closely with specialist doctors, as we believe it is important to build trust between specialist doctors and the pharmaceutical industry.

It is important for us to demonstrate the successes of Norway's own pharmaceutical industry to stakeholders and politicians. Our gold is in our companies and we need to display more proudly how much these companies can invest and what they can bring to healthcare in Norway. It is only through improved public-private partnerships and pilots that we can establish foundations upon which to build a stronger healthcare industry in Norway.

LMI represents the entire life sciences spectrum, from the affiliates of multibillion-dollar Big Pharma companies to up-and-coming local biotechs. What are the challenges of bringing such a diverse set of companies together?

This diverse membership portfolio did not exist when I started at LMI, but it was a key part of my strategy to build a more powerful and unified industry.

LMI has managed to provide a new platform through which smaller companies are able to meet larger companies and vice versa. We offer an opportunity for the large international corporations to meet the small Norwegian clusters, or small university spin-off companies. There is a lot of exciting innovation happening in Norway's start-up companies. This innovation is useful for us, in demonstrating to stakeholders the potential the pharmaceutical industry holds for patients and for Norway.

Norway has a population of only five million, but has a landmass bigger than the UK, Poland, and Germany. Digital tools have played a vital role in the pharmaceutical industry's efforts to navigate this geography. Can you outline some of the ways in which digital tools are being utilised in the pharma industry in Norway?

LMI is constantly campaigning for the increased introduction of new technologies. Norway's healthcare system needs to start using new technologies that increase efficiency and productivity. However, the uptake of new technologies takes time and involves a lot of different stakeholders. It is estimated that just in terms of employment in the specialist healthcare service in Norway alone, we will require approximately 200.000 new employees before 2060. This is not sustainable. It is therefore essential that new technologies and new treatments can relieve some of today's workload.

The government now believe that these technologies will play a fundamental role in ensuring the sustainability of Norway's healthcare system in the future. Recently, the Norwegian health committee's National Health and Hospital plan called for increased use of new technologies, in line with LMI's messaging. There is also a majority within the government that is advocating for use of personalised medicine and RWD in Norway's national healthcare system.

We at LMI, are currently collaborating to establish a 'one-stop-shop' point for faster and more connected access to Norwegian data. Several stakeholders are now more open to, and more familiar with, the concept of a 'one-stop' data access point than even just a few years ago.

2021 is an election year for Norway and, as always, healthcare is high on the agenda. What key topics does the Norwegian pharma industry want to discuss with whoever wins?

Market access is at the top of our agenda along with continuing to develop a stronger domestic health industry. Norway is a wealthy country, but this is not an issue that money alone can solve. We must all take more responsibility to deliver medicines to patients. Above all, we all want patients to benefit.

Norway's pharmaceutical industry also wants to increase domestic production. We want the entirety of Norway's healthcare industry to be in a stronger position – not just the country's pharmaceutical industry, and the potential to produce more products in Norway is there. Trends towards localisation in response to the coronavirus may see increased domestic production inside Norway.

The pharmaceutical industry offers Norway a key to future growth and offers the solutions to many of the pressing problems facing society today, such as a vaccine for COVID-19. We need to use our capabilities in an intelligent way and share this message more widely.

Having been with the LMI for 11 years, what have been your proudest achievements?

When I first started in my position at LMI 11 years ago, I began working to build partnerships between the pharmaceutical industry and other stakeholders such as universities, research centres, non-profits, patient organisations, politicians, clinicians and hospitals. I am very proud of this work. I believe that if these partnerships had not been formed, the government white papers, which have changed politics for the Norwegian pharmaceutical industry, would not have been put into action.

Building trust so that we are in a better position to introduce important new innovations to Norwegian patients is essential and still ongoing. This is something we want to continue to build upon with greater numbers of clinical trials more public-private partnerships and pilots that can build a stronger health industry and, most importantly, provide patients with new, innovative treatments.

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