

# Interview with Mats Persson, Managing Director, Nordic Operations, Astellas Pharma, Nordic

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## **Why was it decided that Copenhagen would be the headquarters for Astellasâ?? Nordic operations?**

If you combine the Nordic countries together it is around 25 million, and Sweden is approximately 40 percent. Every time there are calculations about the Nordics, Sweden is the biggest in market potential, population, etc. Therefore, many companies prefer to put their HQ in Sweden instead of Denmark. However, it was decided by management that the headquarters should be in Copenhagen because Yamanouchi was the biggest operation and it was already here, so it was a decision made up front. Fujisawa had its office in Gothenburg and it was very tightly connected to the transplantation society because the biggest centre for transplantation in the Nordics was in Gothenburg.

As a true believer of the region, I think that Denmark is a very good place to have a Nordic office because from this location you can run two countries. There is only a bridge between us, it takes 20 minutes to reach Sweden from here by car and only an hour flight connection. Where as in if youâ??re in Stockholm, you have to fly out to each country, so our locations is very convenient. Furthermore, and most importantly, there is a very good recruitment ground because we can recruit from two countries.

## **Most of your Astellas counterparts that we have interviewed in different parts of the world are very proud to say that they were the ones establishing Astellas in their respective countries. What is your own story of building up Astellas in the Nordic countries?**

Before the merger I was working in Fujisawa, where I was responsible for the Nordic operations. In 2004, where the merger was announced, I had acquired experience working in Scandinavia and I knew the Nordic set-up quite well, therefore I was selected to establish the operations.

Before the merge both Yamanouchi and Fujisawa had a presence in the Nordic region, however even when the merge happened we were very small, since we had few products. Fujisawa has Prograf transplantation, we also had dermatology and Yamanouchi had Omnic for BPH. We were about to launch Vesicare and we also had an OTC dermatology portfolio. We were around 90 people and our turnover was around 40 million USD.

Today 2012, we have sales close to 90 million even though we have lost at least 20 million in patent expiry and price reductions (mainly in Norway and Finland since they have an international reference price system, i.e., in Norway we have lowered the price around 40 percent over the last three years of one of our products,) we have been able to have a steady growth.

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Furthermore, we have constantly outperformed our competitors, the Big Pharma: Pfizer, MSD and Novartis. We are proud to say that we are doing better than them in respective market share.

**Is Astellas outperforming the competitors because you are just focusing on certain therapeutic areas or because you are better?**

That is a good explanation. The other one is the size; we have a lean organisation with little hierarchy, which means that we can take and implement decisions very quickly. In bigger pharma companies you have to go to their HQ to get an approval and it can take up to a year to get it, compared to a company our size that can do it in one month.

The other will be the way we are organized, having sales organisations in the five Nordic countries with a HQ that takes care of all the support functions. Denmark is our HQ and we support all the other Nordic markets with their management, finance, HR, medical, regulatory, pharmacovigilance, medical information, marketing, etc. So, everything is centralised here.

This organization works quite well since HQ focuses on the administrative functions, whilst the countries focus on positioning our products. It also create healthy competition between us, since if we have success in one country it is a very good benchmark for the others; if it was done in one county, it is possible to do it in another.

We have speed, we have power to take decisions and we are able to recruit very skilled people. Furthermore, the drug pipeline makes Astellas a very attractive place to work.

**How easy is it to attract and retain the people? When we talk to people here, everybody talks about Novo Nordisk; it is their dream job to work there. So is it true that one of the main challenges for MNCs is talent?**

I came from Novo Nordisk so I have a slightly indifferent opinion about that. I can understand they're doing a fantastic job, especially on the international side. They are very attractive to recruit talented people, but it depends on what you are interested in. Astellas Nordic is a sales and marketing organisation, if you are interested in sales and marketing this is a company where you can get it, where you can have an impact and create results.

**What is Astellas raison d'être? And given that the Nordic operation have been growing, what have been the main therapeutic areas responsible?**

To answer the first part, we would like to improve the health for people around the world. That is actually something that we are thinking, that is the reason everyone at the company gets their salary. Our job is to secure that the right patient gets the right medicine at the right time. We are not interested to sell our medicine to all patients, they should have the right diagnosis to have the right treatment. Therefore, locally we work a lot with clinical trials, non-interventional trials and we do a lot of education campaigns.

As for the therapeutic areas, Astellas globally has an intention to be a global category leader, GCL. We have four areas where we decided that we would like to be in: transplantation, immunology, oncology and urology. In the Nordic market, we are the market leaders in transplantation and urology, and we have a fantastic pipeline in oncology.

We also have anti-infective, pain and dermatology. In urology, with Vesicare, we are market leaders and Eligard, an LHRH agonist, is also a very well established product. In transplantation, we have Advagraf, Prograf, and in anti-infective we have Micamin and Difclir.

