

Patient centricity and the promise of data

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Patient centricity and the promise of data – two themes, four perspectives

What patients want

- Minimise disease and monitoring burden
- Support research & be supported by latest clinical research results
- Data protection

What HCPs require

- Low monitoring burden
- Credible evidence



What payers/ systems expect

- No incremental monitoring burden
- Evidence for efficacy and efficiency on relevant endpoints

What Pharma Industry understands

More relevant data for less investment

Take something that used to be a patient-reported outcome — now I can simply track it using a wearable, ... **increasing my datasets and reducing the number of patients** I need in order to get significance, thereby shrinking my trial and making it **less expensive** and faster to conduct — *SVP*, *Sanofi*



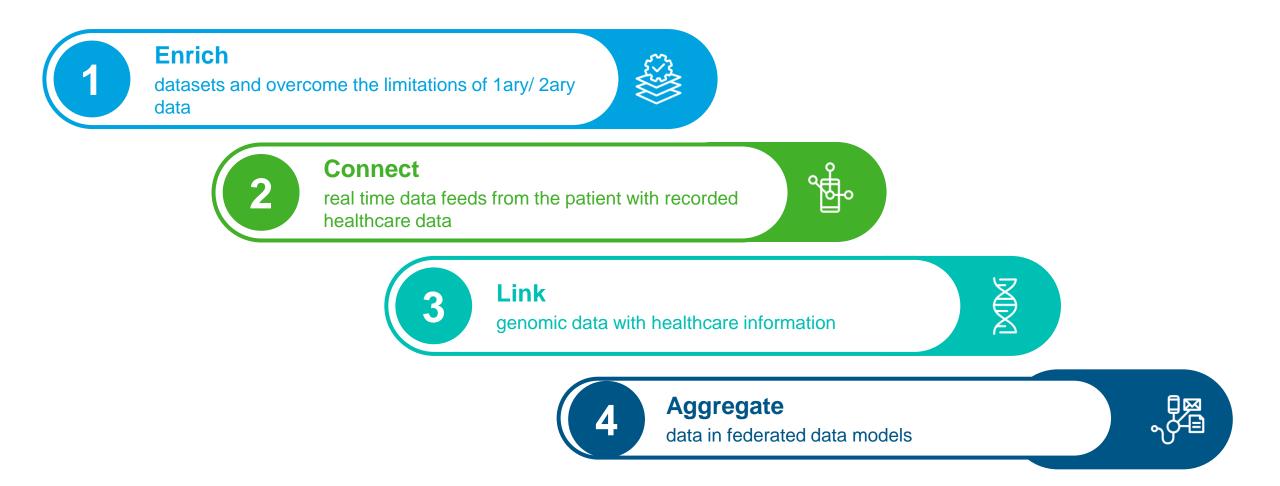
Clearly, current clinical research approach takes a narrow view on classical health data which limits its relevance to the patients



- The exponential growth of healthcare data offers both **an opportunity to incorporate** this wealth of data into the clinical study processes, and **a challenge, given the disparate sources** where a patient's healthcare data may be contained
- Successful integration of new patient health data sources will allow a new view on trial endpoints

