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Having just announced a major investment into a new UK Discovery Centre in London that is set to open in 2020, MSD is committed to leverage on the UK's potential in driving forward early stage discovery. Louise Houson, Managing Director for the UK and Ireland explains the reasons for that investment decision and highlights how working in partnership with all stakeholders will allow the UK to remain a top market for innovations post-Brexit.

MSD has a long-standing presence in the UK. What is the footprint today of MSD in the country?

Globally, MSD ranks number four in terms of sales. In the UK, we perform similarly to this global ranking as we currently stand at number three based on in-market sales. We have over 2,000 employees in the UK across six sites, with our national headquarters in Hoddesdon, a large manufacturing facility up in Cramlington, Northumberland, in the North-East as well as one of the UK's largest animal health businesses based out of Milton Keynes. We also have smaller sites in Maidenhead where our vaccines business is based and in Scotland. Finally, there is our London hub which currently hosts some of our research colleagues and has an important role in clinical trials both in the UK and Europe.

In late 2017, as part of the UK government's Life Sciences Sector Deal as described in the Life Sciences Industrial Strategy (LSIS), we announced that we were to establish a new 'UK Discovery Centre' in London by 2020. It will bring around 150 research scientists to the UK and hence increase our large footprint even more. Our future intent is to move our headquarters from Hoddesdon to London to co-locate with the Discovery Centre. We will then have a facility with approximately 1,000 employees in total in London.

What will be the strategic importance of the Discovery Center to MSD globally?

MSD globally is committed to being a primary research-intense biopharmaceutical company, and R&D is at the heart of our organization. The intent of the planned Discovery Centre in London is to tap into the European early discovery ecosystem. The UK in particular has a strong heritage in early discovery science and one of the strongest bases in Europe and across the globe in that regard. This is one of the reasons we decided to continue to invest in the UK.

As a company, we follow the science. Through its focus on early discovery, the Discovery Centre will provide us with the opportunity we want to collaborate with the research ecosystem around us—a tremendously rich one here in the middle of the Golden Triangle of Cambridge-Oxford-London. We hope to contribute further to the vibrant and rapidly growing London life sciences community while also providing access for more collaboration within the European life science ecosystem.

Despite Brexit, why has MSD decided to display this important dedication to the UK?

We see the UK as a world-leader in developing science, underpinned by a strong research and development infrastructure, scientific skills base and clinical trial network.

From a discovery science perspective, we think it is going to take a long time for any country to come close to matching UK standards. The legacy between the fantastic Universities of Oxford, Cambridge and throughout London has laid a research base for the future that takes a long time to grow and build. We believe that the UK will remain a critical life sciences market for the next 15 to 20 years and are extremely happy to showcase this belief with our investment.

Of course, Brexit poses a challenge to the whole life sciences industry and we are very much hoping to see regulatory alignment with the EU. This will continue to foster investment in clinical trials, an important aspect for early discovery and seeing the UK remain a key life sciences market.

Nonetheless, as much of a concern and a challenge Brexit is for the whole industry, MSD remains committed to investment in discovery in the UK for the reasons I have outlined.

What have been your priorities in your role as Managing Director since you took over the position one and a half years ago?

The vision and mission of the company globally is very clear: we will always be a research-intensive company, aiming to improve patients' lives. My role as Managing Director is to create the right capabilities and environment that will allow us to fulfil this vision and in particular ensuring every patient in the UK gets access to the right medicine at the right time. This includes actively nurturing our pipeline while also focusing on people and talent at MSD. An organisation is only ever as good as the people that participate in it.

Moreover, it is my responsibility to manage a rapidly evolving environment and how we respond to this. Take Brexit – this was voted on two months before I started in my role of Managing Director so is a good example of how swiftly things can change!

Other examples include the NHS (National Health Service – the UK's single payer). The NHS, along with every healthcare system in the world, is facing the challenge of increased demand and therefore, affordability. Companies such as MSD have to think how they navigate their way through these challenges and working alongside the NHS in tackling said challenges has been a priority for MSD. Finally, we see in the UK a health system that presents a huge amount of valuable longitudinal patient data which could be an important asset for the industry. Just as the NHS has to decide how it can strategize to make the most of its data to enhance patient care, we are also considering digital transformation and its impact and opportunity on us as a company and its potential to empower patients as well as improve the way in which we operate including R&D and supply of medicines.

In terms of digitalization, what strategy are you pursuing moving forward?

At MSD, we spend a lot of time considering what the right strategy is, and our focus has to date been threefold. Firstly, we try and engage with our customers, thinking about how we can interface with them to create the best possible customer experience. From our field force to our social media channels, we cover the whole spectrum of interaction.

Secondly, we pursue an internal focus, as most companies do to increase productivity these days. This revolves around process automation and a general desire to help the company and our people to be more agile and efficient.

