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HealthTech Nordic Community 27.02.2018

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Regionen siger stop: Medicinalindustrien må ikke betale lægers kurser

AF: DANIEL JØRGENSEN , DLJ@JV.DK
Publiceret 22. juni 2017 kl. 14:49

45 % af danske CXO'er forventer, at dele af deres kerneforretning vil ændre sig grundlæggende eller helt forsvinde i løbet af de næste 3-5 år på grund af den digitale og teknologiske udvikling.

A CHANGE **MAY BE JUST AROUND** THE CORNER

Kilde: PwC & DE, 2018

CIFS 14 megatrends

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Network society

Demographic development

Sustainability

Focus on health

Knowledge society

Polarization

Immaterialization

CIFS megatrends & categories

Globalization

Democratization

Commercialization

Acceleration and complexity

Individualization

Technologic development

Economic growth

What is a megatrend?

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Megatrends are a synthetic, complex aggregation of trends

Megatrend

Subtrends

Trends

Individual
Observations

Source: CIFS, 2014.

Example of trend hierarchy

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Megatrends

Subtrends

Trends

Microtrends

Fads/Crazes

- Focus on Health
- New Perceptions of Health & Wellness
- Organic Food
- Back to basics
- Stone Age Diet

9

Reducing uncertainty

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Should rarely be In analysis

Focus of the analysis

Should be considered in all Scenarios

Uncertainty

Large

Small

Small

Large

Impact

10

Burning platform

- Ageing and more years with disease
- 1% costs 30% - 10% costs 75-90%
- Comorbidity
- From "fee for service" to value based health
- Data Gold Mine – Between person and system
- Personalized health – from cradle to grave
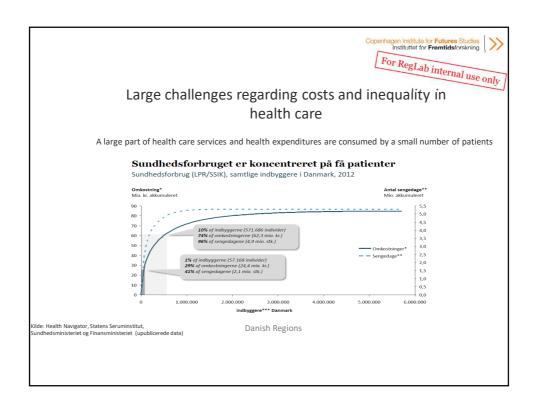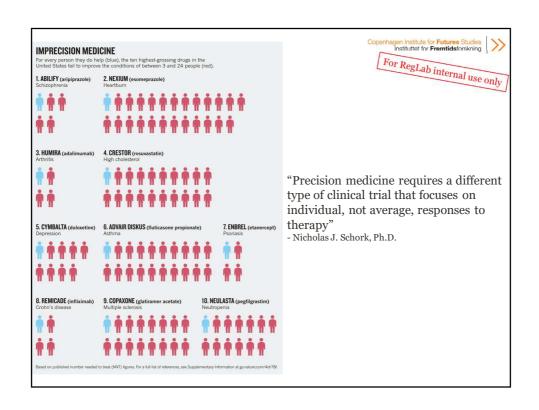- Broadening health concept and global health

≫

Fremtiden for det danske
sundhedssystem 2030

Scenarier og anbefalinger

14. august. 2017

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Megatrends influencing the future

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- Social
- Technology
- Economic
- Environmental
- Political

- Competitors (new and existing)
- Suppliers and value chain
- Labor market

Megatrends

Contextual environment

Transactional environment

Innovation, strategy and risk management

Opportunities

Threats

Scenario matrix

National consensus
(Common long-term and coherent solutions)

Comfort in Community (A)

Healthy Growth – Pride of The Nation (B)

Proven concepts (Moderate adoption and implementation of innovation)

Proactive approach (Accelerated adoption and implementation of innovation)

My Network – My Health (D)

Free Market Healthcare (C)

Liberal organization
(Relatively flexible framework conditions for actors in the healthcare system)

The specific trends and themes of the future of the Danish healthcare system can be divided into 3 subjects

Polarisation and fragmentation

Globalised and intensified health competition

Specialisation and centralisation

Acceleration in health development

New management-paradigms

Tapered health context

Active patient network

Digitalisation and mobility

Infotainment/ Diagnosetainment

Changeable health behaviour

Advanced health technology

Genetics and biotech

Individualised health solutions

Big data and bioinformatics

Instant gratification

Automation and smart technology

Changing opinions

Data security and privacy

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The Gutenbergproces of Health

- Technology & knowledge before limited for the few are now accessible for the masses.

