

## Philip Macnabb - CEO, Curia

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*Philip Macnabb serves as Chief Executive Officer of Curia, bringing 25 years of private equity-backed healthcare experience to his first venture into the CDMO sector. Joining in March 2023, Macnabb leads a globally diversified CDMO with 20 facilities spanning drug discovery through commercial manufacturing, serving predominantly biotech customers whilst maintaining relationships with major pharmaceutical companies.*

**You have spent 25 years building private equity-backed healthcare businesses. What drew you into the CDMO sector, and how has that long-term, value-creation mind-set shaped your priorities at Curia?**

My background has been in building organisations where the combined enterprise becomes more valuable than the individual parts. That involves thinking strategically five to ten years ahead to define what the company should become, assessing its current position, and mapping the path to reach that goal. I have extensive experience strengthening organisations and expanding them through acquisitions and greenfield development.

This is my first role in the CDMO sector. Previously, I served as CEO of a company focused on accumulating pharmaceutical services assets. Before that, I spent a decade in medical device and pharmaceutical services, including sterilisation and laboratory analytics. Those businesses operated in highly regulated environments, with FDA oversight, global exposure, and complex

manufacturing operations. The parallels with Curia were clear, so the progression felt natural.

The opportunity arose through two private equity firms, GTCR and Carlyle, which jointly own Curia. I had an established relationship with GTCR, and they recognised how my experience could fit the organisation. I joined the company in March 2023.

**When you joined in 2023, what stage of life was the company and where did you focus first to sharpen its strategic positioning across API, biologics, and sterile injectables?**

Curia was built through a long history of acquisitions. By the time I arrived, the organisation had reached a point where it was necessary to assess all those capabilities, companies, and facilities and determine where we were truly differentiated and where focused investment should be directed. That has led to selected divestitures and consolidations.

We have been refining the proposition by asking why customers choose to work with us and what they value most. Resources are then being concentrated in those areas. An organisation cannot be everything to everyone; it must define its value proposition and pursue it consistently.

We have broad capabilities. Many CDMOs describe themselves as end-to-end providers. We do not cover every segment, but we offer substantial scope. We still perform drug discovery work that many CDMOs do not, so the model is closer to a CRDMO, covering development, scale-up, and manufacturing.

In drug product, however, our focus is exclusively on sterile injectables. We do not have solid oral dose capability. The company remains heavily weighted toward small molecules, while biologics capabilities are maintained in US facilities. We do not develop cell and gene therapies, but we work extensively in antibody discovery. Our capabilities include GMP suites for monoclonal antibody manufacturing, mRNA research platforms, and other protein-based drug substance development, all based in the US. Our small molecule sites also have specialized capabilities to work with highly potent product and controlled substances.

**The CDMO market appears to be fragmenting between pure-play specialists and broader end-to-end providers. Where does Curia sit in that landscape, and what does “end-to-end” mean for your customers?**

When you walk the floor at CPhI or attend DCAT conferences, many CDMOs describe themselves as end-to-end providers. But what does that mean? Different customers value this differently.

Large pharmaceutical companies typically place less value on having all capabilities under one roof. They select the best provider for each activity and are comfortable separating services across multiple partners to achieve optimal outcomes. However, when it comes to manufacturing blockbuster products, they often prefer to retain manufacturing in-house. These are multi-billion-dollar assets, and maintaining direct operational control is understandable.

Biotech companies, by contrast, rely heavily on outsourcing and place significant value on experienced CDMO partners. Many are virtual organisations with limited internal infrastructure and require access to a full range of capabilities. In that context, a single end-to-end partner can provide meaningful value, although there are natural inflection points in development where companies may reassess and select a different supplier.

In drug substance scale-up through commercial manufacturing, integration within one organisation can be particularly advantageous. The organisation that develops and scales the manufacturing process is often best positioned to execute commercial production, providing continuity and clear accountability.

When a programme progresses to drug product, customers frequently re-evaluate their options. Success in drug substance does not automatically secure the drug product mandate. Each capability must stand on its own merits, and the business must be earned at every stage.

Some activities are naturally linked, like development and manufacturing, while others are less directly connected. Regardless, customers require compelling reasons to partner with a CDMO, including responsiveness, technical expertise, an understanding of operational pressures, and an appropriate geographic footprint.

