Takeda aims for best in class

Market access and a greater focus on specialist medicines are key to Takeda UK’s drive to be best in class for employees and customers

WITH ITS PIONEERING COMMITMENT TO KEY ACCOUNT management, Takeda UK is no stranger to forward thinking. And now the company has entered the next phase of its evolution – deepening its product portfolio, re-aligning operating functions and moving to new headquarters that will accommodate both the rapid growth and innovative teamwork that’s central to Takeda’s business ethos.

The transformation follows a global reorganisation put in place by Christophe Weber, the first non-Japanese executive to be appointed president and chief operating officer of Takeda Pharmaceutical Co. While fundamentally respecting the firm’s 230-year heritage, he plans to revitalise it by making it a more agile, best-in-class pharmaceutical company with both a patient and customer focus.

Clearly these global priorities set the framework for the changes within the UK business where, in five years’ time, specialist medicines are expected to account for 50% of overall revenues, with primary care medicines making up 40%, and the commercial business 10%. Currently, the revenue split is 50% primary care medicines, 20% specialist and 30% commercial.

Despite this shifting revenue forecast, the company is quick to stress its realignment is not about neglecting its strong heritage in primary care both in the UK and worldwide. Rather, the aim is to grow the whole business, with launches of specialist medicines providing extra momentum. In total, Takeda’s ambition is to double its revenue over the next five years. “We will continue to put substantial resources behind our primary care business,” notes Hiro Fukutomi, managing director of Takeda UK. Evidence to that effect is the recent launch of two products into the UK primary care market: Vipidia (alogliptin) for diabetes and Vitaros (alprostadil cream) for erectile dysfunction.

R&D weighted to specialist meds

Takeda’s late-stage R&D pipeline is more heavily weighted, though, towards specialist medicines addressing unmet needs in areas such as gastrointestinal diseases and oncology, as well as vaccines. This in turn reflects the worldwide consolidation of R&D priorities at Takeda into four core areas: oncology; cardiovascular and metabolic; gastroenterology; and central nervous system.

Further down the pipeline and scheduled for UK launch within the next three years are oncology therapies for lymphoma and multiple myeloma, while also on the way are vaccines for norovirus and dengue fever. Vaccines traditionally belonged very much to the Japanese business, explains Dr Rebecca Curtis, medical director for Takeda UK. However, the current global reorganisation includes new speciality business units for oncology and vaccines to accelerate globalisation in these segments.

UK ahead of the curve

In the UK “we are ahead of this change”, Fukutomi observes – a sentiment that’s echoed by Jon Neal, business unit director for specialist medicines, who believes Takeda in the UK is well along the way to a more diversified business. “The implications for the UK business will be evolutionary rather than revolutionary,” he points out.

Prominent among the new breed of specialist medicines in the UK, and currently under assessment by NICE, is Entyvio (vedolizumab) for ulcerative colitis and Crohn’s disease – the first biologic to be approved simultaneously in Europe for these two inflammatory bowel conditions.
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One step in that direction meant establishing business units for general medicine (mainly primary care products) and specialist medicines (oncology, etc) respectively. But in sales and marketing terms the differentiation between business units is not so much in Takeda’s approach to customers – key account management across the board – as in the types of customer who may be drawn into a key account, stresses Anne Ballard, business unit director for general medicine.

“We operate key account management at a very high level wherever you work in the organisation,” Ballard comments. Regional account directors and key account managers need detailed local-market knowledge, as well as the ability to talk to customers in their own language and work with them on mutually beneficial solutions.

So new recruits to Takeda UK must be “at the top of the game” in KAM but also need appropriate therapy-area expertise and an awareness of how to launch products in “the modern NHS”, Neal adds.

Launching in the modern NHS
That means negotiating the market-access challenges that increasingly arise with “new, sophisticated medicines”. But Takeda is also looking for people with a “real passion for what they’re doing”, able to understand what patients and healthcare professionals go through in managing a disease and trying to access the right therapy, Neal emphasises.

Given the tensions between innovation and affordability in segments such as oncology, market access will be critical to the UK strategy going forward. This also comes from the top: putting patients and customers at the centre of operations while building trust with society are among the key principles of “Takeda-ism”, Ballard notes. Takeda UK has a strong legacy of getting medicines through HTA bodies like NICE and the SMC, and onto local formularies and guidelines. For example, the Hodgkin’s lymphoma treatment Adcetris (brentuximab) recently became the first product to clear the SMC – and at list price – under the Consortium’s new assessment criteria for rare disease products.

All the same, making sure new medicines get to the right patients at the right price, with a compelling value proposition, is not getting any easier. As Neal points out, market access is now “at the centre of everything a pharmaceutical company has to do in the UK”. At Takeda, that mindset has to permeate everything from head office functions to sales, marketing and R&D.

A two-way dialogue
It also means building relationships with market access bodies wherever possible. “We like to think we have a good two-way dialogue,” Neal comments. That includes prospective engagement with NICE to shape late-stage development programmes in areas such as myeloma. Takeda has strong relationships with commissioners and payers at a local level in CCGs/LHBs.

Takeda’s broadening portfolio and strong growth in the UK are also behind its recent move to new, larger commercial headquarters in High Wycombe. The layout of these offices, with everybody on the first floor and improved access to meeting space, favours a spontaneous creative environment, with extensive cross-functional collaboration, that Fukutomi sees as vital to the success of a relatively small organisation like Takeda UK.

“Everybody is a business owner,” he comments, adding that diversity of input is also pivotal to the Takeda philosophy. New recruits with the right skills find these can translate into a flexible career path across the company.

As Fukutomi puts it, “we want to be best in class for both employees and customers”. With a solid base in integrity, innovation, diversity and agility, both inside and out, he is confident business success will follow.

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