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# Pharmaceutical Executive

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**HBA**

Woman  
of the Year

DEIRDRE CONNELLY





# Performing and Transforming

Deirdre Connelly, HBA's 2010 Woman of the Year, brings her insight and experience from Eli Lilly to GSK, where she will have the daunting challenge of trying to turn around a sluggish US market.

When you've been in pharma for 25-plus years, you've likely had to wear a lot of different hats. Deirdre Connelly, president of North America Pharmaceuticals for GlaxoSmithKline, has collected more hats than most of her peers; she could almost outfit an entire baseball team.

Connelly, 49, is based in Philadelphia these days. But she started off as a humble rep at Eli Lilly in 1984, and from there doggedly rose through the ranks: general manager for Eli Lilly Puerto Rico in 1995; regional sales director in 1997; head of the women's health business unit at Lilly's US affiliate in 2000, where she oversaw the successful implementation of the global marketing campaign for osteoporosis treatment Evista; executive director of US human resources in 2004; and, finally, president of US operations in 2005.

“I was amazed at how approachable she was, both for senior- and junior-level people. Our job [as an HBA Woman of the Year] is to be an advocate for women’s leadership.”

—Catherine Sohn, Senior Vice President of Worldwide Business Development, Consumer Healthcare, GlaxoSmithKline



*Fortune* named her one of its 50 Most Powerful Women in business three years straight. She came in at no. 47 in 2007, no. 42 in 2008, and as of this year she’s sitting pretty at no. 37. And now Deirdre Connelly has another feather for her cap, having been named the Healthcare Businesswomen’s Association’s 2010 Woman of the Year.

Connelly attributes all those promotions and accolades to two things: work (“A lot of work,” she emphasizes) and the guidance of men and women, like former Lilly CEO Sidney Taurel. “I had a couple of extraordinary people that took me under their wing and taught me a lot,” she says.

#### **WOTY: Role Models and Advocates**

Deirdre Connelly’s ascension to US president of Lilly wasn’t a surprise, per se—but it was also something Connelly says she had never really considered: “If you had asked me at the beginning of my career if I was going to end up as president, the answer would have been ‘no.’”

Former co-workers at Lilly tell a different story, however. Company HR consultant Catherine Foley was one of Connelly’s many nominators for this year’s HBA award (she also put together the dossier for Connelly’s nomination last year). Foley began working with Connelly when she was putting together a leadership program for new MBA hires. Connelly signed up as a faculty advisor.

Foley paints a picture of a woman determined to impact as many blooming Lillyites as possible, regardless of gender. “One of the common themes we discovered when we were collecting information for Deirdre’s Woman of the Year nomination was her commitment to mentoring,” says Foley. “She gave clear and direct feedback, scheduled time to meet with mentees, and just followed through in general, which is a rare thing.” Connelly opened up to the acquisitive young staffers, explaining how she learned from various missteps and personal setbacks and used those experiences as career fuel.

She left Lilly in 2009, after almost four years at the helm of its US operations (and 24 at the company) to tackle the challenges that come along with being president of North American Pharmaceuticals at GSK.

Connelly is the first female to hold that title, and one of only two women on GSK’s corporate executive team (the other is SVP for HR Claire Thomas), but she dismisses any question of discomfort with a wave of her hand. “It’s not run in a way where you feel like you’re either a man or a woman,” she says. “The approach is very professional.” Connelly points out fellow team members Moncef Slaoui (from Morocco) and Abbas Hussain (born in India) as further examples of the team’s diversity, but admits she’d like to see an even more varied crew in the future. “Our customers are very

diverse, and the more we reflect that in our organization, the more we can offer them.”

Outwardly reserved, though not shy, she already commands the loyalty and respect of her GSK cohorts, as evidenced by the many WOTY nominations she received from, among others, GSK CEO Andrew Witty and Catherine Sohn, senior vice president of Worldwide Business Development for GSK’s Consumer Healthcare division.

Sohn, who was the HBA’s Woman of the Year in 2003, praises Connelly’s openness: “I ran into her in the cafeteria one day, and I was amazed at how approachable she was, both for senior- and junior-level people,” she says. “Our job [as an HBA Woman of the Year] is really to be a role model and an advocate for women’s leadership,” she says. That includes speaking to various HBA chapters and participating in Q&A sessions around the country. “They’re always humbling, those Q&As,” notes Sohn. The weight of leadership is never greater than when you’re facing a crowd of 300 women.

