Interview
Phillips Medisize Grows its Capabilities with Vectura

In this exclusive interview with ONdrugDelivery's Guy Furness, **Brian Thompson** and **Dave Thoreson** of **Phillips Medisize** discuss the company's expanded capabilities as a result of its recent acquisition of Vectura, bringing extensive expertise and experience in the inhalation sector within the global CDMO. The discussion covers how Phillips Medisize organises its global operations, the opportunities that the acquisition of Vectura represents and where the company goes next.

Q To start us off, could each of you briefly introduce yourselves and your roles at Phillips Medisize, and could you also touch on what was exciting to you about Phillips Medisize's recent acquisition of Vectura?

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BT I'm Brian Thompson and in my role, I'm responsible for our scale-up capabilities across our 23 manufacturing sites around the globe, as well as our programme organisation. With respect to the Vectura acquisition, I'm really excited about being able to pair the complementary skillsets of Vectura's deep knowledge of the inhalation space and Phillips Medisize's expertise in scale manufacturing. Likewise, their expertise in inhalation formulation is a capability that we can leverage to help support our customers. By combining these skillsets we are increasing the value we can bring to our customers.

DT I'm Dave Thoreson, Vice-President of Global Operations, and I'm responsible for new product introduction (NPI) across Phillips Medisize. I've been with the organisation for over 27 years, so I've seen the company through a number of transitions with different ownership, and I've been very engaged in the acquisition of Vectura. In my role, I have responsibility for the manufacturing operations across Phillips Medisize, so I'm involved in building the equipment and tools we use, getting those validated and truly industrialising and moving projects into a production setting. Brian and I work very closely on that.

Regarding the Vectura acquisition, Phillips Medisize has been in the drug delivery device space for a long time, including some activity in the inhalation space. With the acquisition of Vectura, we've brought in expertise and capabilities in the inhalation field from an engineering and a scientific perspective that really gives us that strong foothold in inhalation. This is going to complement our existing development, NPI and manufacturing capabilities. We're excited to have that.

The other aspect to consider is our R&D or the development capability that we offer to our customers. We have our main sites in Hudson (WI, US) and Sturer (Denmark), as well as R&D design centres in India, China and across the world. Vectura expands our ability to meet our customers where they are. Our customers engage with us along the whole value chain, and we don't really determine where they're going to connect with us. Our

Brian Thompson
Senior Director, Global New Production Introduction & Programme Management

Brian Thompson leads the global NPI and programme management capabilities at Phillips Medisize. He has 25 years of experience in pharmaceutical and medical device product development and commercialisation. Mr Thompson joined Phillips Medisize in 2017 and holds bachelors' degrees in Chemistry and Biochemistry, and an MBA from the University of Minnesota (Minneapolis, MN, US).

spectrum of capabilities runs from early phase all the way to commercial manufacturing and lifecycle management, and Vectura will accelerate our growth with combination formulation science, device technology and inhaled drug development expertise.

Q How are you using Phillips Medisize's global network of manufacturing sites and its single quality management system (QMS) to help customers build locally, cut logistics costs and still give them true global design freedom?

BT As Dave mentioned, we have the breadth of expertise and capabilities to meet a customer wherever they are in the product lifecycle, and, with Vectura, that includes the inhalation space. If they're ready for product development, no matter what development phase a customer is in, we can support them. If they need supply for clinical trials, we can help develop that product all the way through from early development through all clinical phases. If they're ready for high-volume device manufacture, we can bring them into one of our 23 global operation sites. With those capabilities and our global footprint across North America, Europe and Asia, we can also meet them wherever they are geographically to develop their products, scale their products and, ultimately, deliver to their patients in those regions.

DT Our goal is to be able to act as a true full-service CDMO for our customers (Figure 1). We want to be able to support the moulding, producing the sub-assemblies, final assembly, handling the drug, packaging – everything our customers could need. With the acquisition of Vectura, we're now also developing the capability to help with formulation, especially in inhalation. In injectables, where we're more established, we handle the drug, but we've not offered inhalation formulation services before, so we're excited to move into that area.

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Dave Thoreson

Vice-President of Global Operations

As Vice-President of Global Operations, Dave Thoreson has responsibility for all commercial manufacturing operations and NPI engineering functions for Phillips Medisize. He collaborates with customers to ensure that the company's manufacturing locations, capabilities and quality systems are aligned with customer expectations and compliant with US FDA regulations and current GMP. Mr Thoreson joined Phillips Medisize in 1996 as a project manager at its Phillips (WI, US) operation. He was promoted to Engineering Manager in 1999 and then moved to the Menomonie (WI, US) facility as Engineering Manager in January 2003. In February 2005, Mr Thoreson was promoted to General Manager of the Phillips Medisize Menomonie medical site and, shortly thereafter, Vice-President and General Manager. In that role, he was responsible for the sales and operations of the medical sites (including Ireland) that support the Phillips Medisize medical business. In 2019 he was promoted to his current role as Vice-President of Global Operations. Prior to joining Phillips Medisize, Mr Thoreson was employed by SSI Technologies. He holds a BS degree in Manufacturing Engineering.

