

Are You a Medical Device or Medtech Entrepreneur? If so, Stop Being a Problem Solver! Interview with Dr. Arlen Meyers

In this interview, we learn more about this unique organization and its mission to accelerate physician-originated innovation within the biomedical and medical device arenas. This is what we are going to learn in this interview with Dr. Myers:

- What is SoPE otherwise known as the Society of Physician Entrepreneurs and how did it come to be?
- The three reasons why SoPE has experienced tremendous growth. Note: You could apply these principals to any entrepreneurial endeavor.
- How SoPE hopes to bridge the education gap that currently exists between business and the life sciences.
- What value does SoPE bring to its members?
- Why you should think about joining the SoPE community?

Scott Nelson: Hello, everyone. It's Scott Nelson, and welcome to Medsider, home of the free medical device MBA, and for those of you who are first listening to this program, this is a show where I bring on interesting and dynamic experienced medical device mentors, people that serve in some sort of medical capacity so we can all learn a few things, learn about their backgrounds, hopefully, be entertained along the way. On today's call, we've got Dr. Arlen Myers, who is a teaching professor at the University of Colorado School of Medicine, and he is also the president and CEO of The Society of Physician Entrepreneurs, which we'll refer to as SoPE probably throughout the rest of this program. So, without further ado, welcome to the call, Dr. Myers.

Arlen Myers: Thanks, Scott. It's a pleasure to be here. Thanks for inviting me.

Scott Nelson: Alright, so let's start with what you're currently doing in your role right now as a teaching professor and as the President and CEO of SoPE.

Arlen Myers: Well, I've been a professor at the University of Colorado. I'm an otolaryngologist. My interest is in head and neck surgery and facial plastic surgery. So, I'm an active professor at a major medical school research center, and I'm involved in teaching research, patient care administration, usual things that academics do. In addition, we've created The Society of Physician Entrepreneurs and I'm the CEO and President of the organization.

Scott Nelson: Okay. Let's dig right into The Society of Physician Entrepreneurs. I'd like to definitely spend a decent amount of time on SoPE, but let's start with a basic overview.

Arlen Myers: Sure. The Society of Physician Entrepreneurs was started, the idea was started, in 2008, so we've been around for about four years. We just incorporated as a 501 (c) (6), (c) (3), that is, a not-for-profit organization in Washington, DC. SoPE is a global physician-led biomedical innovation network that includes service providers, investors, industry representatives, and bio-entrepreneurs. By bio-entrepreneur I mean anyone who has an idea with a patient at the end of

the innovation funnel. So, we don't really care what the initials are after your name, what your background is, where you came from. What we're interested in is, and the mission of SoPE is, to accelerate global biomedical and healthcare innovation.

We do that by engaging the four sectors, and so essentially we're a collaborative online innovation network or a virtual cluster with chapters around the world. We presently have about 15 to 16 chapters around the world. Interestingly, the most recent chapter that was created was in Baghdad in Iraq, and I see that as a tremendous opportunity for healthcare and biomedical development, and we can talk about that later in the interview, but basically, our mission is to accelerate global biomedical innovation.

Scott Nelson: Okay. If I'm listening to you give a brief of SoPE and I'm in the audience, I mean thinking is this just for entrepreneurs? You just referenced that it's not, but can you explain that in a little bit more detail?

Arlen Myers: Sure. I mean, again, the idea is for people to work together to collaborate and move an idea forward to the market or the bedside. So as anyone in medical device development knows, this is a team sport, it's a relay race, you have to be able to hand the baton off to someone who can move the project to the next level whether it be a strategy, marketing, sales, investment, technical development, new product development, etc. So, this takes a lot of people in skill positions on the team to move the idea to market, and the idea for SoPE is to get those folks together in the same sandbox and hope they all play nice together and come out with something that makes sense.

Scott Nelson: Okay. You started SoPE, let's go back into SoPE's history, and then we'll move forward into maybe some example stories of projects that have sort of been fostered out from the SoPE environment and the SoPE community, but let's go back into the history. You started this four years ago. Can you give us an idea of where the idea came from and how you kind of put this group together?

