

# Interview: Stéphane Lassignardie General Manager, AbbVie Canada

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*Stéphane Lassignardie, General Manager of AbbVie Canada, discusses the significant milestones for AbbVie Canada in the past three years, with major product and indication launches, the various initiatives it has introduced to support patients and healthcare practitioners, and the exciting investments it is making into its pipeline.*

**Stéphane, having been appointed General Manager of AbbVie Canada in June 2014, what have been some of the major highlights for you over the past three years?**

Fundamentally, AbbVie is an innovation-driven company. We launch best-in-class or first-in-class medications for highly significant unmet medical needs. Therefore, the key achievement for AbbVie Canada in the past three years has been our ability to launch many new compounds and indications.

Firstly, we have had three new indications for Humira either listed or reimbursed, including the autoimmune disease, hidradenitis suppurativa (HS), in dermatology, for which it is the only approved medication. We have also launched new hepatitis C medications. As a company, we are also really focused on building a footprint in oncology with the launch of Venclexta<sup>®</sup>, our new hematology compound for chronic lymphocytic leukemia (CLL). Having successfully launched them, the next step is to improve the capacity for patients to access them, given the complexity of Canada’s market access environment.

A second major achievement is the strengthening of the corporate culture. AbbVie turns five on January 1, 2018. We are therefore extremely proud that we have been able to generate huge engagement within our employees for our company mission to search for innovation and patient-

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centricity. In the latest Great Places to Work Canada survey, we ranked 14<sup>th</sup> across the country. What was even more heartening is that 97 percent of our staff responded that they were really proud to work at AbbVie.

I firmly believe that as long as employees understand, believe and participate in the company mission, regardless of their role and level in the organization, they will have the passion to drive the company's success. We have received feedback from physicians that whenever they meet our teams, our people are very happy! I was very touched by that. Very simply, happy people deliver better results!

## **The fragmentation of the Canadian market access environment does present pharma companies with challenges. How does AbbVie assess the current situation?**

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The overall issue stems from the fact that Canada has both a public and private health system. On the public payer side, Innovative Medicines Canada (IMC) commissioned a study showing that in terms of reaching a milestone of 80 percent of patients on public plans receiving access to products, the average delay is around 449 days, placing Canada 18<sup>th</sup> out of the 20 countries studied. This applies not just for new medications but also new indications, which is unfortunate. In some other countries, the reimbursement process for new indications is speedier since the product has already been approved previously.

The key message we want to communicate is how we can discuss the value of drugs: drugs are more an investment than a cost within the system.

According to the Canadian Institute for Health Information (CIHR) and their most recent data on healthcare spending growth trends, drug expenditures is the slowest growing category (0.7 percent) among the three largest categories of health expenditure in 2015.

Hospital and physician spending are expected to grow in 2015 by 0.9 percent and 2.2 percent respectively. Innovative medicines account for 6.4 percent of overall healthcare spending in Canada, but this investment has resulted in significantly improved health outcomes for patients.

Hospital spending accounts for the largest share of total health spending by the public sector, at a forecast 37.7 percent in 2016.

A company like ours that is driven by innovation understands that there needs to be space for innovation. But that space does not necessarily come from cutting the drug budget. It comes from looking at the most efficient way to address waste in the system and optimize standards of care. Another question is, how do we work with all the stakeholders – not just the public payers – to look at the most efficient way to address waste in the system and optimize standards of care?

## **How can AbbVie bring its industry leadership and expertise to support the healthcare environment in Canada?**

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Firstly, we aim at delivering the message that we are ready to be part of the solution. We all share the vision of improving the health of Canadians. If we start from that vision, we should be sitting together to find solutions and the common ground. Cutting the cost of innovative medications will not solve the issue of unsustainable healthcare expenditures. As a trade association as well, with IMC, we believe that we can find solutions – without delaying access. Other countries have different

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models with their own challenges, but the fact remains that when true innovations are introduced there, they can be reimbursed in a timely basis.

We have also launched various programs to bridge gaps that we see within the existing healthcare systems. For instance, we have been working with rheumatologists working with our product, Humira®<sup>®</sup>, on a treat-to-target initiative, by educating them on how to use ultrasounds to better identify what the appropriate treatment targets for patients should be.