Most of our work is with biotech companies. As they succeed and commercialise their medicines, they often become acquisition targets for larger pharmaceutical groups. Our customer base reflects that lifecycle. We support innovation at the biotech stage, and when programmes transition into pharmaceutical ownership, the relationship frequently continues under a different corporate structure.

**With client base spanning emerging biotech firms and large pharmaceutical companies, and how do you balance those unique needs within a single operating model?**

I often remind the team that we are, first and foremost, a service organisation. While we operate substantial infrastructure through manufacturing sites, laboratories, and technical platforms, our customers ultimately still look to us for our expertise. In many ways they are relying on our scientific experience and operational capabilities to advance their products.

As a service provider, you can pursue several strategies as either a low-cost provider, focusing on process innovation, or act as a customer-intimate organisation that understands and solves customer problems. Rather than being the lowest-cost provider, we act as partners and problem-solvers, working alongside clients to navigate scientific, operational, and regulatory complexity.

Expectations vary significantly between emerging biotechs and large pharmaceutical companies. Budget-constrained biotech firms often require flexibility, so programmes may be structured in stages, allowing them to validate hypotheses, reach key milestones, and secure additional funding before committing to full-scale investment. Although this approach can appear more expensive on a unit basis, scientific expertise often accelerates timelines and enables more efficient overall progress.

Some clients need regulatory support, and we help them understand regulatory stage gates while providing documentation suitable for their next development steps. Others face scientific challenges, such as having a promising molecule but no clear path to synthesising or scaling it. In those cases, our scientific and technical teams support manufacturing and scale-up to commercial levels.

Balancing these expectations within a single operating model ultimately comes down to mindset. We are committed to remaining flexible and responsive to each client's needs while maintaining consistent quality and execution across the organisation.

**Advanced modalities like mRNA and ADCs are reshaping the innovation pipeline. How significant are advanced modalities within Curia today?**

So far biologics are still a relatively small portion of our business. We operate two facilities: one focused on discovery activities such as antibody discovery, and protein expression work, and another providing cell line development and GMP drug substance manufacturing at clinical scale. We do not currently perform commercial production of monoclonal antibodies or mRNA, but can fill those types of products within our drug product network.

When considering biologics growth, our focus is on expanding into commercial capabilities rather than entering cell and gene therapy at this stage. The intention is to grow from areas where we already have established expertise.

However, ADCs represent a particularly interesting opportunity. As a company active in both small molecules and biologics, with sterile fill-finish capabilities, we can support nearly the entire value chain apart from GMP bio-conjugation. We can supply the warhead, develop the linkers, manufacture the antibodies, and complete sterile filling operations. Importantly, we can work with up to OEB5 products, which includes many ADCs, and this is a relatively rare capability in the industry.

We have been active in this area and expect continued expansion. We have a facility located in Glasgow, Scotland that has been working with highly potent products for more than two decades, and we are expanding that facility to add more capacity. Multiple of our worldwide which are well-suited to safely handle toxic materials involved in scaling-up ADCs.

**With renewed emphasis on onshoring and supply chain resilience in the US, how are shifting industrial policies influencing CDMO strategy?**

This represents a significant opportunity for CDMOs with a footprint like Curia's. Of our 20 facilities, nine are located in the US. We have a substantial US presence spanning small molecule API, biologics API, sterile fill operations, and discovery and development capabilities. We also hold numerous NIH and university contracts, reflecting Curia's origins as a discovery-focused organisation and its evolution into the integrated platform we operate today.

While current discussions often focus on economic incentives, the present onshoring momentum is best understood as an extension of what began during COVID, when the industry reassessed supply chain resilience and risk mitigation. For many years, manufacturing strategies prioritised low cost, often resulting in single-sourced materials or production. The initial shift was toward diversification to ensure continuity across inputs, intermediates, and finished products. That conversation has now expanded to include industrial policy and location-based incentives.

From a customer perspective, the objective is to evaluate the entire value chain — from regulated starting materials through final synthesis to finished dosage form — and structure supply chains that mitigate single-source risk, strengthen business continuity, and situate manufacturing closer to patient populations. Therefore, we are currently seeing stronger demand on the drug product

side, although interest in US-based API production is also increasing. Many companies have announced plans to build US capacity, but facilities take years to construct and commission. Curia, by contrast, has capacity available today, offering immediate access to US-based manufacturing.