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Welcome to the United Nations. It's your world!

عربى 中文 English Français Русский Español

SUSTAINABLE DEVELOPMENT GOALS
17 GOALS TO TRANSFORM OUR WORLD

HOME   ABOUT   SECRETARY-GENERAL   GOALS   TAKE ACTION   KEY DATES   MEDIA   WATCH AND LISTEN

Goal 3: Ensure healthy lives and promote well-being for all at all ages

Life Expectancy and Healthy Life Years

Kilde: The Lancet, 2013

CIFS 14 megatrends

Network society

Demographic development

Sustainability

Focus on health

Knowledge society

Polarization

Immaterialization

CIFS megatrends & categories

Globalization

Democratization

Commercialization

Acceleration and complexity

Individualization

Technologic development

Economic growth

New networks and realities

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Kaiser Permanente

- An app for patients to communicate with doctors, make appointments, refill prescriptions, and view medical data
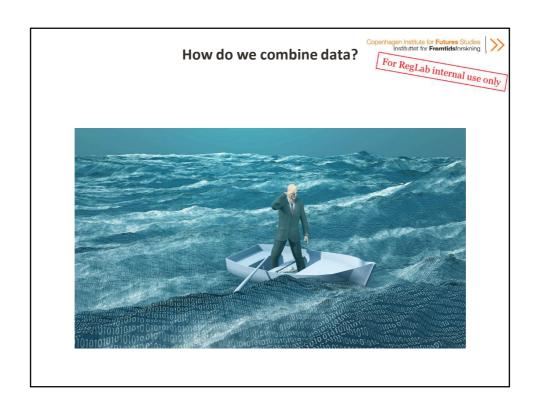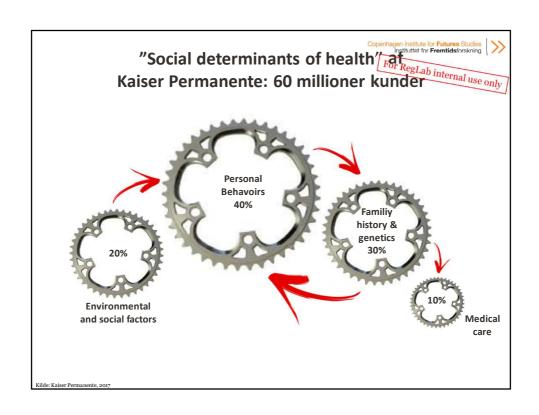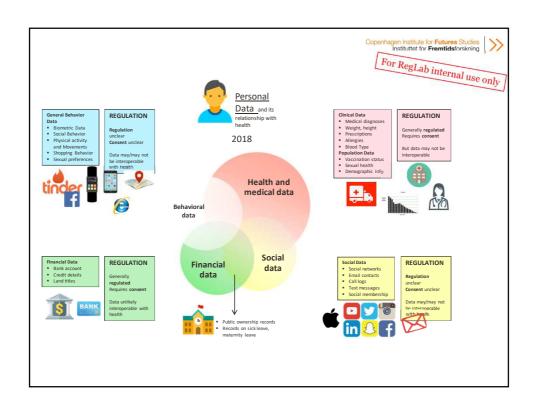- Focuses on preventative and health analytics

Source: Kaiser Permanente

Knowledge Society

How do we combine data?

"Social determinants of health" at Kaiser Permanente: 60 millioner kunder

- Personal Behavoirs 40%
- Familiy history & genetics 30%
- 20% Environmental and social factors
- 10% Medical care

Kilde: Kaiser Permanente, 2017

Hyper-specialized tecnologies

Material Science   Nanotech   Biotech   IoT   Robotics

3D Printing Computing   AI   Energy Storage   Quantum

Evolving health data ecosystem and big data

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The health data ecosystem is described in this conceptual diagram, created by the WHO eHealth unit and the Health Ethics and Policy Lab, Epidemiology Biostatistics and Prevention Institute, University of Zurich.

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Automated decion support

Technological development

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Between 2001-2008, the price of genome sequencing fell from 100 million to 1.3 million USD. By 2040, the price could be less than 25 cents.

