



OThéa











Written by Lorraine KALTENBACH

THE LEGACY OF OPHTHALMOLOGY...

Destiny is a random path to which we give direction. Nothing predisposed the CHIBRETs to become major players in the European pharmaceutical industry in the field of ophthalmology. However, they achieved it! Paul CHIBRET, a young Auvergne boy born under the reign of King Louis Philippe (1830-1848), contracted a serious eye disease. As a military physician in Algeria, he was repatriated to France, treated and trained by the big names in European ophthalmology who, at that time, practised in Paris. This visionary became the originator of an industrial saga that continues to this day.

Through five generations of CHIBRET and 6 portraits, this brochure outlines their approaches to entrepreneurship and innovation, and portrays their strong personalities brimming with ideas and energy. They all shared the same desire to do business and the same passion for research and ophthalmology.

This story also serves as a reminder of the strength of family businesses that rely on innovation and management that focuses on the long term.

PAUL CHIBRET
1844_1911

Ophthalmologist Founder of the Société Française d'Ophtalmologie





JEAN-FRÉDÉRIC CHIBRET 1975

MBA Chairman of Laboratoires THÉA SAS



HENRI CHIBRET

Pharmacist Founder of Transphyto and Laboratoires Théa Chairman of the Board of THÉA Holding



JACQUES CHIBRET 1941_1989

MBA Founder and CEO of Biophysic Medical (ophthalmic and ultrasound lasers)



JEAN CHIBRET
1915_1989

Pharmacist CEO of Laboratoires CHIBRET



HENRY CHIBRET 1876_1943

Pharmacist Founder of Laboratoires CHIBRET



844_1911 • Ophthalmologist • Founder of the Société Française d'Ophtalmologie

The story of the CHIBRET family in ophthalmology began with Paul CHIBRET, a military doctor, at the end of the Second Empire (1852–1870) stationed in Constantine at the edge of Tunisia, he became interested in trachoma, a disease of the eye that would become his lifelong passion. Soon mobilised to participate in a campaign in eastern Kabylia (Algeria), he was struck down in August 1871 by bilateral chorioretinitis which left him almost blind. He returned to Europe the following month for treatment.

On his return to France, he sought the treatment of Prof. GALEZOWSKY and consulted Prof. De WECKER and the major Parisian ophthalmology clinics. He promised that if his sight was fully restored, he would dedicate his career to ophthalmology. In 1875, he left Paris and the ranks of the army and returned to his roots in Auvergne, since his family originated in Cantal.

He opened a private consultancy in Clermont-Ferrand, became the only ophthalmologist in the Massif Central and opened the ophthalmology department at Clermont's Hotel-Dieu Hospital. In addition to his routine practice, he was also stimulated by the research and observation of different pathologies in his patients. Paul CHIBRET was a distinguished physician, surgeon, researcher and inventor.

SCIENTIFIC **WORK**

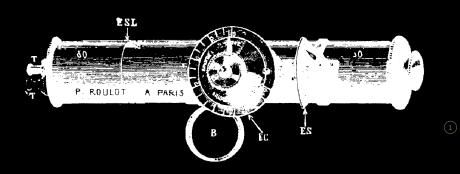
The scientific works of Paul CHIBRET are important and cover various fields of ophthalmology. Among his inventions is the chromatophotoptometer that uses polarised light. This simple and inexpensive instrument, small in size (20 cm), allows 2700 different colour shades to be obtained in order to detect dyschromatopsias such as colour blindness. He worked to promote a method of measuring

astigmatisms and gave it the name skiascopy. He invented a syringe for the injection and simultaneous aspiration of cortical masses in the posterior chamber of the eye after cataract surgery.

Problems of infection and aseptic techniques concerned him throughout his life. In 1891, he presented to the French Society of Ophthalmology (SFO) a report on bacterial infections of the conjunctiva, and in 1896 a report on trachoma. He recommended pre-, perand post-operative precautions to reduce the risks of endophthalmitis.

As a creative, independent and original European mind, Paul CHIBRET had a profound influence on subsequent generations.

> [Prof. A. BRONNER and Prof. J. SAHEL wrote an excellent bibliography on Paul Chibret in 1983.]

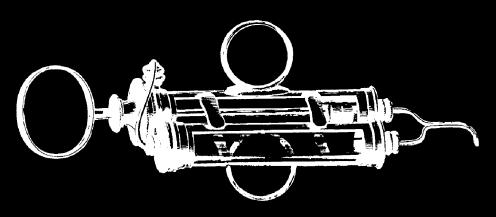




1 & 2 - Paul CHIBRET, with his colleagues IZARN and COLLARDEAU, invented this "chromatophotoptometer" to detect defects in the perception of colours, such as colour blindness.