Arlen Myers: Sure. As I said, I'm an ear, nose, and throat surgeon, so my professional affiliation is with the American Academy of Otolaryngology, Head and Neck Surgery. That's about 10,000 to 15,000 ear, nose, and throat doctors from around the world in a professional society. I had an idea and a fellow named Jim Blakely, who is now the Executive Vice-President of SoPE based in Washington, DC, got together and Jim at the time was running the for-profit arm of the academy and I had been writing some stuff about bio-innovation and entrepreneurship, and we had some conversations, and I said, how about if we just get a few folks together or send something around and see whether anybody has any interest in this?

To make a very long story short, we attended one of our national meetings in Chicago four years ago, and on a shoestring and in 24 hours we were able to recruit about 50 people into a room at 5:30 in the morning, and that was the seed of the beginning of the society. Since that time, we spun out of the American Academy of Otolaryngology and created an independent not-for-profit as I indicated in 2011, and we now have 1800 global members on a LinkedIn site. We're over 500

members joining our website. We have various service affinity partners. We have 60 chapters around the world and we're growing 37% month to month.

Scott Nelson: Wow, okay and you said 18,000 members on your LinkedIn?

Arlen Myers: 1800.

Scott Nelson: 1800. Okay, 1800 members and growing at a 37% clip month to month.

Arlen Myers: Right. Right.

Scott Nelson: Okay, so those are some impressive numbers. My first question is, why? Why has this taken off so relatively quickly, and I guess I should say that you may think differently with the amount of work that you probably put into it. It seems like it's taken off really quickly. You're experiencing a lot of growth in your membership. Why?

Arlen Myers: Well, I think like, I mean, I look at this as a startup. So, I mean, just think of a medical device, and I think there are three elements to a successful business particularly to a startup and I think it applies to SoPE. One is it met an unmet need. There's an unmet need for primarily community-based physicians to have an ecosystem or an avenue to get their idea to market.

I'm an academic. I represent up to 900,000 doctors practicing in the United States. I represent probably 4 to 5% of them, that is, working in an academic research environment. All the hype, all the attention, all the spotlight goes to inventions that are coming out of tech transfer out of the universities, but it ignores the 96% of what I think most of the innovation happens, and that is with the grunts in the trenches. There is no place for the doctor who works for a community-based hospital with an idea to go to without talking across the fence to their neighbor who happens to be a business person or a lawyer.

So, the first reason I think it's getting traction is we're addressing an unmet need. The second is you have to create a value proposition that people love and are willing to pay for. So, I think that what we have created, that is, a virtual innovation network where people can in a nonthreatening environment work with each other, collaborate, and we fundamentally provide free services, education, networks, and services. So, if you're a doctor in the trenches with limited time, you have an idea, you've been fooling around with it for six or eight months, you don't know what to do with it, we offer a solution.

The third element is the business model. SoPE for all intents and purposes is a freemium business model. We don't charge people. It's free to join SoPE. It's like LinkedIn. You can go to LinkedIn; it doesn't cost anything. You can connect to as many people as you want to connect to but if you want to buy value-added services or products, we charge you to do that, and there are various ways that SoPE raises money in the business model. So, to answer your question, largely unmet need, a solution with a compelling value proposition, a business model that makes sense.

Scott Nelson: Okay. Can you dig into the business model aspect a little bit more? How does SoPE function from a financing standpoint?

Arlen Myers: Well, as I said, SoPE at this point is a C6 member association, not-for-profit, with a C3 foundation, and that foundation raises money to support the activities of the C6.

Scott Nelson: Okay.

Arlen Myers: We're having conversations about creating an LLC to do more for-profit ideas like creating SoPE capital management, which would provide early-stage seed funding to early startup investors particularly in the device industry or doctors who are interested in creating devices.

