

Highlights from the MAPA-MAPS Medical Affairs Summit 2025

The 2025 MAPA-MAPS Australasia Medical Affairs Summit set the tone with its inspiring theme, *“Bold Ideas, Bright Futures: Brilliance in Medical Affairs.”* This vision speaks to the ambition, creativity, and transformative impact of the Medical Affairs community. Summit co-convenor and MAPA Executive Committee member, Krishan Thiru emphasised the role of medical affairs professionals in driving change.

“You are helping us define the future of our profession” – Krishan Thiru

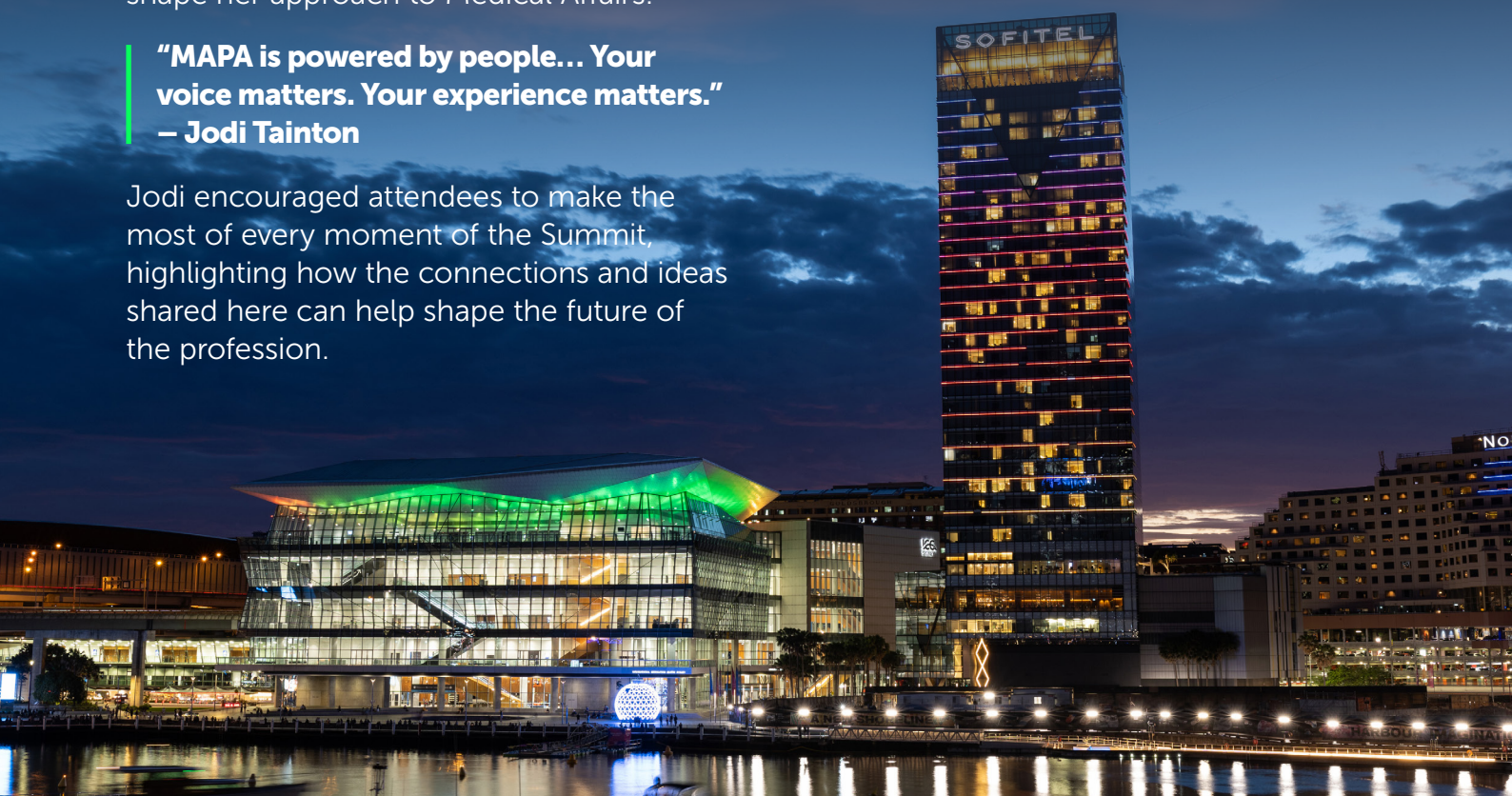
Interim MAPA President Jodi Tainton shared her deeply personal journey from ICU nurse to patient and ultimately to a career in pharma—experiences that continue to shape her approach to Medical Affairs.