As it relates to the QMS, Cheryl Norder, our Vice-President of Quality and Regulatory, has been with the organisation a long time as well. She's done an excellent job of fully integrating what we call our design capabilities, as well as NPI, where we're involved with industrialising a product. Wherever we are in the world, it's really a global set of standards that we're executing, whether it be in R&D,

Figure 1: Across 23 global manufacturing sites and seven R&D locations, Phillips Medisize offers a full suite of CDMO services across the entire product lifecycle.

NPI or sustaining operations. That provides us with a really differentiated capability within Phillips Medisize.

Q How do you choreograph a project when, for example, design starts in Denmark, clinical builds run in Wisconsin and commercial-scale manufacturing lands in Suzhou – and still keep a single source of truth for design history files?

BT That's an interesting example of a combination – it's not a specific one we have going on, but we often deploy our global capabilities and footprint for a programme. We have one programme running right now that's actually using all of our R&D capabilities around the globe to execute it. As a medical device CDMO, quality is deeply embedded in our vision, values and culture, which manifests in our products and solutions.

The choreography you mentioned is critical to ensure that we have that quality. In addition to our global QMS, we also have a global enterprise resource planning system, global programme management processes, and a global design and development process that we deploy. We also share common transfer and scale-up processes. We call the combination of these systems "Advanced Quality Planning".

And we also use common metrics and measures to execute on our programmes at the local level. We use common processes and systems in a common language that helps us communicate and ensure success for our programmes. We also have centrally managed teams of programme leaders and technical experts that are positioned around the globe so that they can integrate with our programmes, teams, customers and site capabilities wherever they happen to be.

DT Each programme is a little different in what the customer needs. As Brian mentioned, we have our programme management process where we can deploy our various project teams to those needs. It depends on the capability that that programme needs at the time. It's really about bringing the right people to

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the table and making sure that we have the right capabilities on the team. Then once we start to move towards manufacturing, we can put it in the location that best supports the customer's full supply chain.

Q Phillips Medisize offers both proprietary devices and CDMO services for its customers' own products, can you go into how you combine these two aspects of the business?

BT I think we're well positioned with our innovative platform offerings alongside having a full capability to develop and manufacture bespoke devices to meet the needs of our customers fully. If they're looking to reduce cost, accelerate time to market or lower risk, then, if our platform products are a suitable match for their drug, that can be a way to enter the market with that sort of structure. On the other hand, if they have a novel therapy that needs a bespoke solution to deliver their drug or to service their patients, then we can help them through that journey, too. That can be from the very early proof-of-concept phase all the way through scale manufacturing. It really just depends on what creates the most value for our customers – we take a very customer-centric approach and want to make sure that our offerings create the most possible value for them.

DT If a customer's product is going to be a blockbuster pharmaceutical, it's probably going to be a bespoke product. Other customers, if they're targeting generics or smaller markets, might want to leverage a platform or one of our platform technologies. Once again, we view it as a full set of capabilities that we can reach into and deploy as best fits the needs of our customers.

Q I was at RDD Europe in Lisbon in May and that conference was the first time Vectura appeared under the Phillips Medisize banner, signalling the full merger. What capabilities have you already unlocked between Vectura's formulation know-how and your device-manufacturing scale, and how will future projects feel different for a pharma or biotech company that brings you on board next quarter?

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DT Vectura brings us a comprehensive swath of capabilities and experience in the inhalation space. Depending on the product we're working on, we're going to put the right team on it and Vectura is a major addition to what we can offer. What the acquisition has really done, and what our customers will likely find, is that we've closed a gap in our capabilities and we'll be even more able to adapt to whatever their needs might be wherever they are in the development process.

BT Vectura has over 350 employees and they bring decades of experience in the inhalation combination product development space with them. Currently, we're still in the early parts of our journey to really understand all of their capabilities and experience and what they can bring to our pharmaceutical partners. I think of it in terms of complementary skillsets, experience and capabilities, and there's a process to discovering how both sides optimally fit together. In time, Vectura will be fully integrated into Phillips Medisize.

We can now say to our customers in the inhalation space that we can take a project from discovery all the way through to delivery by combining those skillsets, with Vectura added to Phillips Medisize's expertise. In the past, I believe that Vectura would need to work with third parties to scale and manufacture their products – now we can help support that under the Phillips Medisize umbrella.

Q Looking to the future, what do you see as Phillips Medisize's next strategic moves in terms of growth and investment?

DT There are always going to be capabilities that we don't have that we want invest in, so we're going to look for those – whether in medtech, diagnostics or drug delivery. Next, I would say we are evaluating capabilities and organic and inorganic growth options that would benefit our customers and expand our scale.

As part of Molex, and part of Koch, we can either do that organically, where we win contracts, we develop programmes and we continue to build scale, or we can do that inorganically, where we can go out and identify a region that we're not in, a capability that we don't have or a scale that we need to continue to grow into and focus resources into.

We have our current global footprint, which we've done a lot of work to optimise, and we're well positioned to continue to grow it within the regions we're currently in. However, we will also look into other regions we're not currently established in, so that we can offer the best possible support to our customers. We take a very long-term view and will continue to scale accordingly.

BT I'll add that the industries we serve as a CDMO are evolving rapidly, so the other area that we will continue to invest in is in our people. We need to attract, develop and retain the best people, who can create the technology, capabilities and expertise that our customers and patients will need in the future.

Phillips Medisize
a molex company

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