So, we generate revenue in three basic ways. One is we collaborate with industry partners and with foundations, and I can give you some examples of how we do that. We sell products and services through affinity partners on our website in various distribution mechanisms and we accept donations to the 501(c) (3) foundation, and just recently we're having a Christmas gift to a foundation kind of thing. We've been pleasantly surprised that we're raising money and people are getting behind this idea and giving us support to move innovation forward.

Scott Nelson: Okay. Alright. These services, you mentioned the three services that SoPE offers its members.

Arlen Myers: Right.

Scott Nelson: Let's dig into those. You mentioned education, network, and what was the third?

Arlen Myers: Products and services.

Scott Nelson: Products and services. I guess the three bullet points of your basic value proposition to your members, let's dig into those.

Arlen Myers: Sure. So, in terms of education, we provide and plan to provide something called SoPE U. SoPE U will be an online learning management system, and that will provide education to our members that are both externally generated and internally generated. So, as an example, an externally generated educational content partner is the World Medical Device Organization. If you go to our website now, you'll see a link to the WMDO, and they as you probably know provide something like 170 modules, webinars, podcasts, etc. on how to get a device to market.

We have similar partners in various universities, MBA programs that provide entrepreneurship education either at a generic level or at a more specialized bio-entrepreneurship level. So, those are externally generated content partners. The internally generated content will be generated by SoPE, and we will provide essentially a mini-MBA, to steal a phrase, a mini-MBA in medical device or IT.

Let me just say that while the focus of this conversation is on medical devices, SoPE is interested in helping people who are developing drugs, devices, diagnostics, health IT products, innovative business models, service delivery platforms, and processes of care that are innovative. So, we

kind of run the gamut. Any idea that has a patient at the end of the funnel is something that we're interested in helping to support.

Scott Nelson: Okay.

Arlen Myers: So, the education platform, as I said, will be internal, and then we have external. As far as services and products, we have affinity partners. For example, going to meetings, subscribing to journals, getting CDs, ordering books, having access to service provider services, initial intellectual property consultation with the intellectual property attorney, web development, sales, and marketing. All the things that go into supporting early-stage product and company development we offer to our members in an affinity arrangement with our partners.

Scott Nelson: Okay.

Arlen Myers: And the third part has to do with networks, and as I indicated, whether it's through the LinkedIn network—and we have various communication channels. We have a newsletter. We're developing an ezine. A SoPE magazine should be coming out in the spring that will probably go out to 15,000 or 20,000 doctors who are interested in physician entrepreneurship. So, there are lots of ways that we provide communication mechanisms and services to our members to help them get their idea to market.

Scott Nelson: Okay. Before we recap on those three sorts of bullet point value propositions, you mentioned the funding arm. Has that already been developed or is that in the process?

Arlen Myers: No, it's already been developed.

Scott Nelson: Okay.

Arlen Myers: We have an existing 501 (c)(3).

Scott Nelson: Okay. I'm sorry, I should clarify. Like an angel arm to SoPE that helps with early-stage capital, that's what I was referring to.

Arlen Myers: No, the LLC SoPE Capital Management has not been formed yet.

Scott Nelson: Okay.

Arlen Myers: We're in the process of discussing this with professional money managers, with fairly high-level angel network people as to how to conceptualize this and how to make it work for us. Primarily we're interested in, as you're aware, probably because our biggest problem with medical device development for an early-stage entrepreneur is valley-of-death money. We need to be able to provide that to our members, so we're having a conversation with people as to how to best structure that so that it's done professionally so that the investors recognize a big enough return on their investment so that there is sufficient deal flow that is real and not garbage is thrown over the transom. So, we have to structure this, and we envision this is a fund that will be funded by doctors for doctors.

Scott Nelson: Okay.

Arlen Myers: So, we look at physicians in our membership not just as entrepreneurs but as investors, and accredited investors. So, we certainly wouldn't limit the fund to physicians interested in subscribing to the fund but that's the basic intent, the idea being no one knows the market better than the doctors. If you're interested in investing in an idea that addresses a problem in healthcare, we're interested in talking to you.