“MAPA is powered by people... Your voice matters. Your experience matters.” – Jodi Tainton

Jodi encouraged attendees to make the most of every moment of the Summit, highlighting how the connections and ideas shared here can help shape the future of the profession.

This year’s Summit opened with an incredibly powerful reminder of why empathy and connection matter in healthcare. In the **opening plenary session, Dr Ben Bravery** shared his extraordinary journey from cancer patient to doctor—a story that has inspired a national conversation about compassion, transparency, and system reform. It was the perfect start for two days of discussion, discovery and collaboration, setting the tone for a program that challenged assumptions, celebrated innovation, and put people and their experiences at the heart of healthcare.

“There is more to the art of healing than treating the illness” – Dr Ben Bravery



Making Science Stick: Storytelling for Medical Affairs

Presented by

Scott Davis, Ward6

Hugh Fitzhardinge, Ward7

Nathan Martinez, AstraZeneca

The storytelling workshop explored how to make scientific communication more memorable and persuasive. Medical teams often rely on data alone, but the session demonstrated how structured storytelling can make information “stick.”

“If you think about the times when a piece of information has really resonated with you, it’s because there was a story built around it, right? It’s not just that Kaplan–Meier curve”

– Nathan Martinez

Strategic Director Scott Davis highlighted key principles used widely outside healthcare to drive engagement and persuasion. Participants learned a practical framework to transform complex science into narratives with a clear beginning, middle and end—anchored by emotional tension, key messages, and a call to action. Citing evidence that stories dramatically boost recall, the facilitators encouraged attendees to move beyond “information monsters” and use storytelling to build stronger engagement, drive insights, and influence action.

“Stories make data human. They don’t replace evidence. They make data resonate” – Scott Davis

One core message: appeal to the heart, not just the head. Using examples like Apple’s iconic “Think Different” campaign, political slogans such as “I like Ike,” and public health messages like “Slip Slop Slap,” he showed how simplicity, emotion, and clear storytelling leave lasting impressions. Creative Director Hugh Fitzhardinge emphasised the power of keeping it simple—distilling complex ideas down to memorable, human narratives.

“Emotion is a potent tool” – Hugh Fitzhardinge

The session ended on a powerful note, reinforcing that a strong storytelling structure doesn’t just make information more memorable—it gives presenters confidence. By starting with the story, not the slides, communicators can shape clearer, sharper, and

more persuasive messages. The framework shared throughout the workshop is designed to keep stories focused, emotionally resonant, and aligned to audience needs—whether in a one-minute elevator pitch or a full presentation. Participants were encouraged to practice, refine, and apply this approach in their day-to-day work, using it as a tool to cut through complexity and create truly “sticky stories” that inspire action.



Harnessing AI Tools to Enhance Medical Affairs: From Basic Applications to Advanced Strategies

Presented by:

Arthur Alston, Novartis

Scott Thomas, CSL Seqirus

Sinhuja Siva, Nanosonics

Huey Wen Lee, Sanofi

Vin Jayawardene, Daiichi Sankyo

This lively and practical workshop explored how artificial intelligence (AI) can redefine efficiency, compliance, and collaboration in medical affairs. Scott Thomas set the scene by describing medical affairs as “the knowledge owners” within organisations—those colleagues naturally turned to for answers. He demonstrated how generative AI is now accelerating workstreams: crafting first drafts of ministerial letters, abstract submissions, and post-meeting summaries, and supporting pre-call planning and coaching.

“Gen AI doesn’t give us finished products that we should rely on but it’s consistently delivering strong first drafts. Now I’m spending most of my time polishing the diamond.” – Scott Thomas

Scott Thomas emphasised responsible use: awareness of hallucinations, automation bias, and the limits of English-trained models. “A human-in-the-loop” remains essential, he warned. Arthur Alston expanded the discussion, guiding participants through prompt engineering techniques—defining role, context, and output—to improve LLM performance. His vivid analogy likened prompting to ordering at a fine restaurant:



“If you just say, ‘make me a meal,’ you’ll get what the chef wants, not what you want.” – Arthur Alston

An engaging exchange followed, as audience members raised practical questions about transcript recording, consent, data privacy, and the limitations of AI in real-time interactions.