Cost from 2016-2040, if processing power continues to double every 2-3 years (Moore's Law)

Kilde: IFF (2016) – ekstrapolering baseret på National Human Genome Institute

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Deadly gene mutations removed from human embryos in landmark study

Groundbreaking project corrects faulty DNA linked to fatal heart condition and raises hopes for parents who risk passing on genetic diseases

Scientists edit disease-causing gene mutation in human embryos

By Jacqueline Howard, CNN
Updated 1748 GMT (0148 HKT) August 2, 2017

OPINION

CRISPR GENE EDITING: SCIENTISTS EDIT HUMAN EMBRYOS TO SAFELY REMOVE DISEASE

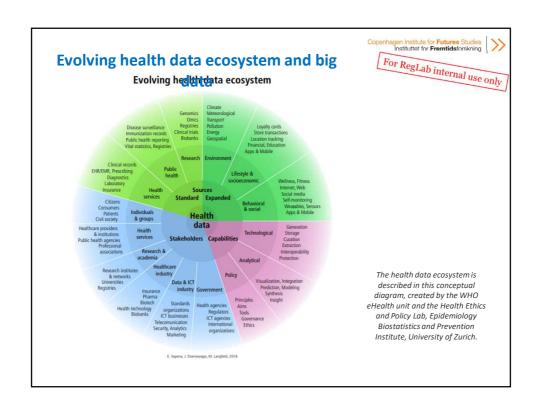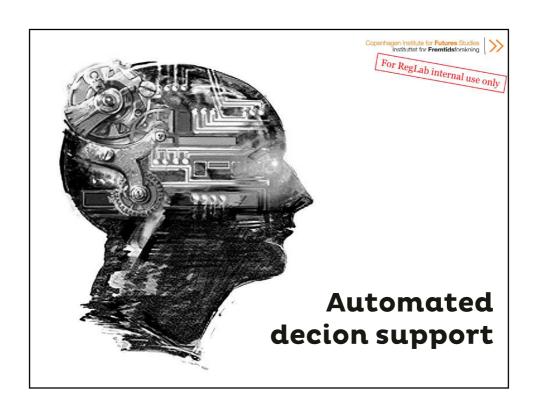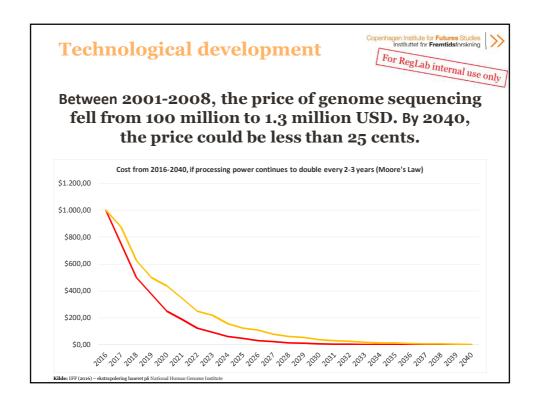BY **HELEN O'NEILL** AND **JOYCE HARPER** ON 8/3/17 AT 7:03 AM

**Early detection –
the Grail Vision**

THE PROBLEM

Cancer is a leading cause of death worldwide, with over 14 million new cases per year and over 8 million deaths annually. Cancer incidence is expected to increase more than 70% over the next 20 years. At least half of all cancers in the United States are diagnosed in Stage III and Stage IV, leading to lower survival rates. Detecting cancer at the earliest stages dramatically increases the probability of a cure and long-term survival.

THE PREMISE

Ultra-deep sequencing to detect circulating tumor DNA has the potential to be the holy grail for early cancer detection in asymptomatic individuals. Most tumors shed nucleic acids into the blood. Circulating tumor DNA is a direct measurement of cancer DNA, rather than an indirect measure of the effects of cancer.

