



### TRADITIONAL → ACCOUNT MANAGEMENT

The trend that takes the traditional sales force model to account management will accelerate further. We need to foster (support) local market access capabilities and mindset changes.



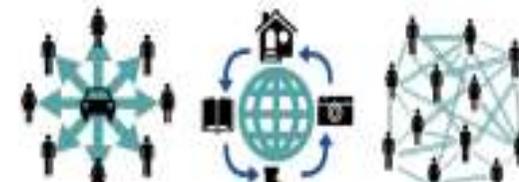
### REACTIVE → PROACTIVE

Increased use of novel technologies, empowered patients, improved partnerships, greater focus on health outcomes. Better healthcare.



### WAITING → THE BEST NOW

All information now! Patients will push to get the innovative and more effective treatment. Making information about drugs and effectiveness available in an understandable format will help strengthening the patients' position.



### OWNERSHIP → ACCESS

Rather than seeking individual ownership, people will share, lease, exchange and rent goods. This will be driven by an increasing desire to be in control of consumption by having access to only what we need and when we need it.





### PILLS → HEALTH OUTCOMES

With the increasing ability to manage big data, systems will be able to push towards payment models for “real” outcomes. Companies that can offer solutions for this will have a competitive edge over companies that will be unwilling or able to offer it. An additional opportunity of this approach is that the discussion will focus on VALUE compared to pure price discussion.



### ANALOGUE LIFE → DIGITAL LIFE

There will be an increased use of digital tools (such as smartphone, smart watch, smart home), which will provide a greater opportunity to improve patient outcomes through the use of digital tools and the use of real-world evidence in drug development.



### DOCTOR RELIANCE → APP RELIANCE

Big data analysis and an even wider availability of smartphones will provide expanding access to more sophisticated tools and information. On the Apple store alone, there are already now more than 165,000 health-related apps available, offering everything from early stage prevention to advanced medical consultation and monitoring.



### 6 MWMs+UK → 1 MUST-WIN MARKET

HTA and access hurdles will increase around the world, while there remains only one country representing a business opportunity for pipeline assets. Slim and focused R&D investments, only placebo controlled trials, due to favored US-only cases from a commercial perspective. We will need to win in the US, remaining countries will become opportunistic launch countries





### QUANTITY → QUALITY RELATIONSHIP

Patients will not (only) value measurable endpoints anymore (e.g. further prolongation of life). They will be wanting improvement in quality of life. It's not about single pills against single diseases, but holistic care for better health.



### STANDARDIZED → INTEGRATED THERAPY

Use digital tools to manage and individualize therapy by documenting drug usage and events of the condition, allowing therapy monitoring, easy exchanging of therapy and event information between patient and physician/ specialist and providing access to RWE.



### OPPORTUNITY → THREAT

Political attitude to Pharma innovation is changing from valuing innovation towards criticizing innovation and cost as a threat. The Pharma business model will need to change. Direction and magnitude of change will depend on the way we collaborate with public authorities. Access is a key in this change of the Pharma business model.



### MORTALITY → IMMORTALITY

With the increased technology, a machine to cure all diseases (more or less) will be developed. The new problem will be to solve the over populated Earth! Some of us will be moved to other planets.





### MEDICIN => FOOD AND ACTIVITY

We will start to look more at root causes for diseases and to treat both the patient and their disease (not only the disease). We know that eating healthy and being physically active can prevent and even reverse/cure some diseases.



### DISEASES => PATIENT

Patients will become the centre of communication. It will be up to the different doctors to share and coordinate information and knowledge reaching one collective message to the patient.



### ONE => MULTIPLE DISEASES

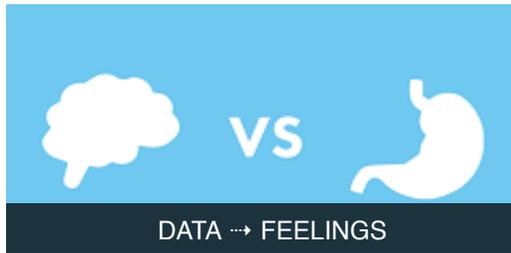
With our increasing age and the possibilities for treatments we will be seeing patients in the future with multiple conditions and the need for a holistic approach to address them.