Scott Nelson: Okay. Okay. No, that makes a lot of sense. So, just to recap the three bullet points, so if I'm in the audience and I'm hearing you speak about SoPE, The Society of Physician Entrepreneurs, it sounds interesting. This is what I get if I become a member and join the freemium model as you put it earlier. The education aspect, which I want to ask you a few more questions about; the services and products and affiliate partners that you work with. So, not only I can learn a lot about getting a product to market, about business functions within the medical device space or health IT space, getting a product to market, etc., entrepreneurship in general, I can work with your affinity partners from a service and product standpoint if I want to get more detail and if I want more one-on-one help, I guess to put it in simple terms and then, the network, the big network that SoPE has to offer with its affiliates across the globe.

Arlen Myers: Right.

Scott Nelson: Okay.

Arlen Myers: Right.

Scott Nelson: In terms of education, you mentioned SoPE U, and I know in doing a little bit of research you've also established at the University of Colorado a certificate program in bio-entrepreneurship, or I think that's the title, I should say. It's a certificate program.

Arlen Myers: Right.

Scott Nelson: You've got the BioEntrepreneurship Summit I think Baltimore maybe in 2012, I think if I remember correctly. Is that all part of the SoPE U education arm or...?

Arlen Myers: In fact, no. It's part of what I conceptualize as a global bio-entrepreneurship and innovation education network.

Scott Nelson: Okay.

Arlen Myers: So what's going on is that as bio-clusters are growing around the world, as every state in the United States is trying to grow their ecozone, everyone is trying to get out the front of building their bio-cluster, whether it's in Stockholm, whether it's in Germany, every state in the United States, etc. But what that has created is a demand for talent. When I say talent, I mean not science-based. I mean science-based talent but a science-based talent that has an understanding of commercialization and entrepreneurship and innovation.

At this stage of the game, I think it's fair to say that most graduate science and engineering programs in the United States with a few notable exceptions are not filling that need. They're not teaching their students how to get research to the bedside. They're focusing on research. They may be dipping a toe in development but they're certainly not addressing commercialization.

So, what we have proposed is, again, a solution to that unmet need, and we have created at the University of Colorado, for example, a certificate program in bio-innovation and entrepreneurship that is meant for graduate students, engineers, MBAs, health science professionals, again, who are interested in learning how to get their idea to market. It's a collaborative program between the University of Colorado Graduate School at the Anschutz Medical Center and the University of Colorado Business School located in Denver. I teach a full-semester course in life science technology commercialization. They take my course, they take two courses in the Entrepreneurship Center and they get a certificate, which appears on their diploma.

So, that's an example of one program. There are several programs like this emerging around the world, everything from a single course to a certificate to a master's in bio-entrepreneurship, for example, that's offered at the Karolinska in Stockholm. So, what we've done is we've connected the dots. Again, we've identified the key opinion leaders and the people who are creating these programs around the world and we're convening the first international bio-entrepreneurship education summit in collaboration, that is, the University of Colorado with Johns Hopkins at their facility in Rockville. It's about 30 miles outside of DC or north of Baltimore.

That will be the first time where educators, administrators, people who are interested in creating these educational programs, will get together and create an action agenda for the future. My goal in doing this is to legitimize bio-entrepreneurship education as an academic domain, which it is not now, and there's so much activity going on around the world that we need to formalize how we teach this, what we teach, care resources, best practices, the whole drill. So, that's one step in the process.

The other step is that I'm the associate editor for the Journal of Commercial Biotechnology, and we've created a section in the journal called "From the Classroom." That's an opportunity for educators and researchers in bio-entrepreneurship to publish their findings in a peer-review journal. There is no place to do that right now with the exception, I think, of where we're doing it. So, all of these steps are designed to put another piece in the puzzle of building a global bio-entrepreneurship ecosystem. So, SoPE, since our target market is doctors, fits into that. The bio-entrepreneurship education programs are primarily for graduate students in life science engineering and health professions.