The session progressed to “reasoning models,” where AI collaborates iteratively with the user, supporting deep research and learning plans, and finally to “agents”—custom-built AI tools trained on curated datasets. Alston showcased two examples: *Code Buddy*, based on the Medicines Australia Code of Conduct, and *Promo Reviewer*, a compliance-checking agent. These reduce hallucinations by using retrieval-augmented generation (RAG) and curated company knowledge bases.

Closing discussions, facilitated by Wei Wen Lee and Vin Jayawardena, highlighted that AI should empower—not replace—human expertise.

“AI is not going to replace us—but people who know how to use AI will replace us.” – Arthur Alston

Pilot to Scale Up: Amgen Experience with MAPA Competency Framework

Presented by

Riaz Abbas, Amgen
Cae Tolman, Amgen

This workshop detailed Amgen’s practical experience in piloting and scaling the MAPA Competency Framework across Asia Pacific, transforming it from a conceptual model into a dynamic tool for capability building. Co-led by Riaz Abbas and Cae Tolman, the session explored how Amgen tested the framework’s real-world application, adapted it to diverse cultural contexts, and integrated it into digital systems for self-assessment and benchmarking.

Dr Tolman outlined the origins of the MAPA framework, developed in 2022–2023 to define six key competency domains with four achievement tiers per domain. Amgen’s pilot sought to validate its feasibility for non-field-based medical roles, using data visualisation to identify strengths, gaps, and coaching opportunities within teams. Riaz described how Power BI dashboards enabled managers to benchmark performance and design personalised learning pathways. The pilot demonstrated that an “off-the-shelf” competency framework could be effectively implemented with minimal workload burden, using simple tools like Smartsheet and Power BI.

“An off-the-shelf competency framework that could actually be used” – Riaz Abbas.

Expanding beyond Australia, the framework was tested in Japan and China, where cultural nuances influenced interpretation. As Riaz noted, Japan’s consensus-driven environment initially viewed the exercise as performance evaluation rather than developmental assessment, highlighting the need for training in constructive feedback and manager conversations. Despite these challenges, consistent benchmarking across countries reinforced the framework’s adaptability, with minor regional variations in role-specific subdomains.

“There is cultural nuance....in Japan they interpreted [the framework] as management thing...we had to make it clear this is a development assessment” – Riaz Abbas.

The initiative has since evolved into a unified digital platform integrating self-assessment, managerial review, and dynamic dashboards. Amgen has submitted its findings for publication in the *Journal of Pharmaceutical Medicine*, positioning this work as an example of how regional medical teams can operationalise competency models to drive capability excellence across diverse markets.

Business Acumen: Can't Define It But I Know It When I See It

Presented by

Paul Slade, Gilead

Leon Rozen, MedicalAffairsMentor.com

Tamara Etto

Christina Xinos, Ipsen

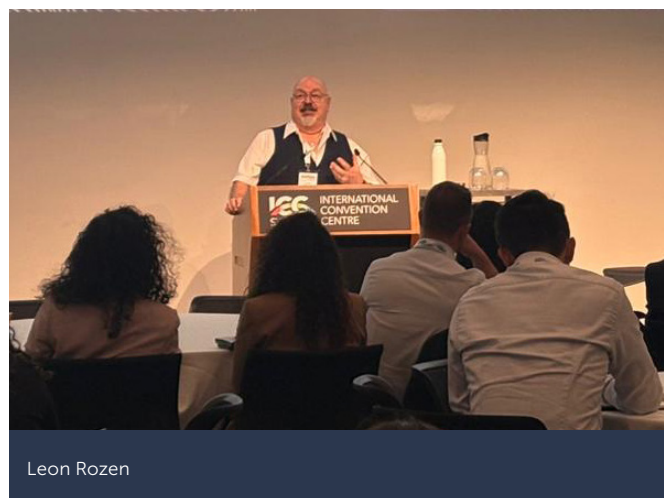
Paul Yun, Ipsen

What exactly is “business acumen” in medical affairs—and why does it matter now? That was the central question tackled in a lively panel discussion featuring senior and emerging leaders from across the industry.