INSTRUMENTS du Dr PAUL CHIBRET présentés par MORIA-DUGAST

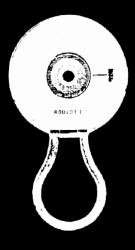
108 Bd. St. Germain, Paris



1 Double-action syringe



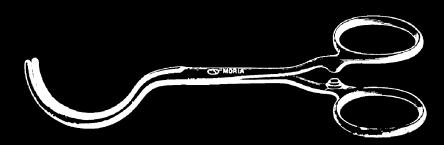
2 Clamp for turning the eyelids



3 Ophthalmoscope



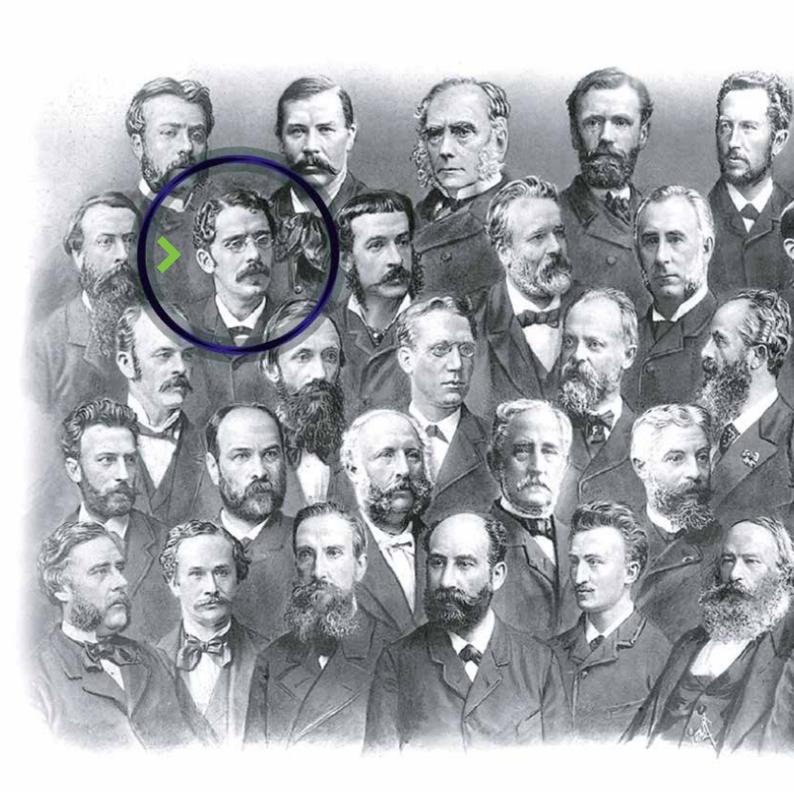
4 Lifter for newborns

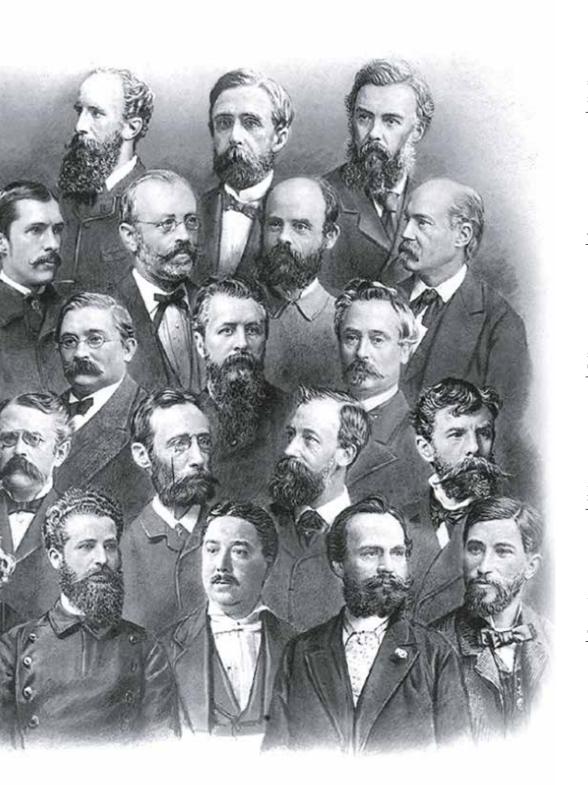


5 Clamp for displacement of the eye

A EUROPEAN AHEAD OF HIS TIME

OPHTHALMOLOGY CONFERENCE IN COPENHAGEN, 1883





Abadie Ammundsen Sir Risdon Bennet B. O. Bull, Bjerrmn Benson Christensen

Coppez CHBRET Diannaux Gayet Edm. Hansen Gurt O. Grant Gulstad Gulstad

E. Hansen Hippel Henie Holmgreen Janij Jatzow Libbrecht Mosren

Rossander Schmidt Rimpler Sattler Sahmelsohn Tscherning Waldahner Wolffberg Vallez Wischerhrewicz

M. Larsen Lorentzen Löwegreen Lehmann E. Meyer A. Meyer Gordon Nerrie Noyes Ralchmann

THE CREATION OF THE SFO

SOCIÉTE FRANÇAISE D'OPHTALMOLOGIE



SFO Congress in 1900

At the end of the 19th century when science was triumphant, a tight network of conventions, scientific and medical societies and academies was built up that linked more and more specialists across Europe. Paul CHIBRET thus became one of these journeying scholars who crisscrossed Europe attending academies and congresses. He performed surgery in Russia and Poland and engaged in abundant correspondence with his ophthalmologist colleagues. Undoubtedly the descendants of Paul CHIBRET have him to thank for their closeness to French and foreign ophthalmologists. Future developments in this respect, as in many others, show an extraordinary continuity of tradition between the CHIBRET ancestors and subsequent generations. It was at the Amsterdam Congress in 1879 that Dr. CHIBRET and Dr. MARTIN first endeavoured to create a Frenchlanguage scientific society in ophthalmology. This first attempt failed but a few years later the project began to

In September 1882, Paul CHIBRET published his new project in the journal Clinique d'Oculistique du Sud-Ouest. The French Society of Ophthalmology (SFO) was born on 29 January, 1883 in Paris.

He was the first Chairman of this new society. The statutes, still in effect today, state that the board is to include a chairman always based in the provinces and a secretary-general always based in Paris with an annual report presented to the Congress of the SFO without restrictions of nationality (AXENFELD was the first German reporter in 1906).

Paul CHIBRET reconciled the differences between French and foreign members, between private practitioners and academics, between Paris and the provinces. He held that the SFO should be accessible to all, in particular, to German ophthalmologists who had been ostracised since the German annexation of Alsace Lorraine, after the defeat of 1870. He chose May as the month of the annual congress thus allowing German ophthalmologists to come to Paris and French ophthalmologists to go to the Heidelberg Society in summer. Today, the Paul CHIBRET Medal awarded alternately by the SFO and the DOG (German Ophthalmology Society) celebrates this Franco-German friendship.



HOLDERS OF THE CHIBRET MEDAL, AWARDED ALTERNATELY BY THE SFO AND THE DOG (GERMAN OPHTHALMOLOGY SOCIETY):

1974 - PROF. F. HOLLWICH, MÜNSTER (GERMANY) · 1976 - PROF. H. REMKY, MUNICH (GERMANY) · 1978 - PROF. A. BRONNER, STRASBOURG

(FRANCE) · 1979 - PROF. W. STRAUB, MARBURG (GERMANY) · 1980 - PROF. H. SARAUX, PARIS (FRANCE) · 1981 - PROF. P. AMALRIC,

ALBI (FRANCE) · 1983 - PROF. E. KLÖTI, ZÜRICH (SWITZERLAND) · 1984 - PROF. F.C. BLODI, IOWA (USA) · 1985 - PROF. J. ROYER,

GENEUILLE (FRANCE) · 1986 - PROF. J. MICHIELS, LOUVAIN (BELGIUM) · 1989 - PROF. J. WOLLENSAK, BERLIN (GERMANY) · 1990
PROF. M. BONNET (MRS.), LYONS (FRANCE) · 1991 - PROF. H. BAURMANN, KÖNIGSWINTER (GERMANY) · 1992 - DR. JL. SEEGMULLER,

STRASBOURG (FRANCE) · 1993 - DR. R. GREWE, MÜNSTER (GERMANY) · 1994 - PROF. H. HAMARD, PARIS (FRANCE) · 1995 - PROF. CHR.

HARTMANN, BERLIN (GERMANY) · 1996 - PROF. H. BOURGEOIS, PARIS (FRANCE) · 1997 - PROF. H. NEUBAUER, COLOGNE (GERMANY)

• 1998 - PROF. G. SOUBRANE, CRÉTEIL (FRANCE) • 1999 - DR. K. DILGER, INGOLSTADT (GERMANY) • 2000 - PROF. J. FLAMENT, STRASBOURG

(FRANCE) • 2001 - PROF. H. BUSSE, MÜNSTER (GERMANY) • 2002 - PROF. J. P. ADENIS, LIMOGES (FRANCE) • 2003 - PROF. H. KAMPIK, MUNICH

(GERMANY) • 2004 - PROF. J.-L. DUFIER, PARIS (FRANCE) • 2005 - PROF. P. RIECK, BERLIN (GERMANY) • 2006 - PROF. J.-L. ARNE, TOULOUSE

(FRANCE) • 2007 - PROF. G.E. LANG, ULM (GERMANY) • 2008 - PROF. S. MORAX, NEUILLY (FRANCE) • 2009 - PROF. F. GREHN, WÜRZBURG

(GERMANY) • 2010 - PROF. J.-A. BERNARD, PARIS (FRANCE) • 2011 - PROF. DR. K.G. KRIEGLSTEIN (GERMANY) • 2012 - PROF. PIERRE-YVES

ROBERT, LIMOGES (FRANCE) • 2013 - PROF. T. REINHARD, FRIBURG (GERMANY) • 2014 - PROF. C. ARNDT (FRANCE).

