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In this episode Taren Grom, editor-in-chief of PharmaVOICE Magazine meets with Charlotte Jones-Burton, MD, Cardiovascular Development Team Lead, Innovative Medicines, Bristol-Myers Squibb.

Taren: Dr. Jones-Burton, welcome to PharmaVOICE WOW podcast program.

Dr. Jones-Burton: Thank you so much for having me. It's an honor to be speaking with you today, Taren.

Taren: It is our pleasure to have you. I'm really intrigued by your title – Cardiovascular Development Team Lead Innovative Medicine. Can you tell me about your role at Bristol-Myers Squibb?

Dr. Jones-Burton: Yes. My title as you've mentioned is development team leader and what this role entails is that I'm responsible for leading across functional team that's working all the way from discovery to commercialization for medicines that are in our cardiovascular therapeutic area at Bristol-Myers Squibb. Specifically, I work with our head of cardiovascular development to ensure that the strategy that has been outlined is well developed and then is executed and helping our team really identify and solve for any road blocks or challenges that will occur. What I like to say is that I'm a conductor in the orchestra and I'm really leading and conducting the orchestra.

Taren: I love that analogy. So, really, you're working from molecule to market. Is this a new approach in terms of development for the organization?

Dr. Jones-Burton: So, this is not a new approach; however, I think it's when I talk about the role of this conductor, if you will. I think that the conductor approach is something that people – is not really the way that people usually explain it, but this role is not a new way of thinking. I do think that this role has been in existence and is a role

that you typically see across different companies; however, there may be a slight tweak in the terminology of the title.

Taren: Gotcha. Well, it sounds like you have your hands full just with that, but I also know you have a particular passion around driving diversity in clinical trials particularly for racial and gender minorities. I'd like to talk to you about what some historical barriers have been and then what your vision and goals are for the future to make sure that there's improved representation of these underserved patient population.

Dr. Jones-Burton: I think one of key barriers to diversity in clinical trials is really a systemic one that isn't frequently talked about and I would like to give some time here to talk about that and what that systemic barrier is is really a lack of diversity represented along the process from discovery drug, discovery all the way through the development and commercialization process. And I see that this lack of diversity happens within academic institutions, as well as in the pharmaceutical industry as well. Diversity amongst those who are responsible for developing the strategy, discovering and developing the medicines is critical and here's why? Because it's important to ensure that our clinical trials are designed to support the inclusion of many different population, gender diversity as you've mentioned, racial ethnic diversity.

The reason why that's important is because it will allow the data to be generalizable to the broadest populations and at the end of the day that's really what we're striving.

So, my vision for the future would be to increase this representation that I believe is lacking of diverse populations throughout this full process from bench-to-bedside, which is what we physicians like to say and what the means is really from basic research to the patient. In order to do this, I think there really does need to be a commitment, a well-defined goal and a way of monitoring to ensure that the goal is realized. There's one area where I do see that we have been successful in terms of the diversity within clinical trials and that really is around geographic diversity and this is really how that was achieved. So, I believe they it could be achievable for other areas of diversity.

Taren: Dr. Jones-Burton, how is this vision being realized within your organization?

Dr. Jones-Burton: Yeah, thanks for that question. What I'll say is that we have had an intense focus on ensuring that our workforce is diverse and that our leaders operate within an environment where inclusion is important so not only having the diversity, but also having the inclusion and that allows leaders to feel empowered and a part of that

empowerment is making sure that we have diversity along every aspect of the drug discovery development and commercialization process.

Take myself as an example, I am empowered to make decisions with my team and I have a diverse team. We have diverse representation in terms of gender, race, ethnicity, age, you name it, geography. We have people who are from the US, people outside of the US and what that does is that allows for different perspectives and insights to be baked into the work that we're doing and also a lot of the work that we do is we have advisers whom we work with, expert scientists and other clinicians and healthcare providers and it allows for us to realize that diversity and actually seek out that diversity in those advisers who we're working with to design clinical trials. So, that's just an example of how this is being realized within my company, Bristol-Myers Squibb.

Taren: That's wonderful. Are there any metrics that you're looking at in terms of milestones and how will you know that you've achieved your goals?

Dr. Jones-Burton: I do think that we have metrics on the team level. What I think is so interesting is my team knows this is something that I'm committed to and the more that we have these interactions, I might ask a question. What I'm finding is that I don't necessarily have to ask the question. My team members are presenting me with options and actually pointing out where the diversity lies, and sometimes the diversity isn't obvious, so it's important to have those questions. So I'll say I think there is some room for us to grow in terms of metrics, but I'm encouraged by what I'm seeing with even my own team.

Taren: That's wonderful. I think you're right; I think there is room for improvement, but certainly every step forward is a step towards greater diversity. So, I applaud you for the work that you're doing.

Specifically within your CT programs, what kind of initiatives are your researchers using to promote diversity?