Scott Nelson: Okay. Okay. And That's interesting that you bring up the problem that exists right now with the lack of solid, to use your terminology, bio-entrepreneurship business focus strictly on the life sciences, etc. There's a huge gap right now, and that's interesting that you mention that because if anyone wants to Google that, medical device graduate programs, I've done it myself.

Arlen Myers: Yeah.

Scott Nelson: Not just a medical device, but there isn't a lot. There isn't a lot to choose from.

Arlen Myers: Right.

Scott Nelson: So, do you see in the future, looking out five, 10 years, do you see that actually becoming a more formalized specialization with an MBA for example?

Arlen Myers: Yes. Yes, and if I were a medical device company, I would get behind because part of the value proposition of SoPE, for example, or for these bio-entrepreneurship education programs, is basically we're training their farm team.

Arlen Myers: As you know, most device companies, most bio-pharma companies are running away from R&D. Now, again, with some notable exceptions, they're outsourcing it downstream to low-risk situations. They're partnering with universities. They're working with bio-engineering departments. So, they want to see something that's valid before they are going to move it forward and invest in it. Well, we are training people to do that. So it would seem to me that it would be a mirror interest to support organizations like ours to help them train a sales force that can hit the ground running with both feet by the time they're done and they don't have to waste a whole lot of time until they add value to the organization.

Scott Nelson: Right. No, that makes a lot of sense, and I would think that if I'm a decision-maker in a large medical device company, and not necessarily even a large medical device company, I'm understanding that point. I mean the talent that already exists within that sort of community is already there, and so the ability to track that talent and keep them in-house I think would be a huge benefit.

Arlen Myers: Right.

Scott Nelson: So, very cool. In SoPE, I mean we kind of got off the subject a little bit with SoPE U, but filling that education gap, that business life science education gap, that's part of the SoPE U kind of bullet point value prop?

Arlen Myers: Let me give you another example. So, if I'm a doctor and I have an idea, I mean, I am a doctor and I've had lots of ideas, so I can give you an example. So, my interest is, as I said, in this head and neck cancer, so I developed, and we created a spinout company from the University of Colorado that was attempting or is attempting to commercialize a device to optically detect cancer of the upper-area digestive system. You shine a light on the surface of your mouth. If it lights up, it's cancer. You don't have to biopsy it. It's an obvious value proposition.

So, we went through the usual drill, tech transfer, patenting, blah, blah, blah, tried to identify a licensing partner or a strategic partner to work with. Well, when I get involved with medical device companies, and I have, with various ideas, I run into, "We're not going to sign a bilateral CDA. We're not going to sign any nondisclosure agreement. We want you to file a provisional patent because we don't want to contaminate our patent portfolio," and you run into all of these

issues that just basically create a lot of brain damage. That's coming from someone who has some experience in dealing with this.

Now, if you're dealing with a doctor, the average doctor who is trying to worry about making a living in practice but comes up with an idea, who has little or no knowledge about intellectual property and how to deal with a device company, there's a problem. So, SoPE U, for example, could provide a platform for providing intellectual property basic education to a doctor before they get engaged with a company. So, let's just pick a company. Let's just pick Stryker, and I'm not picking on Stryker, let's just pick it as an example.

So, Stryker decides, "You know what, we're tired of fooling around with doctors who really don't understand how commercialization happens. We run into all these patent issues. Bad feelings happen. Worst-case lawsuits happen. How about if we require doctors who want to interface with us to demonstrate that they've taken a module in intellectual property? Basic background information about what is intellectual property, how do you deal with it, how do you protect it, etc., etc."

Secondarily, there will be a Stryker intellectual property, an internally developed curriculum for, "Here's what our development partners need to know about Stryker before we have a conversation with them developing an orthopedic screw." Once they demonstrate that they've taken those two courses, then at least there's some knowledge, some understanding, that these folks have at least taken the course, you know, have done the boot camp before they go into the trenches.