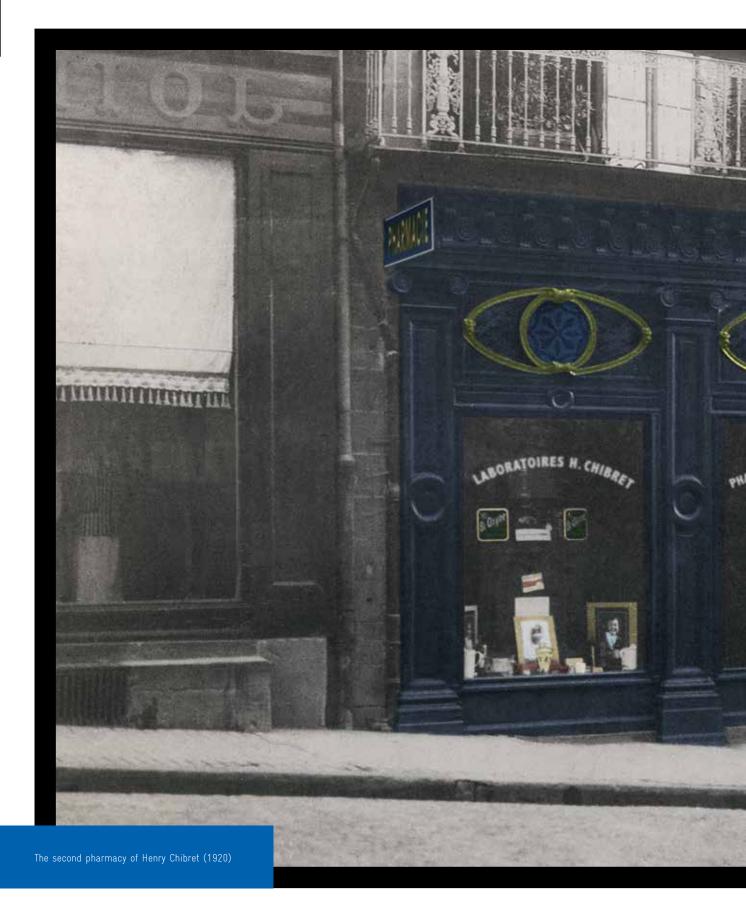


876_1943 • Pharmacist • Founder of Laboratoires CHIBRE1

As the son of a pharmacist and himself a pharmacist practising in Clermont-Ferrand, Henry CHIBRET at the instigation of his uncle Paul, had a passion for the development and manufacturing of ophthalmic formulations. Ointments were his preference because eye drops presented stability and sterility problems. In 1902, he founded Laboratoires CHIBRET which experienced modest growth just like its French and foreign competitors, because the pharmacopoeia still had only a few active drugs. It consisted principally of mineral salts or organic salts and alkaloids. The pharmaceutical industry only began to develop in ophthalmology after World War II.

Like his uncle Paul, Henry CHIBRET developed friendships with many ophthalmologists. He established a strong relationship with Albert BRONNER during the war, as the University of Strasbourg had moved to Clermont-Ferrand. (A. BRONNER, from Alsace-Lorraine, was arrested and deported in 1944. Released in 1945, he became a Professor of Ophthalmology at the University of Strasbourg.)





THE EARLY DAYS OF LABORATOIRES CHIBRET



The first successful CHIBRET products allowed Henry to expand his business. In the aftermath of World War I his pharmacy and laboratory opened in 1902, were transferred from place de l'Hôtel de Ville to 5 rue Saint-Hérem in Clermont-Ferrand to an old furniture shop.

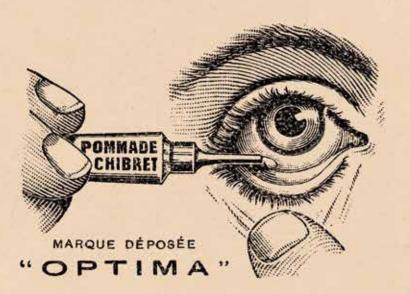
THE FIRST PACKAGING

The packaging of drugs has been a constant technical challenge throughout history. Suede bags for powder, stoneware and earthenware pots, wooden vases, glass of various shapes and sizes - these packages have evolved over the centuries to meet ever more demanding standards in terms of hygiene and quality. The early years of Laboratoires Chibret were marked by heavy use of flexible metal tubes made from pure tin or lead. In line with his uncle Paul, Henry was indeed an avid proponent of ophthalmic ointments. Based on vaseline, a petroleum jelly invented in 1872, ointments have a longer duration of action than eye drops and are less prone to contamination.









POMMADES OPHTALMIQUES "OPTIMA"

des Laboratoires CHIBRET, à Clermont-Ferrand

Prix spéciaux accordés à MM. les Docteurs, Hôpitaux et Cliniques.

i™ SÉRIE	2** SÉRIE	3** SÉRIE
Oxyde jaune Violet de methylene Bleu de methylene Aristol Vioforme Iodoforme Rouge écarlate Cuivre (hemocuivre) Oxyde de zinc Zinc cadium Zinc tuménol Zinc ichtyol Calomel Iodo Calcique Ichtyol Soufre Tannin Precipité blanc Bismuth-Hydroxyde Dermatol Extrait thyroldien Ecktogan	Collargol Argyrol Protargol Cocalne Stovaine Ethylhydrocupreine (Optochine) Rose Bengale Xeroforme Orthoforme Essence du Niaouli (Gomenol) Airol	Eserine Euphtalmine Scopolamine Atropine Pilocarpine Adrenaline Dionine Homatropine

COFFRETS AMPOULES FONDANTES CHLORO-IODO-CALCIQUE (Bains d'yeux pour cataracte)

CEILLERE CHIBRET, a REBORD CAOUTCHOUTE (Marque deposée)

Les POMMADES "OPTIMA" FABRIQUEES PAR H. CHIBRET, a CLERMONT-FERRAND sont livrées en tubes d'étain munis d'une canule dévissable et stérilisable sur laquelle s'adapte un capuchon. Cette canule facilite l'entrée de la pommade dans le cul de sac conjonctival sans l'intermédiaire d'accessoires (bâtonnets de verre, etc...) et n'en laisse sortir que strictement la quantité à employer, le reste est à l'abri de tout contact impur lorsque le capuchon est replace.

Ges pommades sont faites d'après des procèdes spéciaux de fabrication qui les rendent irréprochables.

Echantillons adresses gracieusement sur demande



THE FIRST PACKAGING



If the second part of the 20th century marked the golden age of glass for pharmaceutical use, it was in its infancy at Henry CHIBRET's time. Dispensary glassware spread slowly for use with eye drops. Bottles were still made in the traditional way. The use of wood or cardboard for packaging and protection of vials of eye drops was growing at the same time.





1915_1989 • Pharmacist • CEO of Laboratoires Chibret

Following the death of his father Henry CHIBRET in 1943, Jean CHIBRET gave a national and international dimension to Laboratoires CHIBRET with leadership positions in Europe, the Middle East and Africa. As the third generation of pharmacists (having completed his studies in Clermont-Ferrand and Toulouse with his future wife Marguerite DELCHER), he was a visionary and tireless entrepreneur who made his mark as an innovative industrialist who, over two decades, developed an entire range of eye drops and ointments. The marketing authorisation files are fully documented and show how Laboratoires CHIBRET became a leader in the majority of therapeutic classes in ophthalmology, including antibiotics and corticosteroids. The research laboratories were then the most important worldwide and worked very closely with academic researchers and, in particular, with Clermont-Ferrand University (Professors Pierre TRONCHE, François ROUHER, Roger CLUZEL, Pierre BASTIDE and Henri POURRAT).

In 1946, Jean visited MERCK Laboratories in the United States and established close ties to them. He first acquired their licence for streptomycin and later for corticosteroids (in 1950, he launched the first cortisone eye drops, followed by hydrocortisone and then dexamethasone). These revolutionised the treatment of ocular inflammation.

