



SHIFTING THE CONVERSATION ON Diversity and Inclusion

By Kim Ribbink

COVID-19 and the Black Lives Matter movement have prompted many companies to step up diversity and inclusion initiatives.

The past 18 months, with the global pandemic and social unrest following the deaths of George Floyd and Breonna Taylor, have shone an even brighter light on diversity and inclusion — both in the workplace and in society in general.

“Companies within our industry have released statements, made philanthropic pledges,

donated a variety of resources, and even come out publicly for the first time to stand against inequality, intolerance, and discrimination and in support of the diverse communities of patients and employees,” says Synim Rivers, senior director of research and development communications, Horizon Therapeutics.

For many in the life-sciences industry, these life-changing situations presented a call to action to step up DE&I initiatives. It turns out that DE&I isn’t just the right thing to do, but also the smart thing to do.

According to BoardReady, a nonprofit organization, companies where women held more than 30% of board seats outperformed

their peers in 11 of 15 sectors, and companies with at least 30% of director seats held by people of color saw year-over-year revenue grow by 4%. Those with less racially diverse boards had a revenue decline.

Increasingly, companies and the industry at large are recognizing the importance of D&I.

“There is a clear stakeholder expectation among our investors, customers, and our associates for organizations to show ethical leadership on issues affecting society both globally and in the United States,” says Marion Brooks, VP and US country head of diversity and inclusion at Novartis.



We are at a watershed moment in society where we all must play a part to welcome diverse representation, viewpoints, and experiences in our work, and, more simply, in our existence.

SYNIM RIVERS
Horizon Therapeutics

Over this past year, I have seen a more concerted effort to explore and understand the barriers that prevent women and people of color from excelling in pharma.

TAJ NERO
GSK





Since being appointed as Genentech's first chief diversity officer in January 2020, I have worked closely with our CEO to ensure that Genentech's enterprisewide D&I strategy is truly integrated into the organization's culture.

QUITA HIGSMITH
Genentech



We must continue to promote D&I values in our planning and decision-making, but also engage each other to broaden and deepen our understanding of what diversity and inclusion really is.

TAMARA BOWLES
WCG

Although D&I initiatives are a welcomed priority and goal for many companies, we must be or become laser-focused on equity.

DR. CHAZEMAN JACKSON
W. Montague Cobb/NMA Health Institute



Organizations are starting to make their demographic data and D&I goals publicly available to encourage accountability and measure progress, experts say.

"There is a committee on the BIO board of directors solely focused on workplace development, diversity, and inclusion, so change is happening," says Eric Dube, Ph.D., president and CEO at Travers Therapeutics. "More CEOs are now speaking out about their commitment to achieving equity both in their companies as well as in healthcare."

Chazeman Jackson, Ph.D., health science researcher and equity advocate, W. Montague Cobb/NMA Health Institute, says too often D&I initiatives have been on the margins and disconnected from organizations' missions and bottom lines.

"Now, we're seeing a greater call for these initiatives to take center stage — permeating throughout research development, hiring practices, as well as marketing and communications," she says.

While the rise of DE&I departments has been key to setting the blueprint for an inclusive culture, Paula Garcia Todd, global strategic manager of pharma solutions at International Flavors & Fragrances, says the corporate culture must come directly from leadership.

A Changing Paradigm

While the global pandemic has brought many challenges, there have also been silver linings, says Taj Nero, a medicinal science and technology project manager and workstream leader in the global demographics and trial diversity team at GSK. "I believe that the flexibility of working remotely allows for a more inclusive culture," she says. "Being virtual and being invited into our colleagues' homes has changed the professional paradigm — driving momentum forward to reach a more inclusive, equitable society."

However, she adds that there are many blind spots when it comes to the experience of underrepresented groups and the role they play within pharma. Change, experts say, begins with education.