AI, VR, AR

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Microsoft Hololens

- A headset that enables users to see through a mixed reality
- Engage with digital content and holograms in the real world
- Partnered with CAEHealthcare to improve training

Source: Microsoft Hololens

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Humber River Hospital
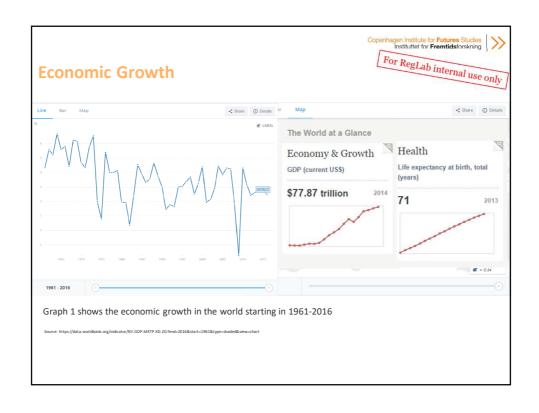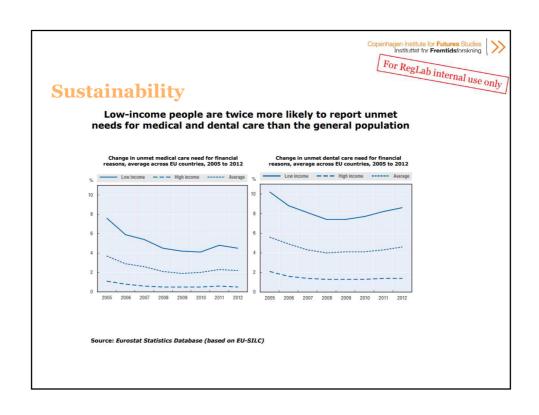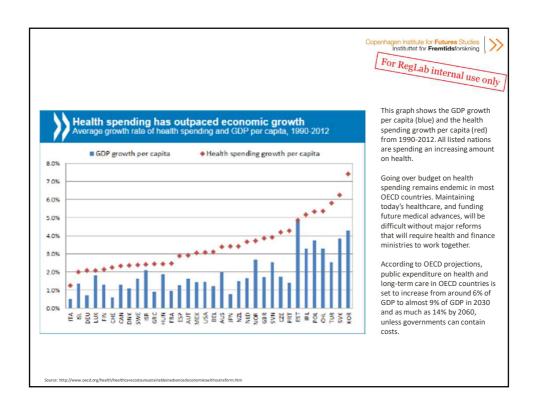
- North America's first fully digital hospital
- Integrates technology to improve efficiency and accuracy between patients and doctors/nurses

Source: Humber River Hospital

Graph 1 shows the economic growth in the world starting in 1961-2016

Source: https://data.worldbank.org/indicator/NY.GDP.MKTP.KD.ZG?end=2016&start=1961&type=shaded&view=chart

Individualization

Dynamic data.....

Personlig sundhed

Strategiskt projekt

GMS: GENOMIC MEDICINE SWEDEN

- Mer

Genomic Medicine Sweden (GMS) koordinerar och utvecklar förutsättningarna för att Sverige ska kunna ligga i framkant inom precisionsmedicin.

- Opti
  med

Genomik, det vill säga studie av vår arvsmassa, utgör en viktig komponent av precisionsmedicin och används ofta som diagnostisk metod för både ovanliga ärftliga sjukdomar och cancer. Med hjälp av ny, kraftfull sekvenseringsteknik kan redan idag hela eller delar av arvsmassan analyseras på ett kostnadseffektivt sätt.

Vad vill projektet uppnå?

- **Øge**

Genomic Medicine Sweden (GMS) arbetar för att snarast ta Sverige till ett läge där precisionsmedicin – rätt behandling till rätt patient – blir en central del av utvecklingen av framtidens hälso- och sjukvård. Sverige har

- Opd
  øjeb

förutsättningar i form av kunskap, data och viss teknisk infrastruktur, men för att erbjuda precisionsmedicin på nationell nivå måste resurserna koordineras och dessutom krävs en helt ny IT-infrastruktur.

Idag varierar tillgång och metodik för de nya sekvenseringsteknikerna mellan olika sjukvårdsregioner i Sverige. Ett av målen för GMS är därför att göra tillgången till dessa diagnostiska metoder kostnadseffektiv och likvärdig över hela landet, i enlighet med visionen om lika vård för alla.

- **Ænd**

- **Øge**
  forb
  pris

Ett mål är att etablera regionala medicinska genomikcentra (GMC) vid universitetssjukhusen. Dessa ska kompletteras av en centralt uppbyggd informatikinfrastruktur som krävs för att kunna analysera, tolka, dela och lagra de stora mängder patientdata som är förutsättningen för precisionsmedicin.

DANSKE REGIONER

PIXI-UDGAVEN

Kilde: Danske Regioner

DECLARATION OF COOPERATION

Towards access to at least 1 million sequenced genomes in the European Union by 2022

Arrival of accesable genomes

Declaration of Cooperation

Towards access to at least 1 million sequenced genomes in the European Union by 2022.

