

Vanja Hoeben – Head of Benelux, Aspen



Belgian healthcare is under huge pressure to balance the costs associated with new innovations, but continual price cuts for generics are threatening the system's sustainability and eventually these products' availability for patients

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Vanja Hoeben oversees the Benelux cluster for South Africa-headquartered specialty and branded pharma firm Aspen. He describes the reorganisation that his organisation has undergone in the past few years, some of the key trends at play in the Belgian generics market, and his hopes for how a more sustainable healthcare ecosystem can emerge moving forward.

Can you outline your pharmaceutical industry experience and how you came to work for Aspen?

After completing my studies, I started out working in clinical nutrition for Nutricia, which was part of Numico. Through this, I became familiar with the healthcare industry. After seven years, I decided to go in another direction and pivoted towards pharmaceuticals. The German company Boehringer Ingelheim reached out to me, so I took on the role of District Sales Manager. I quickly moved to Sales Manager and was responsible for the policy, strategy, and key account management. During my 12 years at the company, I took on five different job roles, including building my department's healthcare affairs, dealing with wholesalers, the commercial business, but also insurance companies, building new healthcare concepts and new campaigns.

As part of the new approach, we implemented a new concept: Health Care Consultants. Experienced professionals who worked in hospitals for 15 to 20 years as COPD nurses. We made them responsible for developing and implementing educational programs for Health Care

professionals (HCP) about COPD and how to treat patients best.

I also dealt with corporate affairs and communication with the government. Furthermore, I worked with Pfizer in the brand teams.

After 12 years there, I was looking for my next opportunity and was contacted by the American company, St. Jude Medical, where I took on the role of Division Manager for Neuromodulation. When Abbott acquired the company in 2017, I became Country Manager for Neuromodulation and was responsible for rebuilding the team. We had some challenges but after a change of strategy and some adjustments in structure, it became quite successful.

After five years, Abbott restructured the business – instead of a country organization, it became a Benelux organization. I decided to go on a sabbatical. During my three months sabbatical, Aspen reached out to me, so I returned to pharmaceuticals.

What was your first impression when you received the proposal from Aspen?

When Aspen first reached out, I had not heard of the company as – compared to Abbott at least – it was relatively small. However, I did my due diligence and had several positive meetings with people at the company, which helped sway my decision. Additionally, the role covered full profit and loss (P&L) responsibility for the entirety of Benelux, making it a more international and interesting challenge.

What were the first items on your task sheet upon taking the role?

Aspen became active in Benelux in 2014, having acquired part of GlaxoSmithKline (GSK)'s portfolio here. I joined in 2019 when the company's main areas of focus were thrombosis, anaesthesia, and global brands. However, Aspen then sold its thrombosis business, which led to a 50 percent reduction in net sales and a 46 percent decrease in staff numbers here in Benelux. All of this meant that I had to restructure our operations and focus more on the tender market, as well as source new partners and find alternate solutions.

What are the differences in the tendering systems in Belgium and the Netherlands?

Of course, there is European law which every country must follow, but the regulations are applied differently in each country. In the Netherlands, companies are able to negotiate directly with hospitals, for example, making the process reasonably straightforward. Additionally, most Dutch tenders are linked to insurance companies.

However, in Belgium, the situation is more difficult, with different levels of tenders and masses of regulation and paperwork creating a lot of work for both hospitals and companies. We must constantly be in contact with our customers regarding the unique selling points of our portfolio products.

It is important to note that 80 to 90 percent of the tender decision remains solely about price. Price competition can be difficult because while competition in itself is good, the pressures – combined with strict regulations – can become overwhelming. Additionally, both the Netherlands and Belgium are facing significant supply chain issues, putting availability into question.

We hope that the next step in the development of the tendering system is having more open conversations with hospitals about alternative means of tendering and broadening the conception of value beyond price alone. This is already happening in the Netherlands. Dutch hospitals are willing to pay a little more for products that improve other ongoing issues. For example, there are extensive staffing issues in Benelux and “ if a company like Aspen can provide ready-to-use products ” it saves time and effort on the part of HCPs as well as leads to lower infection rates and increased compliance.

Hospitals in Belgium are consolidating and will have greater purchasing power moving forward. Do you think this consolidation might help companies like Aspen with volume?

Yes, that is a trend that is new to Belgium but was present a few years ago in the Netherlands. As a result, the purchasing power of hospitals will increase, creating a new dynamic between hospitals and pharmaceutical companies. There is more volume to gain, but it will also put more pressure on pricing, for example. It would be valuable if we can have more discussions on reciprocity and partnering to improve patients’ treatment and healthcare.

What are the dynamics of Aspen’s product portfolio in Belgium and are you seeing an increased uptake in generics across the system having an impact?