In addition to research conducted on molecules, Jean CHIBRET was interested in packaging. Scientific information was another of his obsessions. He was the first to grasp the importance of audiovisual communication and began an extensive film production initiative to train ophthalmologists. More than 200 films were produced with the big names in the discipline. He opened the world's biggest documentation centre, the CHIBRET Institute, frequented by entire classes of young specialists. He published the CHIBRET Journal, sent to 15,000 ophthalmologists. Each year, he organised symposia on ophthalmology involving residents in Clermont-Ferrand. The reputation behind the CHIBRET name soon became synonymous with rigour, ethics and quality. Of course, staying true to the family tradition, he was interested in trachoma and supported its international journal, the gold medal and many research teams.

Since he did not have the financial resources necessary to ensure the worldwide distribution of his products, in 1969 he joined forces with the American laboratories MSD which would become the world number one in ophthalmic drugs particularly with major innovations in glaucoma (Timoptic, Trusopt, Cosopt). At the same time, MSD made the Clermont-Ferrand region an important research and production site.

LABORATOIRES CHIBRET

During his visit to the United States in 1946, Jean CHIBRET was impressed by the country's advances in pharmaceutical technology, mass production and quality control. On returning to France, he decided to modernise the family's laboratories. This level of industrialisation was obtained by the early 1960s with the opening of the new site on boulevard Clémentel in Clermont-Ferrand. Ultramodern facilities emerged with state-of-the-art equipment exceeding the quality standards required by the authorities. The production unit of Laboratoires CHIBRET became one of the most modern and impressive in Europe.





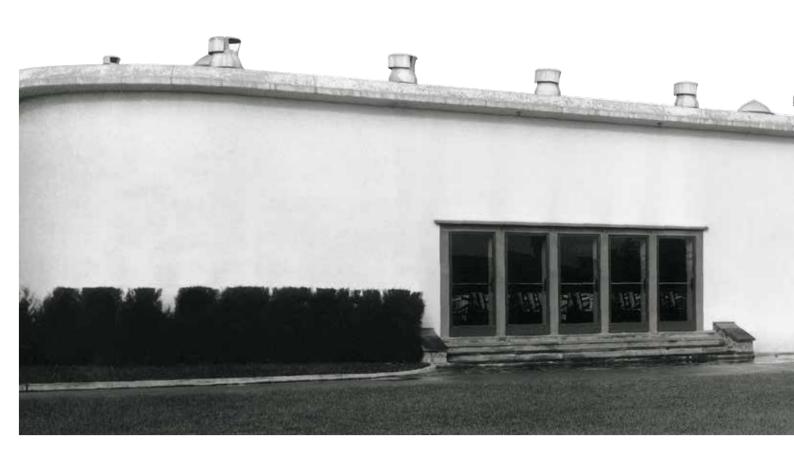


- 1 Site at boulevard Etienne Clémentel (Clermont-Ferrand)
- 2 Jean CHIBRET and his staff
- 3 Sterile block for filling eye drops



THE CHIBRET INSTITUTE

Jean CHIBRET believed that research and development must be the cornerstones of the expansion of Laboratoires CHIBRET. He created an internal R&D structure to develop a "pipeline" of new products. He recruited a multidisciplinary team to study all the new possibilities of physical, chemical and biological technologies to develop the pharmacopoeia. In parallel, he relied on all the institutional research networks. Finally, he opened the world's biggest documentation centre - the CHIBRET Institute - frequented by entire classes of young specialists. This "Institute" published the CHIBRET Journal which was sent to 15,000 ophthalmologists and organised various symposia. Each year, it also organised symposia on ophthalmology for residents in Clermont-Ferrand. The reputation behind the CHIBRET name soon became synonymous with rigour, ethics and quality.











- 1 Reception area of the Institute
- 2 Documentation centre
- 3 Ocular electrophysiology centre
- 4 Ophthalmology symposium in 1966



THEOTTLES

In addition to research conducted on molecules, Jean CHIBRET was also interested in packaging.

After World War II, the quality of glassware and therefore vials improved due to the addition of adjuvants according to their use. Manufacturing became fully automated and allowed for a significant increase in volumes with a reduction in production costs. Research into the stability of products packaged in containers also led to the definition of several types of glass. Subsequently, these pharmaceutical glasses increasingly came into competition with plastics. In all these stages, Laboratoires CHIBRET remained at the cutting edge of innovation: from blown-glass eyedrops vials to treated glass with a sterile plastic pouring nozzle, plastic vials and lyophilised vials, CHIBRET packaging evolved in tandem with the latest scientific and technological discoveries to always satisfy the needs of professionals and patients.

Jean was always preoccupied with the serious problem of contamination; he was also a pioneer in introducing preservatives into solutions and in imposing an expiry date for their use after opening the vials. These two apparently simple ideas were adopted by all health administrative authorities.





THE **PRODUCTS**

Jean CHIBRET was the first to make ophthalmic products containing penicillin and cortisone available to practitioners in France. It is no exaggeration to say that the three post-war decades saw a true revolution in treatment. Antibiotics, corticosteroids, mydriatics, anaesthetics and anti-glaucoma drugs - the CHIBRET range expanded along with the new discoveries that constantly arose and radically changed the daily practice of ophthalmologists. Many products, Novesine, Mydriaticum, Chibro-cadron, Rifamycine... (some of which are still available today) were developed in this era. Jean's objective was to cover the daily needs of the ophthalmologist.

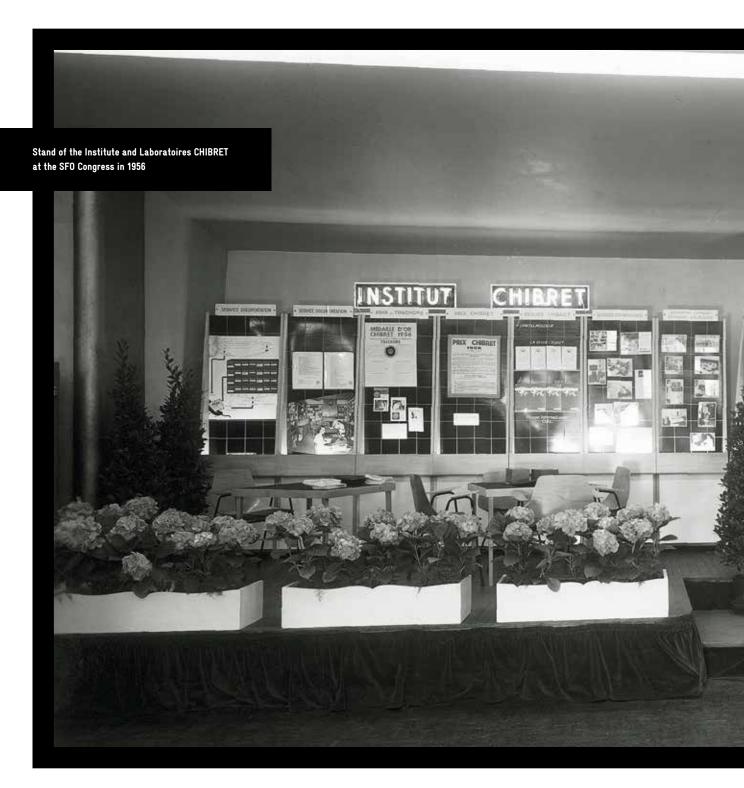


- 1 Sample of the many products of Laboratoires CHIBRET
- 2 Aureomycin advertisement
- 3 Chibro-Cadron advertisement