The panel reflected the breadth of experience in the room — from MSLs and medical advisors to medical directors. A common theme emerged early: while everyone agrees that business acumen is a critical competency, its meaning and application can vary widely. Leon Rozen opened the discussion, highlighting the pivotal role of business acumen in career development, building strategic partnerships, and balancing scientific insights with business priorities.

“We need to be able to combine science with that business insight.” – Leon Rozen

Paul Slade provided a helicopter view of business acumen, emphasizing the importance of data generation, data understanding, and risk mitigation in Medical Affairs. At a strategic level, business acumen enables medical affairs to secure a seat at the table—helping shape resource allocation, identify opportunities, and balance patient and business priorities. At a practical level, it’s about making smart choices, understanding trade-offs, and aligning medical strategies with broader brand and company objectives.



Leon Rozen

“Why is business acumen so important? It’s because we need it to make the case.” – Paul Slade

Panelists shared real world examples, from applying structured decision-making tools like the SMART framework to integrating early business considerations into ISS evaluation.

Tamara Etto highlighted the strengths of medical affairs in understanding complex data and evolving trial landscapes but noted the need for better awareness of business priorities.

“We can get really drawn into some very compelling scientific passion projects, but we need to see how does this fit in with the big picture?” – Tamara Etto

Christina Xinos discussed the challenges of managing investigator-sponsored research proposals, including the need to align with business priorities and data gaps.

“I think the best strategic decision making when applied to investigator sponsored research is actually very early on in the life cycle.” – Christina Xinos

The panel also highlighted opportunities to strengthen cross-functional understanding and agility—without losing strategic focus.

“I think Medical Affairs has evolved a lot, we’re not just compliance people anymore, it’s really a shared role now.” – Paul Yun

The session closed with a reminder: technical expertise is essential, but future leadership in medical affairs will hinge on the ability to think—and speak—the language of the business.

Mastering Bold Networking: From First Contact to Follow-Up

Presented by

Niloufar Ansari, Amgen
Victoria Dokic, Menarini
Tamara Etto
Chunyan Ma, Eisai
Daniel Thurley, The University of Sydney and Axis Health Co

This interactive workshop reframed networking as a disciplined practice—before, during and after an introduction—with a special emphasis on purposeful follow-up. The session opened with facilitator Niloufar Ansari explaining that this was the third networking workshop his team had run, designed to help medical affairs professionals practise their networking and follow-up skills in a collaborative environment.

“The idea started with the thinking that networking is very important. We do it every day, internally, externally, with HCPs, but we haven’t practised it that much or shared our learnings.” – Niloufar Ansari

Participants began with interactive polls on how they approach first meetings and the challenges of following up. Silence after outreach emerged as a common frustration. The second half of the workshop turned to the use of AI in professional engagement. Poll results showed that about 70% of attendees now use AI daily to assist with communication, mapping and research. Recruiter Sophia Heng described how AI had transformed her workflow:

Professor Fran Boyd, a breast-cancer oncologist and patient advocate, and Nikki Conway, a long-time industry leader and volunteer in patient advocacy, joined later for live role-plays exploring how professionals can engage with key opinion leaders, recruiters and patient groups authentically. Matt Graceland closed with reflections on professional branding in medical affairs and the power of strategic media engagement.

“We’re all brands, and LinkedIn is a really big part of the world that we’re in.” – Matt Graceland

The session concluded with three “bold challenges”: make ten new LinkedIn connections at the summit, reach out to a senior leader for a 15-minute bold conversation, and conduct a “lunch-and-learn” with a colleague outside one’s function to broaden cross-functional understanding.

From Evidence to Impact: Applying Implementation Science in Chronic Disease through Medical Affairs Leadership

Presented by

Ravi Santani, DKSH Healthcare
Daniela Vanvuuren, Novartis Pharmaceuticals
Jon Zdon, Novartis Pharmaceuticals
Matt Britland, Edge Medical Solutions
Chetan Mehndiratta, Scholars Sapiens

This engaging late-afternoon panel explored how medical affairs can bridge the persistent gap between generating evidence and achieving real-world impact through *implementation science*. Moderator Jon Zdon opened by noting that, despite immense investment in research, it still takes an average of 17 years for proven innovations to become routine clinical practice—and less than half ever do.

“We’re great at finding gaps and filling them with evidence, but when it comes to diagnosis, screening, treatment, are we really shifting the needle for our patients?” – Jon Zdon

Chetan Mehndiratta outlined how implementation science transforms evidence into sustained practice change, emphasising the importance of understanding context and identifying “no-do gaps” before acting. Using examples from infection control and COPD, he showed how collaborative design with patients and clinicians drives success.