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For pain, two years ago we introduced a patch for localised neuropathic pain; one hour treatment gives pain reduction for three months in 50 percent of patients. Unfortunately, you need to pre-treat the patient and the cost is perceived as relatively high, 350 EUR per patch. However, it lasts for three months. It is similar to the cost of Lyrica, but with the patch you avoid the risk of abuse, overdose/underdose, and interactions, which are some of the biggest problems in pain treatment.

Coming back to our anti-infective drugs, we launched a unique product, Dificlir, last year (2012). It is the first new antibiotic in over 20 years and it's specifically targeting clostridium difficile. It works only on this spore, it prevents a recurrence and it doesn't affect other bacteria, which are also good for the body to have in the system.

### **Has the product been reimbursed?**

The product is not reimbursed yet, so there we run into the market access affordability question, which is one of the biggest hurdles in the Nordic countries – getting reimbursement is a challenge today.

### **What other products have you launched or will be launching soon?**

We are about to launch Mirabegron/Betmiga for overactive bladder and we are looking forward to being the market leaders. We are very confident that we will develop and lead this market because even though overactive bladder doesn't kill you, it kills your life. It is a problem that many people keep to themselves. They don't dare to tell their partners, go to the theatre, go out shopping, which results in isolation.

### **When are you expecting to launch it?**

The product is approved and actually we already got reimbursement in Denmark. We sent in the application just before Christmas and we got it in January, so ultra-short handling time from the authorities, probably because they see there is a need for it. Now we are waiting for the production to catch on, because the product should be approved by the end of January 2013. We expect to sell the first package in Denmark in May.

I would like to go back to the coming launches since we have one more in the pipeline, Enzalutamide/Xtandi for prostatic cancer, which is one of the potential blockbusters, one of the big sales that we have extremely big expectations for. Xtandi was approved in the US, the FDA gave it fast track and we got the approval already after 2 months. EMA has the product now in Europe, it's filed and we expect to have approval around August this year.

Apart of the products that I have mentioned we have others in the pipeline. We are really working with a very rich pipeline, we launch at least one product per year (which is unique today) and it's always either first in class or best in class.

### **With this rich pipeline, what are your expectations, or what is the growth potential that you see for the Nordic region in the next five years?**

We haven't done such a long-term projection because there are a lot of things happening at the same time: generics entering in the transplantation area, discussions about introducing an international reference system in Sweden, which will have an impact on the turnover. It is very hard to predict and there is a lot of uncertainty with market access; can the country afford these new products? Therefore, we cannot plan so far ahead.

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**Despite not being able to plan so far in advance, Astellas's pipeline is very promising and you are very motivated. What is the "revolution" that you are planning in Astellas Nordic?**

A revolution that will impact people to think positively. If you think tomorrow: it will be raining, then you're not planning to go on holiday, you can put yourself into that condition. It's only a problem, it's not worth it to cry. If you have positive thinking you can really do something to change tomorrow and that's actually the logo we have, it is changing tomorrow. There is an elegant explanation and it is very simple to remember. Changing tomorrow starts with yourself, what will I do to change tomorrow? Have you asked yourself that question?

Changing tomorrow starts with yourself and that is the first hurdle. What will I do together with my colleagues and what can we do as a company to improve the health together with health care professionals? So three steps.

**So you start with yourself, then with the personnel, then with the health professionals ?**

That is correct, so in order to build up enthusiasm and a hype when we are going to launch these big products, we produced a short motivational movie at the end of our sales conference.

We have sales and marketing two times a year when we bring all the countries together, educate them, train the campaigns, etc. The last campaign that we did internally in the Nordic region was "the extra mile." This is a very interesting concept, which aims to create a new mind-set; will you be a part of this success? Will you do what you have to do to make this happen? Doing these kinds of internal campaigns is very important to motivate our staff and create a cohesive culture in our Nordic operations.

As the General Manager, I really believe in the Nordic potential. There is so much we can do and all is in our mind. To build up something great starts with someone's mind-set thinking they can have an impact and we want our staff to believe in that because at Astellas we are: "Changing tomorrow for people that need help to get a better life".

**To finalize, what would you like to be your final message for our international readers?**

The future is bright and Astellas is definitely one of the key players in the Pharma business, we have great products, we are first in class, we have best in class product to launch. In the next five years will launch ten new products that can really change the life of patients; we have very exciting times in front of us.

**In a more personal way, what keeps you that motivated?**

I'm in a fortunate situation because I've been able to work here since the start. I've been able to recruit very good talented people, to see them grow, work together and contribute, and that's given me a great satisfaction. It's just fantastic.

**And now that you will soon be given the added responsibility of managing the Baltics, you're going to have the same chance?**

I am very excited about the Baltics, it's hard to believe it's only 300km from here and it's such a different place. I think with the experience and knowledge that we have we can really contribute to developing the healthcare system in these countries.

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