Fadela Benjelloun – Executive Director, LEMM, Morocco (May 2020)



We want to see the emergence of an ecosystem of clinical research and position Morocco as an expert hub like other countries such as Tunisia, Egypt and Turkey

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Fadela Benjelloun, executive director of LEMM, the association of multinational pharma companies in Morocco, explains the association's key goals of improving access to healthcare and medicines, positioning Morocco as an expert hub for clinical research in the region, and ensuring good ethical practices in pharmaceutical distribution and promotion.

Could you introduce the main activities of the association?

Created in 2005, LEMM is the Moroccan professional association of the subsidiaries of 20 multinational pharmaceutical companies involved in research and development.

These subsidiaries have been present in Morocco for several decades and have contributed very strongly to the emergence of an important local industry. We represent more than 50 percent of the sales of the sector.

Our members are present through industrial pharmaceutical establishments or through partnerships with local manufacturers specifically in terms of technology, knowledge and know-how transfers

Our association has three main priorities: improving access to healthcare and medicines in general, particularly innovative therapies, incentivizing research and development activities, and

encouraging good ethical practices in pharmaceutical distribution and promotion.

In order to work on these three axes, the association mutualizes the human resources of our members. Experts from all companies participate in different working groups, sometimes in collaboration with national or international consulting firms. While companies compete on the market, they collaborate when it comes to reflecting on problematics affecting the whole sector.

How has access to healthcare and medicine progressed in Morocco over recent years?

Access to healthcare and medicines is conditional on medical coverage. The latter was introduced in 2005 with the introduction of the Obligatory Health Insurance (AMO) and the Medical Assistance Regime (RAMED). The AMO provides medical coverage to employees in the public and private sectors. It was then extended to other categories of citizens, all of which represents approximately one-third of the population. Then the RAMED covers indigent people who represent one-third of the population. One-third of the population is still not covered. There is still a long way to go to achieve universal medical coverage

What does that mean when it comes to access to innovative therapies?

Access to innovation remains limited in Morocco. Despite the efforts made by the authorities, we notice that the patient does not benefit from the latest innovations that are available on the market.

This reality is primarily due to the lack of widespread medical coverage.

Secondly, for AMO policyholders, reimbursement of the innovation would benefit from being better so that policyholders can benefit from the best therapeutic solutions quickly. There is a real need. The public-private partnership is one of the levers for meeting this need.

Regarding sustainability, according to the latest figures from the National Agency of Medical Insurance (*Agence National de l'Assurance Maladie* (ANAM)), three percent of the insured population consumes 52 percent of health insurance funds, which is out-of-balance and not sustainable. In order to reduce this burden, authorities must implement prevention measures.

Finally, further expanding health insurance coverage would lead to the development of the whole sector, which we saw after the introduction of AMO in 2005, by boosting drug consumption which is

very low in Morocco compared to its neighbours in North Africa at about MAD 400 (EUR 37) per person per year.

What is the situation regarding clinical research in Morocco?

Today, clinical research is almost nonexistent in Morocco. We want to see the emergence of an ecosystem of clinical research and position Morocco as an expert hub like other countries such as Tunisia, Egypt and Turkey. Although a law on biomedical research was adopted in 2015, the implementing decrees have not been published.

The development of clinical research will bring many advantages to our country

Clinical research has a structuring value in the medium and long term. It is both a privileged mode of access to therapeutic innovation for the patient and a source of continuing education for health professionals. RB thus improves the quality of care and offers many economic, social and health opportunities:

- Participates in the financing of health infrastructures,
- Allows the influence of Moroccan researchers and their development
- Promotes access to innovative treatments and participates in the financing of the care offer
- Participate in the transfer of technology and know-how
- Credits and strengthens the reputation of the pharmaceutical industry in Morocco
- Develops other R&D activities over time

Representatives of the local industry are arguing that the government needs to do more to encourage local manufacturing as the share of drug consumption catered by locally produced drugs has decreased over recent years. What is the position of LEMM on the matter?

Around 80 percent of medicines commercialized today in the private Moroccan market – originals or generics – are manufactured locally (Ref. IQVIA data: *Cartographie du médicament sur le marché privé marocain*; Dec 2019).

It is worth mentioning that out of every ten locally manufactured products, six are original formulations, and of every ten original products sold on the private market, seven are locally produced which definitely translates into the success of the 50-year-old collaboration between

multinational and local companies, specifically in terms of technology, knowledge and know-how transfers.

That said, thanks to its strong production capacities, Morocco has great potential as a pharmaceutical export hub which is not currently being exploited and should be encouraged by the authorities.

Another important point to mention is that local production does not improve access to medicines. Whether a drug is produced locally or imported, if a patient is not covered by medical insurance, he or she cannot access it. The issue of universal coverage is much more crucial than local production which fills up for the private market.

How does the association drive good promotional practices in Morocco?

Through a self-regulatory decision, LEMM initiated the development of the Code of Good Medicine Promotion Practices. It applies to member companies and their subsidiaries, branches and offices.

The goal is to promote an environment where we are confident that prescription choices are made based on the attributes of each product and the patient’s medication needs.

Interactions should focus on educating healthcare professionals about products, providing scientific and educational information, and supporting research and medical education.

We are working in Morocco to have a National code of good practices for promoting drugs similar to those that exist in developed countries

What would be your final message?

In Morocco as in the world, the patient’s health and interest take precedence.

Today, we remain determined to work for the emergence of a favourable environment in order to benefit all Moroccan patients and equitably, the latest therapeutic innovations

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