Thirdly, we are dedicating considerable resources to partnerships. A great example of this is the 'Early Intervention Long Term Conditions Test Bed' project in collaboration with NHS England. The project, which has been ongoing for over two years, combined innovative technology with data analytics to look at improving the care of patients with long-term conditions in the area of Manchester.

Through the NHS, the UK disposes of a truly huge set of data the country could leverage upon moving forward in research. How do you think the UK should tap into this potential?

The UK has indeed a unique set of patient records, the challenge is making sure this data is linked. At the moment, this data is sitting in a number of places, with different sets in primary and secondary care, and within the community in pharmacies for instance, but this needs to be joined up if the UK is to realize the benefit of this unique asset. The LSIS has stated there will be an effort made to pull it all together into one base.

Another great aspect in the UK is the diversity of the population in the country. It might not be the largest country, but the heterogeneity of its population speaks for the UK and the potential of its data sets.

I think that what we see today is a data rich country where abundant opportunities lie alongside a huge untapped potential. For companies to continue to invest into the British market, they need to see this potential transformed into something tangible. All stakeholders have to work together and strive towards a common goal, and I believe that with the LSIS, we see that for the first time.

Globally, MSD focuses on the therapeutic areas that it believes can have the most impact on human health, covering everything from oncology, diabetes, cardio-metabolic disease and resistant microbial infection to Alzheimer's disease. How is this portfolio reflected locally?

The UK portfolio is very similar to the global portfolio of MSD. Our portfolio in the UK is diverse with strong growth in the oncology business. In lung cancer specifically, we are very excited to support this market segment as this represents a huge unmet need in the UK.

MSD also further supports public health initiatives and outcomes with its vaccines business.

Then, we have a broad specialty business covering hepatitis C, HIV, antibiotics, antifungals and anesthesia, together with a large primary care division with an important presence in cardiovascular disease and diabetes.

Overall, we have a significant portfolio diversity which is beneficial and challenging at the same time: we are thrilled to offer so many solutions in the UK, but also have more diversity to manage than counterparts with more specialized portfolios.

Looking forward, we are seeing some new indications in oncology being studied and are very excited about the extensive research program we are conducting here. I hope that we will be able to launch new indications for many years to come. We will also augment our presence in our legacy areas and have new molecules in the anti-infective space in our pipeline.

How would you assess the general ease of market access in the UK?

The UK has a truly unique market access environment as it functions as a single payer market through the NHS. I recognize some real strengths in the UK, notably with an outstanding HTA (health technology assessment) agency in NICE (National Institute for Health and Care Excellence). Globally renowned, NICE is an asset we should value as a market for its independent analysis.

Nonetheless, we see challenges arising and think the way industry is bringing very different innovations to market requires a reassessment of current processes.

We're encouraged that the UK Government responded to the Accelerated Access Review (AAR) with commitments to accelerate access to 'transformative' medicines, via a new Accelerated

Access Pathway (AAP), but the scope is too narrow.

There remain many challenges for access to medicines for patients in our commercial operating environment. Ensuring that the NHS is in a place where it is able to adopt these treatments quickly so that they can deliver benefits to patients will be critical to delivering sustainable high-quality care for patients, as well as long-term efficiencies for the system.

One of the key challenges when you compare the UK to other markets globally is the relatively slow uptake of new innovations. For the UK to remain a very attractive market in post-Brexit times, we have to ensure rapid uptake. I believe the solution lies in partnerships. The aforementioned challenges concern the industry, as well as the NHS, NICE and the Department of Health and Social Care (DH). We have a responsibility to partner to overcome the current affordability challenge faced by the NHS to work towards a more flexible system with rapid uptake at its core.

If we came back to the UK in five years, to produce an update on our report, what would you want to tell us?

I have worked for MSD for 20 years, both in the UK and Ireland. If I have a hope for the UK, it is that the country remains a key vibrant life sciences market for global companies. We want the UK to remain a key market so that patients continue to benefit from early access to innovation. If we have different regulations from the EU, we have to ensure we are somewhat special in order to guarantee we remain a target for early access.

This is one amongst many reasons I would really like the LSIS be realized. In five years, if the UK collectively has made sure to leverage the fantastic data available here – be it through Genomics UK or patient records from the Biobank – the UK will be in a great place. We will become a global centre for real world evidence and there will be huge clinical trial presence in the UK. I consider it my role to make sure that ambition is met.

Lastly, if the industry, the NHS and the DH can partner effectively in solving the affordability challenge, this will further ensure British UK patient access to innovation and strong uptake in the UK.

As a UK citizen, I want the environment to thrive, not only because it is beneficial for patients and the UK as a whole but also because it is our children’s future including mine.

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