

Haseeb Ahmad - Country President, Novartis UK



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Only 14 months in position, UK country president at Novartis, Haseeb Ahmad, shares insights into the company's new strategy. He further analyses how Brexit can be a catalysing force for the UK to lead in life sciences and explains why the country has potential as a test bed for medicine launches.

Much has changed at Novartis within the last months: Vas Narasimhan took over as global CEO, Novartis received the first ever CAR-T approval by the FDA and now the company is letting go of its consumer health business to GSK within a joint venture. How have you adapted to such a fast-changing environment?

Indeed, the period of 14 months since I joined has been characterized by change. I have not known it any different in fact, change has been a constant since I joined Novartis!

Taking a step back, you can see a red thread running along those changes. Our new global CEO Vas Narasimhan is a very purpose-driven leader, someone extremely focused on answering the question: 'How can we get the innovations we have to patients who need them?' Moreover, the choice of Vas was a clear choice for science and innovation, the board highlighting that Novartis is a science intensive company. Hence, there has been a deep focus to putting science at the heart of our business, leveraging our innovation as a solution to many of the world's healthcare problems.

Thus, letting go of our consumer health business – a successful unit, was a strategic decision, especially since, hot on the heels of that announcement we communicated our acquisition of AveXis, a cell and gene specialized biotechnology company that is bringing transformational science in spinal muscular atrophy. This is definitely an exciting time to be part of Novartis.

Since the beginning of your tenure a little over a year ago, what have been some of the priorities you have been pursuing?

My primary focus has been on culture and people. There is a growing sense—and I subscribe to this—that having the right people in the right role and driven by a strong sense of purpose is what it really takes for a business to develop. Consequently, we have dedicated a lot of efforts these past 14 months to establishing a real sense of purpose amongst our employees. We are driven by the purpose that nobody in the UK should have to wait for an extraordinary life.

That statement is something that drives all the associates in the UK on a day to day basis. Unfortunately, in the UK, we live in a society where patients often have to wait to even see a secondary care consultant and cannot access innovation readily available in other countries. Indeed, patients in France or Germany are five times more likely to get access to a medicine within its first year of launch compared to UK patients. So, our purpose in the UK is to bring a day when the wait is over for British patients. I feel that establishing our sense of purpose will really help us grow as an organisation.

My second priority was around performance, which is linked back to my first priority. On my leadership journey I have become convinced, all things being equal, that happy people sell more. The sense of purpose we were able to instill is what will show results, and Novartis UK has been named a top employer five years in a row.

My final priority is about putting the UK back on the map. The UK is a reference market, and it is my responsibility to retain this position for Novartis UK, while ensuring that we create a position for Novartis in the UK to be a reference company.

The UK has always been known to be tough market, and now Brexit is adding an extra layer of complexity. How do you see it impacting life sciences in the UK?

Without a doubt, Brexit will entail a lot of change, and, more importantly, a lot is still entirely uncertain about the future after Brexit. Beyond this, however, Brexit can be and has been a catalyzing force for the life sciences industry in the UK.

In the 1950s, there was a race driver, Juan Manuel Fangio, one of the best ever. He was once asked what his secret to win so many races was. He answered: 'When I see an incident up ahead, while all the other drivers take their foot off the gas, I put the foot to the floor because I see that as my opportunity to lead'. I look at Brexit in a similar way. You can see it as that terrible incident, or you can put your foot to the floor and try to make it into something positive. And I think both from the industry side and also from the UK Government, there is a choice to be made – whether we take our foot off the gas or put it on the accelerator. Ultimately, with or without Brexit, there are a number of issues that the British Government needs to tackle, including patients' access to medicines which in the UK far lags behind much of Europe. We are a willing partner to help bring solutions to many of the challenges being faced by the NHS.

Over the past months, the signs have been rather positive with the government backing the Life Sciences Industrial Strategy (LSIS). Several officials have been recognizing the value of our industry, not just in terms of inward investment, but also in terms of helping society solve some of the big global health challenges we are facing in the UK. Therefore, while the uncertainties Brexit entails are undeniable, there have been some positives, at least in words. The next step will be to see words transform into actions, but we definitely see a signal of intent. In the end, no matter what political commentators or economics say, the UK will remain a top six or five economy globally, and in any scenario, it will also remain a top ten pharmaceutical market globally.

Regarding your product portfolio, what have been some of the recent launches and which launches can we look forward to in the near future?