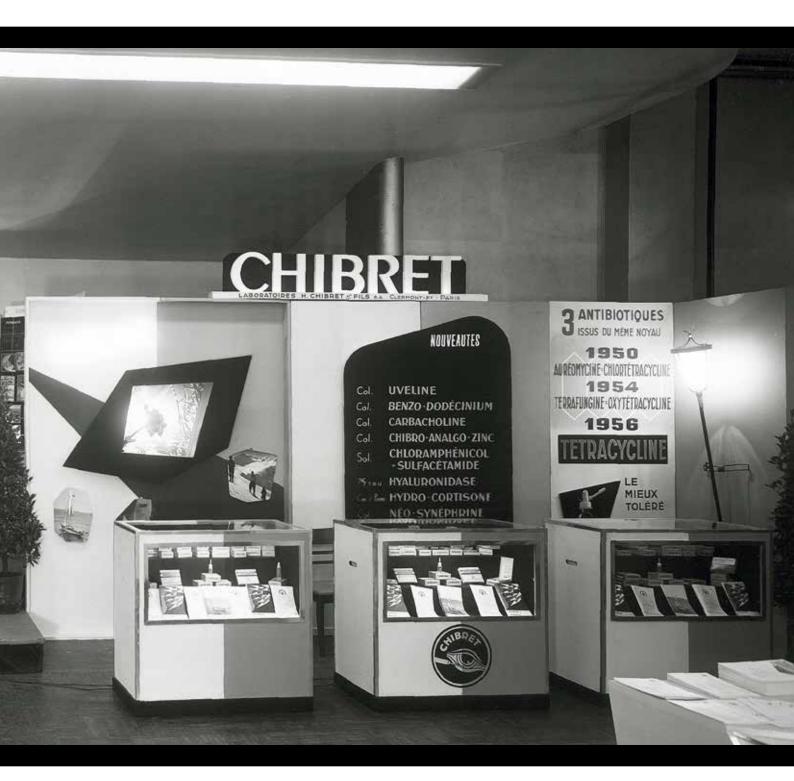


The presentation of products experienced a dramatic change. Communication changed from black and white to colour; visuals, entrusted to communications professionals, became more sophisticated. Laboratoires CHIBRET attached growing importance to medical information in anticipation of the authorities that would soon require the inclusion of more and more labelling on drug packaging (name, form, active substance, classification, batch number for traceability, etc.) to ensure their quality and safety.





THESFO



Several decades after the establishment of the French Society of Ophthalmology (SFO) by his ancestor, Paul CHIBRET (1883), the annual SFO congress remained an exceptional opportunity for Jean CHIBRET to increase the standing of the family business. This conference, held over the years at the Centre Marcelin Berthelot or at the grand amphitheatre of the Faculty of Medicine in Paris, was rooted in the post-war years to the Maison de la Chimie (Paris). The marketing services of Laboratoires CHIBRET created stands that jointly presented

the Laboratory and the Institute. In addition to being a showcase of new CHIBRET products, the space thus created was a meeting point for encounters and exchanges between the leaders in ophthalmology. Jean CHIBRET and his teams also participated since this era in every global conference. From Madrid to Berlin, New York to Taiwan, Manila to Rotterdam, they made contact with the leading specialists and ensured that the French company maintained its international reputation.



Biophysic Medical (ophthalmic lasers and ultrasound devices) 1989 • MBA • Founder and CEO of



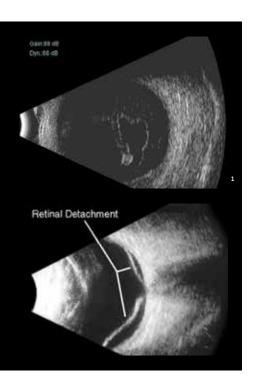
Jean CHIBRET inspired his two sons, Henri and Jacques, with his entrepreneurial passion to innovate and export. BIOPHYSIC MEDICAL was founded in 1974. It sold an automated electrophysiology device (Pantops) after research conducted in collaboration with the Department of Ophthalmology of the Clermont-Ferrand University Hospital Centre (Profs. ROUHER, SOLE and ALFIERI). Prof. Jean HAUT, of the Quinze-Vingts National Ophthalmology Hospital Centre in Paris, and Dr. POUJOL allowed Biophysic Medical to develop the emerging technology of diagnostic ultrasound. Jean HAUT and Florence PINON had a key role in the development of the 1st European ophthalmic ARGON laser for the treatment of retinopathy. The first YAG laser for the treatment of secondary cataracts was developed with Prof. Aron ROSA in 1983.

Just like Laboratoires CHIBRET, in the 1980s BIOPHYSIC MEDICAL reached the critical threshold of being a big company that was still too small. To become a major player in the American market, which accounts for almost 70% of the global market, BIOPHYSIC MEDICAL became associated with the French pharmaceutical group SYNTHELABO MEDICAL* through its main shareholder L'Oréal. In this way, BIOPHYSIC MEDICAL USA was created in 1984 with Alain CHARMANT as its CEO, and quickly achieved success.

Jacques was a strong believer in the Excimer laser for refractive surgery of the cornea and with Dr. Philippe CROZAFON and the University of Nice, developed the first prototype. Unfortunately, the project was interrupted by his tragic death in Africa. He was mortally wounded in February 1989, during a safari in Cameroon. He had gone there to bring back the personal effects of Jean CHIBRET who died a few weeks earlier. 1989 will always remain a black year in the history of the family.

BIOPHYSIC **MEDICAL**

BIOPHYSIC MEDICAL quickly became the number one worldwide in the field of ophthalmic ultrasound and number two worldwide in the field of lasers. This success was achieved by analysis driven by the requirements of practitioners. It is also explained in particular, by Jacques CHIBRET's creation of a multidisciplinary team that allowed him to merge their expertise and know-how. Leading researchers in the most varied fields (tubes, fibre optics, micromechanics, microelectrics, etc.) agreed to work together. The result of this collective work: revolutionary medical imaging devices made in Clermont-Ferrand, was sold worldwide.

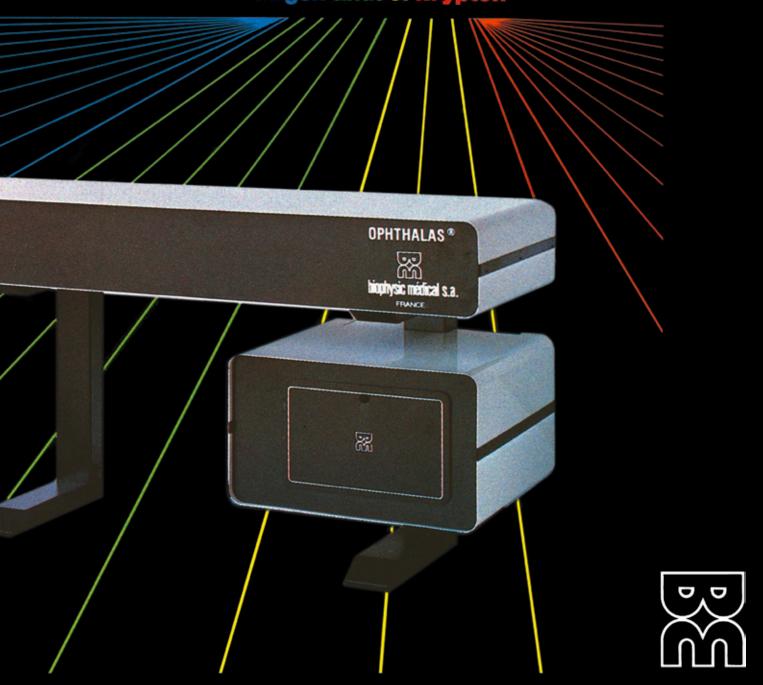






OPHTALAS

Argon and/orKrypton





940 • Pharmacist • Founder of Transphyto and Laboratoires THÉA, Chairman of the Board of THÉA Holding

After studying pharmacy in Clermont-Ferrand and spending one year in North America, in New York state and Quebec, in 1965 Henri CHIBRET was put in charge of the management of the entire export activities of Laboratoires CHIBRET. One of his priorities was to establish CHIBRET in Germany (with Pierre CZAPINSKI, who worked on the Franco-German reconciliation) and in emerging countries in the Persian Gulf: Iran, Iraq and Saudi Arabia.

