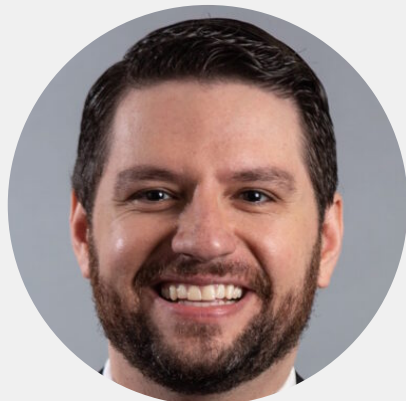


Rodrigo Rodriguez - Area Head UMEA, Takeda



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Rodrigo Rodriguez, as area head for UMEA at Takeda, leads a vast and varied region that includes Ukraine, the Middle East and Africa and is characterised by what he calls "geographical and economic volatility," with an extreme example being the conflict in Ukraine. He discusses the challenges presented by the conflict as well as much of the region's commitment to innovation as witnessed through fast track registrations in the UAE and other GCC countries, and the impact of digitalisation.

What have you seen as the major trends affecting your region over the last few years?

Digitalisation is a concept and idea that keeps on growing stronger and we are looking to use the data we generate to build cases for key stakeholders. It has also shaped the way we face the world in our daily operations as there is no need to come into the office every day. And Takeda is proud to have implemented a hybrid business model for its employees while encouraging them to interact and solve problems with colleagues rather than just sitting in front of a computer.

We also have seen some changes during and post COVID. The need for a strong and sustainable healthcare system is more evident than ever and we must as a contributor collaborate with key stakeholders within the healthcare ecosystem to help build it. The financial strains placed on governments during COVID due to the challenge of budget management and optimization were clear to see, and a new approach is needed. Saying that, investment is not a one size fits all

approach. Some markets require investments into better technology, some infrastructure, and others capability building, while within this, the roles and responsibilities vary for pharmaceutical companies, the scientific community, and the government.

How successful has Takeda been over the last two years within the region you control?

We faced some ups and downs which is normal, especially during the COVID and post-COVID period and our demands have shifted as the value given to innovation in the region has changed. The number of patients getting access to our innovative solutions is a lot higher, which could be considered as a good indicator of success.

You recently took up a new position, could you tell us more about it and how you manage these new dynamics?

I just took up the role as the Area Head of UMEA, which encompasses Ukraine, the Middle East and Africa. This region is extremely vibrant with varying economies and extraordinarily rich cultures. Some markets are developing, others are developed, and we have a mix of private and public systems. We have witnessed that stakeholders in the territory are open to discussions and partnerships, and we must adopt a localised strategy within each market that helps the healthcare systems and at the end of the day benefit patients.

What are your current priorities as the Area Head of UMEA?

In Takeda we believe in our PTRB values, reflecting Patient, Trust, Reputation and Business in that order. Therefore, our key priority is to bring and accelerate access to innovative medicines in the region in a sustainable manner. It is also important, to establish trust-based partnerships as we cannot succeed alone, and we must collaborate with different stakeholders throughout the healthcare ecosystem by reinforcing our reputation within the industry. Finally, and as a backbone to our strategy, we need to invest in our people and ensure their development as well as the company culture. If we are able to create an inclusive and exceptional workspace, we will harness the potential of our fantastic employees.

What is the situation for Takeda in Ukraine at this moment?

One characteristic of the region is the geographical and economic volatility, and obviously the situation with the war in Ukraine is an extreme of that. Our main priority is to make sure patients on Takeda medications are still getting access to the products, therefore, maintaining a strong supply chain is key. Furthermore, we must ensure our staff there are looked after physically and mentally.

On the government level, we are collaborating closely, and they have been receptive to new technologies, even recently signing a new agreement with Takeda. We were one of the first companies to deliver treatments during the war and we will continue to operate there despite the challenges that the country is facing.

Given Takeda's positioning as a global leader in terms of R&D, what are the key innovations that you are bringing to the UMEA region?

