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Barbara Fritsche-Surchat outlines Servier's historic commitment to Switzerland, how the French mid-cap's global oncology pivot is translating into its Swiss operations, and comments on the evolution of pharma salesforces post-pandemic.

Could you begin by talking us through Servier’s presence in Switzerland and the significance of the Swiss affiliate to the group?

Firstly, it is important to note the importance of the pharmaceutical market to Switzerland itself, as one of the country’s most important export drivers. Almost all pharma companies have an affiliate here due to the relative ease of market access compared to the country’s European neighbours. Even for high-priced drugs, early access is relatively straightforward to negotiate.

Servier has had a presence here for more than 40 years and Switzerland was one of the Group’s first international affiliates. There has always been a market for our portfolio here and the country’s stability allows us to accurately forecast future market developments. This stability and ability to predict trends is unique to Switzerland and was not present in my former roles in countries like Italy, Greece, and France. Switzerland is a very profitable country for Servier, even when factoring in the high cost of living and labour here.

Since 2017, framework conditions have become more challenging here, with the Swiss government finally implementing what we see as quite harsh cost containment measures. The new tri-annual price reviews have hit Servier hard, as they have every other company, but they were to some degree inevitable as Switzerland was the last bastion of generous pricing levels in Europe. Still today, generics are about 40 percent more expensive in Switzerland than they are in surrounding countries. Branded products are about five to ten percent more expensive in Switzerland, but the gap is not as significant as it used to be.

In all of our core therapeutic areas of cardiovascular medicine, diabetes, depression, and venous disease, we are among the top 35 companies within Switzerland and within specific indications, we are either first in class or at least top three. This is due to good products, good team performance, and, of course, a really good established relationship with doctors.

All of Servier’s global affiliates have a specific role to play, but we have really established ourselves as a key early launch market for the company’s burgeoning oncology portfolio. Around five years ago, Servier started its first collaborations within oncology with the aim of streamlining the portfolio to increase profitability, increase our attractiveness to doctors, and have a long-term vision of our evolution. While the bulk of our portfolio today is still in a few very established products, our future lies in oncology. Therefore, Servier picked a couple of niches within oncology – not huge ones like breast or lung cancer – but areas nonetheless where there is still a huge unmet patient need.

In 2016, we acquired the distribution rights to Lonsurf in Europe and some other parts of the world from a Japanese company. Switzerland, along with Austria, was one of the first countries in which it was launched. This was thanks to the Swiss reimbursement system but also due to the early access that innovative medicines can gain here.

Cardio-metabolic drugs still make up over half of Servier’s revenue, but the company is targeting spending up to 50 percent of its R&D budget on oncology. What are the timelines for bringing even more oncology products to market?

Servier is in the process of developing a huge R&D hub in Paris-Saclay, concentrating all our research teams in one location and upping our investment in oncology R&D. However, we still maintain an interest in degenerative diseases like Alzheimer’s and Parkinson’s and are continuing to maintain our investment in single-pill combinations of well-known products, which is the basis of our income today. Thanks to Servier innovation, patients can take one or two pills instead of three or four and treat multiple diseases at once. Innovative breakthroughs are scarce in our industry but reducing the number of pills that a patient needs to take has a massive impact on their quality of life. Nevertheless, our future clearly is oriented towards oncology.

Given that Switzerland is home to some true giants in the oncology field, how do you go about differentiating Servier and raising awareness of its oncology portfolio to doctors and KOLs?

We started out in oncology in Switzerland back in 2016. While we are clearly not yet able to compete with the likes of Roche, Novartis, and Bayer, it is not the size of the company that matters, but the quality of the products that we are able to provide to patients, and the service that we are able to provide to doctors. Over the years, we have developed a real expertise, predominantly in the cardiovascular field, but we will leverage this expertise to bring value to doctors and patients via our oncology drugs.

We love to collaborate with experts, and indeed most of our team are super-qualified and well-prepared to explain to doctors the benefits of our products. Servier trains its people not only on the science, but also on our values and how to interact with doctors.

What has been your experience of trying to build up Servier's oncology brand recognition at a time of remote working and a huge drop in face-to-face interactions brough about by the COVID-19 pandemic?

Honestly, it has been a real challenge and still is. Many hospitals remain closed to our representatives, especially those working in oncology, and staying in contact has proved difficult. However, despite our fledgling footprint in the oncology field, we have managed to maintain a good service level.