Dr. Jones-Burton: One initiative – and I just kind of alluded to it – is really this focus on ensuring that our workforce is representative of the populations that we're aiming to treat with our medicine and we at Bristol-Myers Squibb have a focus within our people and business resource group. We have one group devoted specifically to women, we have another group devoted to black employees, another group devoted to Latina employees and there are others. We have committed the resource to have those led by a



full-time person and how that shows up is that each of those groups really do help inform the business that we are conducting so that commitment is very important.

Another initiative that we have is an initiative basically that I've spoken about with myself is leadership development of individuals that represent diverse population such as myself. I'm an African-American woman and having the investment within for my leadership development really allowed me to then have my fingerprint on this for the teams in which I lead.

At the end of the day, I think it's important to understand that we need to build a robust pipeline and that pipeline really starts with scientists, as well as other individuals who are trained to lead clinical trials and these are typically called Young Scientist's Program. So having that commitment to make sure that we are not just looking at the workforce, the current workforce, but the future workforce and then the final initiative that I'll bring up is really having an interest in our young students in terms of STEM initiative. And to that end, I have – with the support of Bristol-Myers Squibb five years ago – developed a program that has provided shadowing opportunities at Bristol-Myers Squibb each summer for students of color to really come in and understand what it might mean to have a career in science and medicine.

And really that's meant to inspire them. You can't be what you can't see. So, those types of programs are very important and really reach children who are middle school, early high school, at the time where they might be making some critical decisions about what they want to do when they go into their college years.

Taren: I think that's wonderful work you're doing and I wish you continued success.

When we talk about clinical trials and the recruitment of patients into those clinical trials. We recognize that there is a lack of diversity there as well. So, how can companies such as yours, Bristol-Myers Squibb, as well as other working in the pharmaceutical space address those different patient populations to encourage them to join a clinical trial?

Dr. Jones-Burton: I think that I'm going to sound like a broken record but I really do believe that we do have to begin with the end in mind and I like the way that you phrased the state, which is really thinking about the patients and being very clear of the proportion of different populations that are reflected in terms of a disease state and once you have that in mind, clearly, it's having an understanding of needing to reach out to experts who are treating those types of patients so that you can bring the insights and have those

clinician experts inform the work that's being done very early on so that we don't have those systematic barriers that I talked about at the beginning and the more that we can do that, the more the commitment to ensure that we have diversity along every aspect of the process. I think we will achieve the state of having diversity in clinical trials, as well as I will state again why that's important so that the data that we are getting is generalizable to a broad population and so that our medicines get to the right patient.

Taren: Excellent. Your passion is so great around this topic that you co-founded the Women of Color in Pharma in 2015. I love to hear more about this organization, its mission and the response from the industry.

Dr. Jones-Burton: Yeah. As you have stated, I'm quite passionate about making sure that we have diverse representation within the pharmaceutical and life sciences industry that I was so compelled to pull together a group of women and start an organization called Women of Color in Pharma and the vision of the organization is to transform the pharmaceutical industry with women of color and the mission is to empower those women of color to speak their professional and personal development so that they can have roles of impact as I believe I have achieved and it's really to ensure that there is a strategic network where people feel that they have a safe and nurturing environment so that they can grow to where they would like to grow within the industry in their career.

Taren: Wonderful. I wish you continued success with that organization as well because it's important work that you're doing and the messages are really quite relevant today; so, I applaud you.

Dr. Jones-Burton: Thank you.

Taren: Let's go to the future of the industry. What excites you about where you see drug development, commercialization or the business models going as we look forward to 2020?

Dr. Jones-Burton: So, I think what is really exciting for me is the pace which we're seeing things changed within the macro environment and it's translating into the industry. I also think that we're in a time where we are becoming hyper focused on the patient and the reason why that's exciting is because I think that is going to drive a lot of the innovation and the speed at which we move. So, those are the things that excite me about the industry and I like to solve problems. I also think that there are some challenges that are ahead particularly as it relates to cardiovascular research. There are some challenges



in making sure that we continue to focus on cardiovascular research. Cardiovascular disease is the number one killer across the world and making sure that there is a notion of false optimism that we solve all of the problems and that cardiovascular disease is no longer a public health issue I think is one of the biggest issues that are confronting us, ensuring that we continue to have funding for cardiovascular research.

I love to state problems and also build solutions to those problems. So that does excite me about the future of the industry.

Taren: I'd like to touch a little bit more about the cardiovascular space because I think you're right. I think obviously it's the number one killer, but it so often is overshadowed by the new innovations happening in cancer, the lack of treatments in Alzheimer's and dementia that are getting a lot visibility or attention right now. We haven't solved one of the biggest challenges in healthcare and that's cardiovascular disease.

