

Interview: Robin Hunter - General Manager, Mallinckrodt, Canada



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Still in the process of integration, Mallinckrodt is preparing to build its launch structure in Canada. With several innovative products in the pipeline, Robin Hunter, general manager of Canadian operations, highlights the company's ambition to be a top tier innovative specialty pharma company with a specific area of focus in hospital-based therapies and rare diseases.

Robin, can you please give our readers a brief overview of Mallinckrodt's recent evolution and its operations in Canada?

Mallinckrodt is the exact same age as Canada, celebrating its 150th birthday in 2017. When the company went public in 2013, the generics and medical imaging business units drove three quarters of the company's revenues, and about 11 percent resulted from specialty pharmaceutical products. Today, 75 percent of our revenues come from specialty pharmaceuticals and overall, Mallinckrodt went from being a USD 2 billion business to become a USD 3.2 billion company. With the pipeline assets we have recently acquired or in-licensed, we are expecting significant growth in the years ahead.

In Canada, Mallinckrodt is still in its infancy, striving to establish itself as a preferred partner and supplier of innovative medicines to hospitals. We are on the right track, emphasized by the fact that Mallinckrodt Canada will receive the President's award from the Canadian College of Health Leaders for outstanding corporate partnership at their annual leadership conference in June 2018.

Our biggest task at hand today is working on building the Canadian affiliate that it can best execute the launches of the large number of products in our pipeline.

How did the 2017 business year unfold for Mallinckrodt in Canada?

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Although 2017 was a challenging year for us, we can register a significant achievement as a young affiliate. Our lead product, INOmax, which is used to treat critically ill newborns in neonatal intensive care units, was faced with generic competition, but we managed to keep 67 percent of our customers. These babies are among the most vulnerable patients in our healthcare system and our steadfast approach to patient safety proved to be a clear differentiator between us and our generic competitors.

As a manager, how do you instill motivation among your employees on a daily basis?

It is that same commitment to patient safety that keeps all of us motivated each and every single day. Our lead product is a pharmaceutical grade gas that can only be delivered by a sophisticated and complex medical delivery device. Our drug and our device is delivered as a complete service offering branded INOmax Total Care, resulting in a level of patient centricity that many companies are still striving for.

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I am privileged to work with a group of highly committed people who understand that many of our patients are in a critical life or death situation. There are examples when members of our team have literally come to the office in the middle of the night to pack an emergency delivery to a hospital in need of an additional device to treat a sick baby. The knowledge and awareness that our work impacts these lives and the lives of their families is a key motivational factor. The dedication of our team is also what made many of our customers stay with us, as they are aware of the fact that we are there to support them 24/7/365 should they encounter a problem with any of our solutions.

Mallinckrodt has undertaken a shift in focus from being a nuclear medicine and generics business to becoming a specialty pharma growth company in the critical care, and rare disease space. What is your portfolio strategy in Canada?

Our portfolio strategy in Canada is still being developed, partly because our pipeline has expanded significantly in the last year and we are still assessing the optimum way to launch all of these

products in Canada. We currently market INOmax and Therakos Photophoresis, two drug device combinations and have Health Canada approval for Ofirmev (IV acetaminophen) which will be available later this year. In addition, we have seven innovative medicines either in phase 3 trials or are preparing for registration. Quite simply, within the next three to five years, we will be one of the largest suppliers of innovative medicines in the hospital setting—this does not even take into account further acquisitions and pipeline products that are currently in phase 1 or phase 2—.

How does Mallinckrodt take advantage of the great R&D potential Canada has to offer?

We currently invest in research in Canada in an effort to expand the scientific body of evidence in Hepato Renal Syndrome, Duchenne Muscular Dystrophy and other areas of critical care medicine. Advocating for more research investment to come to Canada is one of my key responsibilities, and it is my full intention to take advantage of the exceptional quality of research centers Canada offers.

What are the benefits and drawbacks from your close proximity to the largest pharmaceutical market in the world, i.e. the US?

One of the challenges I am facing when trying to implement the build out of our Canadian affiliate is to determine a balance between leveraging shared services from the US, building our own capabilities in Canada and outsourcing to partners. The most difficult aspect lies in correcting the assumption that a product launch in Canada can be successfully executed by a US based brand team.

On the other hand, the close proximity to the US benefits us in that we are in the same time zone, as well as that I can leverage the expertise and tremendous resources of the US organization and realize efficiencies through a shared service model.

What CSR activities are you engaging in in Canada?

We are a small company with less than 15 employees in Canada. However, for the last four years, we have supported an organization called HandFullHearts. Our team helped fundraise and create baskets of essentials for families who spent the holidays in the Neonatal Intensive Care Units at Mount Sinai Hospital, Sunnybrook and Mackenzie Health. When you are expecting a child, you expect everything to be normal but unfortunately, that is not always the case. For those parents whose children are forced to stay at the NICU, the life they had planned for has been thrown out the window. Feelings of confusion, helplessness, guilt and fear become their first parental emotions and that is just the beginning. For many parents the average day in the hospital is 12 hours long,

and in many cases three to six months long. It takes courage to walk in, and even more courage to come back the next day. It is a roller-coaster with no defined end. When the baskets were delivered, we talked to the families, we shared stories, and we cried and laughed together. They were grateful for the gifts but above all they realized they were not alone.

What key priorities will you be pursuing in the integration of the Canadian business of Mallinckrodt?

My priority is to build a high performing, patient centric Canadian affiliate that successfully launches multiple critically needed innovative products into the hospital space over the next five years.

Robin, you have been in the industry for 25 years. What still keeps you motivated every day?

I love to solve puzzles and this industry and company specifically allow me to meet challenges and discover matching solutions. I never lose sight of the fact that our challenges pale in comparison to those of the patients we serve. I have been fortunate to meet a little girl who was treated with our product a month after she was born, and who just celebrated her second birthday two years ago although her parents and doctors were not sure she would make it to that point. I worked in many therapeutic areas during my career but none of them have been as rewarding as working to save the lives of critically ill newborns. This is the biggest motivator there can be.

Do you have a final message for our readers?

Mallinckrodt Canada today is not yet the company we aspire to become. I think people should keep their eyes on us throughout our transitional period, and in 2020, those who did not will say “I wish I had known that company before. I would have liked to work there.”

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