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Taiwan is a strategic base for both patient access and generating learnings that can inform regional approaches

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[Taiwan](#), [Biogen](#), [Rare Diseases](#), [Neurology](#), [Strategy](#), [Access](#), [Innovation](#), [APAC](#)

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*Sabrina Zimmerman, General Manager for Taiwan, Hong Kong, and Macau and APAC (excluding Japan) Portfolio Head at Biogen, shares her perspective on the company’s expanding presence in Asia and its evolving focus beyond neuroscience. She discusses the region’s innovation potential, the strategic priorities driving rare disease and other exciting therapeutic areas, and the importance of building local partnerships and clinical trial ecosystems. Zimmerman also reflects on inclusive leadership, mentoring the next generation of female leaders, and the universal mission of delivering breakthrough medicines to patients.*

**After 13 years in the US, working in Biogen’s global headquarters, you have returned to Asia. What drew you back to this region, and why is now the right time?**

APAC has always been an exciting and dynamic region for me. It is home to a significant share of the world’s population, and when we think about multinational healthcare innovation, we must be present here – both for innovation and for equity. APAC markets present meaningful opportunities to deliver medicines to underserved populations through models that differ from Western systems, and it is critical that we ensure access to innovative therapies across diverse patient communities.

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There is tremendous innovation happening across APAC. Many health systems in this region have developed highly effective care pathways. For example, Taiwan's progress in newborn screening and early intervention for spinal muscular atrophy (SMA) illustrates what is achievable when clinical expertise, policy focus, and public health priorities are aligned. Across APAC, academic partners, biotech companies, and industry leaders continue to accelerate the development of new technologies and therapeutic approaches, strengthening the region's growing influence in global biomedical innovation.

Having worked in Asia earlier in my career, I have witnessed first-hand how rapidly the region continues to evolve. There is a clear ambition not only to deliver high-quality care domestically, but to contribute more meaningfully to the global scientific community. This makes it an extraordinary time to be working in APAC.

For me, returning to Asia was about engaging with that innovation and bringing diverse global experiences to support local development. I enjoy working with my highly talented colleagues in APAC, and this role allows me to apply lessons learned in local, regional and global roles to deliver real value for patients. It is both a privilege and a responsibility to lead a team in this region.

### **How do you view the growth potential of Asia, and what strategic priorities guide Biogen's expansion in the region?**

There is still significant unmet medical need to address with our strong core portfolio of products. A key priority is increasing disease awareness and improving diagnosis in the therapeutic areas where we operate.

A key strategic pillar is expanding our clinical development presence in APAC. APAC—including Japan—already contributes 10% of participants across Biogen's clinical trial portfolio. In systemic lupus erythematosus, APAC represents approximately 13% of the patients enrolled within the broader Intercontinental region, which contributes 70% overall. This demonstrates APAC's critical role in enabling diverse, high-quality recruitment and generating globally relevant evidence that accelerates innovation.

APAC is a strategic hub not only for trials but also for patient access. Our presence in the region has been driven by the strength of our rare disease portfolio. We are committed to expanding access and ensuring the systems are in place so that when novel therapies are available, patients can receive them.

Looking ahead, we remain committed to rare disease while developing new areas such as immunology and nephrology. We are also excited about our continued progress in amyotrophic lateral sclerosis (ALS) programme. Staying focused and agile, we are committed to advancing treatment options for ALS patients in APAC.

### **Biogen has long been associated with neuroscience. As the company spreads its wings into other therapeutic areas, what has that transformation looked like in your region?**

We are proud of our multiple sclerosis (MS) heritage, and the expertise that we have developed in this field can be applied beyond neuroscience. In essence, MS is an immune-mediated disease, meaning that we have a strong scientific foundation to expand into immunology. We have also moved into the nephrology space while continuing to double down on rare diseases.

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This strategic shift is evident in our pipeline where we currently have ten Phase III trials underway worldwide. Three of our pipeline molecules – for Dravet syndrome, cutaneous lupus erythematosus (CLE) and antibody-mediated rejection (AMR) – have received breakthrough designations from the US FDA, which reflects our sharpened priorities.

For the organisation, this is an exciting moment. The broadened portfolio opens meaningful opportunities in APAC, where unmet medical need is substantial. Different markets will prioritise different indications, so our regional strategy must be flexible enough to align global innovation with local healthcare realities. As part of that shift, we have also been conscious of how Biogen is perceived locally to reflect both the continuity of our strengths and the breadth of our future ambition.

### **How prepared are your affiliates to execute product launches in new therapeutic areas?**

In rare disease we have demonstrated the ability to launch successfully with small, focused teams. That experience gives us confidence heading into future launches, including ALS. However, launching broadly across multiple therapeutic areas requires additional operational scale, cross-functional coordination, and local stakeholder engagement – so we are actively building those capabilities.

A central part of our approach is developing the local footprint through clinical development. In Taiwan today we have Phase III trials across various diseases of our focus areas. These studies not only support regulatory filings but also build clinical familiarity with new mechanisms of action, create local evidence, and strengthen the ecosystem.

That said, market entry timelines can be lengthy. Regulatory and reimbursement processes mean some launches are still a few years away. We are therefore investing early – in training, local medical affairs, and evidence generation – so that once approval is obtained, we can move rapidly to secure patient access.

