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â??Growth of personalised therapies across Asia-Pacific is creating both opportunity and pressure for emerging biotechsâ?•

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With the rapid rise of cell and gene therapies (CGTs) and precision medicine transforming healthcare, logistics is no longer simply a transportation function, it has become a critical determinant of clinical success. Addressing this requirement, Cencora has built one of the most comprehensive support networks for advanced therapies globally, by supporting hundreds of cell and gene therapy developers. A key differentiator in Cencora's market position is its ownership of World Courier, one of the most recognised names in specialty pharmaceutical logistics. Cencora's continued investments in cryogenic capabilities, specialty logistics networks, and integrated commercialisation services position the company to play a central role in this evolution. Mervin Sulistyo, Head of Personalised Supply Chain, APAC, World Courier, a Cencora company, shares more details in an exclusive chat.

Before we discuss the market, can you tell us about your role and what drew you to this area of healthcare logistics?

I lead personalised supply chain services for World Courier across Asia-Pacific (APAC), based in Singapore. My team supports therapies that are highly specific to an individual patient, including advanced therapies, radiopharmaceuticals and direct-to- or direct-from-patient logistics. In these areas, the supply chain is not just about moving a product from point A to point B; it is part of a patient’s treatment journey.

I have been with World Courier for more than 12 years, starting in Australia and fresh out of university, and what has kept me here is that sense of accomplishment. We are much more than a specialty pharmaceutical logistics provider. We are also part

of a healthcare ecosystem through Cencora, and the patient is central to how we design services, build solutions and make decisions. In personalized therapies, that means applying a white-glove approach to every movement, where operational precision, judgement and care can directly affect whether a patient receives lifesaving treatment safely and on time. I came from a scientific background, so working in an area where those details can make such a tangible difference is something I never take lightly.

How is the rise of personalised therapies reshaping the biopharma landscape across Asia-Pacific?

Asia-Pacific is becoming a major growth engine for cell and gene therapies. According to research, the region has overtaken North America in active CGT clinical trials for the first time, with 982 active trials, and is now home to 738 CGT developers. That shows how quickly personalised therapies are moving from scientific promise to clinical and commercial reality.

For biopharma companies, that shift is changing the model of medicine. Personalized therapies move healthcare away from a one-size-fits-all approach and toward treatments designed around an individual patient's biology and clinical need. In cell and gene therapy, radiopharmaceuticals and other advanced modalities, the product may travel through the supply chain as a single dose, for one patient, for a specific treatment window.

That means supply chain planning must begin much earlier and be a lot more rigorous. Scientific innovation and operational readiness are intertwined as the treatment may be highly targeted, but it still has to reach the right patient, in the right condition, at the right time.

What makes APAC a uniquely complex region for the development and delivery of personalised therapies?

Asia-Pacific is not one uniform market. It is one of the world's most diverse healthcare regions, with different regulatory pathways, customs expectations, infrastructure, healthcare systems and market access considerations. For patients and families, those differences can influence how quickly a therapy moves from approval to treatment. Infrastructure is another factor. Some parts of Southeast Asia are consistently warm, and airport or GDP infrastructure may not yet be as advanced as in the US or Europe. Therapies can still move safely, but routes need to be designed with resilience, stronger contingency planning and local knowledge. Those are not just technical choices. They are safeguards for the patient waiting at the end of the chain.

How do the logistics requirements for personalised therapies differ from traditional pharmaceutical products?

Traditional pharmaceutical products are manufactured in batches, moved into market and held close to patients. Personalised therapies are demand-led. A shipment may represent a single patient dose, moving from Singapore to a manufacturing site in the US or Europe and then back to the treatment center. In that context, the shipment is connected to one person's treatment plan.

In autologous cell therapy, the starting material can come from the patient themselves, so every handoff, temperature decision and document check has to be managed around the patient timeline. Manufacturing lead times, quality release, import and export requirements, customs clearance, route selection and contingency planning all become part of the patient pathway.

The stakes are personal. In traditional logistics, a delay may mean stock arrives late. In personalised therapy logistics, a delay may affect a patient's treatment window. That is why each movement requires technical discipline, urgency, care and a partner who has end-to-end visibility and scale to mitigate risk effectively.

