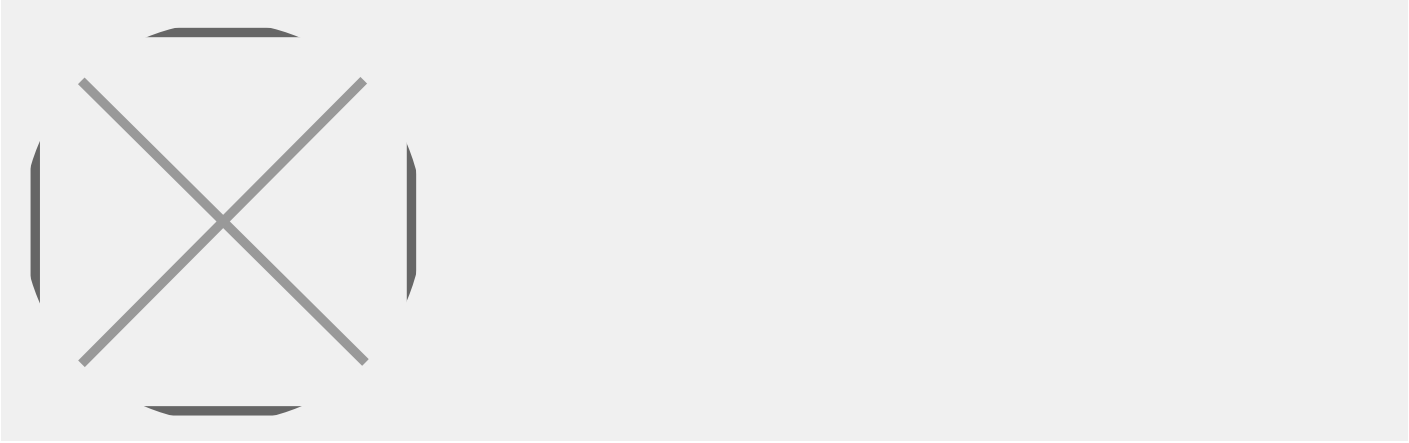
Interview with Emad Mohareb, Managing Director, Pierre Fabre Australia



21.02.2012

Tags: Pierre Fabre Australia

Would you please introduce Pierre Fabre to our readers?

Pierre Fabre Medicament Australia Pty Limited was established in Australia in late 2001, and is a fully owned subsidiary of the international parent company Pierre Fabre Medicament. Within Pierre Fabre Medicament, there are various divisions, of which oncology is among the most important, and consequently before establishing the company brand in Australia, the flagship oncology product Navelbine was distributed by another company called ASTA Medica. Since we have started operations in Australia, the company will continue its marketing efforts for Navelbine in addition to expanding to other areas, with the direction toward adding other business entities.

Which are these business entities, and what strategic direction will they support?

Since 1997 Navelbine injection has been listed on the PBS for the treatment of advanced Non Small Cell Lung Cancer, and advanced breast cancer. In addition to Navelbine IV, Pierre Fabre Medicament has introduced Navelbine Oral, an innovation in chemotherapeutic management, due to its additional benefits, and being the preferred formulation for cancer patients according to clinical studies. To help the Australian public manage their health care effectively, and to offer a value-added product in cancer treatment, Navelbine Oral has been introduced as a soft-gel, patented technology formulation of a capsule, and inside the capsule there is Navelbine liquid. This represents an innovation in pharmaceutical manufacturing, produced at Pierre Fabre state-of-the-art manufacturing facilities located near Toulouse in the South of France.

Other milestones since 2001 include expanding the business to New Zealand.

Last year, Pierre Fabre decided to appoint a business development manager, former French rugby captain Thierry Lacroix, whose mission is to expand the Pierre Fabre group products, including the dermatological line, which will be commercially developed here in Australia.

Pierre Fabre has a distribution agreement with Genepharm to promote, advertise, and distribute two major products called Avene and Klorane, which are flagship products for the treatment of skin and hair. Over and above these two, there is a full range of dermacosmetics, mostly from plant extracts, including Aderma and Ducray, both of which are high ranked marketed products for healthy skin in France. Beyond that, Pierre Fabre is moving into other areas of business, such as antifungal preparations with unique applications for toe fungal infections common in athletes and youth, and a full range called Mycostal. There is also a range of foot care products called PediRelax, which is another trademark of this kind of preparation of Pierre Fabre. Others include a product for the treatment of benign prostate enlargement, and CYCLO3 the first product invented by the founder Pierre Fabre himself. Overall, the Australian operations are in a state of rapid expansion, and the company would like to expand into other areas including a slimming preparation for better shape and health, pain and rheumatic disorder, and iron preparations.

Since its inception the company seems to have been doing quite well. You mention Navelbine is on the PBS – how have the recent reforms affected Pierre Fabre?