“Unless you collaborate with patients, families, and clinicians, you are not going anywhere with this study.” – Chetan Mehndiratta

Ravi Santani then unpacked common barriers and facilitators, from resource limitations and regulatory hurdles to leadership support and simplicity of intervention. Drawing on a meta-analysis of global data, he identified three universal obstacles—resource constraints, intervention complexity, and resistance to change—and urged leaders to secure early stakeholder buy-in to overcome them.

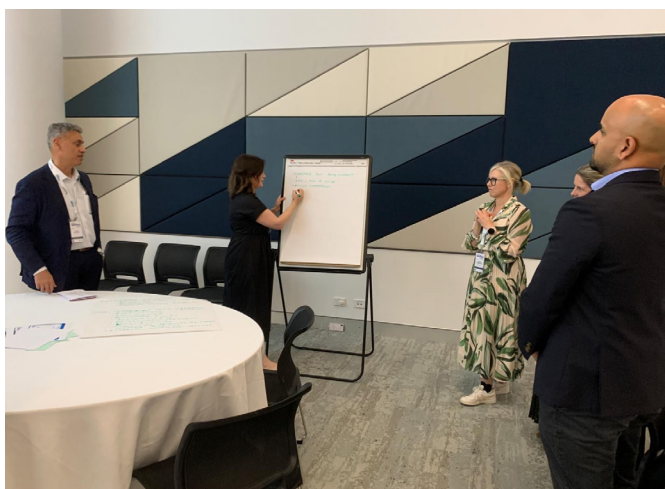
Daniela Vanvuuren presented measurable outcomes and frameworks that enable evaluation and scale-up, referencing the Proctor model and practical tools such as IMPRESS, SIRC, and TCAS. Through real-world examples—the *Happy Life Club* diabetes coaching

initiative and New South Wales' *Leading Better Value Care* program—she demonstrated how implementation frameworks can deliver substantial clinical and economic benefits, from HbA1c reduction to millions saved through redesigned care pathways.

“It’s heartbreaking that brilliant research can take 17 years to reach patients—implementation is how we change that.” – Daniela Vanvuuren

Closing the session, Matt Britland looked ahead to the seventh “wave of innovation”—AI and digital health—calling for integrated public–private partnerships to accelerate translation and equity in access. He urged medical affairs to move “from outputs to outcomes,” championing policy alignment, data-driven feedback loops, and a culture of collaboration to embed change.

“We are the seatbelt of healthcare—let’s not wait 35 years to make innovation mandatory.” – Ravi Santani



Workshop strategic thinking

Metrics Mindset Shift: Bold Thinking for Medical Affairs of Tomorrow

Presented by

Clare Smith, Medical Affairs Expert
Riaz Abbas, Amgen
Siân Davis, Aspire Medical

Are our metrics telling us we’re winning or just that we are busy playing? This was the question posed in the session that explored how metrics can elevate Medical Affairs as a critical strategic pillar.

“It’s easy to track numbers but how can we track progress? How can we track impact?”

– Clare Smith

Speakers urged attendees to move beyond activity tracking and embrace metrics that demonstrate impact on patient outcomes. While traditional reporting has centred on field medical touchpoints, future strategies must integrate qualitative and quantitative measures across all functions—linking activity to strategy, strategy to outcomes, and outcomes to patient benefit.

“The focus is going to shift, and the focus is going to be upon us, because we measure what matters”

– Riaz Abbas

Key themes included the distinction between leading and lagging indicators—what predicts versus what proves impact—and the need for clear definitions and aligned goals. Riaz Abbas used a simple umbrella analogy to illustrate how leading indicators drive results, while Siân Davis introduced practical frameworks such as *Theory of Change* and *Contribution Analysis* to help teams plan, evaluate and communicate value with rigour.

“Quantifying the impact can be challenging and often multifaceted in nature.” – Siân Davis

The session underscored that metrics should be viewed as a strategic tool, not a compliance burden. By embedding them in cross-functional planning, aligning on shared goals, and tracking meaningful impact, Medical Affairs can strengthen its seat at the table and deliver better patient outcomes.

Attendees left with a challenge: re-examine their metrics and ask—are they proving value, or just measuring activity?

