Baxalta's Meek inherits grand mission

Baxalta oncology chief David Meek knows from big missions. In his current role he has been charged with building out what he calls a "third leg" for Baxalta: an oncology arm that matches the company's existing strengths in hematology and immunology. Before that Meek was essentially asked to build a commercial entity from scratch at Endocyte, a maker of cancer drugs and companion diagnostics. And before that, Meek's role as a regional chief for Novartis Oncology vested him with oversight for 32 European countries.

Yet when he looks back at those previous gigs, Meek doesn't seem awed or even marginally impressed by his accomplishments—which just might have a little something to do with his first professional experience out of school, as an officer in the US Army during the first Gulf War.

"At a pretty young age I was in a complex environment leading people with more experience than I had," Meek recalls. "In a situation like that you might not have all the knowledge and history that you need. You learn very quickly to surround yourself with great people and be situationally aware of the world around you."

Those lessons have followed Meek through a career that now finds him as one of the most well-regarded commercial execs in and around oncology. And while he doesn't come out and say it, he seems to regard his current challenge at Baxalta as a defining one, one whose impact will be felt for years to come.

By the time Baxalta was formally separated from Baxter, in July 2015, Meek had long since started to evolve the company's oncology unit. It didn't hurt that, philosophically and practically, the expanded operation was a perfect fit with the company's existing pieces. "It felt like there was a big opportunity to leverage our history in rare, high-unmet-need disease states," he says.

David Meek

July 2015–present
EVP and president, oncology, Baxalta

July 2014–June 2015
VP and global head of oncology, Baxter

Aug. 2012–July 2014
Chief commercial officer, Endocyte

Jan. 2010–Aug. 2012
Region head, North, Central & Eastern Europe, Novartis Oncology

KELLY DAVIDSON

At the same time, Meek's mandate—"to build an oncology organization as big as you can and as fast as you can"—wasn't one that lent itself to a deliberate pace, as Baxalta had already set the pre-launch wheels in motion for three products. With no time to waste, Meek set about building a team (from around a dozen people in September 2014 to more than 100 at the end of 2015) and expecting that its members would be able to jump right into the mix.

"I like to say that while oncology may be new to Baxalta, it's not new to our team," he says. "If you name a big biotech or oncology organization, somebody on our team was probably there at some point—Roche, Celgene, so many more. We're taking the best of these companies and bringing it with us. The stuff that doesn't work, we're leaving behind."

Baxalta's big three oncology assets—Oncaspar, for treatment of acute lymphoblastic leukemia in young patients; Onivyde, for metastatic pancreatic cancer; and pacritinib, in Phase III, for myelofibrosis—collectively illustrate Baxalta's nimbleness within the oncology space. Oncaspar, a biologic, was acquired last July from Sigma-Tau Finanziaria. Onivyde is being jointly developed and commercialized with Merrimack (which holds US rights), while pacritinib is set to be co-marketed in the US with CTI BioPharma.

Asked about the range of partnerships, Meek says that companies need to be flexible in their deal models, especially within the fast-changing oncology sector. He touts Baxalta's willingness and ability to accommodate all comers.

"Why did Merrimack want to do a partnership with us when we were an unknown entity? I think it's because, with us, it's never our way or the highway. We're flexible, plus we have the oncology expertise. [Partners] know their asset will be maximized."

Meek reports that he expects that Baxalta will add more "disruptive products" to its oncology portfolio in the months and years ahead. In terms of revenue, the oncology unit should hit $80 to $90 million when the books are closed on 2015, at least double that sum in 2016 and well beyond in 2017.

"We want to be a development and commercial powerhouse," he says. "We don't plan on settling for anything less." —*Larry Dobrow*

"We're flexible, plus we have the oncology expertise. [Partners] know their asset will be maximized."