Samy Khalil – Country Head, Takeda Egypt



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08.09.2022

Tags: Egypt, Takeda, MEA, Strategy, Access

Takeda Egypt's Samy Khalil gives an overview of the company's presence in the country and the fundamentals behind its double-digit growth there, provides his view of the healthcare transformation of the country – both achievements and challenges – and explains why Egypt was added to Takeda's Access Markets cluster.

This is your first time leading a Big Pharma affiliate, but you have spent years working in the industry. Can you give us a quick snapshot of your career?

Soon after earning my pharmacy degree from Cairo University, I joined the pharmaceutical industry. Since then, I have overseen regional marketing and commercial operations for various multinational companies. While I was always based in Egypt, my experience in the Middle East has taught me how to navigate challenging markets. In fact, I was responsible for Libya, Yemen, and Sudan during the Arab spring (in a previous role).

I joined Takeda six years ago to establish the specialty care business as the company had just launched its oncology portfolio. I became country head three years ago. If I reflect on my time in pharma in Egypt, I recognize that there are many things that are uncontrollable, so one must learn to focus on what can be controlled.

What are some of the things you can and cannot control?

You can control your responses, your emotions, your way of thinking, your values as well as your degree of focus. If you truly believe that what you do benefits patients – and this is a common one – then you can overcome challenges.

Examples of things that cannot be controlled are economic setbacks, devaluation, and instability. Our role is to get innovative in developing breakthroughs and making them accessible for those who need it.

Your colleague from Takeda Middle East, Rodrigo Rodriguez, told us that the company celebrated 240 years in 2021 (25 years in the Middle East) and Egypt is now part of the Access Markets cluster. Can you explain the reasoning behind putting Egypt in that group?

Being part of an organization with such a rich history is amazing. Takeda started operating in Egypt in 2004.

Building on our 240-year history, we all embrace the company's values and make decisions that are beneficial to our patients, co-workers, and society as a whole.

Improving access for a big country that is going through an ambitious healthcare reform requires a unique strategy. We made sure to align our operations with the country's vision to improve its healthcare system's accessibility. Egypt is the second largest market in the Middle East and Africa (MEA) region after Saudi Arabia, and the fastest growing market, but its landscape is very different than what we see in Saudi Arabia or the United Arab Emirates.

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How do you evaluate the transformation of healthcare in Egypt as the country moves toward its 2030 vision and offering coverage for the entire population?

Overall, Egypt's health indicators have improved significantly, with a health profile that is increasingly comparable to developed countries. Some of the prominent successful initiatives include the progress made on the health-related Millennium Development Goals.

Today, we must celebrate the will to transform, to cover 100 million people. If we look at the universal healthcare law that kicked off the country's effort, we can see that the government chose to partner and listen to the private sector, seeing it as a key ally.

The law states that it will cover all Egyptians from all diseases. That is something incredibly difficult. What we have seen so far is that the authorities have chosen a very scientifically driven process. Their approach has been to distribute responsibilities across different agencies to provide clarity for all stakeholders. We now have the Egyptian Drug Authority (EDA) and the Egyptian Authority for Unified Procurement, Medical Supply, and Technology Management (UPA), which means a separation of duties.

The universal healthcare program started with pilot programs in different governorates with the idea of starting small before rolling out in the entire country. The progress so far is positive, things are moving at a steady pace and according to plan. They are up to date with the timeline.

Moreover, they have introduced programs to measure customer satisfaction in the interaction with medical facilities. According to recent data from the Ministry of Health, **97 percent** of July's Universal Health insurance beneficiaries' complaints have been resolved.

What does Takeda's portfolio in the country look like and what is the plan to secure access to your therapies in Egypt?

Takeda globally is focusing on six therapeutic areas: oncology, rare disease, vaccines, plasma-derived therapies (PDT), gastroenterology and neuroscience.

In Egypt, we currently focus on oncology, gastroenterology, rare diseases, and plasma-derived therapies (PDT).

Our approach to access revolves around ensuring timely delivery of our products to patients who need it. If you have an innovative product, you should not wait years to bring it to low- and middle-income countries; the plan is to have them here from the start. How can we do this? Either through our own internal programs or by so-called bridge agreements until we can get full reimbursement.

Looking at the Egyptian pharma market before the transformation, 70 percent is out-of-pocket and only 30 percent reimbursed. The goal for the future is to overturn this and get everyone under the umbrella of universal health insurance. This will, of course, not happen within a day. You will always have a portion of the population that will have to opt for out-of-pocket, and Takeda wants to

tackle that along with its partners. There are NGOs and other players that want to support patients in Egypt, not only the government. In this regard, we are proud of local programs, Takeda Patient Assistance Programs (TPAP), where we support patients within our therapy areas using an innovative tailor-made approach. On the other side, we need to support the system as it tries to help rare disease patients.

As part of our commitment to equitable healthcare, partnerships are vital to delivering high-cost drugs to patients that cannot otherwise afford them. At Takeda, we believe that we all have the right to life-saving treatments – and should not be determined by where we live.

Do you expect Takeda Egypt to grow commercially in the next few years?

While commercial operations are key, at Takeda, we measure our success based on how much we can facilitate access, which means that our main goal is to grow our number of patients, not only our revenue. Thankfully, we are growing, and our business is on solid ground.

One of the most noticeable things about Egypt's progress in recent years has been the heavy investment in roads and highways. Has the investment in healthcare infrastructure followed that trend?

I see that the investment in healthcare infrastructure is indeed keeping up with what is being made in other areas. And, again, I am referring to the thinking itself because we have a dedicated entity that is responsible for providing international accreditations to hospitals. Any hospital or clinic, public or private, should receive accreditation from that body to participate in the universal healthcare program, which means that all of them will follow international standards.

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