In fact, Sohn met Connelly for the first time in November of 2008 at an HBA Leadership Conference in Chicago; she remembers Connelly as the clear standout among the speakers at the conference, and says she made quite an impression on the audience. “I still have the brochure from the lunch,” Sohn says. “I use some of her bullet points in my presentations.”

For symbolic reasons alone, Sohn encourages Connelly to strive for excellence in her current position at GSK, noting that she’ll be a beacon to other women hoping to smash through the c-suite glass ceiling. Meanwhile, Connelly says she’s committed to giving a boost to as many female pharma young guns as possible. “There’s a new, plentiful generation of women in the groups that report to me,” she says. “So I expect to work to ensure that many of them sit on our executive team in the future.”

“I thought [upon reading a profile of GSK CEO Andrew Witty], ‘This seems like the kind of guy you would like to have coffee with.’ We stayed for two-and-a-half hours. We talked about everything pharma. It was fantastic.”

—Deirdre Connelly, 2010 HBA Woman of the Year



### Family Matters

It was Connelly's father who inspired her career path. Born to Irish-American Owen Connelly and Puerto Rican mother Dolores Montecinos in 1960—the middle child of nine—she spent the first 18 years of her life in San Juan. When it came time to leave the nest, Deirdre decided to head to the mainland, choosing Pennsylvania's Lycoming College after hearing about its accounting program from her father. Three accounting classes in, she switched her major to marketing and economics.

“I love economics,” says Connelly, with a smile. “It's just fascinating.”

Connelly, who is bilingual, also says the college's small size was a boon. “My older siblings had grown up in more of an English-speaking environment,” she explains. In a smaller, more forgiving setting, she was able to approach professors if she was having trouble understanding lectures.

Owen instilled in his children a sense of respect for the healthcare arena; several went into the industry, either on the pharma or physician side. One of Connelly's older sisters is a hospital rep for GSK in Texas. She was one of the first people Deirdre called when the GSK offer came—she wanted to make sure her sister was OK with little sis taking a job at the same company. “Though I didn't tell her I'd already accepted the job,” she admits.

### The Transition to TRIP

The road to GSK began some six months before CEO Witty extended the offer. Connelly had been approached for the position by a recruiter, but was perfectly content captaining Lilly's team. However, a *Wall Street Journal* profile of Witty (and his efforts to steer the British juggernaut in a more global direction) caught her attention. “I thought, ‘This seems like a guy you would like to have coffee with,’” she says. Soon enough, the two had a coffee date, originally slated to last 45 minutes.

“We stayed for two-and-a-half hours,” Connelly says, laughing. “We talked about everything pharma. It was fantastic.”

More to the point, Witty impressed her with his strategy of melding business and values, and putting the company's money where its mouth was. And he himself was new to the job; Witty had just taken over as CEO in May of 2008. Connelly saw an opportunity to slip into a leadership role that would put her in a prime position to drive GSK's global diversification strategy.

Witty and Connelly's personal values were similar, as well: “For me, faith is important; family is important; integrity and transparency are vital too, so people know who you are and what you stand for.

“The business we're in is very serious,” she says. “People's lives depend on it.”

One year into the assignment, she's already a company woman through and through, preferring to talk up GSK's strengths and values rather than herself. She speaks at great length about the company “performing while transforming” in the US, as well as GSK's many Physician-Patient Assistance Programs (P-PAPs) and the volunteer work the company does.

This emphasis on transparency cuts right to the heart of GSK's US strategy, which comes with its own acronym—TRIP (Transparency, Respect, Integrity, Patient focus). And though the patient comes last in that acronym, Connelly says the patient perspective is always foremost in the company's mind. So she champions Glaxo's Bridges to Access program, which offers non-oncology medicines to low-income patients whose medications aren't covered by insurance; CARES, a new program launched last month that offers oncology copay assistance; and several other similar programs, including a new offer to provide vaccines free-of-charge to eligible patients in the US. It all goes back to the company's *raison d'être*: “We bring medicine to people who need it.”

Other company outreach efforts include “Orange Day,” during which teams of GSK employees around the globe pick a day to tackle a community project (on company time). Connelly has participated in several of these days, but two stand out in her mind:

During a GSK sales convention in New Orleans, the execs took all 3,000 of the convention-goers to build bookshelves for schools still struggling to crawl out from under Hurricane Katrina's shadow. And they brought books to fill the shelves as well. “At the end of the night, we had thousands of books and hundreds of bookshelves,” Connelly says.