How Medical Affairs Can Lead Cross-Functional Collaboration

Presented by

Lina Fusco, Pfizer
Rob Ormsby, ADORA Medical Affairs

This interactive workshop explored how medical affairs professionals can strengthen self-awareness and relational intelligence to become effective cross-functional leaders. Facilitators Rob Ormsby and Lina Fusco guided participants through two practical

tools—Know Yourself to Lead Yourself and the Support–Challenge Matrix—designed to enhance collaboration and trust within and across teams. Opening the session, Rob encouraged attendees to reflect on the question:

“What’s it like to be on the other side of me?” – Rob Ormsby

A challenge to examine personal tendencies and behaviours that influence workplace dynamics. He stressed that meaningful collaboration starts with self-leadership and emotional intelligence. Rob stressed that if you’re not leading yourself well, how can you expect to lead others?

Participants then used the *Know Yourself to Lead Yourself* framework to identify behavioural patterns that emerge under pressure, exploring how to “trade up” to healthier responses. Lina Fusco guided teams through a reflective exercise, prompting open discussion on how tendencies can undermine leadership and how conscious awareness enables change.

“Become a person in charge of their emotions, who responds to emotional situations and doesn’t react.” – Rob Ormsby

In the second half, the *Support–Challenge Matrix* helped participants map their natural leadership styles—whether they tend to offer high support, high challenge, or both. Discussion revealed that most attendees lead with high support, highlighting a need to elevate constructive challenge to foster growth and accountability.

“A true leader brings everybody with them.” – Rob Ormsby

Through group exercises and honest conversation, attendees recognised that leadership is fluid and context dependent, requiring constant calibration between empathy and accountability. The workshop closed with a call to action: to bring these tools back to their teams, normalise open feedback, and “liberate” others by balancing support and challenge.

Living Well With and Beyond Cancer: Reimagining the Role of Medical Affairs in Patient-Centered Innovation

Presented by

Georgina Wiley, Medwise Consulting
Sarah Collings, Servier
Jaime Macedo, Rare Cancers Australia
Inez Denham, Novartis

A powerful theme ran through the closing sessions of the summit: patient-centred innovation must move from aspiration to action. The panel, chaired by Georgina Wiley, explored how Medical Affairs can play a pivotal role in elevating the patient voice across cancer care.

As survival rates improve and cancer is increasingly managed as a chronic condition, traditional clinical endpoints like tumour response and progression-free survival are no longer enough.



“It’s no longer only about response rates or progression free survival. It’s about quality of life, dignity and ensuring that every person, no matter where they live or what background they come from, has equitable access to care and support.” – Georgina Wiley

The panel highlighted the growing importance of patient-reported outcomes that capture quality of life, autonomy, emotional wellbeing, and financial impact. Patients want to live well—not just survive.

Speakers shared tangible examples of how medical teams can translate data and insights into meaningful change: shifting treatment plans to minimise disruption, co-creating solutions with patient advocacy groups, and involving patients early in clinical trial design. Strong, trusted partnerships were identified as critical to making equity and inclusion a lived reality.

The session ended with a clear challenge: stop talking about patient involvement and start embedding it in everyday practice. As Ben Bravery's powerful opening reminded attendees, data alone doesn't inspire change—stories and lived experience do.

Stories from the Front Line: Trust, Clarity and Landmines in Communicating Science - Keynote Session with Norman Swan

Day two of the summit opened with an engaging keynote from Dr Norman Swan, whose unique perspective as both doctor and journalist set the tone for a day focused on empathy, communication, and credibility. Drawing on his experience reporting through crises like COVID-19, Swan explored the essential role of trust in science and medicine, reminding attendees that

"Medical affairs professionals carry the flame of trust and reliability, the flame of science, the flame of ethics" — Norman Swan



He argued that communication is never just about sharing facts — it's about emotion, connection, and understanding the audience's perspective. Using examples from his work, Swan showed how powerful storytelling can make complex science meaningful and help counter misinformation.

"You start from where they're at, not from where you're at." — Dr Norman Swan

Reflecting on the pandemic, he urged openness and humility, noting that admitting mistakes builds confidence rather than weakens it. His keynote left a lasting message: trust is not earned through perfection, but through honesty, empathy, and authentic human connection.

Boosting Medical Affairs: Brilliance from Within. Transforming the Way We Work.

