Omar Lugo Aguirre â?? Country Lead, nPVU & Market Access, Operations Head, UCB Mexico & Latina

The upcoming three years are crucial and UCB Mexico wants to play a role elevating the standard of care in our country

13.05.2020

Tags:

Mexico, UCB, CNS, Strategy, LatAm

UCBâ??s Omar Lugo Aguirre outlines the companyâ??s response to the COVID-19 pandemic in Mexico, countering stigmas around neurodegenerative and mental diseases, and the abundant opportunities that Mexico and the region carries for the firm.

Before we move into the companyâ??s operations in Mexico, given the worldwide COVID-19 situation, how are you dealing with it from an organizational point of view and what have been the instructions received from HQ?

Given that we are a European company, we were aware of this situation as soon as it hit Europe. Weâ??re focused on four dimensions as a company, first and foremost to ensure the health of our people and their families, besides having all team members working from home, we have also implemented initiatives to provide support in different aspects, from a telephone line for medical consultancy and psychological assistance for those who need emotional support along this experience, to remote engagement sessions on the best use of time while staying home. In addition to that we are constantly providing information to better understand COVID-19 and trainings to ensure the continuity of the professional development of the team despite the current situation.

Secondly, to ensure patientsâ?? access to care, we have analyzed our supply chain end to end, to identify where the potential risks might come from. As you can imagine, exports from Europe have become more complicated due to sanitary reasons but apart from a few delays, we are doing fine for the moment.

Thirdly, maximum cooperation with local authorities to limit the risk of infection spreading. As said, everybody is doing home office for five weeks now, including the field team who is not having any face-to-face interactions anymore, which makes things remarkably interesting and challenging. Weâ??re using all the tools available such as CRMs and we have received good feedback so far. We were one of the first to go fully on home-office, and weâ??re trying to do the best we can to keep working closely with physicians while giving them an empathetic and respectful space since they are still working close to the front line. Studies show face-to-face interaction is the most impactful way to operate in countries like Mexico, but I believe this situation will come with changes and will teach us all a broad spectrum of how to do things differently. We all need to wait and see how this is going to end.

Lastly, to contribute to the economy and society. To that end, we have given a significant donation to the Red Cross Mexico as our contribution to help those healthcare providers that are directly fighting this sanitary situation in the front line. Also, we have reduced payment terms to commercial partners and customers.

These four dimensions represent how we have coped with COVID-19 as a company in Mexico so far, but we are also looking into the best way to roll out a de-confinement strategy. Of course, we will be aligned with local authoritiesâ?? recommendations, and we will consider several factors such as antibody status and individual risk factors.

Looking into your position as country lead, neurology patient value unit (nPVU), market access & operations head, what were your first priorities taking over the role?

My priority is to keep the team going. The governance of the company is done by a leadership team composed of six members, and in order to be successful we need to work as one. We have a lot of work to do, especially to address and reshape the way we operate both with the government as well as the private sector. We have been experiencing a big shift in Mexico, moving from private medical offices accessible only to a small part of the population, to most drugstore chains now having a physician at the point of sale consulting at very affordable costs. With the support of a consultant we made an assessment of how this works and it is especially important to understand the experience, service, and time to receive primary care which is now much faster. We have learned that the population goes to the public sector for chronic diseases as this could put a burden on the familyâ??s finances but use the private practice and the drugstoresâ?? physicians for acute diseases. This system is becoming more integrated, from consultancies to diagnostics and so on, so it will play an important role in the provision of care in the country.

Neurodegenerative and mental diseases carry a social stigma all around the world. What is the perception of mental diseases in Mexico and how would you evaluate the level of care for neurology in the country?

Mexico is no exception, there is stigma especially around epilepsy, and this has deep cultural roots. We have participated in different initiatives to reduce the stigma around epilepsy plus several campaigns with patient associations to create awareness. From our interactions with patients we

learn both happy but also sad stories; I recall a patient who does pottery and he goes to several villages to get different colorful soils in order to do his work. In one of those visits, he had a seizure and the villagers thought he was a drug addict on an overdose, and they tried to kill him. It was a nightmare for him, and for me, this is a truly clear example of how misinformation and misunderstanding can affect people living with epilepsy. This story and many others have impacted me and reinforces my commitment to inspire the team to do what we can to shift the paradigm and contribute to improve their quality of life.

Taking into consideration this existing stigma and the level of misinformation among general public and patients, we created the position of Â¨patient liaisonsÂ¨, who are healthcare professionals that interact directly with patients and caregivers. They never discuss pharmacological treatment options but provide support around psychosocial aspects of the disease: information for parents whose kid has been diagnosed, so on and so forth.

In Mexico there is an access issue too. We have less than 35 certified epileptologists and less than 30 Movement Disordersâ?? specialists in the whole country, we need to support these subspecialties and inspire young Neurologists to raise that number. We do this by creating scholarships with the National Neurology & Neurosurgery Institute aiming to elevate the epilepsy and Parkinsonâ??s standard of care in Mexico. We also want to help patient associations become stronger and build upon their knowledge, organization, management practices and ways to interact with their stakeholders. We can bring different approaches and best practices from around the world, as when we visited *La AsociaciÃ³n Parkinson Madrid*, and help them adapt that knowledge to local needs. Everything that we do has a common goal: to create value for the patients.

