Sāls LETTER

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"If a man empties his purse into his head no one can take it away from him. An investment in knowledge always pays the best interest." *Benjamin Franklin*

FDA Approves First Generic Versions Of Aciphex Delayed-Release Tablets To Treat GERD

The U.S. Food and Drug Administration approved the first generic versions of Aciphex (rabeprazole sodium) delayed-release tablets, used to treat gastroesophageal reflux disease (GERD) in adults and adolescents (ages 12 and up). GERD, also called acid reflux or acid regurgitation, is a common condition in which backward flow of acid from the stomach causes heartburn and possible injury to the esophagus.

Insulin Use Tied To High Risk of Bladder Cancer Mortality in Type II Diabetes Patients

Type 2 diabetes mellitus patients who are treated with insulin therapy will have to face a higher risk of dying from bladder cancer, a study in Clinical Genitourinary Cancer suggests. C. H. Tseng from Department of Internal Medicine, National Taiwan University College of Medicine in Taipei, Taiwan conducted the study and found patients with type 2 diabetes mellitus who used insulin therapy were nearly twice as likely to die from bladder cancer as those who did not use insulin treatment.

The study shows type 2 diabetes mellitus patients who used insulin and also smoked tobacco were three times as likely as those who did neither to die from bladder cancer. For the study, 86,939 patients with type 2 diabetes mellitus aged 25 or older were f**ollowed prospectively from 1995** through 2006 for bladder cancer deaths. Higher risk of bladder cancer mortality was also found associated with type 2 diabetes mellitus patients who were older, male, and longer diabetes duration in addition to insulin use and smoking. The study concluded "Insulin use is significantly predictive for bladder cancer mortality in patients with T2DM. Insulin use and smoking jointly increase the risk."

FDA Approves Gazyva For Chronic Lymphocytic Leukemia

The U.S. Food and Drug Administration approved Gazyva (obinutuzumab) for use in combination with chlorambucil to treat patients with previously untreated chronic lymphocytic leukemia (CLL). CLL is a blood and bone marrow disease that usually gets worse slowly. According to the National Cancer Institute, 15,680 Americans will be diagnosed and 4,580 would die from the disease 2013. Gazyva works by helping certain cells in the immune system attack cancer cells. Gazyva is intended to be used with chlorambucil, another drug used to treat patients with CLL.
Gazyva is the first drug with breakthrough therapy designation to receive FDA approval. This designation was requested by the sponsor and granted soon after the biologic license application to support marketing approval was submitted to the FDA. The FDA can designate a drug a breakthrough therapy at the request of the sponsor

if preliminary clinical evidence indicates the drug may offer a substantial improvement over available therapies for patients with serious or life-threatening diseases. The FDA also granted Gazyva priority review because the drug demonstrated the potential to be a significant improvement in safety or effectiveness in the treatment of a serious condition.

Gazyva's approval for CLL is based on a study of 356 participants in a randomized open-label multicenter trial comparing Gazyva in combination with chlorambucil to chlorambucil alone in participants with previously untreated CLL. Participants receiving Gazyva in combination with chlorambucil demonstrated a significant improvement in progression free survival: an average of 23 months compared with 11.1 months with chlorambucil alone. Gazyva is marketed by Genentech, a member of the Roche Group, based in South San Francisco, California.

Hepatitis C: Banking on Sofosbuvir

Ben Weintraub, senior principal and director calls his $3 to $4 billion sales estimate on Gilead's sofosbuvir-a nucleoside analog polymerase inhibitor targeting all six HCV genotypes-conservative. "The question is whether it's going to be the biggest drug ever". Weintraub says he's seen estimates as high as $15 billion.