Presented by

Maaïke Addicks, School of Medical Affairs

The session opened with an energising and interactive tone as Maaïke Addicks encouraged participants to "work for it" and learn from one another — with cats as a recurring visual metaphor. She reflected on her own career journey in Medical Affairs and the evolution of the function from a support role to an increasingly strategic pillar alongside Commercial and R&D.

Using the "cat in the box" analogy, Maaïke illustrated how Medical Affairs has grown in importance, but the processes and structures around it — planning templates, timelines, and cross-functional engagement — often remain unchanged, creating a mismatch between ambition and operational reality.

Discussion focused on practical ways to "make the box bigger": involving Medical earlier in brand planning, aligning timelines with long-term impact, recognising supportive activities, and shifting language from commercial goals to patient-centred outcomes. Participants shared real-world experiences of both best practice and common barriers.

Key themes emerged around the importance of early, meaningful cross-functional engagement, especially in pre-launch settings, and the ability for local teams to adapt global strategies. Several noted that proactive Medical involvement improves not only compliance but also the quality and agility of strategic decisions.

"If you can describe the value already in the plan or the outcome in your plan, it's going to help you be more effective." — Maaïke Addicks

The session closed with collaborative table discussions to identify small but impactful process changes. The overall message was clear: Medical Affairs can—and should—lead in shaping how teams work together, not just respond to plans made elsewhere.



Engaged discussion with Maaïke Addicks

Leading with Empathy and Insight: Unlocking Emotional Intelligence for Medical Affairs Excellence

Presented by

Siân Davis, Aspire Medical
Daniel Garlick, Costello Medical
Christina Frenzel, AstraZeneca
Ben Palmer, Genos International

In this engaging post-lunch session, moderator Daniel Garlick led an insightful discussion on the pivotal role of emotional intelligence (EI) in elevating leadership and team performance within medical affairs. Setting the tone, Garlick underscored that while technical skills are essential, "people often hear a message emotionally before they hear it intellectually"—a sentiment that resonated throughout the conversation.

"People will often hear a message emotionally before they hear it intellectually." — Daniel Garlick

Dr Ben Palmer introduced the Genos model of emotional intelligence, developed from his research at Swinburne University, outlining six key competencies: self-awareness, awareness of others, authenticity, emotional reasoning, self-management, and positive influence. He emphasised that these are not static traits but skills that can be developed—especially when tied to performance and succession planning.

"[Emotional intelligence] keeps appearing in the top 10 job lists of the future," — Ben Palmer

Siân Davis described her experience implementing the Genos model to strengthen leadership teams, emphasising the need for a structured change approach and skilled coaching. She advocated for focusing not only on blind spots but also on amplifying strengths.

"Understanding ourselves is the start to all of this....and then being able to understand others." — Siân Davis

Dr Christina Frenzel shared AstraZeneca's leadership development journey, where all people leaders in medical affairs undertook the Genos assessment. She reflected that investing in EI helped foster collaboration and psychological safety:

"It's about having the real conversations—listening, asking questions, and building an environment where feedback can flow without fear." — Christina Frenzel

Across their collective insights, the panellists identified common barriers to EI implementation—chief among them, organisational inconsistency between values and reward systems. Palmer illustrated this with the ANZ Bank case study, where embedding empathy and communication in culture transformed both staff engagement and business outcomes.

In closing, the panel shared simple actions to strengthen EI: active listening, soliciting specific feedback, and daily reflection on emotional patterns. These practices, they agreed, can drive marginal gains that collectively transform team culture and performance across medical affairs.

From Data to Decisions: The Role of HEOR and RWE in Accelerated Access to Medicines in Australia

Presented by

Richard White, Oxford PharmaGenesis
Giles Stratton, Pfizer
Elizabeth de Somer, Medicines Australia

This session explored how recent Health Technology Assessment (HTA) reforms in Australia could accelerate access to innovative medicines, and the crucial role Medical Affairs professionals play in this transformation. Richard White opened by framing HTA as a value-based decision-making process, highlighting that Australians currently wait an average of 466 days from TGA approval to PBS listing. Using relatable examples, he illustrated how efficacy, safety, quality of life, and budget considerations interact to determine value, emphasizing the complexity of balancing clinical benefit and cost.