Pulling the Strands Together: MEGA Steps to Drive European Genomics and Personalised Medicine

Horgan D.[a] · Romao M.[b] · Hastings R.[c]
Author affiliations
Corresponding Author

Keywords: Genomics · Big data · Genetics · Share · Technology · Million · Research · Genome

Biomed Hub 2017;2(suppl 1):481300
https://doi.org/10.1159/000481300

| Abstract | FullText | PDF | References | Extras : 2 |

Abstract

The increasing understanding of the genome is recognised as being one of the main determinants of future improvement in healthcare. The availability of genetic data from a large number of individuals increases the ability to investigate questions across many rare and common diseases and in different populations, and also provides more information for understanding clinical care outcomes for an individual. A number of large scale genome sequencing initiatives have been launched in the last few years to try and capitalise on this

Comercialization

Convergence & new business models

Medical Industry Innovation

e)consult

- (winner of HSJ Award 2017 for Primary Care Innovation) is a tool developed for and by GPs.
- Patients can access eConsult through an app with features such as self-help and symptoms checking, medical advise 24/7, questionnaires checking for red flag symptoms mailed directly to the clinic, information on alternative healthcare providers in case immediate medical attention is required outside opening hours.

cuviva
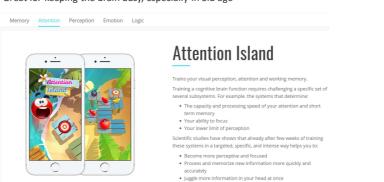
- Cuviva is a scalable platform that connects the individual with health care professionals and relatives, providing personalised health services, real-time communication, and shared patient data.
- The Cuviva solution consists of four modules offering unique possibilities to cover all aspects of healthcare and safety at home: MyCuviva, Cuviva Cloud, Cuviva Home and Cuviva Communication.
- Cuviva collects all digital healthcare and home safety services into one personalised solution, providing one source of patient information accessible to all caregiver categories and one channel for real-time communication with healthcare and family.

Medical Industry Innovation
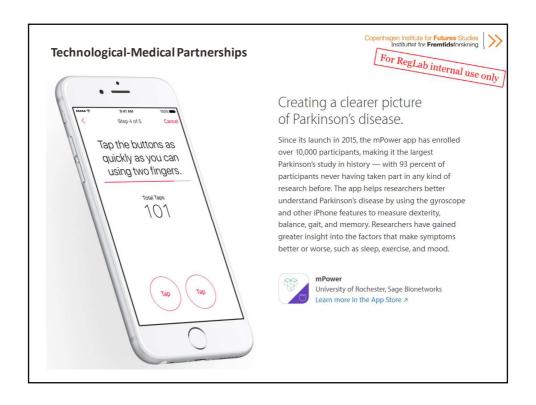
brain+
Care for your brain
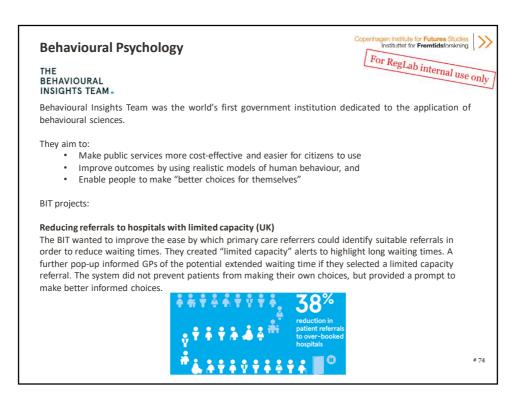
- Gamification is used to train the brain within five areas: memory, attention, perception, emotion, and logic
- Neuro-game apps work with AI that adapts the difficulty in each game to your individual ability and based on the user's performance
- The main focus lays on either recover or enhance brain power
- Great brain training apps for people suffering memory loss or similar diseases
- Great for keeping the brain busy, especially in old age

Technological-Medical Partnerships

Step 4 of 5   Cancel

Tap the buttons as quickly as you can using two fingers.

Total Taps
101

Tap   Tap

Creating a clearer picture of Parkinson's disease.