Takeda has a large number of products in its R&D pipeline within the therapeutic areas of gastrointestinal & inflammation, neuroscience, oncology, rare genetic & haematology and vaccines and plasma-derived therapies. All of these areas have significant unmet needs in the region. For example, Inflammatory bowel disease is a condition which will see a rapid increase in patients over the next 15 years, and if patients are not treated quickly, they will have a decreased quality of life and the healthcare system will be impacted immensely.

There is a lot more to the innovation we are bringing forward than medicines alone. In the UAE we have Patient Assistance Programs in place that help patients that cannot afford treatments due to financial burdens. We also help patients through Patient Support Programs. For instance, administering treatments at home, and the importance of homecare was made a lot clearer during COVID. Hospitals were having to make tough decisions about whether to treat a COVID patient or one with a different ailment as there was not enough bedspace. By utilising homecare, they could do both. In addition to that we have in place diagnostic services that help in the early diagnosis of rare diseases leading to early treatment and offering those patients a unique opportunity to have a near-normal life.

Another step we are taking is giving scientific support to ensure the medical community in the UAE has the right level of knowledge to identify patients and provide quality care.

Rare disease is a therapeutic area on the rise, but different approaches are being utilised across the world. How well is Takeda doing in this field?

The company has had some good success stories globally, and that includes the UAE. The nation has a clear regulatory pathway that promotes fast-track access to patients, and this is also occurring in Kuwait and Saudi Arabia and other GCC countries.

In fact, our region has the third highest number of registrations in the last year globally for the company, with 60 percent of them being made using the fast track system. This is utterly amazing and shows the commitment to innovation here. Once a product has EMA or FDA approval the dossier is strong enough to use the accelerated approval pathway. We must continually work with the relevant stakeholders to have open scientific discussions while putting forward innovative access schemes. All in all, companies are happy with innovation acceptance here, and within rare diseases this is no different.

Given that its innovation seems to be rewarded in the UAE, might the company invest more in the country in areas such as clinical trials?

For sure, and collaboration with key stakeholders is a key element of clinical trial investments in a country. We believe that the diversity of the population here offers an opportunity for Takeda and the UAE government has improved the clinical study framework to make it easier for companies to undertake such R&D here.

Rare disease clinical studies can be challenging due to the lack of patients, but overall innovation has many clear advantages for the country. It is a good way of understanding the prevalence of a condition, how to develop strategies to treat a disease and how to better incorporate disease therapies within the budget.

Bringing clinical studies to a nation is sometimes about changing perceptions. How prepared is the UAE?

We need to grow awareness of clinical studies to show what the advantages for patients and the healthcare system are. The Emirates is establishing its R&D footprint and the government is creating an ecosystem that promotes innovation which is a critical element. Takeda is working with patient groups, such as the Rare Diseases Society of the UAE, in order to raise awareness. They are

doing an incredible job here and together we are strengthening this partnership to ensure early patient diagnoses and develop a rare disease framework.

It seems, until now, innovation has been widely accepted in the UAE. Do you believe it will reach a point where the market access process for new products will become more challenging?

There is a clear indication that the UAE government is shifting its innovation acceptance model to be less about pricing and more value-based healthcare. I am confident that, with the innovation Takeda offers, this will make it an even stronger market for us as we truly deliver medicines that treat unmet medical needs and can benefit any healthcare system immensely.

Your Takeda colleagues in other geographies are very excited about the company's Dengue Fever vaccine. Has that been rolled out here yet?

The story of this vaccine is an amazing one as more than three billion people globally are in areas where they could potentially contract Dengue Fever. The UMEA region has no countries that are endemic zones, and the company is first prioritising those countries which are mostly in Latin America and Southeast Asia. Afterwards, we will receive the vaccine along with the other less-risky territories.

Diversity is key for Takeda, and you yourself are a Brazilian working in the UAE for a Japanese company. What advantages do you believe this brings to your operations?

Diversity brings new mindsets and ideas to the challenges we face as a society and a company. We have over 26 nationalities working out of UMEA Offices with people with different backgrounds coming from Europe, Latin America, the Middle East and Africa and top GDP countries to some of the lowest. Together we draw different conclusions and thoughts based on our experiences and this allows us to find solutions to complex problems and better serve patients.

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