

Interview: Rajendran Bhimaraj - Country Manager - Roche Diagnostics, South Africa



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The country manager of Roche Diagnostics SA, Rajen Bhimaraj highlights the current gaps in the country's healthcare system and elaborates on how the company's various community initiatives, such as AmpliCare and the Roche Scientific Campus, are helping to address those gaps. He also evaluates the role of diagnostics in tackling the nation's burgeoning disease burden and the type of success factors that have effectively positioned Roche Diagnostics as the industry's market leader.

To begin, Rajen, can you please share the objectives you set for yourself when initially assuming the position of country manager, and also describe how far the affiliate has progressed now, under your leadership?

As a born South African from the apartheid era, there were new opportunities that were afforded to me as a previously disadvantaged individual when the new democracy first started in the early 90's. I moved from an environment that was predominantly restricted to non-whites into the field of pharmaceutical sales with Adcock Ingram, I then joined Boehringer Mannheim which later merged with Roche. My entrance into the industry had essential started from there and I'm now coming up on my 18th year with the company. With the opportunities I had starting relatively late in the industry, sales was the one profession that truly inspired and motivated me. Through a series of personal successes, as well as with the support of key mentors and leaders during my time in

sales, I've managed to achieve several milestones that I would've originally thought impossible. After growing through the company's ranks and spending some time abroad on foreign assignments, I was offered the opportunity to come back to South Africa and lead the organization as country manager. My personal objectives focused on demonstrating to the rest of my South African colleagues that ethnic origins don't define future career paths and illustrating to the organization that leading yourself appropriately can in fact enable both personal and professional ambitions—especially when given the proper guidance and support network.

In terms of business objectives, Roche began in South Africa as a relatively small organization. Over the years, we've made instrumental developments and pioneered several revolutionary initiatives that have truly inspired me as a South African. My passion to pay forward what I've gained in my career puts me in a pivotal position to take the organization from where it stood to the next level of growth and success with respect to both the business and people. Although we've made significant strides in progressing the organization, there are still much room for improvement in light of the many challenges associated with the volatility and complexity of the market.

With over a 100-year history, Roche has well established itself now as the worldwide leader in in-vitro diagnostics. To what degree has that level of success been replicated here in South Africa?

In this regard, our brand has a huge impact on the confidence and belief of customers. However, working in South Africa requires a specific approach to business. The accessibility to finance and markets is not as easy as it is in developed economies. We needed to think differently—beyond the face value of the products that we sell—by envisioning exactly how we're impacting the local population and anticipating what patients need next. As a corporate citizen, we have the freedom to define what exactly that impact will look like, and only doing so, have we been able to realize such commercial success.

What value does the company's diagnostic solutions bring the healthcare value chain in South Africa?

From a diagnostic side, the disease burden has to relate to whether we have a technology or an assay that is able to conclusively identify the presence of a particular disease or determine whether or not a patient is clinically vulnerable. The country's lab services play a critical role through pathology services advising clinicians on the patient diagnosis thereby aiding clinicians in the most suitable forms of clinical intervention. For example, if a pathologist finds the creatinine and urea levels among other indicative markers or tests abnormal, they can then guide the

clinician on possible causes and aid clinicians in the choice of potential treatment options based on the diagnostic abnormalities they've seen. After administration of clinician-defined therapies, pathology comes in again from a diagnostics perspective once the patient is on therapy to monitor the patients' improvements post therapy. In the case of HIV, for example, in-vitro diagnostics is used screen or diagnose patients that are positive, then patients are provided with ARVs, whilst on ARVs they generally come back for regular monitoring. When we look at their viral loads, we're able to evaluate patient compliance to the instructed therapies or even the treatment's efficacy to begin with, and then subsequently assess or monitor the patient's viral loads which then provides the clinician with more diagnostic information on the need for secondary intervention if required. For us, it's not about pushing products into the market, but rather about creating a portfolio of solutions that caters to different disease types and provides additional medical value or health information to improve patient outcomes.

Spanning the company's product portfolio, which segments have displayed the most promising demand prospects?