This is particularly relevant for biotech companies that cannot finance multi-billion-dollar investments to build API or sterile manufacturing plants. By design, they rely on CDMO partners. As a result, we see strong tailwinds for our US footprint and the ability to support customers immediately rather than years in the future.

Looking ahead, supply chains may become more localised as products approach commercialisation. Early-stage materials and initial synthesis steps may remain globally distributed, but as complexity increases and products move toward final packaging, proximity to major patient populations becomes more important. The US, Western Europe, and China each represent substantial markets, and manufacturing finished products closer to where they will be used may reduce reliance on global shipment. That evolution is still developing, but if economic incentives continue to support domestic production, greater localisation will likely continue as a trend.

**Technologies such as artificial intelligence, automation, and flow chemistry are gaining traction. To what extent are they operational realities at Curia rather than exploratory ambitions?**

AI is already a core tool at Curia. Our origins are in drug discovery, and machine learning has been applied across multiple stages for more than a decade. These capabilities which have always been part of our operations are now more broadly described as AI.

We are now extending AI into production, supporting scheduling and process optimisation by identifying batches with the highest yield and lowest cycle time. This improves efficiency and accelerates customer turnaround.

Manufacturing technologies such as flow chemistry are also important, emerging capabilities. Traditional batch processes require significant asset time for equipment turnover, cleaning, and preparation, whereas continuous flow models enable greater efficiency. However, flow systems are not universal and must be customised for each product. Unlike batch processing, where multiple products may use the same vessel, flow setups are designed specifically for individual processes. The resulting footprint is smaller and operations are optimised for efficiency and yield. While Curia

already does operate commercial-scale flow chemistry for select products, our focus going forward is on practical implementation that delivers immediate, scalable value.

**You have described CDMOs as “selling trust.” In practical terms, what does trust mean in this sector and how does it differentiate Curia in an increasingly competitive market?**

Trust in healthcare operates at multiple levels. At its core is the patient who is seeking to extend or improve their quality of life. Patients rely on medicines and healthcare professionals to work as expected, without needing to understand the complexities of how products are manufactured or delivered. They expect safety and efficacy.

For Curia, that represents the ultimate trust contract. When a patient receives an injection or takes a pill, they are relying on us to perform flawlessly. Our responsibility is to ensure that every product we support is safe, effective, and fit for purpose.

Customers also place trust in us to protect their brand. A manufacturing issue reaching the market risks both patient safety and company reputation. Biotech companies seeking funding depend on timely and reliable delivery, trusting us to guide programmes efficiently through discovery and clinical development. In practice, we see ourselves an extension of our clients’ organisations, safeguarding their brand through consistent execution.

Ultimately, trust is the basis of every interaction in this sector. While it exists in many industries, in healthcare it is paramount because each step affects patient lives. Earning and maintaining that trust is what differentiates Curia in a competitive market.

**Looking two to three years ahead, what will define the next phase of Curia’s evolution amid the various geopolitical, technological, and market disruptions?**

Over the next two to three years, I do not anticipate dramatic shifts across the industry, as many announced expansions are still coming online. More meaningful change is likely to emerge over a longer horizon.

If demand for onshoring continues to grow, we are well positioned to support partners in achieving it. We will respond to market needs by expanding in areas where we provide differentiated solutions and scaling back where we are not best-in-class. This includes further development of flow chemistry and ADC capabilities, plus broader deployment of automation across manufacturing

operations. The objective is to become an even stronger partner in solving our customers' operational challenges.

For Curia, the opportunity lies in our existing footprint and available capacity. My goal is not for Curia to be the biggest CDMO out there, but I want us to be the best at what we do. With the capacity we have in the US, you could say we had foresight or maybe it was just luck. Five years ago, we embarked on expansions of our US facilities where we expanded our API manufacturing capabilities in New York and our drug product and sterile processing capabilities in New Mexico. We are excited that those facilities are now coming online or are online. That positions us well to continue building our presence as a trusted CDMO partner.

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