Several analysts including Weintraub say sofosbuvir will receive FDA approval by the end of this year. Sofosbuvir will be prescribed in combination, but Weintraub says it's likely to be priced per regimen, not per drug, at "whatever the market will bear, $70,000 for sofosbuvir, riboviron and a protease inhibitor, whatever that winds up being".Raghuram Selvaraju, managing director and head of healthcare equity research at Aegis Capital Corp. says both sofosbuvir and ABT-450 "are very, very good at treating genotype-1 treatment naïve patients"-the largest HCV genotype globally, and the hardest to treat- "but they are much less good at treating null responders".

Selvaraju says the quad ABT-450 regimen "is going to show better activity against null responders with genotype 1 than the sofosbuvir two-drug regimen." FDA gave ABT-450 Breakthrough Therapy status in May. On a recent AbbVie earnings call, CEO Rick Gonzlez told investors that ABT-450's interferon-free studies are "coming in April 2014." Recently approved in Japan, J&J's simeprevir is expected to be approved in the Untied States by this year's end. Weintraub describes J&J's simeprevir as an Incivek/Victrelis follow-on drug, and says with AbbVie and BMS both launching in late 2014 or 2015.

FDA Agrees To Review Lilly/BI's Lantus Biosimilar

US regulators have agreed to review Eli Lilly/Boehringer Ingelheim's long-acting insulin LY2963016, a biosimilar of Sanofi's blockbuster diabetes treatment Lantus (insulin glargine).

The US Food and Drug Administration will assess the drug as a treatment for both type I and type II diabetes, following in the footsteps of regulators across the pond in Europe.

Lilly and Boehringer say they have studied LY2963016 "in a comprehensive development programme in order to meet the regulatory standards of clinical and nonclinical safety, efficacy and quality," and note that the filing also contains data from Phase III trials in which their treatment was pitted against Lantus. Around 24.4 million Americans suffer from diabetes, and Gwen Krivi, head of Lilly Diabetes product development, previously said that long-acting insulin "is a mainstay treatment for many people with diabetes, and we anticipate that insulin glargine will continue to be widely used for many years to come".Lantus is a top-earner for Sanofi's, pulling in sales of 1.45 billion euros in the third quarter of this year.

Lilly links up with Japan's PeptiDream

Eli Lilly has entered into a collaboration with Japan's PeptiDream to discover and develop novel therapeutic peptides.

The Tokyo-based biopharmaceutical company says it will identify macrocyclic peptides as potential drug candidates for disease targets being pursued by Lilly. The US drug major will be responsible for any subsequent development. PeptiDream will receive an undisclosed upfront payment, research funding and other payments upon the successful achievement of certain development milestones. It is also eligible to receive royalties. Chief executive Kiichi Kubota said the Lilly link-up "underscores the value of PeptiDream's novel screening technology for therapeutic peptide discovery as a way to help advance patient care".

Bristol-Myers Squibb Sells Diabetes Business to AstraZeneca

By *Patricia Van Arnum*

Bristol-Myers Squibb has agreed to sell its global diabetes business that was part of its collaboration with AstraZeneca for $2.7 billion with potential regulatory- and sales-based milestone payments of up to $1.4 billion and will make royalty payments based on net sales through 2025. In addition, AstraZeneca will make payments of up to $225 million if and when certain assets are subsequently transferred. The Bristol-Myers Squibb's board of directors has approved this transaction.

"This agreement will allow us to further evolve our business model as a leading specialty BioPharma company and increase resources behind the opportunities that drive the greatest long-term value for patients, our company and our shareholders," said Bristol-Myers Squibb CEO Lamberto Andreotti, in a company release.

Bristol-Myers Squibb and AstraZeneca entered into an alliance agreement in January 2007 to enable the companies to jointly research, develop and commercialize select investigational drugs for Type 2 diabetes. The alliance has since been expanded to collaborate on additional diabetes products.