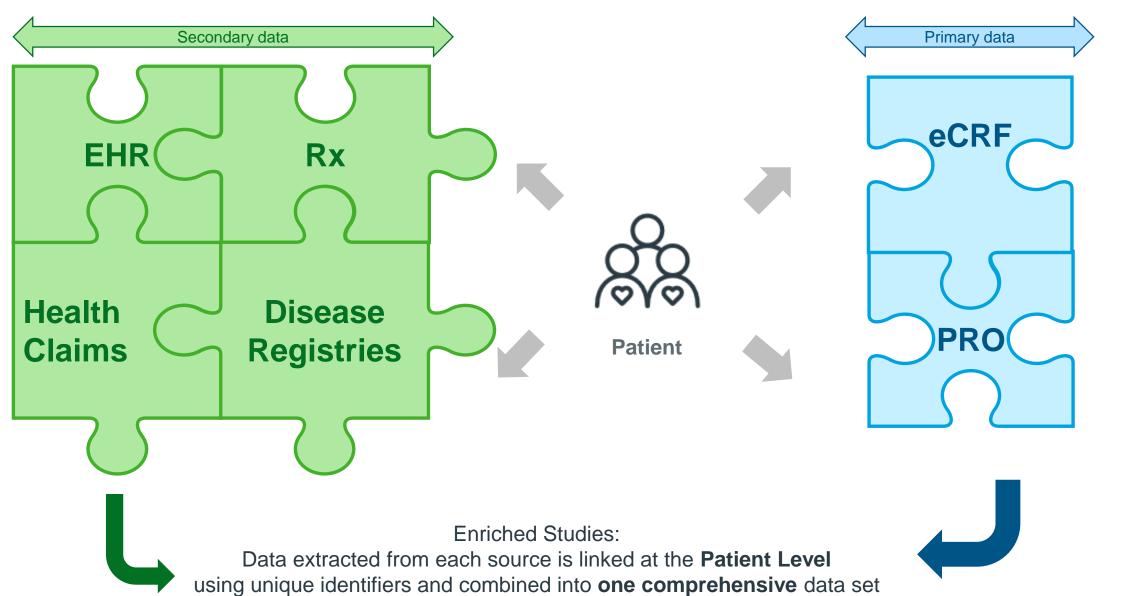


Four key data science innovations that help make data more patient-centric



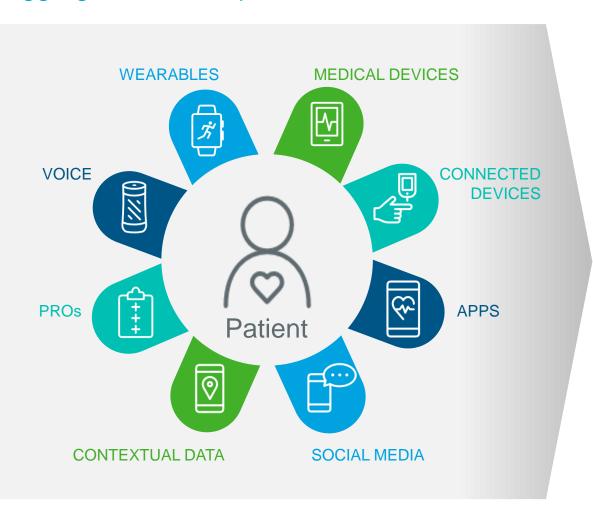
The distinction between secondary and primary data research – should we care





Connected health technologies enable better clinical research

Aggregated view of patient data



Optimising clinical research





Patient centric designs





Smaller study size



Faster timelines



Digital biomarkers



Digital therapeutics

Enabling a new model for better care delivery



Today, connected devices can serve evidence generation in several therapeutic areas













CGM = Continuous Glucose Monitoring, ECG/ EKG = Electrocardiogram, Ox = Oximetry, EEG = Electroencephalogram	Meta- bolic	CNS						Respiratory	
		MS	Depression	Parkinson's	Pain	CVOT	ONC	COPD	IPE
CGM	Х								
Actigraphy	X	X	X	X	X			X	X
ECG/EKG						Х			
Spirometry						Х		Х	Х
Blood Pressure	X			X		X		x	Х
Weight	X	Х	Х		X		X		
Vital/Heart Rate					X	X	X	x	X
Pulse Ox (SpO2)								x	X
EEG		Х	Х	X					
Tremor Detection		Х		х					

3 Link

To make genomics data work it needs to be linked across silos with Real World longitudinal patient health data



Search specific mutations across multitumour types & multiple genomic databases





Real World Data Insights

- Demographics
- Patient characterisation
- Treatment Patterns
- Outcomes



Mutation based patient profiles & characterisation

Example: Patient characterisation and demographics of patients with HER2 point mutations



A current challenge in 特区線 data science is ... **In-Hospital** that **游云帘** information is **In-Country Data** Aggregations Pharma distributed Infrastructure across silos Genomics TransMed ederated €360 genomics **Genomics OHDSI OMOP Network Agggregated**

Registries/ Academia









Key takeaways

1

Patient data is essential to achieve patient centricity and base patient-relevant decisions on sound evidence – but there are gaps that prevent widespread use

2

Enriched studies, connected health, and genomics can bridge the gaps; federated data models allow navigation of heterogeneous data sets.

To keep focus on patient centricity - keep the patient's need in mind

3

These new approaches will challenge **current evidence methodologies and processes** in many pharma companies, calling for an entrepreneurial and sharing mindset and new strategies of stakeholder engagement



Thank you

For information about the Personalised Healthcare Collaborative, please visit: https://futureproofinghealthcare.com