Elizabeth de Somer provided an update on the HTA Implementation Advisory Group and progress following the 2024 strategic review. She outlined the 50 recommendations designed to streamline HTA processes, engage stakeholders, and improve equity, timeliness, and recognition of innovation. She highlighted early actions being considered and reinforced the importance of aligning reforms with patient needs, industry sustainability, and making Australia a more attractive destination for new therapies.

Giles Stratton discussed how Medical Affairs can contribute through local insights, real-world evidence, and early planning, ensuring submissions reflect Australian clinical practice and patient perspectives. He stressed the value of integrating evidence across functions, leveraging comparative effectiveness data, and using innovative methods—such as discrete choice experiments—to support decision-making.

The session concluded with practical guidance on integrated evidence planning, cross-functional collaboration, and aligning publications, data, and real-world insights to support HTA submissions. Attendees left with a refreshed understanding of the evolving HTA landscape, actionable strategies for Medical Affairs engagement, and the potential to shorten the pathway from TGA approval to patient access, ultimately improving outcomes for Australians.

From Rising Star to Strategic Partner - The Development Journey of a TAE

Presented by

Bernd Merkel, Teva Pharma
Kevin Knowler, Roche
Alvaro Sanchez Herrero, GSK

This interactive workshop explored the development journey of Therapy Area Experts (TAEs) and strategies to enhance engagement across different lifecycle stages. The session began with a framing discussion, introducing the concept of TAEs and differentiating them from traditional Key Opinion Leaders (KOLs). Participants learned that TAEs include rising stars, established experts, legacy leaders, and allied healthcare professionals—stakeholders increasingly influential in shaping treatment pathways beyond traditional prescribers.

The workshop focused on aligning TAE engagement strategies with both product lifecycle stage and TAE persona. Participants engaged in scenario-based exercises to map TAEs within their portfolios, identify engagement opportunities, and design tailored, strategic interaction plans. Emphasis was placed on purposeful, lifecycle-aligned engagement rather than frequent touchpoints, highlighting the importance of cross-functional collaboration to maximize efficiency and impact.

Through group discussions, participants reflected on real-world practices, shared innovative approaches, and considered short-, mid-, and long-term goals for rising stars and other TAE personas. By the end, attendees had tangible, actionable strategies to implement immediately in their daily work, reinforcing the value of strategic, persona-driven engagement to strengthen relationships, optimize cross-functional alignment, and ultimately improve patient outcomes.



Debra Bourke, Summit Co-Convenor & MAPA Interim Supporting Vice President with Ben Bravery

Closing Plenary

Presented by

Maaïke Addicks, School of Medical Affairs

The closing plenary, led by Maaïke Addicks, provided an inspiring reflection on the evolution and impact of Medical Affairs. Maaïke shared her personal journey from starting as a medical advisor in Sydney to becoming a global medical leader and trainer, highlighting how the role has transformed from a supportive function to a strategic partner within the pharmaceutical industry. Drawing on her international experience, she emphasized that many of the challenges and opportunities faced in Australia mirror those globally, reinforcing the value of networking and shared learning.

“We’ve been growing from a supportive function to a reliable partner, and now we’re moving towards being that strategic partner”
– Maaïke Addicks

Maaïke outlined the five key pillars of Medical Affairs: KOL engagement and planning, gathering insights, data dissemination, data generation and medical projects, and business acumen. She stressed that patient-centricity should infuse all activities. Attendees were encouraged to assess where their teams are on the journey to becoming fully strategic partners and to reflect on the impact they create, both internally and externally. A key message was the importance of being visible and valued: Medical Affairs teams often contribute significantly behind the scenes, yet their long-term impact on healthcare, real-world evidence, and corporate credibility is substantial. Maaïke urged attendees to communicate their value confidently, bridging the gap between perceived and actual impact.

“Brilliance in Medical Affairs is about being the strategic partner for both internal and external stakeholders. It means we need to be more visible, we need to feel valued, and we need to be happy in our jobs — because this is our life.” – Maaïke Addicks

The plenary also highlighted the significance of happiness and motivation in the role, encouraging attendees to be architects of their own careers by seeking opportunities for development, cross-functional collaboration, and leadership. Maaïke concluded with a call to action: the seat at the table is ready—Medical Affairs professionals must step up and embrace their strategic influence.

The summit closed with thanks to over 300 attendees, faculty, partners, and speakers, acknowledging the energy, engagement, and knowledge sharing that made the event a success.



The MAPA-MAPS Summit Planning Committee 2025



Some of our workshop presenters



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