How is UCB working with the government increase the awareness and treatment of psychiatric and neurological conditions?

We have been working with a Government initiative called *Programa Prioritario de Epilepsia* for the last seven years to really build the needed capabilities at the primary care level to increase timely and accurate diagnosis. We are 125 million people in Mexico and barely account for around 1,200 neurologists approximatively and 35 epileptologists so what are the odds to be diagnosed and have access to one? The numbers show that approximately two million Mexicans live with epilepsy, and with only 35 epileptologists it is easy to understand thereâ??s a significant gap in terms of diagnosis. Most of the specialists are located at in the big cities, so in the smaller ones or rural areas the access to a neurologist is extremely difficult. The aim of the *Programa Prioritario de Epilepsia* is to provide knowledge and guidance to the first contact physicians to diagnose properly or suspect the diagnosis and refer the patient to a specialist, plus provide the basic care.

Looking at UCBâ??s global portfolio in CNS and immunology, how adapted is it to the needs of the population here and where do you see the growth coming from?

In Latin America, our strongest portfolio is in immunology, then neurology, and established brands. In Mexico, however, we have a robust portfolio from established brands, especially allergy which is its most important area, then neurology and immunology. Really the established brands are a key component of our portfolio as they are part of UCB legacy and we will keep investing in them, but also in specific new products we are bringing to cater special patient niches. Over the next two decades, the treatment priorities for neurodegenerative conditions will change towards neuroprotection. We are ready to lead that evolution. Our new solutions can bring a lot of value even to small sub-populations so access for us at UCB means finding the right treatment at the right

moment for the right patient and at the right price. In Latin America, the perceived value of price is particularly important, but this is becoming a global concern, since governments are increasingly more sensitive to price given the sustainability of their limited healthcare budgets.

Another point I would like to add is the fact that up to 30 percent of epilepsy patients do not have an adequate control of their condition, so we are investing in providing additional solutions for that sub-population. There are a couple of concepts around this topic that have heterogeneous definitions across physicians, Â¨pharmaco-resistant and refractory epilepsyÂ¨, so thereâ??s an opportunity for us to mediate a national consensus. At UCB, we want to be part of the solution and we want to do what is best for the patient.

What is the strategic significance of the region you are managing for UCBâ??s business and more specifically the importance of Mexico as a regional hub?

The company is divided in three big markets: US, Europe and International Markets. We are part of the International Markets area which has been reorganized recently. We are an important market, the basecamp of our operations in Latin America and strategic for the footprint we can have in the region. The number of patients we can reach in Latin America is significant, and it has been estimated that by 2025, two of every three patients will come from International Markets so an impressive growth is expected, though access can be an issue in this type of markets. What we have learned is that if we show we can improve the value for the government, they will grant the needed access. We have seen this in different areas like oncology and in our case in immunology where we were able to show and prove an advantage with a relevant price. This is an example of the potential opportunity there is for those of us who can provide value solutions to the stakeholders.

What are your strategic goals and priorities in the foreseeable future, where do you want to take UCB Mexico & Latin America?

We see Mexico and Latin America as a land of opportunity, as the growth rates we see in International Markets and Latin America are quite different from those in developed markets like Europe due to access to a broader population. The biggest challenge we currently face is being able to adapt to the shifting environment, itÂ´s not anymore a matter of size but a matter of agility â?? the fastest company to advance and adapt to governments needs will be the one reaping the benefits and having a bigger seat at the table.

In my personal view, what the Mexican government is trying to accomplish is very positive from a patient perspective, but unfortunately the level of healthcare provision is uneven for different populations, depending on the type of access the outcome is different too. The system now is struggling as we are working against a paradigm, and that means changing the way to access the market and work with stakeholders, as well as demonstrating value with clinical data of Mexican patients. Therefore, we are investing in regional research sites and working in all our current clinical projects to have a cohort within the Latin American population.

What would be your final message for our international readers?

Usually people hear the bad news coming from Mexico, but there is also very good news that need to be shared. I think we shouldnâ??t get stuck in the middle or in the process but think about the outcome and what we want to achieve. We are starting a new decade; the decisions we make today

will shape the course for the next years. The upcoming three years are crucial and UCB Mexico wants to play a role elevating the standard of care in our country. Our contribution to this is by providing educational platforms to bring Mexican physicians closer to the experience of international Key Opinion Leaders, not only on the latest technologies and diagnostics but also on concepts like integrated care, considering every need along the patient journey. To conclude, I believe itâ??s important to have a positive view of Mexico despite the clashes made by changing the paradigm and think of the outcome which would be having one universal healthcare service with a higher standard of care which is very appealing for anybody. At UCB we want to support the authorities and be part of the solution, as we have a lot to say and resources to share in order to achieve that common goal.

See more interviews