Kent Thiry Resigns as DaVita Chair and CEO

Kent Thiry has resigned as chairman and chief executive officer of DaVita (Denver, CO), one of the largest kidney care services companies in the world. After 20 years in the role, the colorful CEO was practically synonymous with the company.

MarketWatch reports that he will transition to executive chairman of DaVita, Javier Rodriguez takes over as CEO of the company (after serving as CEO of DaVita Kidney Care).

When Thiry took over the business in 1999, it was called Total Renal Care. Chief Executive Magazine in 2009 wrote rhapsodically about what the CEO had managed to accomplish in 10 years:

- Employee turnover decreased by 50% between 1999 and 2005.
- A 1999 year-end loss of $417.3 million on revenue of $1.45 billion by the year 2004 was turned into net income of $222.3 million on revenue of $2.3 billion. (At the end of calendar year 2018, DaVita had net income of $333 million and total revenues were $11.4 billion.)
- A 2004 purchase of US clinics from Swedish dialysis firm Gambro nearly doubled the size of the company.

Thiry will be remembered for intimate team-building, as well as for turning around a company in crisis after he arrived in 1999. He also made an impression within the organization—and to outside Thiry-watchers. Employees named the company DaVita (Italian for “giving life”), and the company became known internally as a “village” where Thiry presided as “mayor.” Employees were known hence as “citizens” and “teammates.”

The New York Times, Denver Post, and others have written about his proclivity for dressing as one of the Three Musketeers and proclaiming, “All for one, one for all.”

Thiry’s two-decade tenure, begun at age 43, wasn’t without controversy. While Thiry led the company, DaVita had to settle several lawsuits, including a recent one for three wrongful patient deaths, another for physician “kickback” practices, and a federal suit that violated the False Claims Act.

Business schools have studied DaVita’s somewhat unorthodox approaches to team efforts and success in shaving seconds off dialysis procedures in order to create envied labor-hour-per-treatment statistics.

Kidney Cancer Updates

News concerning combination drugs in the kidney cancer space continues apace. Recently, Merck & Co. and Pfizer obtained approval from the US Food and Drug Administration (FDA) for a combination of Merck’s Keytruda (pembrolizumab) and Pfizer’s Ilytra (axitinib) as a frontline treatment for patients with advanced renal cell carcinoma.

OncLive reported that the findings from the phase 3 KEYNOTE-426 trial showed that the frontline combination significantly improved overall response rates (ORRs), as well as progression-free and overall survival compared with Pfizer’s Sutent (sunitinib), a tyrosine kinase inhibitor. The data showed that the combination reduced the risk of death by 47% versus sunitinib alone (95% CI).

“This is the first anti-PD-1 therapy that is approved as part of a combination regimen that significantly improved overall survival, progression-free survival, and ORR compared with sunitinib in this patient population,” OncLive reported.

For those striving to make sense of the marketplace for therapies for RCC patients, especially those with advanced cancer, Motley Fool has published an informative story that guides readers through the most promising competitors, including those mentioned above, Bristol-Myers Squibb with its combination of Opdivo and Yervoy, as well as Exelixis with Cabometyx and Novartis with Alimta.

Says Motley Fool, “The highest sales in the kidney-cancer market will go to the drug—or, at this point, drug combinations—used by the most first-line patients. But that treatment will fail for many patients, offering plenty of opportunity for good drugs to be used as second-line treatments.”

In other cancer news, Hoffmann-La Roche (Basel, Switzerland) and Genentech, (South San Francisco, CA) have published results of their drug atezolizumab (Hoffman-LaRoche brand name Tecentriq) in combination with bevacizumab (Genentech’s Avastin) versus sunitinib as a first-line therapy for metastatic renal cell carcinoma.

The study, published recently in the Lancet, showed that the combination of drugs prolonged progression-free survival compared with sunitinib and had a favorable safety profile. Further research is needed to demonstrate a survival benefit to the combination, the authors wrote.

A New Kind of Home Dialysis

Simergent announced plans to use a new round of seed money, $2.835 million, to further development of a cheaper, quieter home dialysis machine. The company, with offices in Oklahoma...