"My personal mission is to normalize the vantage point of seeing a Black woman who is a chemical engineer and a scientist," Ms. Nero says. "This is why I remain visible at schools and collaborate with organizations such as the Girl Scouts. I also serve as the director of professional development on the board of Women of Color in Pharma, which promotes the development and advancement of women of color in the pharmaceutical life-sciences industry."

In April 2021, Ms. Nero was certified in the first cohort of the speakers bureau for the WOCIP "We are Pharma" initiative, which focuses on community education and increasing COVID-19 vaccine confidence by bridging the gap between pharma and patients.

Ms. Garcia Todd has spent the last decade on the board at Penn State's College of Engineering helping ensure the recruitment and retention of diverse students in engineering, as well as looking to expand the talent pipeline earlier through engaging in K-12 STEM outreach, specifically targeting underrepresented students and encouraging them to consider STEM careers. This resulted in her appointment as an IF/THEN ambassador by the American Association for the Advancement of Science (IF she can see it, THEN she can be it).

"In this role, I have the privilege of speaking with students, which allows me to encourage STEM career pathways, especially among females and underrepresented candidates," Ms. Garcia Todd says.

D&I in Health Delivery

A person's healthcare experience shouldn't be determined by their gender, race, sexual orientation, or socioeconomic background. But data show these factors significantly influence access to care and health outcomes, says Quita Highsmith, VP and chief diversity officer at Genentech. "The industry needs to address inherent bias," she says. "For example, while

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artificial intelligence can help to provide better healthcare, its training data must be representative of the communities that it may impact to make it more inclusive and equitable.”

Dr. Jackson adds clinical trials, and more broadly biomedical research, have often neglected the meaningful engagement of patients.

“I’ve spent a significant portion of my career ensuring that there are policies and systems in place that remove barriers to research participation and promote equity and inclusion in each phase of scientific discovery,” she says.

Since the pandemic, Dr. Jackson has seen increased transparency of clinical trial data to help build consumer, patient, and public trust in scientific and medical systems.

Among industry groups, BIO launched its BIOEquality Agenda with the aim of improving health equity and increasing clinical trial diversity, investing in current and future scientists, and expanding opportunities for women and other underrepresented populations. And PhRMA launched the first-ever industrywide principles on clinical trial diversity in November 2020.

Further, according to Tegan Mead, senior director, healthcare operations, Javara, the FDA released its nonbinding guidance addressing diversity and eligibility in clinical trials last year, indicating the agency may

HBA’s Gender Collaborative

- ▶ The Healthcare Businesswomen’s Association’s Collaborative cohort has nearly achieved equal gender representation at senior VP and manager levels (48% and 49%, respectively).
- ▶ From 2018 to 2020, the Collaborative cohort doubled the representation of women senior VPs — jumping from 24% to 48% — nearly achieving equal gender representation at that level. In comparison, from 2018 to 2020, the broader pharmaceutical and medical product sector only increased representation of women senior VPs from 25% to 32%.
- ▶ From 2018 to 2020 at the VP level and higher, the HBA Collaborative cohort saw a 27% average increase in women’s representation, whereas the broader industry saw a 9% average decline.

Source: Healthcare Businesswomen’s Association

establish requirements surrounding minority participation going forward.

Tamara Bowles, VP, human capital management and co-chair for WCG’s Diversity & Inclusion Council, says the company has seen a marked increase in the number and types of clients seeking expertise in how to diversify clinical trials. “We’ve also seen the intersection between external clients and clinical trials and internal WCG culture and employees getting stronger and more cognizant of the imperative to diversify both clinical trials and the biopharma workforce,” she says.

Ms. Mead says COVID-19 increased patients’ understanding of trials and the critical role diversity plays in advancing research, which has created opportunities for further dialogue with patients and potential participants. “We are working to leverage this new awareness to engage with an increasing number of underrepresented minority groups,” she says.