Bristol-Myers Squibb will sell its global diabetes business that was part of its collaboration with AstraZeneca, which includes Onglyza (saxagliptin), Kombiglyze XR/Komboglyze (saxagliptin and metformin HCl extended release), dapagliflozin (marketed as Forxiga outside the U.S.), Byetta (exenatide), Bydureon (exenatide extended release for injectable suspension), Symlin (pramlintide acetate) and metreleptin. The agreement also

includes the sale of the former Amylin manufacturing facility in West Chester, Ohio, and covers the future purchase by AstraZeneca of Bristol-Myers Squibb's Mt. Vernon, Indiana, manufacturing facility approximately 18 months following the closing of the transaction. ?As part of the transaction, and subject to local consultation and legislation, Bristol-Myers Squibb and AstraZeneca anticipate that substantially all employees of Bristol-Myers Squibb dedicated to the diabetes business will be transferred to AstraZeneca. A number of R&D and manufacturing employees dedicated to diabetes will remain with Bristol-Myers Squibb to progress the diabetes portfolio and support the transition for these areas. Bristol-Myers Squibb will work closely with AstraZeneca to ensure a smooth transition.

The company expects to receive $3.4 billion in the first quarter of 2014, which includes $2.7 billion in an upfront payment and an additional $700 million assuming regulatory approvals of dapagliflozin

Bristol-Myers Squibb and AstraZeneca anticipate that the transaction will close during the first quarter of 2014. Closing of the transaction is subject to customary closing and antitrust conditions. The closing of the transaction as it relates to China is also subject to the satisfaction of certain conditions in the Sino-American Shanghai Squibb Pharmaceutical Company joint venture agreement between Bristol-Myers Squibb China and its joint venture partners.

Fred (Farid) Hassan: More Musings on the Biopharma Learning Curve

by William Looney

(Mr. Farid Hassan was the Chief Executive and Managing Director of Sandoz (Pakistan) Ltd. back during 80s (1980 – 84). At that time Sandoz Basle was considering closing of Pakistan's operation due to heavy financial losses. Mr. Hassan took the charge and made a turnaround of the company. Since then he has made a turn around for all the companies that he served. That's why he is known as the Turnaround Specialist. After Pakistan's success he was made President of prescription business in Sandoz US affiliate. Later he was promoted as President Sandoz USA.)

Hindsight can be a great teacher – but only if you have the self-awareness needed to adapt those learnings to the next business challenge, whose rough edges are by definition almost always "non-recurring." In other words, because the circumstances of any setback are unique, the astute manager knows that recovery depends on recognizing that the learning never stops.

This was one of the many observations made by Warburg Pincus managing director Fred Hassan, one of big Pharma's premier turnaround specialists, at an Executive Summit hosted jointly byPharmExec and the investment advisory firm, Young and Partners, on December 11 in New York.

Hassan participated in a "fireside chat" as part of a series of engagements to promote his book, "Reinvent: A Leader's Playbook for Serial Success," which since its publication in February has moved steadily up the ranks in Amazon's listings of new management titles.

Hassan believes learnings only take root in fertile soil, and that depends on three essential nutrients: people, culture and execution. "People will follow you only if you do what you say," he told the group. "And in a turnaround situation you don't get a second chance."

Hassan asserts that the one area where many CEOs trip up is failing to understand the essential role of communication skills in bonding and building trust among warring executives, skittish workers and skeptical outside stakeholders. "This is a talent that the CEO must develop individually; too often it's seen as a task that can be delegated to someone else from outside the company or the industry. Ultimately, we have no credibility if we cannot make our own case for what we do and how we contribute to society."

"Laboratories have no choice but to recognize that more early kills of clinical candidates are needed to raise overall productivity. Portfolio and product decisions should never be taken solely by the R&D team. We've all heard about the inclusion of a commercial team perspective. But it is less understood that we must incorporate a medical

voice at each stage of development. The voice of a science or lab executive never rings true for regulators and patients in the way it does when a practicing clinician intervenes," Hassan said.
A spate of new science unleashed by the mapping of the human genome makes the former Schering-Plough CEO optimistic that the 46 per cent performance on this "freshness index" will eventually improve. The obstacle is short-term financial thinking and organizational distractions linked to internal politics, of which the overt sign is frequent shifts in management. "One of the more ridiculous things I am observing is the killing of clinically strong compound candidates just because commercial leaders move on and their teams lose interest."

