Quick fire Q&A with Leading Author, Dr. Prabhavathi Fernandes, Founder, President and CEO of Cempra Pharmaceuticals

The industry established event **"Superbugs & Superdrugs"** returns to London for its 18th annual show and is proud to have Dr. Prabhavathi Fernandes as one of the keynote speakers for 2016.

Author of numerous publications, Dr. Fernandes is Founder, President and CEO at Cempra Inc, a clinical-stage pharmaceutical company focused on developing antibacterials.

Previous experience includes senior positions in areas such as drug discovery and microbiology at Bristol-Myers Squibb and Abbott Laboratories. During these years she was directly involved in the development of numerous antibiotics, four of which have been approved by the FDA and one achieving sales over a billion dollars.

She has served on the product development working group for Biodefense for the National Institute of Allergy and Infectious Diseases; U.S. Congressional Panel for Assessment of Impact of Antibiotic Resistant Bacteria; and the American Society for Microbiology Advisory Panel for Antibiotic Resistance.

Strengthen your antibiotic pipeline and hear more from Dr Prabhavathi Fernandes in her keynote address that will as discuss international collaboration for successful worldwide commercialisation, as well as provide case study insights onto developing an antibiotic with the potential use in multiple therapeutic indications.

Q. About you – what is your role and what perspective do you bring to the conference?

President, CEO and Founder of Cempra, founded in 2006 and a public company (NASDAQ) since 2012.At Cempra we have taken a macrolide antibiotic from lead selection to the NDA.

I have had worked at Squibb, Abbott and Bristol Myers Squibb. While at Squibb I did the in vivo work on the first monobactam antibiotic, aztreonam. At Abbott I was key leader for clarithromycin, a macrolide antibiotic. At Abbott I also worked on fidaxomicin which was later developed by Optimer. At Abbott I also worked on fluroquinolones. Tosufloxacin is marketed broadly in Japan today. My experience as a clinical microbiologist and in antibiotic development for more than 40 years has been very useful taking solithromycin from the bench to the NDA and MAA submissions.

Q. What will attendees take away from your talk?

A macrolide antibiotic with oral and intravenous potential can be developed with new regulatory guidance's and these antibiotics have blockbuster potential. One does not have to limit development intravenous products for the hospital. It is important to develop new antibiotics for outpatient use as well as for hospital use. Hospitalization is expensive fr th society and for the patient and must be avoided.

Q: Are there any sessions you are particularly looking forward to and why?

New classes of antibiotics and early stage programs. These could be in-licensing opportunities for Cempra. New classes of antibiotics are badly needed.

Q: To what extent is antimicrobial resistance a serious global threat?

The majority of infections can be addressed with existing antibiotics. However, these numbers will grow. Importantly the fluoroquinolones that have potent activity are now recognized to be unsafe and new antibiotics are needed to replace their use in the community and the hospital. Those infections in the community and hospital that cannot be treated are now serious and can result in death.

Q: Industry Incentives – how important are they and what has worked in the past?

The GAIN Act has been helpful in incentivizing with priority review. However much more needs to be done to decrease development costs. Some new laws, such as the PATH and LPAD acts could be helpful. Pricing of new antibiotics is also an important aspect.

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www.superbugssuperdrugs.com