### **With Alzheimer’s disease emerging as a public health priority across Asia, how is Biogen partnering locally to prepare diagnostic pathways and treatment readiness?**

Biogen remains invested in Alzheimer’s science, with innovations that are potentially transformative for disease management. On a personal level, Alzheimer’s is an area that matters deeply to me: my father passed away from the disease, and that personal experience reinforces my commitment to improving diagnosis, care pathways and patient outcomes.

We work with Eisai across the region. Our focus is on increasing early detection, particularly at the mild cognitive impairment stage, and preparing healthcare systems for new diagnostic tools and treatment pathways.

We are also excited about our pipeline opportunities and we remain steadfast in our commitment to prepare the healthcare ecosystem and support infrastructure and care pathways. These are long-term tasks that require sustained engagement with government, providers and patient groups.

### **Taiwan is often cited as a regional leader in rare disease policy and reimbursement. How is Biogen leveraging that expertise and experience across APAC?**

Taiwan has been an important partner for Biogen since 2017. It was an early adopter of newborn screening programmes, which enabled early identification of infants and rapid initiation of therapy. The impact has been substantial: data published five years after implementation show that children with SMA who in the past might not have survived early childhood are now achieving near-normal development.

Our work with regulators, payers and clinicians has expanded access to older patients as well, including those with type 3 SMA, and we continue to refine care pathways to further improve outcomes for patients.

These scientific advances, together with Taiwan's policy environment, make the market a strategic base for both patient access and for generating learnings that can inform regional approaches. We aim to continue translating those learnings across APAC where appropriate.

### **How would you characterise reimbursement timelines and adaptation of innovative payment models in your managed markets?**

Access to innovative medicines remains a priority in both Taiwan and Hong Kong, and both systems are adapting as the pipeline becomes more complex.

In Taiwan, reimbursement for rare and innovative therapies can still exceed a year post-approval, but the direction is positive. The Cancer Drug Fund, increased budgets, and parallel review all signal a clear policy commitment to accelerate access while maintaining fiscal discipline. We also see a growing willingness to explore innovative payment models, including risk-sharing approaches, which is an encouraging step toward aligning payment with real-world value.

Hong Kong faces similar fiscal pressures, yet continues to refine its drug listing and funding mechanisms. While innovative payment models are earlier in development, the dialogue is constructive and focused on safeguarding equitable access.

Looking ahead, both markets have meaningful opportunities to bring innovation, value, and sustainability closer together. We remain committed to collaborating with stakeholders to ensure patients in Taiwan and Hong Kong can access first-in-class and best-in-class treatments without unnecessary delay.

### **How is Biogen supporting the local biotech ecosystem through clinical trials?**

We have ongoing trials in SMA, immunology and nephrology across the major academic centres in Taiwan. We strongly believe in local clinical investigational capabilities and advocate for bringing as many trials as possible to the region. Local trials build scientific expertise, strengthen investigator networks, and help the biotech ecosystem mature by demonstrating the ability to run complex, high-quality studies.

Investing in trials also creates a virtuous cycle: trials generate data and support early access to innovative treatments, they attract talent, and they encourage local innovation and collaboration between industry and academia.

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**Part of your remit includes scouting for partnerships across the region. How are you approaching that?**

In my dual role as General Manager and APAC Portfolio Strategy Head, I look at the region holistically. We scout for innovators to partner with – whether through distribution, licensing, local-for-local programmes, or by advancing promising science back to our global corporate strategy team. We are particularly interested in innovation from East Asia, and we evaluate opportunities for local, regional or global development.

Our rare disease expertise allows us to support innovators who may not have regulatory or commercial experience, and to help them translate science into patient impact. That may involve regulatory support, or teaming up on market access strategies and product commercialization.

**How do you advocate internally to raise the profile of Taiwan, Hong Kong and Macau within Biogen?**

My advocacy is grounded in proof and performance. Successfully delivering trials in Taiwan and generating high quality, credible data has established a clear record of execution, reinforcing confidence in our team’s capabilities. This sustained performance demonstrates the region’s readiness for investment and strengthens the strategic case for resource allocation. Consistent results and strong local engagement turn emerging markets into recognized priorities for the organization.

**What does inclusive leadership mean to you, and how do you put it into practice?**

Inclusive leadership, to me, is about creating the conditions for people to bring their full expertise, perspectives, and lived experience to the table – and ensuring those contributions genuinely shape outcomes. It means fostering an environment where individuals feel welcomed, supported, and confident to speak up, challenge constructively, and take ownership.

I practice –servant leadership– by asking thoughtful questions, setting clear direction, and enabling accountability –guiding rather than prescribing. By trusting teams and distributing ownership, I create space for innovation, growth, and sustained performance.

Mentorship and sponsorship are central to this approach, particularly for women and diverse talent who may not always have equal access to visibility or opportunity. Raised in a matriarchal family that valued self-direction and personal ownership, I carry those principles into how I lead today. I invest time in mentoring others to build confidence, expand their networks, and position them for advancement.

I encourage people to see themselves as architects of their own careers. That means intentionally mapping a path, seeking out mentors and sponsors, and building a small advisory board of trusted advocates who provide perspective, challenge assumptions, and champion your potential. Over the long term, that kind of network is invaluable for navigating complexity, overcoming setbacks, and seizing opportunity.

**Do you see differences in how pharma is perceived between North America and Asia?**

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I hope not. Our purpose â?? delivering breakthrough medicines to patients â?? transcends geography. In my experience, the commitment to high-quality science and improving patient outcomes is universal. While markets operate under different policies and dynamics, the core mission remains the same.

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