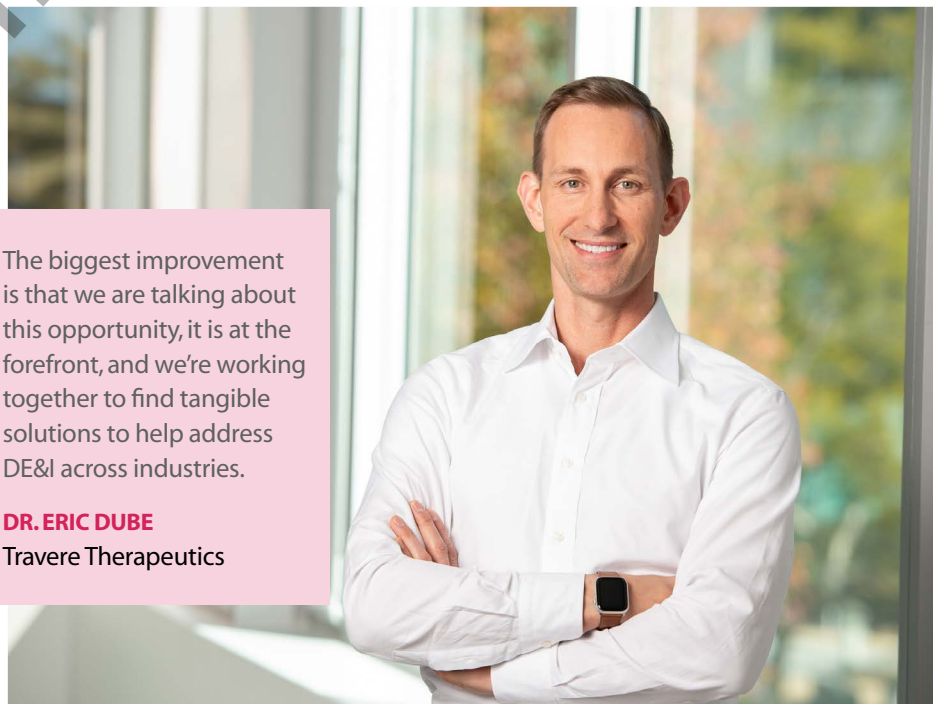
Ms. Garcia Todd believes the industry still has a lot of work to do to gain the trust of the general population. “It starts with internal practices,” she says. “Are we ensuring fair gender and racial representation in our clinical trial testing of new drug products? Are we hiring diverse individuals who not only improve our research and innovation pipeline, but also advocate for the important work we do within their communities? Are we adequately supporting diverse talent to progress in their careers?”

“We need strong advocates and leadership across the entire healthcare industry to lead strategies that result in increased research into racial differences in disease manifestation,” Ms. Rivers says. “We also need to place an emphasis on understanding how socioeconomic, behaviors, genetic ancestry, and other factors come into play in determining one’s ability to lead a healthy life as we develop new therapies



While we are seeing promising advances in improving DE&I within the healthcare industry, there is still much work to be done.

MARION BROOKS
Novartis



The biggest improvement is that we are talking about this opportunity, it is at the forefront, and we’re working together to find tangible solutions to help address DE&I across industries.

DR. ERIC DUBE
Trave Therapeutics

to treat the unique needs of various patient populations.”

D&I Now and in the Future

Experts say while progress with D&I initiatives are welcome, much more must be done to address health equity.

“We need to improve our investments and incorporate equity metrics to recognize when we are succeeding and when we have more work to do,” Dr. Jackson says. “I believe transformation from the inside out will be necessary to disrupt harmful policies and practices and to build a more inclusive and just environment.”

Bonnie Brescia, founding principal, corporate development officer, BBK Worldwide, says achieving diversity in employment or study execution is not something that happens within a year — or even 10 years. “The commitment may take years to gain consensus, then significant efforts to make progress,” she says. “An organization must work hard to achieve diversity within itself. It rarely comes naturally — and you may not exist now as an entity that would be attractive to people who are Black, Hispanic, Latinx, or nonbinary, for example. To attract Black employees, you need to have Black employees on staff. Embracing the life experiences and perspectives of our employees and customers is the only way to change an organization.”