Especially considering its prevalence in South Africa, HIV will continue serving as the primary growth driver. On the molecular side, though, we're also experiencing brisk growth from communicable diseases such as hepatitis C, chlamydia and gonorrhoea (CT/NG). On the routine pathology side, clinical chemistry, fertility, and tumor markers will serve as key segments moving forward, as they're all pre-indicative tests providing insights into early diagnosis and intervention. Typically the process starts off with routine or "bread and butter" testing in clinical chemistry and immunology to get a sense of what needs to be investigated further and then the process escalates to more in-depth diagnostics such as molecular or polymerase chain reaction (PCR)-based testing to gain more conclusive determinations.

How has Roche helped tackle the country's heavy burden of HIV?

Back in 2002, we initiated a program called AmpliCare, which is centered on increasing early infant diagnosis of HIV and facilitating testing for babies at a reduced price for developing markets. It started in South Africa, where we offered the test at cost in order to initiate this program. Though, considering that laboratory testing is only one part of the solution, this program has also focused on training local healthcare practitioners on proper procedures for collecting blood samples. The next step after upskilling medical workers and providing tests at an affordable price was controlling inefficiencies in the pre-analytical phase through the "dry blood spot" (DBS) bundle. In the past, venipunctures were used to obtain blood samples from an infant, which would then be collected in tubes and undergo centrifugation. The concept of DBS testing places blood samples drawn from a

heel prick or ear lobe prick on filter paper, after which point the circle is covered up, labeled in a sealed bag, and sent for laboratory testing.

This effectively prevents further harm to an infant when drawing necessary blood samples, while also eliminating the need to transport samples in tubes which require more controlled or stringent transport conditions, which in our markets may prove to be difficult or inaccessible.

Another part of this project focused on using turnkey solutions, aimed at creating the necessary infrastructure to actually conduct these testing services and connecting stakeholders with the proper partners to carry out renovations. All these aspects were collectively integrated to create the AmpliCare initiative. In addition to South Africa, we also rolled out the program to other African countries under our jurisdiction. In South Africa, in partnership with Department of Health, National Priority Program team and National Health Laboratory services, transmission rates have declined to <5% based the early infant diagnosis PMTCT program (Prevention of Mother to Child Transmission). Aside from the societal implications on infant wellbeing and administering early clinical intervention where needed, AmpliCare has also helped improve our business from a both social responsibility and value delivering standpoint. Currently, we're the market leader in infant diagnosis—especially now when HIV is at the forefront of the nation's therapeutic priorities, which wasn't always the case.

How have the inequalities between the country's public and private healthcare systems affected the way multinationals approach and conduct business in South Africa?

From a business perspective, we don't have a different way of managing those that are financially well off and those that are not. We have a product that meets a demand and enables a positive clinical outcome—irrespective of social class. Ultimately, we work with both segments, but we approach them differently. The commonality in both segments is clinical engagement with all stakeholders to drive the medical value of a particular test and working with all stakeholders on the value and health economics. When it comes to new markers, it's always about illustrating the value that they deliver through clinical workshops. Such targeted education and awareness initiatives effectively create the market awareness among all relevant medical personnel either alone or in partnership with our customers—especially when they see a patient that is comprised.

How would you evaluate the current capacity of the country's clinicians in adopting the latest advancements in medical technologies? Are they adequately equipped with the proper resources and skillsets?

A few years back we recognized that there's a massive drain on the skills and capacities on laboratory technicians both inside and outside of South Africa. As an organization with a vested interest in the market, we felt a need to assist in closing this gap. As such, we started the Roche Scientific Campus where we train laboratory staff from the pathologists all the way to the instrument operators and scientists on how to best use our equipment; we also take this a step further by defining the breadth and content to address Laboratory Medicine more holistically. This ensures that our training menu or content includes basic lab practice/ skills to advance or specialized laboratory practice skills/ techniques. Most or all of our courses are accredited or certified and executed by Roche in-house certified trainers or our partners external to Roche. We cover a multitude of topics such as why the DNA extraction process is valuable or why it's important to maintain a sterile environment. From my perspective, training on the proper usage of Roche equipment is our field of expertise. It's what we should already be good at, but if we want to truly position ourselves as a total solutions partner and enhance the value we deliver to our customers, it's more about influencing every other facet that ensures or enhances state of the art Lab Medicine in our continent. Therefore, we've strived to provide the proper resources to lay that foundation and build up the knowledge from there.