Scott Nelson: Yup.

Arlen Myers: And that's an example of how we can work with industry partners to provide education to our members to help them, help them.

Scott Nelson: Sure. Yup. Okay. That makes a lot of sense. So, you've got two sides of the equation there. You've got the physician that has the idea, and maybe it's a good idea that is trying to move forward, take the next steps with a certain company, but yet, they're experiencing bureaucracy, red tape, etc., etc. You called it brain damage. I like that verbiage.

Arlen Myers: Yeah.

Scott Nelson: But then you've also got the device company that's like, "You know, we're sick and tired of dealing with physicians that, maybe their ideas are legit, maybe they're not, but they just have no idea what we're dealing with and what it takes to [30:15 inaudible]."

Arlen Myers: There's a communication gap. It's like being married.

Scott Nelson: Yeah. Yeah, there you go.

Arlen Myers: I mean, we're just not talking in each other's language, and if you want to live together, certainly if you want to stay married and you want things to live happily ever after, you

have to be able to communicate. My view is communication between physician inventors, particularly those who are in community practice, and the medical device industry is an opportunity for improvement.

Scott Nelson: Sure. Yeah, absolutely. Okay, and so SoPE U helps to fulfill that need to a certain capacity.

Arlen Myers: Exactly.

Scott Nelson: Okay. Very good. I know we're running short on time, but I want to get into some of the things that you've learned in your career, not only as a physician but more in particular kind of within the entrepreneurial space as a physician. Is there anything more that you want to cover about SoPE right now?

Arlen Myers: No, I think that pretty much covers the landscape. Certainly, if anyone is interested and they want to learn more about it, I can obviously talk about this a lot and give them a lot of information so they can get... On the SoPE website, there's a contact for the CEO, which is me, where you can just contact me directly, arlen.myers@ucdenver.edu, or there are a number of ways to get in touch with me. I'll be happy to communicate.

Scott Nelson: Okay. When this interview's posted I'll definitely link to that, but so just for the audience that's listening right now, it's sopenet.org. That's S-O-P-E-N-E-T.org

Arlen Myers: Right, right.

Scott Nelson: On that main website, you have links to your LinkedIn group that we mentioned before. I believe you're on Twitter, all the main social media outlets.

Arlen Myers: Yes. Right. The Society of Physician Entrepreneurs LinkedIn group, and then as I said, every chapter has its own LinkedIn group, and I'd be happy, you know, if you send me an email I'll tell you where the chapter is. If you live in a particular area, I'd encourage you to join the local chapter. We can steer you in the right direction.

Scott Nelson: Okay. Alright. Very good. I presume on the main website, your email's listed there as well, I believe, a way to contact you.

Arlen Myers: Correct.

Scott Nelson: Okay, very good. So, let's move on real quick. Your vast career, we could spend a whole other interview digging into your career as a physician, as an entrepreneur, etc. There are a gazillion things that you've probably learned along the way, but can you pinpoint, and I know in kind of our conversation leading up to this interview, you mentioned a recent article that you read or a book I should say, discussing the five skills of successful entrepreneurs. Maybe we can talk about that and maybe dig in to like the two or three things that really stand out to you that you would hope that if you had to do it over again maybe, these are the things that I would really

hone in on first if I wanted to get more involved in the business entrepreneurial world as a physician.

Arlen Myers: Yeah, well, we could take a couple of topics. First of all, from the perspective of what skill sets do I think are important, and you alluded to the article and we can post that or you can post that as part of this interview, but I think probably one of the most important things that I see is that people, particularly doctors, engineers, what I call technopreneurs, people who have a technology or scientific basis, they invent or discover something, and then they run around looking for somebody to buy it. It's a solution looking for a problem.

So, my advice, and probably the single biggest piece of advice I give to people, is to be a problem-seeker, not a problem-solver. It starts with the opportunity. It starts with market potential. It starts with the unmet need. People who are in basic science and people who are in basic research have a hard time getting their arms around that because that's not their culture.