We are active in generic and branded generic products “ which make up roughly 70 percent of prescriptions ” and compete with other generic companies. Belgian healthcare is under huge pressure to balance the costs associated with new innovations, but continual price cuts for generics are threatening the system’s sustainability and eventually these products’ availability for patients.

Minister of Health Vandenbroucke and the Belgian government more broadly are aware of this issue and are engaging in several conversations with the industry around it. New guidelines are being established as well as other initiatives, such as establishing the option of an export ban.

For what key issues should the generic industry be advocating and fighting today?

A more sustainable model, which automatically influences prices. Currently, once a product becomes off-patent, its price immediately reduces. Then, when there is a budget overshoot, we as generic companies are forced to pay the bill back via clawback. Moreover, in the last two years, and especially last year, inflation has risen, so there is greater pressure than ever on profit margins. We work closely with the generic and biosimilar industry association Medaxes on this.

Aspen already has a manufacturing footprint in Europe, and a well-established distribution network. Where do you see the potential of Benelux for Aspen? What extra resources do you think would be a game-changer here?

I would like to expand my commercial staff numbers as we are currently a very lean team. While we are efficient, there is so much more work that we could be doing. We are facing evermore challenges from the authorities in the Netherlands and Belgium, which we need to adapt to.

Furthermore, I would like to expand our portfolio. We need to acquire new products, factories, or companies. Aspen sold its thrombosis business, and we have many products in anaesthesia, but we need to optimize the portfolio. Some of those products are at the end of their life cycle, and eventually we will sell them, so they need to be replaced with new products.

One might have the impression that therapeutically Benelux is well covered. Do you see any gaps in the market?

We see some gaps in the anaesthesia portfolio, and those are the products we seek. We have some women's health products, but there is so much to gain. Men and women are completely different; that is what we have learned from clinical trials and daily practice. The women's health business is growing, and we are launching campaigns around certain products which have already contributed to growth here. Furthermore, men's health would benefit from an expansion of our portfolio in Benelux.

How elastic and visible is the Aspen brand in communicating value while moving between portfolios?

That is what we do every day, we need to be transformable. We have just launched a digital strategy campaign to increase our organic growth, and our presence on Google and search engines, and are working with key opinion leaders (KOLs) and creating webinars. It looks really promising.

If a new opportunity arises, we need to decide whether it is right for the Benelux within two or three days, so it moves quickly. Sometimes it is necessary to do a deep dive locally to have a conversation with some physicians regarding the possibilities of the treatment. Many companies reach out to Aspen, which is positive. It provides the company with a lot of energy because we are looking to expand our portfolio and business locally.

How has the role of the sales representative evolved in Benelux?

It has changed completely. When I joined Boehringer Ingelheim, it was a company with 25 sales representatives, and we built it up to 100 people. However, HCPs nowadays have a different relationship with pharmaceutical companies and there is less need for such large teams. Despite this, there remains a belief that the information and education received by physicians from pharmaceutical companies is still relevant in making good decisions regarding patient treatment. Digital tools are also growing in importance within these relationships.

As our business has shifted towards contracts and tenders, there is less focus on direct HCP relationships, and we have let five account managers go as part of this shift. In situations like the launch of our new women's health product, we looking into other options like maybe hiring a flex team for a certain period so we can improve our services and share information with HCPs.

As Belgium and the Netherlands are European pharma innovation and entrepreneurship hotspots, is looking out for potential M&A deals part of your remit?

Yes, if there are opportunities, we should take them. We are having some conversations with organizations, which could be beneficial for us in the future and help us increase our portfolio, but we are not there yet. The environment in Belgium and Luxembourg is great because there are many clinical trials. Hospitals, in both countries, are well-organized and well-equipped for many clinical trials. There are a lot of possibilities. Typically, if American or Australian companies come to Europe, they often start in the Netherlands or Belgium or both. If you succeed here, you can succeed everywhere.

What are your personal ambitions for the Aspen affiliate in the next two to three years?

We are a very small and flat organization, and I would like to be more involved in business development projects. I think that is the future of Aspen, and it is something I have not done before, but it is interesting; all the analysis you must do, and the implementation in many countries. That would be a good next step in my current role.

How significant is Benelux for Aspen on a European level?

Within Aspen's newly created Europe and Middle East region, the Netherlands and Belgium are among the 10 countries. We can never compete with Germany, France, or the UK, which are all in the top 10, but we are doing a good job.

Do you have a final message on behalf of Aspen Benelux?

I think it is important to create a model, not only in Benelux but also across Europe, where we work closely with the different players in the market and build a new structure to have a sustainable portfolio and business. Everyone is talking about guidelines and regulations, and everyone has their own agenda. To be sustainable in the future, not only as a company but also as a branch, it is important to collaborate more and work closely together.

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