Ms. Garcia Todd says in the wake of the murder of George Floyd she noticed more employees at her previous company begin to share their stories, and more colleagues become willing to actively listen. “Creating equitable spaces in an industry that is predominantly white and male is challenging — but it starts with tough and personal discussions,” she says. “It became less about events happening to ‘groups of people’ in the news, and more about protecting and advancing our beloved colleagues.”

Mr. Brooks says with the implementation of Juneteenth as a federal holiday, positive changes are happening and it is hoped that DE&I will be recognized as a movement, not a moment, to focus on equity beyond observances and milestones.

DE&I across the industry and in clinical research begins with who gets to be a scientist and a physician, Ms. Highsmith says. “This needs to start early in secondary education, continue through academia and then in the workplace,” she says. “We must develop a pipeline of talent, then encourage and financially support this talent because this will drive innovation, improve scientific and clinical



DE&I has become an all-encompassing ‘us’ challenge — it always has been, but it has finally been recognized as such.

PAULA GARCIA TODD
International Flavors and Fragrances



Saying that increasing diversity in clinical trials is important is not enough — companies need to execute against this goal.

BONNIE BRESCIA
BBK Worldwide



There needs to be a sustainable focus on DE&I gaps and their causes to identify opportunities strategically.

JAVIER BARRIENTOS
Takeda Pharmaceuticals

cal outcomes, and help contribute to more equitable healthcare.”

Ms. Nero says to move the needle forward on DE&I, equity and anti-racism will need to be formalized as business imperatives that are both acknowledged and measured. “The act of listening is the first step,” she says. “The next step is consultation with DE&I experts to create baselines, uncover hidden biases, and implement proven strategies — not only with respect to hiring, but facilitating a clear pathway into the C-suite. The final step is to act and create meaningful spaces for all employees to grow.”

Javier Barrientos, head of diversity, equity, and inclusion, U.S., Takeda Pharmaceuticals, says there needs to be a sustainable focus on DE&I gaps and their causes to identify opportunities strategically. This diagnostic thinking is necessary to inform any long-term vision that aspires to effectively tackle ongoing problems such as healthcare disparities, talent underrepresentation, and even how medical information is communicated to communities of color. “Cooperation across industries, public and private partnerships, and proactively seeking ways to work together will be key to achieving our individual and collective goals,” he says. **PV**

Diversity and inclusion must become non-negotiables.

TEGAN MEAD
Javara



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DE&I in the Workplace: Companies Taking Action



JAVIER BARRIENTOS
Head of Diversity, Equity,
and Inclusion, U.S.
Business Unit,
Takeda Pharmaceuticals

At Takeda, we are in the early stages of embedding DE&I in all aspects of our business through individual and collective commitments and actions. Throughout the pandemic, we've been working to translate our programs into virtual offerings and evaluating hybrid options that will not only connect colleagues through DE&I as a shared purpose, but also build community.

We also created a DE&I strategic council with co-leads representing various segments of our U.S. business unit, transformed the role of our employee resource groups following the integration with Shire, established a formal USBU DE&I team, and set a strategy in place for current and future needs. Additionally, we raised awareness and defined the roles of allies as social and racial injustices played out across our nation.

Externally, we are one of the first companies to create a VP of U.S. Medical Health, Equity and Community Wellness role dedicated to impacting change by working closely with communities to reduce gaps in access to lifesaving medications and improve clinical trial representation.

We recognize that DE&I positively impacts a company's workforce, innovation, and performance, which is why we are focusing on recruiting, retaining, and growing our broad spectrum of talent. We know their contributions will increase idea sharing, quality of decision-making, and innovation as well as improve productivity.

From a community perspective, we demonstrate our social responsibility by working with minority groups and women-owned businesses and advocate within our industry and therapeutic areas to bring better health and brighter futures for underserved populations.