Scott Nelson: Okay.

Arlen Myers: Their culture is science for science's sake. Now, I'm not saying it's a bad idea to do science projects. What I am saying is that the United States is threatened with losing its number one global competitive position.

Unless we do something about improving ideas that are meaningful, that happens out of the bottom of the funnel, we're in trouble. So, I'm not saying get rid of basic science research. What I'm saying is we need to do things like SoPE, like bio-entrepreneurship education, like research and development as the mission of universities to grease the skids of innovation so more meaningful ideas get out the bottom.

Scott Nelson: Very good. Okay.

Arlen Myers: As far as what I have done differently, I don't really think I would have. I mean, you know, most people, your previous job, your previous experience prepares you for the next one.

Scott Nelson: Absolutely.

Arlen Myers: So, I just don't think you can predict what's going to happen. So, you just follow your instincts, you follow your heart, you go where it takes you, and then you kind of build that experience base, identify an opportunity, and apply it. The conversation often comes up, you know, what's the value of an MBA to a doctor, for example? Should doctors get MBAs? Should they get advanced training if they're interested in business?

My view on that is people take in, and I developed the MD/MBA program at the University of Colorado, again, to address an unmet need. I didn't think it was right that doctors should go through their full medical training and then have to spend a lot of money and two years to get an MBA, which incidentally had nothing to do with medicine. I thought that there needed to be a better way.

So, we created a five-year dual-degree program that partially addressed the issue, and my view on this is that doctors who take MBAs basically do it for three reasons and I call them the three C's: They want content, they want credibility, they want connections. Now, whether those three things actually add value to the healthcare system or contribute to biomedical innovation is a question. I mean, the answer is unknown. We don't know because the MD/MBA establishment hasn't bothered to measure it, which is another pet peeve. But that's basically what needs to happen.

This whole MD/MBA industry I think needs to come under some scrutiny because right now more than half the medical schools in the United States provide MD/MBA programs. I question whether they add value. As a person who has developed them and as a person who has gone through them, I question their value, and I'm still waiting for someone to demonstrate to me that the time, effort, and money is worth it.

Scott Nelson: And so, with that said, have there been specific trends that you've seen that cause you to question the value of an MD/MBA program?

Arlen Myers: Yes, the trends are \$60,000 for a two-year program. I question the value of that for a doctor. Most physicians who go to MD/MBA programs do it with three career goals in mind. One is they want to be a leader in a health service organization, Chief Medical Officer, Chief Innovation Officer, VP for Medical Affairs, CEO of a hospital or they want to have something to do with health policy. They want to run a Medicaid office; they want to do research that kind of thing or they want to start their own company.

My argument would be possibly MD/MBAs add value to hospitals, and it has been demonstrated in the past that hospitals that are led by doctors have more profitability in return on equity. Those people who are interested in policy in my view probably should take a master's in public health or a master's in public administration, and if you're interested in starting a company, I think you should just go out and do it.

Scott Nelson: Yeah. Yeah.

Arlen Myers: So, I really wonder. Again, I mean, I'm the fortunate product of a lot of education and I thank my parents and the US of A for allowing me to do it, but I'm just wondering, where's the value?

Scott Nelson: Yeah. Yeah. I think that's the question. The reason I mention that, and this is another topic that I would love to dig into this further, this whole idea of almost education 2.0, what's going to happen to the future of college education because I'd certainly like to know too. ...

Arlen Myers: Right. Well, yeah, in my view, higher-ed is the next bubble.

Scott Nelson: Yeah. Yeah, without a doubt. Without a doubt. With that said, not just a bubble. So, we've got, and this is getting off-tangent but I'm so passionate about this subject. This is

outside of the medical device arena but you have so many kids graduating college these days with an inordinate amount of debt, and you're creating them to work in a cube job for the next 30 to 40 years and really accomplish, well, I shouldn't say nothing of value, but they're going to collect the paycheck and they're never really going to get out of this inordinate amount of debt. So, you think, what was the value of the four-year education? So, anyway, I'm passionate about the subject.