The currently overburdened public healthcare system is widely recognized by all stakeholders and, in part, what prompted the creation of the Public Health Enhancement Fund (PHEF). Can you please describe the initial aspirations behind Roche Diagnostics' participation in this initiative and the type of impact you envision this fund having on the broader community?

A primary component of the PHEF is looking at the skills shortage in this country and building educational capacity. The initiative looks at supporting previously disadvantaged communities but also aims to provide of funding for those who financially unable to do so themselves. In this instance, it's really not about history, but more so any South Africa with a desire or the aptitude to succeed in medicine research or any clinical discipline, as an industry, to help them realize their ambitions without the financial burden. The PHEF aims to fund those who can't normally afford post-graduate degrees or medical programs, with the ultimate hope that these individuals reciprocate the investments by eventually practicing in the local environment. For me, success is not only determined by profits, but also the amount of value we introduce into society. As such, with the end of this initiative's three-year commitment in sight, I'm confident that Roche will continue its support moving forward.

How else does Roche demonstrate its commitment to the welfare of local citizens?

We have a program that we started late last year with the Maharishi Institute, which is a non-profit organization in Johannesburg that offers fully funded open university education to previously disadvantaged South Africans or citizens that can't afford proper tertiary education. Not only did this program provide qualifications, but also a second arm of employment for students. Upon receiving a diploma, students were offered an opportunity to work for the institute and earn a salary. We've actually effectively extended our support of this program, with some of the students that graduated from the Maharishi institute now employed in our customer service department as trainees or learners.

We're also running an internal learnership program where we hire students who've completed their degrees, but can't obtain proper employment on a temporary basis. After bringing these learners on board, we assess their skillsets and equip them with the proper skillsets suitable even for other industries. At the end of the program, if they performed according to the specified performance criteria and we have an open position, then we actually integrate them into the Roche organization. For example, within our technical services team, we have learners shadow more experienced personnel to familiarize themselves with our technologies and instruments. The learners are then assigned responsibility over simpler instruments, and if they've delivered on their objectives and performed in line with Roche standards, if we have open positions we recruit from this pool of learners into fulltime positions. Ultimately, as an organization, we have multiple corporate social investment programs running in parallel—both internally and externally, this is not an option but a responsibility, which we as Roche take extremely seriously.

In terms of reputation, capabilities, and performance, where would you like to have positioned the affiliate in the next three to five years?

Roche Diagnostics in South Africa will continue to be the market leader in in-vitro diagnostics, and not just in South Africa, but across Sub-Saharan Africa as well. At our current pace, we plan on further widening the gap between ourselves and others in the industry in the coming years; in the value we deliver, in the service we provide but most importantly on the impact we have on all Africans. Furthermore, within that timeframe, I will have hoped for an organization with a higher percentage of self-leaders that will continue to be inspired by the motivations underlying our actions and community initiatives.

In the pharmaceutical industry where executives are constantly swapped around from one multinational to another, what factors ultimately motivated you to maintain such a longstanding tenure in Roche?

Firstly, it's the seamless alignment of my personal values with the company's values. I feel what I do every day, and the reason I do what I do, is never comprised while working in this organization. Here at Roche, I can be the authentic me, which I must say is so easy. In tandem with that, Roche has been a company that saw potential and effectively took a risk on me—ultimately providing the opportunities for me to grow in both a professional and personal level. I generally give myself three to five years in a position—never exceeding that—to explore new positions and challenge myself on new fronts. Moving forward, I want to be in a position where I can continue adding value, expanding my own knowledge base, and growing as an individual coupled by being able to continuously inspire and motivate those around me. I don't currently have any pre-determined paths, but anything that enables me to achieve all of the above, that will be the next step for me.

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