The original form of Navelbine is off-patent and has been joined by generic formulations from other pharmaceutical players, so definitely the generic intervention in addition to the PBS reforms have reflected a severe impact of the marketing and profitability of the product in the marketplace. Of course, Pierre Fabre Medicament Australia has lost a considerable amount of revenue due to these two factors. And because oral Navelbine is of the same class of drug, Pierre Fabre has been obliged to reduce prices to wholesalers and pharmacists. The bottom line is that the company has lost revenue as a result; however, we are anticipating that the PBS will consider the future value of R&D to pharmaceutical innovation to ensure the sustainability of players like Pierre Fabre Medicament in Australia.

What was the initial company strategy bringing a French and relatively unknown brand to such a foreign market in 2001?

In oncology it’s very much a situation of “think globally and act locally.” Clinicians, investigators, and players involved in cancer healthcare are very much aware of drug development through participation in early clinical development. The premarketing strategy involves engaging Australian clinicians in global clinical trials because there is a strong research in Australia. Our clinical studies in Australia are highly respected by the global bodies at large. Pierre Fabre Medicament at the same time provides clinicians with published data in order for them to be familiar with the drug

clinical efficacy and toxicity, how it will be delivered to the patient, and the comparative data between our drug and other drug use for the treatment of the same population. Also, Pierre Fabre Medicament maintains a clinical awareness to prepare the healthcare community to understand our products. In development of marketing strategy, Pierre Fabre Medicament trains its oncology force in the best way to educate the multidisciplinary team who often meet to discuss particular cases and how to manage them. Pierre Fabre Medicament has to educate the entire team on where products stand in terms of comparative clinical data, efficacy and tolerability, and provide approved product information and how to prescribe, PBS listing status, and health economics.

Quality of life is a very important aspect of advanced cancer management. It's not only a matter of drug effectiveness, but how tolerable the drug will be to the patient, and quality of treatment time. Advanced patients sometimes may not live for more than 10 months, even with treatment, so the goal is to provide survival and acceptable standard of living in the context of giving toxic medication. One must be careful to educate about toxicity in order to not expose the patient to undue harm, and provide quality of life, relief of pain, overall positive feelings and reduction of nausea, vomiting, constipation, and hair loss, while facilitating activities like family socialization, for example, are all factors to be considered. Talking about a patient profile is very much important to educate sales and marketing people to carry the appropriate message to medical oncologists.

Can you speak of Pierre Fabre's commitment to clinical studies currently ongoing in Australia?

Australia was part of a clinical research initiative by Pierre Fabre Oncology International, which has engaged some Australian centres to be part of a multinational, multicentre clinical study.

There are centres in Australia were Pierre Fabre Oncology has performed clinical studies in assessing the role of combination of Navelbine plus platinum in the treatment of lung cancer. The company is also responding to the intention of medical oncologists to do what is called investigator-generated clinical studies, in which several centres are engaged, providing them with clinical research grants to enable fulfillment of searches to treat different diseases with the drug. Two clinical studies, in Queensland and South Australia, are both currently looking into combinations of Navelbine plus platinum in combination with radiotherapy for treatment of inoperable locally advanced non small cell lung cancer.

You mentioned one of Pierre Fabre's strategies is to think globally and act locally. What would you say is your personal management stile in how you organize the operations locally?

Pierre Fabre Oncology, which is the core business operating in Australia, develops in collaboration with management and annual strategic promotional and education programs. The programs consist of subsidiary meetings in which we gather and discuss the evolving research and data in the

treatment of disease in which we're involved, and weeklong workshops in France, in order to develop a program of medical education, awareness campaigns, advertising, and promotion, in delivering message to oncologists globally. Of course, this kind of workshop and program ethos is transferred around the whole world. Myself being Marketing Director of the oncology operation, I utilize this program and modify it into Australian perspective.

What's the strategy going forward in the next five to 10 years?

Pierre Fabre Medicament will definitely continue focus in developing the oncology business in Australia, and establish a solid foundation for other businesses of the group, namely, Pierre Fabre Dermacosmetics, Pierre Fabre Dermatologic, Pierre Fabre Sante, and Pierre Fabre Oral Care. In oncology, Pierre Fabre Medicament will continue developing Navelbine oral, with its approval in lung cancer and exploring available data for its future indication in breast cancer. Meanwhile, we will follow the positive steps of the parent company of developing our new drug called Vinflunine. Pierre Fabre Medicament is engaging some other partners to introduce products to the market in skin disease, anti-fungals and foot care in Australia including diabetic foot, rheumatic disorders, anti-smoking, slimming, and the famous range of oral care.

What is your final message to readers of Pharmaceutical Executive about Pierre Fabre's continued growth?

It's important that the industry and profession have a synergy through transparency and ethical cooperation. Due to what has happened in the last two to three years regarding media scrutiny to the industry and profession, I would encourage my colleagues to be more transparent and engage the media, patient advocates, and government in regular workshops and discussion in order to progress towards improving the health care at large in Australia. I also encourage providing the most comprehensive training program to the medical representatives to deliver the appropriate message. In conclusion, I would like to reemphasize the satisfactory mission of the industry in developing new fundamental treatments for difficult illnesses, and praise the ethical contribution of the academia and the profession in establishing a new standard of improving the healthcare of Australia.

See more interviews