Beyond the business case, DE&I is the right thing to do. It starts by creating a fair and equitable environment with equal opportunities for everyone to succeed.



TAMARA BOWLES
VP, Human Capital
Management and
Co-Chair, WCG's
Diversity & Inclusion
Council

The pandemic-driven shutdown in March 2020 was a call to action for us to ensure employees had equitable access to the resources they needed to do their work remotely. Externally, our clients who were pivoting to develop COVID-19 diagnostics, therapies, and vaccines were looking for ways to reach a diverse community to participate in their clinical trials.

As early advocates for increasing diversity and inclusion in clinical trials, we were able to help our clients reach clinical trial participant populations that appropriately reflect the demographics of the patient groups who will use the therapies.

The pandemic and shutdown and social unrest following the deaths of George Floyd and Breonna Taylor were calls to action to really step up our diversity and inclusion efforts internally. One of the first things we did was establish our D&I Council Charter to drive four core strategies.

We embarked on a learning journey to educate ourselves and build cultural awareness and competence around DE&I. We focused on how to improve recruiting, retention, and advancement of diverse talent. We sought to align our internal and external advocacy efforts and resources to influence societal changes and diversity in clinical trials. And we adopted metrics and storytelling to track our progress and measure effectiveness and impact.

One example of how we implemented these strategies was through our employee resource groups (ERGs), which help to foster community among WCG employees, giving them a safe space to share and explore common themes in both their professional and personal lives. Our ERGs have hosted companywide webinars to share insights into the successes, struggles, and joys of their community with their colleagues. These webinars have been enormously popular and created opportunities for conversations that further understanding and acceptance in the broader WCG community.



BONNIE BRESCIA
Founding
Principal,
Corporate
Development
Officer,
BBK Worldwide

Founded in 1983 by women who had worked in community-health settings, BBK Worldwide has been addressing client doubts about including diverse populations and perspectives in advertising messaging and images from the get-go.

I remember one health education campaign where the commissioner of public health asked us to remove a stalk of broccoli from an ad targeting Chinese women, stating, "Chinese people don't eat broccoli." The absurdity of a member of one racial and economic group turning assumptions into facts remains a real problem. As communications professionals, BBK is committed to rigorous inclusion of message delivered over media that is relevant and meaningful to each audience community.

From our roots in driving for gender diversity, we have grown to become a community with broad representation of unique perspectives based on race and ethnicity, country of origin or cultural affiliation, language, LGBTQ+ identity, religion, and age in all departments within BBK.



MARION BROOKS
VP and US Country Head of Diversity &
Inclusion, Novartis

Despite an increase in remote working, we have continued to hold significant events such as our 2020 and 2021 Days of Reflection. These events provided an opportunity for Novartis associates to engage in listening and learning to gain a greater understanding about how we can stand up for justice and equality, as we observed Juneteenth.

Over the two years, more than 13,000 associates learned from an inspiring lineup of nationally recognized experts on topics such as allyship, psychological safety, and the historical underpinnings of mistrust of the healthcare system in communities of color. Our employee resource groups have also led the company in observing Black History Month, celebrating PRIDE, and having important conversations about the roots of anti-Asian hate.

In addition, the COVID-19 pandemic accelerated our Choice with Responsibility program rollout, which offers flexibility for our office-based associates — this program has given many of our associates, including parents, caregivers, and those with disabilities the choice to decide how, where and when they work in the ways that best meet their needs.

We are also further building out our D&I Talent Acquisition team, which implements recruiting best practices such as diverse hiring slates and panels. And we are continuing to build relationships with Historically Black colleges and universities, veterans' organizations, and other external groups. Additionally, we are expanding our successful Multicultural Engagement Program, which strengthens inclusion, engagement, development, and retention of ethnically and racially diverse future leaders; 60% of the first cohort of the program have received promotions or stretch assignments. We are also currently on track with our EPIC pledge, which aims to achieve gender balance in management and further improve our pay equity and transparency processes by 2023. Currently 47.5% of our U.S. leaders are female.