Another group she was part of built desks for schools in a similar predicament. “It made me miss the bookshelves,” she says. “I volunteered to do

the screws. I was drenched in sweat—it was better than my treadmill.” Though Connelly says she doesn’t do this volunteer work for the good press, it’s an important part of educating the public about the good GSK—and pharma in general—is capable of.

A large part of the aforementioned “transparency” comes in the form of a more flexible approach to intellectual property, especially when it comes to efficacy patents relevant to neglected diseases in developing countries. In

drome drug Horizant (gabapentin enacarbil) in February for safety reasons. Meanwhile, antidepressant Paxil (paroxetine) lawsuits in the US and Canada continue to plague the company

The biggest thorn in the company’s side, however, is the resurgence of “Avandiagate.” The first iteration of this problem took place in the summer of 2007, long before Connelly set foot on GSK’s corporate campus, when FDA medical reviewer David Graham investigated evidence of an increased

ning their campaigns,” Connelly says. “And that’s okay. But people need to trust us. They need to know we are developing those medicines and approaching our mission with the greatest respect for them as patients.”

Compounding the effect of these legal problems is the patent cliff facing the entire industry. GSK lost Valtrex (valaciclovir) and antiepileptic/mood stabilizer Lamictal (lamotrigine) in 2009. It’ll also lose the Seretide/Advair (fluticasone propionate/salmeterol xinafoate) combo after this year; antiviral combo Combivir (lamivudine and zidovudine) expires during or after 2012; and around 2013, two more antivirals and Zyban’s (burproprion) formulation patents will go generic.

Connelly sees these challenges as opportunities for GSK to prove its R&D mettle. The structure of the company’s R&D division, headed by Moncef Slaoui, has undergone some drastic changes. The department now operates as a sort of miniature, centralized galaxy of biotechs—called Discovery Performance Units (DPUs)—each working on a particular project. The scientists are more like the first Apple employees than research machines: the atmosphere in these mini-biotechs is one of collaborating in a high-tech garage. “One of the buzz phrases we use is ‘repersonalizing R&D,’” says Kevin Colgan, GSK’s vp of External Communications.

R&D doesn’t just rely on internal discoveries. Like other companies, GSK is branching out through licensing deals and partnerships with academic institutions and those smaller biotechs they’re mimicking in-house. Currently, the company has 47 outside partnerships, and that number will only grow going forward.

While her background is in sales, Connelly prides herself—though somehow in a self-deprecating way—on being well-versed in the scientific complexities of GSK’s drugs, both in the pipeline and on the market. She

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January, the company made 13,500 malaria compounds available to researchers and set up an “Open Lab” (with \$8 million in seed funding) to underwrite work on the most promising compounds.

Another element of GSK’s transparency is payment disclosure. With physician payment “sunshine laws” cropping up across the nation—and a federal act looming in Congress—pharma companies can either voluntarily shift their policies now or wait for government to give them a solid cuff to the head. Several companies have already switched gears, including GSK, which will report all payments to US healthcare professionals and publish the names of all its clinical trial investigators. Furthermore, as of 2009, they’ve placed a hold on all US political contributions.

### Challenges and Opportunities

Connelly just celebrated her one-year anniversary with GSK—a tough year in which the world’s fourth-biggest drug-maker has faced more than its share of disappointments and controversies. The FDA rejected restless leg syn-

incidence of heart attacks among Avandia (rosiglitazone) patients. GSK claimed the evidence was inconclusive. The situation threatened to become another Vioxx situation—a potential disaster for GSK and its reputation for clinical integrity. FDA ended the tussle by slapping a black box warning on the diabetes blockbuster and making the company conduct another study of the potential link between the drug and cardiac incidents.

Flash forward to February 2010 and the Senate Finance Committee’s 342-page airing of grievances against GSK—grievances that include alleged “researcher-bullying” and study ghostwriting. The company has since been smacked around by the Senate and the media over allegations of “misrepresented” data on Avandia. This is a big test for Connelly’s “patient first” philosophy. The company has struck back with a detailed 30-page rebuttal covering sponsored clinical trial evidence on ischemic heart risk dating back to 2000.