In another example, we have worked with rheumatologists in the province of Nova Scotia to support patient care. A common issue with Canada is the lack of specialists in certain parts of the country. In Nova Scotia, two out of the three existing rheumatologists were retiring soon. We identified this issue and decided to partner with the stakeholders there to find solutions to improve standards of care. For instance, we trained a GP to help support the care of stable patients so that the last rheumatologist could concentrate on new patients. In some cases, access times to the rheumatologist have fallen from a year to two weeks.

In the area of hidradenitis suppurativa (HS), we have launched a number of support initiatives because this disease is highly stigmatized. HS causes abscesses to form in patients's bodies, which causes not only pain but also emotional distress and embarrassment. It is also a rather unknown auto-immune disease. We decided to bring together ER doctors, dermatologists and surgeons to educate each other on HS. Patients sometimes enter the ER multiple times a year to have their abscesses lacerated, without receiving proper treatment. In one such case, one individual entered ER 50 times within a year.

Collaboration is so essential because it promotes better patient outcomes. We worked with a dermatologist that was so passionate about the cause that she translated some of the disease awareness materials into Arabic and Farsi to better serve some of her patients. Health literacy is another area in which we have invested significantly. This is an issue across many Western countries. Canada is also an immigrant country with a very diverse population, so coupled with our complex healthcare system, health education is critical.

We have supported over 80,000 patients through our patient support program across various disease areas, predominantly in autoimmune diseases. Ultimately, when a patient is prescribed one of our medications, they are not prescribed a molecule – they are prescribed a comprehensive solution.

**With Humira representing 63 percent of AbbVie's global portfolio, how do you balance your portfolio between current and upcoming products?**

Humira's success has given us the ability to focus on the future. Our future pipeline is really what drives the company.

Currently, we focus our pipeline research on immunology based on our deep expertise. We aim at having two new compounds in autoimmune launched in the next two years, not only in the current indications for Humira but also in additional indications like atopic dermatitis (AD).

The second focus is on oncology. We have a prostate cancer medication here in Canada, Lupron®, as well as Venclexta®, as I mentioned. We will have many more indications in hematology to come, and we also will enter the solid tumor space. Our investment here is driven by the search for novel approaches and a longer-term perspective.

Part of this global plan is being driven by a very exciting Canadian story as well! AbbVie very recently announced a global collaboration with Canadian-biotech, Turnstone Biologics, to license up

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to three of their latest oncolytic viral immunotherapies. They have designed a platform to act both as a selective tumor-destroying oncolytic virus and an immune-stimulating T-cell vaccine.

In the longer-term, we also have significant partnerships and initiatives like our collaboration with Calico, where both sides have invested USD 250 million each to advance research in the fields of oncology and neurodegenerative conditions.

As a company globally, we expect to launch a 20 new medications and indications by 2020.

**As general manager of AbbVie Canada, how do you advocate to raise the profile of Canada within the global AbbVie organization?**

The role of a Canadian GM is to build bridges between our global organization and the local ecosystem, including academic and R&D initiatives and ideas. AbbVie is extremely open to this and my commitment has been to bring people from global teams overseeing R&D, business development and investment, for instance, to Canada in order to put Canada on the map. We have already organized several scouting missions across Canada from Calgary, Edmonton, Vancouver, Toronto to Montréal. Essentially, we act as the ambassador for Canada within the global organization.

As you know, the R&D model for the biopharmaceutical industry has completely changed and it is largely through the identification of such investments and partnerships that we can make a significant difference to the future of healthcare.

AbbVie is currently conducting over 130 clinical trials in Canada alone. Canadian academics and physicians are also highly recognized within the global industry. For instance, Dr. Thomas Hudson, AbbVie's VP Oncology Discovery and Early Development is a Canadian extremely well-known in Canada having worked both in Genome Québec and Ontario Institute for Cancer Research (OICR), and was recruited by AbbVie a few years ago. It is great for both AbbVie and Canada to have him on board.

Having Canadians at leadership levels within the global industry is a great way to build bridges and promote the country.

**On a final note, after so many years in the industry, what continues to keep you motivated?**

AbbVie's mission: having a remarkable impact on patients' lives.

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