When it comes to patients, we are committed to creating solutions and funding programs that improve health outcomes for underserved patient populations through initiatives such as More Than Just Words, a multi-year commitment to promote health equity in breast cancer care for Black women, as well as programs to reduce barriers to access for patients with sickle cell disease.

Another key focus area is addressing the vast underrepresentation of communities of color in clinical trials. We plan to work with historically Black medical schools to create clinical trial centers of excellence, led by researchers of color, to increase diversity and in-

clusivity in trials, and contribute to improved health outcomes for people of color. We are actively working to pursue strategic relationships to enhance clinical trial accessibility and expand geographic reach, as well as producing educational materials and toolkits to mitigate some of the barriers to participating in clinical trials.



ERIC DUBE, PH.D.

President and CEO, Travele Therapeutics

Internally, we have had significant focus on ensuring that we are not only sharing the diverse experiences of the people we serve through telling their stories, but also integrating their perspectives and experiences into our planning through programs and initiatives, such as our patient and caregiver advisory council and our diversity advisory boards, and striving to include diverse representation in our clinical trials.

In addition, we've worked closely with the leaders of the Black Women's Health Imperative (BWHI) to spearhead the formation of a first-of-its-kind Rare Disease Diversity Coalition — a steering committee of influential, cross-sector leaders who share a passion and commitment to addressing the racial and socioeconomic disparities among people living with rare disease.

When I stepped into the role of leading the company, I wanted to make sure I did my part in creating a culture where every person can authentically be who they are and do their best work. That's why on my first day as CEO I did two things. I shared that I was a rare cancer survivor and I also shared that I was gay. And I believe that set a tone of transparency, trust, and empowerment for others to be who they are when they come to work.

In addition, I'm also actively involved in the Workplace Development, Diversity and Inclusion Committee on the Board of Directors at BIO and partnered with the BWHI to form the Rare Disease Diversity Coalition.



QUITA HIGHSMITH

VP and Chief Diversity Officer, Genentech

For years, Genentech has taken action to address issues such as gender and race representation inside our organization, inequities in clinical research, and gaps in educational opportunities among underrepresented populations. Last year, Genentech established the Chief Diversity Office (CDO) to further this work and take bold and innovative action in support of advancing diversity, equity, and inclusion throughout the organization. As a result of the work of the CDO, in partnership with employees across the company, we were uniquely positioned to advance our efforts throughout the pandemic to provide our people, patients, and partners the support they needed.

At Genentech we strive to address three core D&I pillars. The first is fostering belonging for our people by leveraging several initiatives, including facilitated employee dialogues called Dialogue Circles and a monthly speaker series titled Of Many Cultures to connect with employees across the organization and build cross-cultural understanding.

The second is to advance inclusive research and health equity for all patients, particularly in light of data showing the extraordinary burden COVID placed on communities of color. In 2020, we approached hospital administrators and physicians treating underserved patient populations across the United States to enlist their help in launching EMPACTA (Evaluating Minority Patients with Actemra): a Phase III, randomized double-blind, placebo-controlled, multicenter study for patients hospitalized with COVID-19 pneumonia. The study was the first global, Phase III COVID-19 clinical trial to primarily enroll patient populations that are often underrepresented in clinical studies and had been disproportionately affected by the COVID-19 pandemic.

Earlier this year, we launched the Advancing Inclusive Research Site Alliance, a coalition of clinical research sites that are partnering to advance the representation of diverse patient

populations in oncology clinical trials, test recruitment, and retention approaches, and establish best practices that can be leveraged across the industry to help achieve health equity for people with cancer.

Our third D&I pillar is centered on transforming society through partnerships that strengthen D&I across the industry and within all communities. Throughout the pandemic, we intensified our philanthropic giving efforts and allocated funding to several organizations led by people of color and found new ways to embed equity in the inception and design of our work.