After the sale of Laboratoires CHIBRET to Merck in 1969, Henri CHIBRET continued his career for a few years at Merck in Brussels, then at Ferlux in Clermont-Ferrand.

In 1978, he created Laboratoires TRANSPHYTO and developed new ophthalmic molecules. This was a decidedly innovative strategy, in fact one of the first French start-ups, which marketed its innovations through French and foreign laboratories, with his revenues being derived from royalties and the sale of patented raw materials. The second innovation of TRANSPHYTO was to outsource the majority of its research activities to subcontractors and draw on the skills of the best research institutes. The collaboration with Prof. Philippe LAPALUS of the University of Nice and with Pierre-Paul ELENA (IRIS-PHARMA), was invaluable in the fields of toxicology and ocular pharmacology.





LABORATOIRES THEA

The main partners of Transphyto were ALLERGAN, CIBA-VISION, MSD. This strategy resulted in very good R&D productivity, but did not allow TRANSPHYTO to be an ophthalmologist-recognised laboratory. On the other hand, the company was too dependent on its licensees. In 1994, Henri created Laboratoires THÉA to market the new products of TRANSPHYTO, first in France and then across Europe.

development of Laboratoires THÉA Laboratoires CHIBRET and BIOPHYSIC MEDICAL) is based on the priority given to innovation, especially in the areas of dry eye, herpes, allergy, glaucoma, infection, etc. The latest addition to the range is the 1st preservative-free latanoprost in France.

In addition, THÉA purchased several well-known eyedrop brands (Chibro-Cadron, Rifamycine Chibret, Chibroxine, Mydriaticum) from Merck in 2004 to complement its THÉA range in France and abroad.

In the 2000s, Henri focused on three objectives: to accelerate research efforts, to continue the European expansion of the company (THÉA is the leading independent European laboratory in ophthalmology) and to pass the reins to his nephew, Jean-Frédéric CHIBRET.

THE ABAK® BOTTLE

PRESERVATIVE-FREE

Henri CHIBRET, continuing the CHIBRET tradition, is developing new packaging for eye drops. In 1996 he launched the first preservative-free multidose bottle, the ABAK®, which using a filtering membrane keeps the bottle contents sterile for a period of 2 to 3 months. The hazardous effects of preservatives including benzalkonium chloride are thus avoided. Ironically, Henri CHIBRET eliminated the use of preservatives that his own father had introduced.





ABAK® 1ST GENERATION



1998 ABAK® 2ND GENERATION



2005 ABAK® 3RD GENERATION

Reservoir containing up to 300 sterile drops
(10 mt bottle)

Flexible and ergonomic wall
made of low density additive-free polyethylene

Locking system
thanks to tamper evident ring

Neutral microporous pad

Bifunctional membrane
hydrophilic / hydrophobic 0.2 µm

Rounded protective tip

Calibrated preservative-free
drops (30 µl)

THÉA INNOVATIONS

THÉA main international trademarks

1995	1996	1999	2002	2005	2007	2008	2009	2010
Naabak Naaxia	Virgan Virgangel Zirgan	Siccafluid Siccafluid Unidose Siccafluid Mono Liquivisc Siccamed Siccafree Oftagel Liquigel Liquigel Unidose	Nutrof Total Nutrof Omega Nutrof Total +	Hyabak Hylabak	Dicloabak Dicloced Voltabak Voltaren Oftabak Voltaren Ophtha Abak VoltarenOphtAbak	Timogel Geltim Geltim LP Timofluid Tiopex	Azyter Tritab Azydrop Bazyt Infectoazit Azydrop Zyter	Blephasteam
ソ	و	● ≥ NUTF	ROF' TOTAL	ソピ	Eef oft. in contenitors woo	mg/g talmico nedose	Azyter 15 mg/z	Blephaste
Naabak 4,9 ^s	Siccaflu 25 me ten spream for the sp	uid o's	ope 3 counts had not	0.15 %	1 n	mg/g talmico nodose ololo	15 mg/g uer en solenten en récipiem solidose n, solenten in integér duce centraliser habitemine distribue habitemine distribue Solentenine Solente	© Lentershafe © Self-serring dince,

- 1995 > Broad spectrum anti-allergic for treatment of allergy and associated inflammation. Preservative-free.
- 1996 > The 1st anti-herpetic gel.
- 1999 > The 1st fluid gel for dry eye treatment.
- 2002 > The reference in eye nutrition.
- 2005 > The 1st non-preserved hyaluronic acid in multi-dose bottle.
- 2007 > Preservative-free diclofenac eye drops.
- 2008 > The 1st low-dosed timolol gel with no quantifiable systemic adsorption.
- 2009 > The first 3-day ocular antibiotic.

In fewer than twenty years, under the leadership of Henri CHIBRET, Laboratoires THÉA has achieved renown by greatly increasing innovations in all the therapeutic classes, THÉA's aim being to meet the ophthalmologist's every need (dry eye, glaucoma, eye infections and inflammation, antivirals, mydriatics, anaesthetics, allergy, hygiene and eyelid care, food supplements...)

2011		2011	2012	2013	2013	2013	2014
Zabak Zalerg Altriabal Zaditen (Ketabak Ketotifen	Ophtha Abak	Mydriasert	Aprokam Aprok Prokam	Monoprost Monopost Unidose Monopost Monopro	Thealoz Duo	Blephagel Théagel Lephagel	Cacicol
Zabak 8,5 mg/d 8,5 mg/d forward for some controls (Sinthe satisfy) because 5 mg/d	MYDRIASE 0.28 mg/5.4 mg (phthalmic) 0.28 mg/5.4 mg inserte ofti Tropicamide and phenylephi Tropicamide e fenilefrina do 20 learns and 20 deposale starile fairs 20 learns 70 proase esterile dauch 20 learns 70 proase esterile sae e get	insert almico / inserto oftalmico ine hydrochloride feralefrina ridrato Théa 1,000	Aprokam 50 mg powder for solution for injection Cefuroxime Box of 10 vials	Monoprost 50 mikrogramów/m Letonoprostu brajke do otz otzhulo w pojenniko jedoudawkong profeska zakiera 10 pojennikow żedoudawkong profeska zakiera 10 pojennikow żedoudawkong	The aloz Duo The a	of the control of the	Cacicol* Cacicol* Consideration Connect Institute parts representation. Connect Institute parts representation. Concernment represent parts of representation of the Connect parts of the Connect Institute of the Connect O Théa

- 2010 > Moist heat therapy for the management of MGD.
- 2011 > The 1st preservative-free multi-action anti-allergic in a bottle.
- 2011 > Effective and stable mydriasis in only one step.
- 2012 > The 1st and only intracameral antibiotic for prophylaxis of endophthalmitis in cataract surgery.
- 2013 > The 1st latanoprost with 0% preservative, combining efficacy and tolerance.
- 2013 > The combination of hyaluronic acid and trehalose: lubricates, protects and regenerates.
- 2013 > The preservative-free revolution in eyelid hygiene.
- 2014 > The matrix therapy for corneal regeneration.