Since its launch in 2015, the mPower app has enrolled over 10,000 participants, making it the largest Parkinson's study in history — with 93 percent of participants never having taken part in any kind of research before. The app helps researchers better understand Parkinson's disease by using the gyroscope and other iPhone features to measure dexterity, balance, gait, and memory. Researchers have gained greater insight into the factors that make symptoms better or worse, such as sleep, exercise, and mood.

mPower
University of Rochester, Sage Bionetworks
Learn more in the App Store ↗

Behavioural Psychology

THE
**BEHAVIOURAL
INSIGHTS TEAM.**

Behavioural Insights Team was the world's first government institution dedicated to the application of behavioural sciences.

They aim to:
- Make public services more cost-effective and easier for citizens to use
- Improve outcomes by using realistic models of human behaviour, and
- Enable people to make "better choices for themselves"

BIT projects:

Reducing referrals to hospitals with limited capacity (UK)
The BIT wanted to improve the ease by which primary care referrers could identify suitable referrals in order to reduce waiting times. They created "limited capacity" alerts to highlight long waiting times. A further pop-up informed GPs of the potential extended waiting time if they selected a limited capacity referral. The system did not prevent patients from making their own choices, but provided a prompt to make better informed choices.

38%
reduction in patient referrals to over-booked hospitals

74

Slide 1

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Polarization

A large part of health care services and health expenditures are consumed by a small number of patients

Sundhedsforbruget er koncentreret på få patienter
Sundhedsforbrug (LPR/SSIK), samtlige indbyggere i Danmark, 2012

Omkostning*
Mia. kr. akkumuleret

Antal sengedage**
Mio. akkumuleret

10% af indbyggerne (571.686 individer)
74% af omkostningerne (62,3 mia. kr.)
96% af sengedagene (4,9 mio. stk.)

1% af indbyggerne (57.168 individer)
29% af omkostningerne (24,4 mia. kr.)
41% af sengedagene (2,1 mio. stk.)

Omkostninger*
Sengedage**

indbyggere*** Danmark

Kilde: Health Navigator, Statens Seruminstitut,
Sundhedsministeriet og Finansministeriet (upublicerede data)

Danish Regions

Slide 2

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Flere kronisk- og multisyge koster samfundet

Kr.

- De gennemsnitlige udgifter til borgere med multisygdomme er på ca. 240.000 kr. årligt.

- De gennemsnitlige årlige regionale sundhedsudgifter til en voksen borger er ca. 20.000 kr.

18-64 år (479.000)   65-74 år (198.000)   75-84 år (130.000)   85+ år (54.500)
(Antal personer med kronisk sygdom)

En kronisk sygdom   Multisyge   Befolkningen generelt

Kilde: Store udgifter forbundet med multisygdom, SSI, Afdeling for Sundhedsanalyser 21. oktober 2015

Lægepopulation 2017

Fordelingen af mænd og kvinder blandt de praktiserende læger viser, at antallet af kvindelige læger er størst blandt lægerne på 58 år eller derunder, mens billedet er omvendt for lægerne på over 58 år, hvor der antalsmæssigt er flest mænd.

JANUAR 2018

Ét sikkert og sammenhængende sundhedsnetværk for alle

STRATEGI FOR DIGITAL SUNDHED 2018–2022

FÆLLES OVERLIGGER

Nationale mål:
Bedre sammenhæng, kvalitet og geografisk lighed i sundhedsvæsenet

Individual resilience requires new mind- and skillset

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Levels of mHealth

Single use mHealth
- Single use for single user
- Consumer driven

Social mHealth
- Social networks
- Gamification apps

Integrate mHealth
- Links apps with formal healthcare system
- Tailored to multiple end users

Complex mHealth
- Integrated and predictive analytics
- Applied to complex data

Source: Deloitte US Center for Health Solutions, 2014

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HEILSUVERA.IS

digi.me

- Putting the user in control of their data

NORMALISED DATA

Source: digi.me

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Blockchain in Health Care

1. Improved Medical Record System
2. Health care financing transparency
3. **Clinical & biomedical research and innovation**

Peer-to-peer (P2P) network
1. Patient is the platform and controls access to their health data.
2. Real time processing of claims and removal of intermediary.
3. **Improves health data sharing and analysis without renouncing control.**

Unchangeable Ledger
1. Data cannot be edited by health workers or patient without authority.
2. Improved auditing and fraud detection.
3. **Traceable and time-stamped health data. Consent trail possible.**

Cryptographic algorithms
1. Increased safety of medical records.
2. Safety of health financing records preserved
3. **Secure health data sharing for population research**

Verification and Honesty
1. Medical records are signed and verifiable by source
2. Verifiable records to process claims for reimbursement.
3. **Clinical research data can be traced, to prevent dishonesty in reporting**

Availability
1. Patients can access their health data
2. Health financers can access health data
3. **Superior health data availability for research**

Decentralized Management

Data provenance

Immutable audit trail

Robustness/Availability

Security/Privacy

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Actors

Citizen

Society

Research

Healthcare system

The public sector

Business

Relevant themes

Health individual

Privacy

Sharing

Collective vs.