We will continue to build on these three pillars, for example, increasing representation of Black/African American, Hispanic, and Asian directors and officers and addressing gender representation opportunity zones through a data-driven approach.

We will also seek to transform society by committing \$1 billion annually of Genentech external spend to diverse suppliers and requiring D&I commitments from all suppliers with requests for proposals of more than \$500,000.



SYNIM RIVERS

Senior Director of Research and Development Communications, Horizon Therapeutics

People are talking about DE&I in spaces they wouldn't have in the past, such as the workplace. At Horizon, we're thinking strategically about how to address this topic. DE&I are woven into all facets of the company and are at the core of our recruiting. We are always looking for ways to evolve and improve when it comes to engagement and culture, and we will continue to recruit from multiple and diverse sources. Taking care of our employees is a priority, and during the pandemic, leadership has focused on finding tangible ways to support employees across multiple fronts.

At a community level, we are listening in-

tently to understand what the needs are and how we can make a difference. For example, throughout 2020, we provided more than \$1 million to advocacy organizations to support COVID-19 relief initiatives for people living with rare and rheumatic diseases, including educational resources, emergency financial relief, and internet connectivity to facilitate continued care via telehealth.

In addition, we have initiated several processes internally to further advance diversity and inclusion in our clinical programs. For example, our patient advocacy team is building relationships with communities of color and ensuring all patient education materials are available in multiple languages. And we are looking to partner and support the training of minority physicians to become principal investigators in clinical research.

TEGAN MEAD


Senior Director, Healthcare Operations, Javara

At Javara, our initiatives to address diversity are multifaceted. We have developed a strategic plan called IMPACT, Improve Minority Participation and Awareness in Clinical Trials, with the goal of reaching more underrepresented minorities, particularly those affected by significant health disparities.

Engaging at the community level is imperative to building trust and opening doors for dialogue. We strive to provide patients with the information they need, and access not previously available, to ensure they are



able to make informed decisions about their choice to participate in clinical research. Our nonprofit partner Greater Gift engages with community and faith-based organizations to build relationships, provide education, and create pathways to spark awareness and access.

We also work to connect with and educate minority physicians because they are an essential part of building greater trust and raising awareness among URM populations. Currently 15% of Javara's investigators and 30% of staff are minorities, and while we have made progress, there is still much work to be done. We must consistently commit ourselves to diversity and inclusion it's the only way to ensure we are building a future with more equitable clinical research for all. 

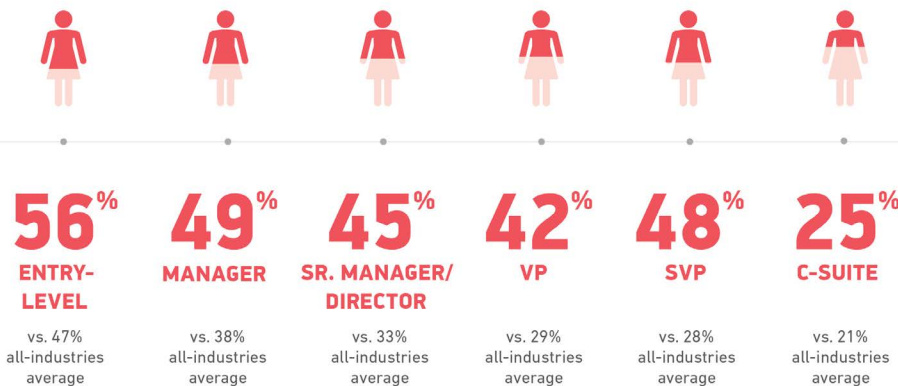
HBA's Gender Collaborative

Gender Parity Collaborative

POWERED BY THE HBA

WOMEN ARE BETTER REPRESENTED AT ALL LEVELS IN HBA COLLABORATIVE MEMBER COMPANIES

than in all industries surveyed



Source: Women in the Workplace 2020 / McKinsey & Company Cohort Report 2020 for the HBA



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