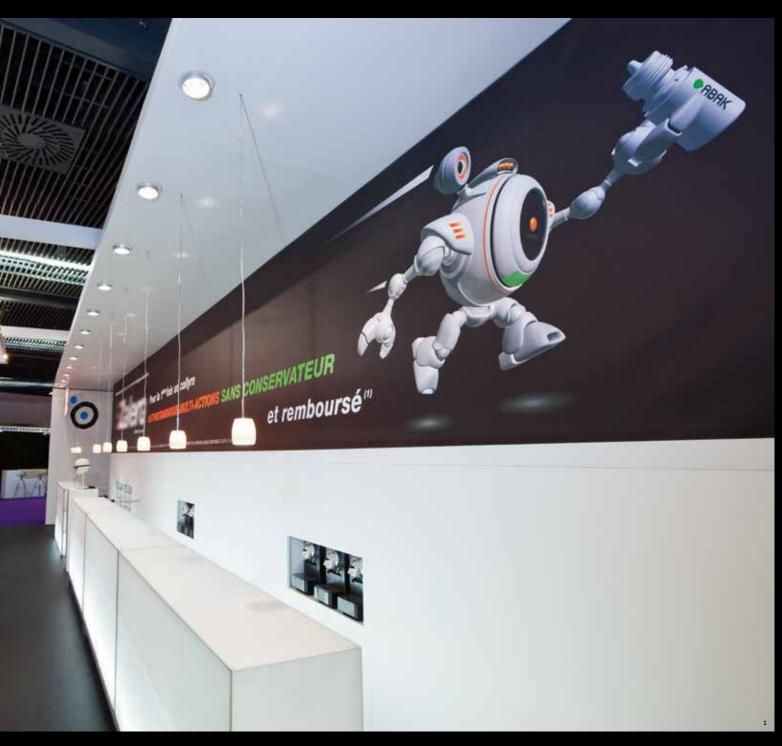
CONGRESSES & ACADEMIES

THÉA has been continuously present in notorial congresses throughout the world.

Henri and Jean-Frédéric recognize the importance of supporting the continuing education of the next generation of ophtalmologists. For many years, Laboratoires THÉA has been the primary partner and sponsor of the European Board of Ophthalmology (EBO) exam and faithful supporter of the EVER congress where young residents present a variety of findings.



- 1 THÉA stand 2011
- 2 THÉA stand 2012
- 3 EBO 2011









975 • MBA • Chairman of Laboratoires THÉA SAS

As chairman since 2008 of Laboratoires THÉA, Jean-Frédéric CHIBRET is now the successor to Henri CHIBRET (who remains at the head of THÉA Holding and now focuses on the scientific and financial strategy of the group). Following a business education and a two-year apprenticeship in the Spanish subsidiary (2000-2001), Jean-Frédéric has been involved in international activities that he gradually guided and structured by creating new subsidiaries in Germany, the UK, Ireland, Poland and Greece and by launching an exclusive sales network in Africa and the Maghreb.

In 2009, Jean-Frédéric presided over the acquisition of several products in the Novartis ophthalmic range, which opened the door to THÉA in many countries such as Russia. Two years later, new acquisitions allowed him to establish a foothold in Sweden, Norway, Finland, Denmark, Austria and Turkey. Consequently, THÉA can more easily distribute the innovations of its own research in these new countries.

Jean-Frédéric CHIBRET thus ensured a rapid expansion of the company. With his efforts, Laboratoires THÉA has gained an even larger European presence than the former Laboratoires CHIBRET. It has become a key player in ophthalmology on the continent. Meanwhile, he continues to distribute THÉA products in more than 65 countries worldwide. This territorial expansion is combined with an accelerated broadening of the THÉA range. Jean-Frédéric's desire is to be able to offer ophthalmologists the widest possible range of products, whether in the field of diagnostics, surgery or therapeutic treatment. The in-house research efforts of Laboratoires THÉA and its technology watch, combined with a policy of targeted acquisitions, are driving the same ambition: to meet all the needs of practitioners, regardless of their practise.

With THÉA, the family business once again shows itself to be a form of organisation perfectly adapted to the challenges of our time: an efficient and reactive long-term vision.

More than ever, the sustainable growth of Laboratoires THÉA is based on strong financial health and the development of innovations, but especially on the family's desire to continue its industrial legacy.





CREATION OF NEW SUBSIDIARIES

With Jean-Frédéric CHIBRET, Laboratoires THÉA entered the closed circle of French pharmaceutical companies with subsidiaries in the four cardinal points of the continent. Fifteen years after opening its first site in Spain, the Auvergne-based group now has twenty subsidiaries in Europe. In keeping with the family tradition, THÉA also has a strong presence in Africa, especially in the countries that make up the Maghreb region, where the company has an exclusive sales network.

In 2014, THÉA is opening subsidiaries in Mexico and Russia and installing a commercial research and development structure in the United States.

This international expansion - often preceded and facilitated by strategic acquisitions in the host country - is motivated by one fact: research does not recognise national boundaries, or indeed boundaries between disciplines and knowledge. Only a greater territorial presence can allow a pharmaceutical company to support and strengthen the broadening of its research.

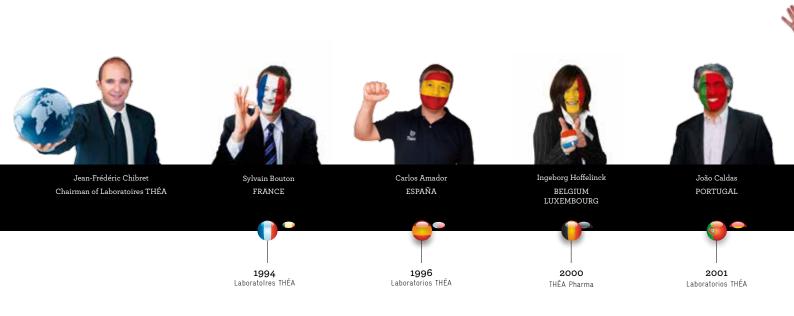






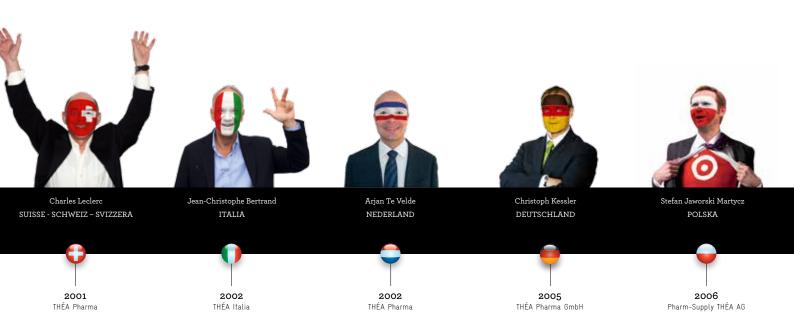
DEVELOPMENT OF THE

EUROPEAN TEAM





The success of a laboratory depends on the quality of its products, but also on the quality of its managers and their teams. Laboratories THÉA agents visit 40,000 ophthalmologists across Europe each year. Success is encouraged daily by Jean-Frédéric, who pays particular attention to the close relationships between the headquarters and its subsidiaries, between directors and management teams, in a company that actively cultivates human relationships.





