Giuseppe Chiericatti – General Manager, Chiesi Spain



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Giuseppe Chiericatti of Chiesi Spain talks strategy, the development of the affiliate and shifting attitudes towards rare diseases in Spain.

You've been leading the Spanish affiliate for 2 years now, your first country manager position. What have been the main developments of Chiesi Spain over this period?

I am pleased with what we have achieved. We have managed sustained, double-digit growth in the last few years, not something to take for granted in Southern Europe. Moreover, we anticipate that we will exceed the 100 million euro mark this year.

We have succeeded in growing our corporate portfolio, particularly in respiratory areas, such as Asthma, COPD, and pathologies with lower prevalence like cystic fibrosis. We have also seen success in specialty care, neonatology and consumer healthcare. We are paving the way to enter in the field of Rare Diseases, another important area of R&D for Chiesi. We have created the infrastructure, the network, and the setting. We are now ready to make available in Spain our first therapies in this setting.

Commensurately, I am satisfied with our developments in people. We have grown to more than 270 employees and have invested considerably in training and projects on the job in order to develop a learning culture amongst our employees. We work with challenges creating teams composed of both employees and external stakeholders and applying methodologies such as

design thinking and lean startup. This continuous collaboration with the ¨external world¨ is key for us to avoid the risk of internal reference that I believe is one of the main issues in our industry.

Last but not least, social responsibility and sustainability is a key part of our mission. Our goal is to integrate the concept of sustainability in whatever we do. Within Spain, we have an action plan to aid 8 of the 17 challenges defined by the United Nations. We endeavour to play our part, however small that may be, in solving these challenges.

What have you defined as your three main priorities?

Our most important aim is to continue to develop our people so that we can develop for the better of society.

In our main area, the respiratory, we recently launched the first triple combination in COPD *Trimbow*® (beclometasone dipropionate/formoterol fumarate/glycopyrronium). Our goal is to make this therapy available for Spanish patients. We believe *Trimbow*® brings a lot of value to the patients suffering from this pathology both from a clinical point of view and a practical point of view. In fact, managing one device instead of two is of great value for these patients who in most of the cases have to adhere to complex therapeutic schemes also for other pathologies.

Another important aspect is our commitment in rare diseases. We have a number of promising therapies close to the commercialization, such as *Procysbi*® (cysteamine bitartrate), treating nephropathic cystinosis and *Lamzede*® (velmanase alfa) the first available therapy for patients suffering an ultra-rare condition called alpha manossidosis. Contributing to bring solutions in the rare diseases space is a great pride for us, there is still a lot to do in terms of awareness, improving diagnosis and developing treatments in the rare diseases area and this requires a joint effort of the stakeholders engaged in the healthcare system.

Focusing on your overall portfolio in Spain, what is driving the growth at the moment?

We will further develop our most recent launches in the respiratory area as well as in the specialty care and in rare diseases.

How would you describe your experience launching products, and how would you assess the market access of launching products in Spain?

We launched *Trimbow*® in June and are now about to launch products in different therapeutic areas. Healthcare in Spain is decentralised, with the budget devolved to the Regions. As a result, we must liaise with multiple stakeholders. Since we focus on developing drugs that bring improvement in the standard of care, our products create both clinical and pharmaco-economic benefits. We need to create very solid evidence in these directions Our key task is to communicate the value of our products for society to different stakeholders who may have sometimes different interpretations of the data and information. We are open to considering innovative reimbursement schemes to make the innovation sustainable.

You have recently signed a collaboration with the HM hospitals for *Holoclar*®. What is the rationale behind such an alliance?

This is the first time that we have struck such an agreement. *Holoclar*® is an incredibly innovative product, in fact, the first advanced therapy medicinal product (ATPM) registered and approved by the EMA. Since *Holoclar*® is not reimbursed by the SNS, we signed the agreement with HM hospitals to make *Holoclar*® available to patients in Spain leveraging on the agreement between HM and ¨mutua laboral¨. Making agreements with the private sector will an important option to make available innovative therapies in the future.

As a company, you have conducted a number of studies into rare diseases. How would you assess the public policy plan towards rare diseases in Spain?

I have no doubt that the goal of all the institutions is to make all the therapies available to all patients. Nonetheless, as resources are finite, one must prioritise where to devote the healthcare budget. As is the case in other European countries, rare disease treatments are competing for these limited resources with other treatments for high prevalence diseases. Therefore, it is of key importance to find smart agreement with the institutions in order to make these therapies available.

We are open to discussing innovative ways to increase the availability of rare disease therapies. This may be through schemes such as risk sharing or pay for performance.

It is known that for a large proportion of rare diseases, the time taken for a diagnosis and to begin the treatment can be long. What initiatives are you putting together to address this?

The delay in diagnosis is a further complication of these already complicated diseases. The patient-organisations play a pivotal role. They have the know-how on the pathologies, the evolution of the disease, and on the support, patients will require. Working with them is imperative. We can act as a catalyst, identifying the priorities directly from the patient organisations to provide better services. There are still several services, aside from therapies that are not available to patients. We work to create a network of stakeholders that will decrease the time required for a diagnosis.

You mentioned bringing a learning culture to Chiesi. Could you introduce to our international readers the projects that Chiesi has in Spain, and what the role of these are for the company?

While our main business is making pharmaceutical products available to patients, we explore ways to complement the medicines, with the aim of improving adherence and to make the treatments easier and more convenient for patients. We like to work in an open environment co-developing solution together with partners such as Hospitals, patient associations start-ups and other healthcare providers. If we closed our doors and remained in our offices, we would miss opportunities to bring further value to the sector.

WeStart is an example of an internal programme we created, taking a more hands-on approach, rather than theoretical. The challenge was to develop solutions in the healthcare field. With the exposure to mentors and entrepreneurs in the start-up setting, within 3 months a prototype was developed on only a limited budget. The main goal was for training, creating a change in the culture of our organisation. I believe this has been achieved.

In the respiratory field, one of the key unmet needs is improving adherence to therapy. Many patients forget to administer the therapy. Others administer it, but incorrectly. Together with experts, we created the first questionnaire developed for measuring the adherence in respiratory diseases such as asthma and COPD. It has been a successful project. Beginning here in Spain, it has now been translated into 14 languages, and is being used by other companies in clinical trials.

What is the strategic importance of the Spanish affiliate for Chiesi, both in Europe and worldwide

Chiesi in Spain is the 6th largest at the global level and the 5th in Europe. It is also one of the most historical affiliates of the group, founded in 1995. Europe is still the bedrock of Chiesi, where the majority of our expertise and R&D is based. In this way, Spain plays a leading role for Chiesi.

Chiesi España has been a top employer in Spain for 6 years in a row. You spoke that developing talent was one of your top three priorities. How do you attract and retain the best talent in the company?

To attract the best talent, we are transparent. We make clear from the first interview which are the values and the culture of the company and what we expect from our people. We want people who help us in going beyond the obvious, we want people who bring ideas. I believe our image has grown in the last few years, making us a popular destination for talented individuals.

To retain the best talent, we create benefits for our employees, we map the key steps of the employer experience in the different stages of their career within Chiesi. Using employee feedback from each stage, we identify where are our areas of strength, and where are our areas for further development. We have also created a flexible benefits package tailored for groups of individuals to better suit the differing needs amongst our employees.

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