As emerging biotech companies advance personalised therapies toward commercialisation, what should they look for in a specialist logistics partner?

The growth of personalised therapies across Asia-Pacific is creating both opportunity and pressure for emerging biotechs. Many have strong scientific expertise, but fewer have established regulatory knowledge, commercial infrastructure or operational partners in every market they hope to reach. As they approach commercialisation, the question becomes practical. How do you make sure the therapy can reach patients consistently, safely and responsibly?

Regional experience matters. Rather than building a fragmented network of local vendors, companies should look for a partner with presence across target markets and a single point of contact that connects logistics planning with local insight. Within the Cencora network, we become involved early, helping companies consider not only how to ship into Asia-Pacific, but what commercial model is common in each country.

The right partner should help companies decide whether a market needs a direct-to-patient, distributor-led, local entity, depot-based or hybrid model. They should also help plan inventory, distribution to treatment centers and any supporting services.

The value is in connecting supply chain expertise with local market knowledge and broader regulatory or commercial understanding, while keeping the patient timeline at the centre.

As cell and gene therapies move from clinical trials to commercial adoption across Asia-Pacific, what are the biggest logistical and regulatory challenges that still need to be addressed to improve patient access?

Getting regulatory approval in Japan, China, Korea, Indonesia or Singapore does not follow the same process. Companies may be planning ten or twelve markets, each with their own regulatory expectations, but they cannot afford to create ten or twelve separate supply chains. The challenge is to satisfy local requirements while standardizing the parts of the operating model that can be standardised. That matters because advanced therapies are expensive to manufacture and highly time-sensitive, so a more consistent regional framework can help companies scale access without adding unnecessary complexity for clinicians or patients.

Manufacturing footprint is part of the access challenge. Some therapies can only be manufactured in the US and Europe, therefore patients in Asia-Pacific experience additional transit time, handoffs and quality release considerations. For emerging biotechs, the priority is not simply finding a route, but building an operating model that can scale across markets without creating unnecessary complexity. A specialist partner with a global network and strong local teams can help translate that challenge into a practical plan, connecting international movement, specialist handling, customs requirements and treatment-center delivery around the patient timeline.

Improving access also means reducing the burden on patients. In clinical trials, direct-from-patient sample collection can reduce the number of site visits required for certain routine appointments. That matters in a region where patients may live far from major centers and can help decentralized trial models reach people who might otherwise be excluded.

After approval, logistical challenges and patient challenges go hand in hand. Route planning, customs paperwork, temperature control and treatment-center coordination may sound operational, but each one can affect whether a patient receives therapy on time and with minimal disruption. Patient support programs can help bridge that gap, making it easier for medicines to reach people while they continue living their lives.

I have seen this play out in very real ways, including helping arrange a rare disease therapy delivery for a patient while they were on their holiday. For me, that example really brings the work to life. It is not just about moving a medicine from one place to another, it is about giving someone undergoing treatment freedom and the chance to keep living their life, whether that means being at home, travelling or spending important time with family.

Looking ahead, how do you see AI, digital technologies and real-time supply chain visibility transforming the delivery of personalised therapies across the region over the next five years?

Real-time visibility is already a major trend in healthcare logistics. For personalised therapies, it helps teams see where the product is, what condition it is in, and whether action is needed. Digital control towers can support optimised routing, preventive action and route changes when an issue is identified. That is especially important in Asia-Pacific, where distance, climate, infrastructure and regulatory requirements vary widely.

The next step is deeper integration across the patient journey. Visibility should become more connected to patient scheduling, manufacturing slots, quality release and treatment planning, so clinical teams can make decisions with greater confidence. If a doctor can see anticipated manufacturing milestones and delivery timing within the EMR/EHR platform, they can better plan appointments, prepare the treatment team and keep the patient informed. For patients, that can mean fewer delays, less uncertainty and a smoother path from collection through to treatment.

Artificial intelligence (AI) could help by identifying patterns, anticipating disruption and supporting better routing decisions before a problem affects the shipment.

The opportunity is not to remove people from the process, but to give experienced teams better information at the right moment. In personalised therapy logistics, technology is most valuable when it supports the people protecting the patient’s journey.