THÉA 2013 team

DEVELOPMENT OF PRODUCTION SITES

To avoid structural obstacles and to remain at the cutting edge of progress, subcontracting has long been one of the key strategies of THÉA. This principle particularly applies to production, with the group using the services of the best French manufacturers for each product category and galenic form.

However, for some highly strategic and innovative products, Jean-Frédéric CHIBRET decided to equip THÉA with 2 production sites: one in Milan (Italy) for the manufacturing of products in ABAK® bottles and the STERI-FREE® tubes; and one in La Rochelle (France) for the production of Mydriasert (ophthalmic insert).











Production line of the ABAK $^{\circledR}$ bottle and STERI-FREE in Italy

THE STERI-FREE TUBE

STERILE BEFORE AND AFTER OPENING

PRESERVATIVE-FREE

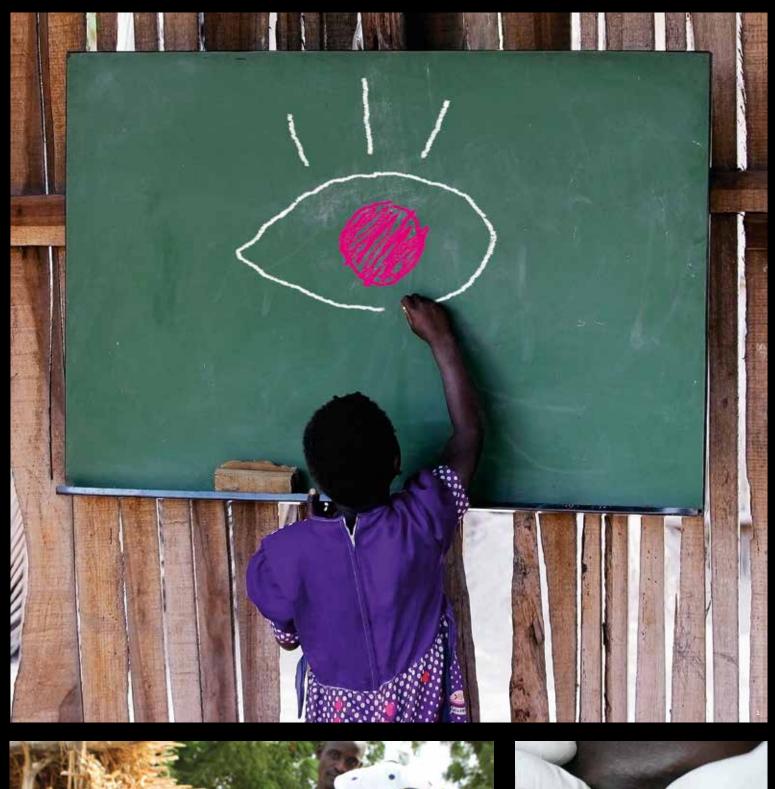
The Italian site of Laboratoires THÉA that produces the ABAK® bottle was redesigned to produce sterile gels that remain sterile throughout the use of the product. Behind this major innovation is an "airless" pump tube and, above all, an avant-garde production line for sterile product packaging ("STERI-FREE technology"). This new system allows to offer gels that contain only the essentials, i.e. without pseudo-preservatives or other irritants. With this invention, Laboratoires THÉA enhances its image as a pioneer and its leadership position in combating the undesirable effects of preservatives in ophthalmological products.





KEEP ONLY THE ESSENTIALS!









LAUNCH OF THE THEA FOUNDATION

In 2012, Jean-Frédéric CHIBRET decided to launch the THÉA Enterprise Foundation to continue and deepen the work of his predecessors in the fight against blindness and the improvement of eye health. In memory of Paul CHIBRET who first practised as a doctor in Algeria where trachoma was rampant, one of the priorities of the Foundation remains the fight against this dangerous conjunctivitis that destroys the eye. While most countries have been able to eliminate it, it remains endemic in almost fifty countries, mostly in Africa. 80 million people are still affected by this disease caused by poverty and hygiene conditions. In the mid-1990s, the WHO Alliance for the Global Elimination of Trachoma by 2020, defined the "CHANCE strategy", combining medical and surgical measures and interventions in individual and collective hygiene. Nevertheless, antibiotic therapy remains the essential tool. In 1997, the WHO sent the pharmaceutical industry a pressing international demand for the development of a topical antibiotic for short-term treatment. In 1999, the long development programme for new eye drops began; it was to last for 8 years due to technical difficulties, particularly concerning the pharmaceutical form. It culminated in the development of a new short-term azithromycin antibiotic treatment (Azyter).

By 2009, more than 2 million doses of this new product had been shipped and administered to 120,000 people during three campaigns by health workers in the district of Kolofata, northern Cameroon, Since the second campaign, the prevalence of active trachoma had fallen below the epidemiological threshold of 5%, leading to elimination according to WHO criteria. In January 2013, Jean-Frédéric CHIBRET accompanied a team from the THÉA Foundation to Cameroon to assess the need for an additional treatment campaign.



- 1 In 2008, before any treatment, the prevalence of active forms of trachoma in the city of Kolofata (Cameroon) was estimated at 31.5% of the population aged less than 10 years.
- 2 Auscultation session in Kolofata
- 3 Detection of stage 2 trachoma in a young child.
- 4 January 2013: Jean-Frédéric CHIBRET, Drs. Amza ABDOU, Aminou BOUBA and Pierre HUGUET were on the ground, supported by an entire local team, to assess the value of an additional treatment campaign.



THE FUTURE



As an independent company with private capital, THÉA aims to continue using the resources that were the root of its dynamism and success, both today and in the future: management which gives priority to long-term strategies while leaving space for boldness in research and innovation. Recent advances in pathophysiology, biotechnology and genetics create new treatment opportunities in ophthalmology. In this context, THÉA continues to invest to stay at the forefront of innovation and be a pioneer in new generations of products, especially in fields like glaucoma, allergies, ocular dryness,

eye and eyelid infections, and disorders of the posterior segment. At the same time, the continuous improvement in preservative-free delivery systems (ABAK*; STERI-FREE technology*), remains a priority.

More than ever, THÉA intends to remain loyal the CHIBRET family tradition, which has made its contribution to European ophthalmology from generation to generation.

ACKNOWLEDGMENTS

This family history is also a human adventure and we would like to thank all of our employees, partners, ophthalmologists, pharmacists, customers and patients who have supported us in this great scientific odyssey.

Since women have always been the mentors of success, we would also like to thank Françoise CHIBRET, wife of Henry CHIBRET who focused on sales management at Laboratoires CHIBRET from 1911; Marguerite CHIBRET, pharmacist and wife of Jean, who, from the end of the 1940s, accompanied her husband around the world and hosted thousands of ophthalmologists in Clermont-Ferrand; Françoise CHIBRET, pharmacist and wife of Jacques who took part in the development of BIOPHYSIC MEDICAL at her husband's side; Françoise PLAUSSU-CHIBRET, sister of Henri and Jacques CHIBRET who now continues the family adventure as chairperson of the THÉA Surveillance Council; and finally, Norma CHIBRET, wife of Jean-Frédéric, who continues this commitment.

Lorraine KALTENBACH

We would like to thank Lorraine Kaltenbach who was the initiative behind this work, as well as the entire team involved:

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OUR 150-YEAR HISTORY IN OPHTHALMOLOGY