We are looking forward to bringing one of our greatest innovations, CAR-T cell therapy to patients with pediatric acute lymphoblastic leukemia and adults with diffuse large B cell lymphoma. This is truly individualized treatment and is unlike anything that has come before. It will require close collaboration between many actors in the system, but when considering the life-changing outcomes these therapies bring, and the transforming effect they have on patients' lives, it'll be a template for the future for how the UK adopts new medical innovations. I see a general willingness to see it available for British patients.

In the next three years, there could be 11 launches overall, in areas as diverse as prophylactic migraine treatment and multiple sclerosis, adding to our recent launches of Entresto® and Cosentyx®, both very well performing in the UK.

In 2017, Novartis published a report on outcomes-based reimbursement (written by the Social Market Foundation), with a specific focus on the NHS and the incentive to see it adopt such a paying system. How has this discussion evolved since last year?

We identify two levels in the progression. At a sub-national level in our partnering with hospital trusts and clinical commission groups, we see good progress. In the last 12-18 months, we have seen a number of outcome-based contracts in the UK increase from a handful to approximately 100. We link this to the fact that, at a subnational level, there is recognition of the value that value-based contracts bring to mitigate what payers perceive as a financial risk. The interest to engage lessens however, when you move away from subnational and get to national level, where the approach is still very much a procurement approach, and this is often down to the fact that the infrastructure is not in place to capture the data needed to make these payment models mainstream.

Since his appointment as new global CEO of Novartis, Vas Narasimhan has been very vocal on new strategic approaches to drug discovery. One aspect has been the wish to focus more on data science to reduce R&D costs for instance. What can be the role of the UK affiliate in participating to drive forward utilisation of data in research?

We have a great primary care data set in the UK as well as a fully connected interoperable data set and social care data. The real challenge and opportunity lies in how we can put all these data together in a central way so that an individual patient can be followed not just through primary care, but through the entire spectrum of health and social care utilization. This is starting to happen in some regions in the UK, such as Manchester or Birmingham, but it is still in its infancy.

Through this utilisation of data in a broader sense, we can demonstrate the value of innovation through real-life evidence. We are not far from seeing this goal become reality, but we need the right infrastructure and leadership to be put in place from Government and the NHS. The UK can expand its leading position, but to achieve this, it has to create the right incentives and the right habitat for innovation to thrive.

Where do you see the advantages of conducting clinical trials in the UK?

Novartis is a large commercial supporter of clinical trials in the UK. In the last three years alone, we invested over GBP 64.5 million (USD 120 million) in R&D in the country. Linked with the pole position the UK occupies in data and digital, we identify potential to further leverage on the excellent science available in the UK.

Conducting clinical trials is comparable to playing the lottery. There are two ways to win the lottery: by being very lucky or by buying a lot of tickets as you become luckier the more tickets you buy. I think that in the UK we have a clear opportunity to bring down the price of the ticket. Thanks to the available data sets integrated with biobank data and genomic data, the speed at which we could develop hypotheses for clinical trials could be dramatically faster. Opportunities further exist in the speed of recruitment, trial monitoring... Data and digital can speed up the whole process and bring down the price of clinical trials while shortening the time. This would transform the way clinical trials are done and ultimately lead to more targeted therapies being developed and coming to market quicker.

What is the strategic significance of the UK for Novartis globally?

The UK is and remains a top ten market and there are many areas in which we punch above our weight, specifically in R&D as the academic and science base here is very strong. In terms of scientific collaboration, the UK affiliate ranks about the top two to three countries in number of partnerships in place.

Beyond this, on the commercial side of the value chain, the UK is a challenging market, yes, and the UK industry does not always see growth numbers like we do in other markets. This being said the UK remains a reference market in more ways than one. It is a microcosm of global market access challenges. Whenever I speak with my colleagues in other countries they relate to me this challenge or that challenge, and I always think: 'Well, I have them all together!' Because of its uniqueness and microcosm aspect, the UK can also be seen as a laboratory for commercial R&D. It can be used as a testbed for launches and there is a growing acknowledgement of this. A lot can be learned from looking at the UK.

I will conclude on this: our global CEO Vas Narasimhan has said he wants Novartis to be a medicines company powered by data and digital. If you read the LSIS, it effectively says it wants

the UK to be a healthcare system powered by data and digital. The fit is obvious, the opportunity to truly partner in achieving our goals is there to seize.

What skills as general manager do you think are needed to stir an organisation through a marketplace such as the UK?

This is a market where you need to be able to transform and perform at the same time. More than anywhere, I see this holding truth in the UK. Hence, it takes individuals that can master agility and organisations with the ability to pivot rapidly to succeed here.

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