“It’s not uncommon for politicians to give pharma bad press—it gets them a few points when they’re run-



## After extolling the virtues of GSK's respiratory and diabetes pipelines, Connelly concedes that one therapeutic area holds a special place for her: Lupus, which her father fought valiantly for 16 years.

co-chairs an internal forum that decides which R&D projects to fund, which necessitates more than just a working knowledge of drug development. While she's not a scientist, she's more than happy to study up. "It's a lot of homework, but it's fascinating. I'm not afraid to say, 'I don't know—teach me,'" she says. "That's what I've always done before and will continue to do now."

She advises all pharma up-and-comers—men as well as women—to adopt this philosophy. Other tips: "Take what you do very seriously, but don't take yourself too seriously. Be genuine and transparent and sincere. Work hard and do your job."

### On the Road Again

Connelly doesn't lead what one might call a sedentary life. Her territory is North America, so she spends most of her time in the States—60 percent in Philadelphia, another 30 percent in Research Triangle Park in North Carolina. But because the GSK home office is in the UK, she also gives London about 10 percent of her time.

When the nostalgia bug bites, she sometimes goes back to her rep roots and heads out for a day of sales calls. "It shows respect for my teammates," Connelly explains. "The job these guys have is not the job I had when I started 24 years ago." And these are not just ride-alongs, she adds. During these jaunts, she carries the bag. (The bag doesn't carry samples, though, since she's not registered for that.)

One doesn't just jump back into the rep fray, of course. Connelly had to complete four hours of training for each of the two products she was presenting, as well as go through all the standard

certification requirements. Since she'd never presented those products before, that added another layer of work. "We bring medicine to patients, and that requires a lot of preparation," she says.

Most recently, Connelly saddled up and called on eight doctors in north Philadelphia. She concealed her title—unless directly asked, of course. Doctors, she says, are typically agog when they discover GSK's president of North American Pharmaceuticals has come to see them, but Connelly always reassures them that the honor is all hers. She tells them: "You're our customer—I'm here so we can hear what you have to say."

And those customers love giving Connelly their input. She typically asks them to design their dream sales force, and takes notes as each doctor describes his or her vision of the Platonic Sales Ideal. Connelly says a physician will sometimes even say the GSK force is already The Ideal—high praise for the team's captain.

Some of the doctors' comments give more than just insight into physician decision-making. One, after learning who Connelly was, even sent a letter thanking her for taking a hands-on approach, which struck GSK's president of North American Pharmaceuticals as incredibly sweet, but odd. "They're the ones treating patients and helping people, and they're thanking me for coming over?"

### The Heart of the Matter

Like a mother of multiple children, Connelly at first hesitates to name the therapeutic area most dear to her. But after extolling the virtues of GSK's respiratory and diabetes pipelines, she concedes that one does hold a special place in her heart: Lupus. Her father was diagnosed with the debilitating,

deadly condition when she was just 16. "He fought it valiantly for 16 years," she says.

So GSK's new monoclonal antibody Benlysta (belimumab) is particularly exciting to her. "We haven't seen anything for lupus in almost 50 years," Connelly says. "The last one was prednisone. But here comes a product that may eventually alleviate the pain and suffering of patients with lupus."

And while it's too late for her father, Connelly is glad to have a hand in bringing the next cutting-edge treatment to market. "I'm part of a group of people that are potentially going to bring Benlysta to some 16-year-old kid who is not going to have to go through what I went through," she says. "And, more importantly, her dad won't have to go through it."

Within the next 18 months, Connelly says, GSK plans on rolling out six new products, with 30 more in the pipeline. "Think about the amount of benefit that will bring to society," she says.

She may be integral to bringing products to market, along with being one of the most powerful women in pharma, but if Connelly ever starts feeling a bit too big for her britches, she thinks of her mother, Dolores. Before she passed away in 2002, Connelly's mother kept her daughter grounded. "I miss it now that she's not around, but she would always tell us, 'You may be this or may be doing that, but I'm the boss here.'"

Only in mid-career, Connelly's accomplishments are already considerable. As head of North American pharma, she has the daunting challenge of trying to turn around the sluggish US market. If she succeeds, Connelly may find herself auditioning for the role of the first female Big Pharma CEO.

But at the end of the day, her eyes are on another prize: "We have a calling to find a cure for diseases. We have a duty to our patients to find those cures."

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