Big Data

Legislation

Democratisation

Access, control, ownership

predictive, preventive, personalized and participatory

A model for preparation of long term changes and scenarios using megatrends

Model Case – My Nordic Health Record Card

Opportunities from a common My Nordic Health Record Card, built on a MyData infrastructure of person centric health data management

Types of Data Sets

BIG DATA

Big Data is quantitative data at a large scale that relies on machine learning. To be analysable, it must be normalized, standardized, defined, and clustered.

THICK DATA

Thick Data is based on qualitative, ethnographic research methods that shows valuable insights of the everyday lives of users. The sample size is small.

DEEP DATA

Deep Data is generated when industry experts are transforming massive amounts of big data into useful sections, thereby excluding irrelevant information.

LONG DATA

Long Data are datasets of long historical timescales. They help understanding how and in which pace human's behaviours and decisions are changing.

4 V's of Big Data

Volume
Refers to the amount or scale of data

Variety
Refers to the diversity of data types and sources

How it works...
Big Data is a combination of the 4 V's. They occur simultaneously.

Velocity
Refers to the speed of analysis of streaming data

Veracity
Refers to the uncertainty in quality (or validity) of data

Precision Medicine
Patients are informed about precision medicine. They demand that their multi-omic, environmental and lifestyle information is incorporated into customized treatment. This becomes standard of care.

Ageing Population
Danes are living longer, and many choose to stay in their own homes. Pressure for hospital-in-the-home care grows. Financial strains escalate. Telemedicine and virtual medicine becomes widespread

Artificial Intelligence
The rise of AI challenges the very notion of Doctor in 2030. AI is used in various hospital settings, from radiologic diagnosis, histo-pathology evaluation and emergency care algorithms. AI replaces most standard functions performed by humans today.

Driving forces

Internet of Things
Technological acceleration has allowed digital sensors to be embedded into most every day objects. Real-time personal data, particularly behavioral data, is integrated into a common Nordic health portal.

Data Driven Health
Personal data management undergoes major transformation, so that health data is portable, interoperable and secure. Nordic quality registries are aligned to build evidence for health interventions.

NCD explosion
Non-communicable diseases (NCDs) such as diabetes, coronary heart disease, cancer and dementia flood the health system. It is both a response to ageing and lifestyle shifts, as well as air pollution and environmental degradation

01   02   03   04   05   06

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Ethical considerations

1. Selling vs. Sharing data

Selling is not the same as sharing. It can create incentives for fraud, as well as exploitation.

2. The Me in We

Should individuals benefit from public health interventions if they do not share their own data?

3. Winners and Losers

Those who struggle with technology will be unlikely to fulfil their data rights.

4. Anonymity vs. Precision

How can we remain anonymous in the era of personalization, precision and individuality?

5. Nudging or Coercion?

When does it slide from encouragement to persuasion to outright coercion?

6. Precision Medicine or Health?

Transitioning from a health paradigm of treatment to prevention requires rigorous and transparent goal setting.

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Navigating My Nordic Health Record Card

1 Iceland
Norway
Sweden
Finland
3
5
Denmark
2
4

Individual
- ✓ Access
- ✓ Portability
- ✓ Interoperability
- ✓ Control
- ✓ Consent

Nutrition

Disease tempo

Physical Activity

Medical History

Genomics

Alcohol intake

Physical Environment

✓ Right treatment
✓ Right dose
✓ Right time to start
✓ Right follow up
✓ Right time to stop

http://www.who.int/mediacentre/factsheets/fs355/en/

The Nordic Health Systems

Increased demand from an aging population accelerates healthcare expenses

New strategic-paradigms against more effective individual treatment

Health care sectors become more specialised and globalised

More people with one or several chronical diseases live longer with life-long treatments that cost society more

Polarisation of health

Shift of paradigms from treatment to prevention