Manage Your Energy, Not Your Time

As the demands of the workplace keep rising, many people respond by putting in ever longer hours, which inevitably leads to burnout that costs both the organization and the employee. Meanwhile, people take for granted what fuels their capacity to work—their energy. Increasing that capacity is the best way to get more done faster and better. Time is a finite resource, but energy is different. It has four wellsprings—the body, emotions, mind, and spirit—and in each, it can be systematically expanded and renewed. In this article, Schwartz, founder of the Energy Project, describes how to establish rituals that will build energy in the four key dimensions. For instance, harnessing the body's ultradian rhythms by taking intermittent breaks restores physical energy. Rejecting the role of a victim and instead viewing events through three hopeful lenses defuses energy-draining negative emotions. Avoiding the constant distractions that technology has introduced increases mental energy. And participating in activities that give you a sense of meaning and purpose boosts the energy of the spirit.
The new workday rituals succeed only if leaders support their adoption, but when that happens, the results can be powerful. A group of Wachovia Bank employees who went through an energy management program outperformed a control group on important financial metrics like loans generated, and they reported substantially improved customer relationships, productivity, and personal satisfaction. These findings corroborated anecdotal evidence gathered about the effectiveness of this approach at other companies, including Ernst & Young, Sony, and Deutsche Bank. When organizations invest in all dimensions of their employees' lives, individuals respond by bringing all their energy wholeheartedly to work—and both companies and their people grow in value.

5-Minute Guide to Analytics in Pharmaceutical Emerging Markets

Over the next five years, two-thirds of pharmaceutical sales growth will come from emerging markets. While this presents enormous potential, how can organizations compete to capture new opportunities? It comes down to the data. Emerging markets present fertile ground for growth, but each must be understood to break into and capture potential.

How Will You Measure Your Life ?

Harvard Business School's Christensen teaches aspiring MBAs how to apply management and innovation theories to build stronger companies. But he also believes that these models can help people lead better lives. In this article, he explains how, exploring questions everyone needs to ask: How can I be happy in my career? How can I be sure that my relationship with my family is an enduring source of happiness? And how can I live my life with integrity?
The answer to the first question comes from Frederick Herzberg's assertion that the most powerful motivator isn't money; it's the opportunity to learn, grow in responsibilities, contribute, and be recognized. That's why management, if practiced well, can be the noblest of occupations; no others offer as many ways to help people find those opportunities. It isn't about

buying, selling, and investing in companies, as many think. The principles of resource allocation can help people attain happiness at home. If not managed masterfully, what emerges from a firm's resource allocation process can be very different from the strategy management intended to follow. That's true in life too: If you're not guided by a clear sense of purpose, you're likely to fritter away your time and energy on obtaining the most tangible, short-term signs of achievement, not what's really important to you. And just as a focus on marginal costs can cause bad corporate decisions, it can lead people astray. The marginal cost of doing something wrong "just this once" always seems alluringly low. You don't see the end result to which that path leads. The key is to define what you stand for and draw the line in a safe place.

Market Access is Dead: Patient Access is the New Prescription for Healthcare Marketing

by John Glasspool

Paradigms change when questions emerge the old paradigm can no longer answer. Market access has become a buzz word as access to markets is as significant a hurdle to product usage as registration itself.

What killed market access?

There are four reasons why the current approach to market access is doomed to fail:

1. The term 'market access' itself says a lot about the self-centered mindset, which is one of the reasons for the paradigm change. Healthcare companies want access to markets, revenues, and profits, and market access aims to persuade those that control access to let them in. But the market access framework often does not address the needs and goals of all the parties involved. Market access is considered a remedy to address the pricing pressures the healthcare industry is facing – a result of a marketing model that basically ignored the fourth P every marketer learns about in business school: Price. As policy-makers and payers search for ways to control cost without compromising care, the failure to communicate a convincing value proposition to these stakeholders results in being forced to compete on price. The increased use of tenders as a means of cost containment should be interpreted as a failure to communicate the value of a medication.