Our core business was not so heavily impacted by the pandemic; there our sales force managed to maintain 65 to 70 percent of their pre-pandemic activities. This was a fantastic achievement and speaks to the good contact and relationships they have with doctors.

Although Switzerland has many advantages, the pandemic showed that Swiss doctors are not as digitally savvy as their counterparts in other countries, and we had limited success in offering remote visits. The overall digital infrastructure here could also be improved. Nevertheless, regardless of these challenges, the past 18 months has been a terrific learning process for us.

How do you foresee pharma salesforces evolving post-pandemic? Will a hybrid digital/face-to-face model necessitate employing fewer people and diverting resources to other departments?

Perhaps. More importantly, the quality of salesforces is evolving as doctors require and demand more medically important information. The days of popping in to see a doctor for a quick chat are over; we are now much more interested in being long-term partners to doctors. Therefore, we foresee salesforces becoming more scientifically and medically engaged to meet the changing needs of HCPs.

However, IQVIA surveys have shown that the first source of information for HCPs remains contact with medical delegates. These delegates must provide medically relevant information that is timely, accurate, and scientifically correct, but we do not foresee the delegate role disappearing altogether.

My role today is helping to guide the affiliate and my team through what is sure to be a transformational period, showing them the changes that need to be made in themselves and in our way of working. Delegates will no longer only engage in a one-on-one discussion with HCPs a couple of times a year, but instead look towards omnichannel delegate-led discussions across personal face to face visits, phone calls, emails, webinars, virtual meetings, and congresses.

We need to support our delegates to use and become at ease with all the electronic communication tools that are available. This will also need to be further developed through interactions with doctors. Additionally, other digital tools such as digital heartrate monitors etc will have to become part of our medical service offering.

Given Servier's status as a mid-sized pharma company, do you have more scope to develop country-specific strategies to approaching this changing landscape than your counterparts at larger companies perhaps do?

One advantage of being a mid-sized global company is that we can benefit from the experiences of our affiliates in large markets like France, Germany, Brazil, and China. Of course, we have global guidelines and suggestions on how to become more efficient and profitable and are in the process of harmonising all of our reporting systems. This is urgently needed because today we have affiliates in between 80 to 100 countries, with 80 to 100 different financial reporting systems, which is a barrier to the company's further development.

The need for top line evolution and bottom-line growth is standardized across Servier globally, which is positive because it makes things more comparable. Nevertheless, we always try to think global and act local and adapt strategies to local markets. A market like China, where there can be up to 20 touch points per day with doctors cannot be compared to Switzerland, where there may only be one to three contacts per year.

Our flexibility and liberty is also thanks to our very flexible senior management team which sets common goals and frameworks to achieve them before leaving it up to the affiliates to choose how to fulfil them.

To what extent is this flexibility influenced by the fact that Servier is privately-owned, rather than a public company that must respond to its shareholders every quarter?

There are two sides to this coin. Our ownership status gives Servier the liberty to invest in the areas in which it wants to go. However, it limits the company's ability to raise capital as we are not able to ask for money on the free market by giving out more shares or selling on an arm. Servier country leaders like me must be extremely cost-conscious, but we knew this when we signed up to work for a company governed by a non-profit foundation. For me, the benefits outweigh the disadvantages. While our ability to conduct acquisitions is not as great as some other companies, Servier has in fact made some big purchases, such as the USD 2.5 billion deal for Shire's oncology portfolio.

Having been in position for four years, what are your ambitions for the next four?

Servier's pivot to oncology and Switzerland's implementation of cost containment measures, which significantly impacted our profitability, have triggered a big internal reinvention and reorganisation at our affiliate. Looking forward, I want to continue this transformation and develop oncology to a point where it makes up around 25 percent of our business here in Switzerland. At the same time, for our more established therapeutic areas, we want to retain the high level of expertise and service to the doctors and patients that have been our partners for over 40 years. We have several exciting launches coming up in cardiovascular, for example.

After over 20 years working with Servier, what has kept you at the company for such a long time?

I am very grateful to have had the opportunity to work for Servier. I have been able to work across different countries and cultures and meet some fantastic people along the way. Servier people like to work together and share the same values and objectives; that is our DNA and what makes us unique.

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