Dr. Jones-Burton: Yeah, I think that's spot on and I definitely would agree with you and I think we need to give you a microphone so that you can begin to be an ambassador for cardiovascular disease because I think you definitely have your finger on the pulse and we can look at some diseases like heart failure for example and if you compare the mortality that's associated with that and you compare it with some cancer, you may see some similarity and I believe that we're all touched by cardiovascular disease and that's why it's so important for us to continue to have that conversation, but not to just speak. I think innovation is very important and really trying to think through in the clinical trial space what things can we do not only to make people aware of the calamity of the situation but also think through what types of data could we use. We're in this era of big data, electronic medical records, so we have a lot of data at our fingertips. How can we use that to evolve the clinical trial space so that we don't have these large trials that take very long time to deliver because we know patients are waiting.

Taren: I think that's the key, patients are waiting. Let's talk about big data. There is so much data out there. Are you finding that there's also now a trend to go to little data where there are specific data points that are becoming more relative as they get culled from the big data set?

Dr. Jones-Burton: Yeah. So, I think that particularly in the cardiovascular space, one of the challenges that we have is that because there have been so much innovation and so much research that there are defined endpoints that are required and really do require long trials to really understand whether a therapeutic intervention impacts it and where I

think there will be more focus on is what you're bringing up and how we actually incorporate that into our decision-making within the clinical trial space so more to come on that.

Taren: I look forward to hearing more about that from you as we go forward. To switch a little bit here, I'd like to you, Doctor, about some of the things that you've learned along the way, some of the lessons that you've learned that you might share with other women who want to reach a level of impact as you have, or influence as I like to say, within your organization. Are there things that you know now that you wish you knew before?

Dr. Jones-Burton: Absolutely. Lots of lessons that have been learned, but I think if I had to distill it down to a few, I would say it's important to do the work to understand what you're passion is, what your purpose is, and what your potential is. It's important to develop meaningful relationships that you can leverage along the journey, your career journey. It's going to be a marathon so it's important to have those relationships and then I think it's really important to show up with your ABCs and with that what I mean is your attitude of gratitude. It's an awesome responsibility to be in a position to change people's lives and therefore, you must approach it with this attitude of gratitude. The B stands for belief in yourself. It's really important that you have that and then C stands for the courage to use your voice. I would just accentuate that because I think it did take me a while to find that courage to go with and find that courage, but that is actually very important for us to do particularly as women and as black women as well.

Taren: I love those ABCs. I think they are fantastic tips for everyone who is looking to progress their career so thank you for sharing. You touched on it earlier about your leadership style of being a conductor. How did you figure out that was the right way to lead for yourself?

Dr. Jones-Burton: That's an interesting question, Taren. I think I did the work as I just mentioned to really understand what are my values and when I did that work, it really pointed to a few key things that I think are important in that role of connector. One of those things is wanting to help people, another thing is wanting to get people together so collaboration is really important to me, and then it's willingness and a desire to serve. So, those are things that are really important that I value and then when I thought through 'okay, here are the things that I value and maybe here's my list of strength,' which I won't bore you with though. It naturally led to that type of role in terms of that conductor role and I absolutely love that role.

Taren: I would never be bored. I want to hear about your strengths because I think those are important things for other women to hear about how you self-identify. I'm not bored. Tell me about your strengths.

Dr. Jones-Burton: No worries. I think I do like to solve problems so you just heard me mention that. I think that I'm solution-oriented. I'm optimistic so I don't see the glass as half empty; I see it as half full. I also that I have a strong sense of communication, which is definitely important when you're working with a group of people and I like people too. I think that's a strength and we need to call that out. So those are the key ones that I would say that I married with. Okay, here are my values and then I thought through potential roles and that kind of landed me in a role where I want to be the conductor. I want to lead leaders if you will.

Taren: That's fantastic, thank you. I know I pushed you there a little bit, but I'm happy to have heard those. I think you are a people person and it comes across very clearly. You've had a lot of successes in your career, a lot of accolades and you've achieved so much. Could you please narrow down for me one wow moment of your career that you can share.

Dr. Jones-Burton: This was challenging to do and what I'm going to say is and please allow me to provide some context...

Taren: Absolutely.

Dr. Jones-Burton: The wow moment was walking across the stage to get my medical degree. The reason why that was the wow moment of my lifetime is because I wasn't supposed to walk across that stage because people who look like me, who come from a background where I come from, which is rural Arkansas where 18,000 people live in my town, 85% of them live below the poverty line, those are not the people that walk across the stage at a prestigious institution to receive a degree. There were so many adversities that were in front of me and closest to my graduation, I was pregnant and I was on bed rest and I had a baby that weighed 1 pound 13 ounces. So there were so many obstacles that were put in front of me to overcome, but I did it. So, I would say to you that that was my wow moment and I carry that with me, and I know that even though any adversity comes in front of me, I kind of have that mindset that if I did that, I can do anything that's put in front of my path.



Taren: I would say that is a big wow! So, congratulations to you for not only having the courage and the belief in yourself, but the fortitude and the resilience to keep going forward and to being such a positive influence on the industry. We're all very indebted to you. So, thank you.

Dr. Jones-Burton: Thank you.

Taren: It's been a pleasure speaking with you and I'd love sharing your story. Thank you so much for sharing it with us.

Dr. Jones-Burton: I appreciate the invitation. Thank you.

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