### PRIVACY => REAL WORLD DATA

Using Big Data and Real World data will be the new black. Utilising the data already being collected without compromising the patient rights and protection of data legislations – making it valuable for patients willing to share data.





Decisions in the future may be taken more based on feelings and not on data. Conclusions will thus be based on gut feelings and not to the same extend on formal data.



**BODY → CYBORG**

We will soon be able to substitute and even improve the defect organs or parts of the body by artificial implants, such as a new pancreas, intestine, breasts, limbs etc.



**SOLUTION ⇒ HIGH SERVICE**

Market Access will be an even harder game in 10 years time. The patients will choose the product with the most benefit – and not necessarily the one seen from the medical doctor's perspective.



**BAYER → CITIZEN INVOLVEMENT**

In the future, projects will invite the general public to help collect, analyze and comment on data and research results and thereby getting the public engaged and supportive.





Gene therapy will cure people of chronic diseases, reducing the need for traditional pharmaceutical treatments. By inserting a gene into patients' cells, we will treat or prevent diseases instead of using drugs – CRISPR/ZFN.



Everyday analogs and our homes are becoming digital and interconnected. Health vitals will be monitored by surrounding sensors 24-7.



From traditional trials and patient documentation to a whole new world of monitorisation and information management.



Healthcare will become fully integrated. A cultural shift, that will decrease information disparity, and increase stakeholder integration.

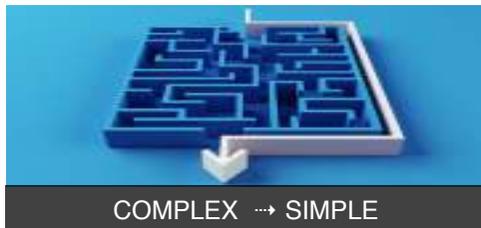




Falling costs of diagnostic measures will enable patients to be more proactive, making decisions to prevent diseases and optimize well-being.



USA will adhere to European standards because of increasing backlash against the high costs of pharmaceutical drugs.



People can't cope with an overload of choices and opportunities. Those who can make things simple and beneficial, will win.



Resources are finite. New business models will emerge in order to support population growth.





**HOMO ECONOMICUS → FEELGOODICUS**

Decisions will increasingly be made based on happiness, "quality fit", good relations, positive impact, societal value creation, and how it makes us feel.



**MOBILE → BUTLER**

We already feel disabled without our phone. In the future it will be our butler and our trainer - a filtering, servicing, decision making device.



**BORING → AUGMENTED**

Augmented Reality Apps will become more common, adding just-in-time information - and fun - to our physical world.



**ME → DEDICATED COMMUNITY**

No one will succeed on their own. Family, friends, neighbors, and all kinds of communities will seek to contribute to the health and well-being of others.





## HUMAN → ARTIFICIAL INTELLIGENCE

AI can successfully implement or perform any intellectual task that a human can, leveraging all that it learns across all domains.



## DEMOGRAPHICS → DIVERSITY

From oldschool segmentation on age, culture, gender etc. towards a much more diverse, fragmented customer and patient reality – segments of one.



## AGING → AGED

For some it will be the best years of their lives, for others a catastrophe: Living longer in retirement than in working years.



## SNAIL → LIGHTNING FAST

From 'snail' logistics to 'lightning-fast' logistics using drones, robotics, autonomous vehicles, and virtual logistics teams.





Large value bills will be eliminated worldwide. In some countries physical money will be phased out by law.



The future will demand us to produce in very small quantities, eg. as personalized medicine or country specific small volumes.



A new doctor-patient relationship develops as individuals start collecting and sharing their vitals and organ functions.



The more tech the world becomes, the more we need touch. Left to tech's devices, we risk losing our sense of self-determination.





### MORE → BETTER

Digitalization, new non-traditional players, and social innovations aiming at "better" - not "more" - health care, will disrupt pharma.



### PRODUCING → PRINTING

Many pharma products will be printed locally: Tissue with blood vessels, prosthetics, drugs, organs, equipment etc.



### NUDGE → FORCE

Incentives for healthy life style. Punishment for unhealthy. Patients will be "forced to behave" and adhere to prescribed therapies.



### LINEAR → EXPONENTIAL

Expect the unexpected. Proactive relentless pursuit. And a focused effort on shattering the status quo.