Arlen Myers: Just as an aside, we haven't touched on this. This is a global phenomenon.

Scott Nelson: Yeah.

Arlen Myers: SoPE is a global organization. I had the good fortune to spend a Fulbright in King's College, London, and Kings Business is their tech commercialization office, one of the premier universities in Europe. During that time, you'll recall last year when the British government was wrestling with budget deficits, with too many employees, with social welfare programs, with what they call the impact of investment in R&D. They were really struggling with what to do with their budget, and now you're seeing a year later the results of that analysis.

That's going on around the world. The United States is facing it, every major economic, in the EU, it's happening all over the world. So, this conversation is an international, global competitiveness conversation. It goes way beyond bioscience innovation.

This is just the tip of the iceberg.

Scott Nelson: Yeah. If one of your students was currently in maybe their second or third year of the MD program at the University of Colorado and they said, "Dr. Myers, I've got this interest in the business. I just do. I love medicine, I love science, but I've got this interest." Would you direct them to an MBA program where you'd say, "Hey, join an organization like SoPE, get immersed in it, network like crazy? You're going to learn far more than a formal two year MBA program?"

Arlen Myers: You bet. You bet, and that's what people come to me for.

Scott Nelson: Yeah.

Arlen Myers: Because they know that I do this. The other piece of advice I would give to college students who are applying to medicine is when the admission officer is interviewing you, don't tell them you want to start a business, because medical education hasn't gotten it. Their interest is training doctors, particularly primary care doctors to meet a manpower shortage. The last thing they want to hear in my opinion is, "I only want to get an MD to get my [41:50 inaudible] punched and, guess what? I'm going to start a company the day after I graduate. Oh, by the way, I started three companies before I got to your medical school."

Scott Nelson: So, medical schools have a problem with that sort of..?

Arlen Myers: A whole other conversation. In my view, this is the hundredth anniversary of the Flexner Report that revised medical education in 1911. The Carnegie Institute paid for and they

funded an analysis of medical education in the United States. The result was the Flexner Report, which revamped medical education in terms of standards, curriculum, outcomes, that kind of stuff. In my view, the world has changed so much we need a second Flexner Report.

Scott Nelson: Yeah. We'll leave that with a Dr. Arlen Myers call to action. I'm someone unfamiliar with the Flexner Report, so I'm actually going to have to do a little bit of research on that because that's interesting to me.

Arlen Myers: Okay.

Scott Nelson: This has been a fascinating conversation. I'd love to do a whole other interview on the future of—maybe we could structure it specific to the biosciences, but just education in general, especially coming from your standpoint with so many acronyms and education degrees beyond your name.

Arlen Myers: Right. Right. Well, I like to tell people that I work in healthcare, government, and higher-ed, and that's a very interesting crosshair.

Scott Nelson: Yeah, no doubt. No doubt.

Arlen Myers: Yeah.

Scott Nelson: That definitely sparks a lot of conversations. I know we're running way short on time, but I can't thank you enough for coming on. For those listening, sopenet.org, that's S-O-P-E-N-E-T dot org, that's the organization The Society of Physician Entrepreneurs that we spent a decent amount of time on in this conversation speaking about. That's an organization that Dr. Myers is currently the President and CEO of. Thank you. Thank you, Dr. Myers, for coming on. It's been a very fascinating conversation.

Arlen Myers: My pleasure. Look forward to talking to you again.

Scott Nelson: I'll have you hold online real quick, but you know that's it for now folks. Thanks so much for listening. Again, if you're listening to this interview on the web or have downloaded it, it's on iTunes where the Medsider interviews are, on iTunes. You can subscribe to the podcast or if you happen to be in a situation where you have some free ears and you want to just listen to the latest Medsider interview, download, or subscribe to the podcast on Freeview or iTunes, so that's an option. So, I wanted to make sure I mentioned that. But anyway, thanks for listening. Until the next episode of Medsider take care.