2. Market access is based on a one-size-fits-all, product-driven marketing model. However, while patients have similar needs, the healthcare systems they live in go about pursuing the same common goal – improving public health – differently. A one-size-fits-all approach is not effective at addressing the different needs in each market, yet to manage market-by-market is not realistic. A practical approach is to define market archetypes and address the needs of each archetype effectively while leveraging limited resources efficiently.

3. Traditional marketers tend to focus on lagging metrics such as number of patients diagnosed and number of patients receiving treatment (often illustrated as a waterfall chart), but they fail to understand and appreciate the patient and payer journey: Why does the market look the way it does? What are the incentives and success metrics? Marketers need to focus on understanding the 'why' instead of the 'what'.

Promotional Review Committees: How to Achieve High Performing Teams

Most pharmaceutical companies have interdisciplinary committees with regular team meetings to discuss and review promotional material. Promotional review committees (PRCs) serve an essential function for pharmaceutical companies. They review all forms of advertising and promotion for medical accuracy, completeness, and realism, as well as for legal and regulatory compliance with the FDA and other authorities. PRCs also ensure compliance with company policies, voluntary industry codes, and anything that might create liability risk for the company, patient privacy and content issues.

In addition to advertising and promotion, PRCs may also review unbranded, disease-state information and internal communications that

describe marketing strategies or provide direction to the sales force.

PRCs must perform flawlessly, otherwise companies run the risk of receiving an enforcement letter from the FDA's Office of Prescription Drug Promotion. Enforcement actions undertaken by the FDA may spark investigations by the Department of Justice, sometimes resulting in significant fines, reputational harm to pharmaceutical companies and the industry, and corporate integrity agreements that impose additional processes and restrictions on companies.

I have served on many PRCs in different therapeutic areas across several companies. Here are some issues I have found critical to achieving high-performing teams.

1. Find a common voice. **2.** Respect everyone's opinion. **3.** Create dedicated roles. **4.** Maintain consistency. **5.** Manage team turnover. **6.** Balance autonomy and teamwork. **7.** Lead and influence. **8.** Adhere to timelines and deadlines. **9.** Conduct all relevant business in team meetings. **10.** Strive for economies of scale. **11.** Innovate. **12.** Include additional personnel in team meetings as necessary. **13.** Take the guesswork out of work. **14.** Delegate with authority. **15.** Embrace the digital domain.

3 Essential Actions During A Crisis

When an economic crisis or other disaster hits, you want your organization positioned to succeed.

Employ these practices: **1. Respond faster.** Annual or even quarterly forecasts quickly become outdated. Keep a close eye on emerging situations, relying on both your regular information channels and new sources from outside your organization. ***Reason:*** Multiple sources will ensure that your view of the situation remains up to date. **2. Be more hands-on.** Don't seize control from your trusted team members and begin to micromanage. Simply make sure that you maintain a visible presence among your staff. ***Best bet:*** Strive to be an inspiration to your employees. Walk the halls and shop floors, and speak to and listen to employees. The people who work most closely with your customers and suppliers can offer valuable insight.

3. Seize opportunities. Don't take a defensive stance. For example, you should not slash funding or resources for initiatives that could put your organization in a good position for the long term.

Winners And Losers

1. A loser blames "politics" or "favoritism" for himself; A winner would rather blame himself than our but he doesn't waste much time on any kind of blame. **2.** A loser is afraid to acknowledge his defects to himself or to others; A winner is aware that his defects of the same centrals as his assets, and while he tries to diminish their effects, he never denies their influence. **3.** A loser smolders with unexpressed resentment at bad treatment, and revenges himself to doing worse; A winner freely expresses resentment at bad treatment, discharges his feelings, and then forgets it. **4.** A loser prides himself on his "independence" when he is merely being contrary, and prides himself on his "teamwork" when he is merely being conformist; A winner knows which decisions are worth an independent and which should be gone along with. **5.** A loser is envious of winners and contemptuous of other loser; A winner judges others only by how well they live up to their own capacities, not by some external scale of worldly success, and can have more respect for a capable shoeshine boy than for a crass opportunist.

Improve Your Public Speaking by Being Yourself

Those who find public speaking daunting -- and who doesn't to some degree? -- may think they need to become better actors to improve. Acting rarely helps, though. Don't try to be someone else or channel a smooth-talking alter ego. Focus on being exactly who you are. While some people may be natural public speakers, most have to work hard at it. Practice organizing your thoughts, modulating your voice, and connecting with your audience. This isn't a matter of rehearsing what you're going to say. It's practicing the skills that

allow you to be flexible and capable every time you are up in the front of the room.

Don'ts At Table

1. Don't throw yourself loungingly back in your chair. The Romans lounged at table, but modern civilization does not permit it. **2.** Don't rest your elbows on the table; don't lean on the table. **3.** Don't use a toothpick at table, unless it is necessary; in that case, cover your mouth with one hand while you remove the obstruction that troubles you. **4.** Don't eat onions or garlic, unless you are dining alone, and intend to remain alone some hours thereafter. One should not wish to carry with him unpleasant evidences of what he has been eating or drinking. **5.** Don't press food upon a guest. This once was thought necessary, and it was also considered polite for a guest to continue accepting, or to signify by a particular sign that he had enough. To worry a guest with ceaseless importunities is now considered in the worst possible taste. **6.** Don't, as guest, fold your napkin when you have finished. Place the napkin loosely on the table. **7.** Don't fail, at dinner, to rise when the ladies leave the table. Remain standing until they have left the room, and then reseat yourself, if you intend to remain for cigars.

The Rubaiyat

Omar Khayyem

Well, Let it take them! What have we to do
With Kaikobad the Great , or Kaikhosru ?
Let Zal and Rustam bluster as the will.
Or Hatim call to Supper ----- Heed not you.

With me along the strip of Herbage strown
That just divides the desert from the sown
Where name of salve and Sultan is forgot-----
And peace to Mahmud on his golden Throne !

Wise Men's Wisdom

"If you just set out to be liked, you would be prepared to compromise on anything at any time, and you would achieve nothing." ***— Margaret Thatcher.*** "Showing off is the fool's idea of glory." ***— Bruce Lee.*** "Anyone who has never made a mistake has never tried anything new." ***— Albert Einstein.*** "If you want others to be happy, practice compassion. If you want to be happy, practice compassion." ***— Dalai Lama.*** Wise men, when in doubt whether to speak or to keep quiet, give themselves the benefit of the doubt, and remain silent ***— Napoleon Hill.*** Who knows for what we live, and struggle, and die? Wise men write many books, in words too hard to understand. But this, the purpose of our lives, the end of all our struggle, is beyond all human wisdom ***— Alan Paton.*** Kings may be judges of the earth, but wise men are the judges of kings ***— Solomon Ibn Gabirol***.

Identify the Untouchables in Your New Job

Newly appointed leaders are often expected to come in and shake things up. But before you start proposing changes, be sure you know what your boss cares about most. There may be certain parts of the organization—products, facilities, people—about which your new boss is proprietary. You don't want to find out that you're pressing to shut down the product line your boss started up or replacing someone whom he considers a loyal ally. Talk with your manager to understand his history at the organization. Ask others what's most important to his. When speaking with his about revamping processes or products, pay close attention to his facial expression, tone, and body language. If you're still uncertain, float an idea gently as a trial balloon and watch his reactions closely.

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