

# 2<sup>nd</sup> Annual FUTURE OF HEALTH SUMMIT

"Where Great Minds Meet Today to Improve the Health of the Society Tomorrow"

## **Speakers and Panelists:**







## **Bernard Munos**

Consultant Consultant InnoThink, FasterCures, National Academy of Medicine, Scientist. com United States



## **Michel Goldman**

Director INSTITUTE FOR INTERDICSIPLINARY INNOVATION IN HEALTHCARE Professor UNIVERSITE LIBRE DE BRUXELLES Belgium





## Andres Metspalu

Professor of Biotechnology Head of the Estonian biobank Institute of Genomics UNIVERSITY OF TARTU Estonia





## **Hans Lehrach**

Emeritus Scientific Member MAX PLANCK INSTITUTE FOR MOLECULAR GENETICS Germany





## Vanessa **Michelini**

Distinguished Engineer, Master Inventor IBM Academy of Technology Watson for Genomics Executive WATSON HEALTH United States





## **Priit Tohver** Advisor for digital services innovation MINISTRY OF SOCIAL AFFAIRS

Estonia





**Irene Fialka** CEO INITS Austria





## Sean Hickey Interim CIO

ELYSIUM HEALTHCARE Ireland







**Julia Wilson** Associate Director WELLCOME SANGER INSTITUTE United Kingdom



Oxford Academic

Vipul Modi Transformation Lead for Innovation and Life Sciences OXFORD ACADEMIC HEALTH SCIENCE NETWORK United Kingdom





**Hannes Rothe** Assistant professor on IT-Entrepreneurship FREIE UNIVERSITÄT BERLIN Germany



SIB Swiss Institute of Bioinformatics

Christine Durinx Executive Director SWISS INSTITUTE OF BIOINFORMATICS





**Nick Sireau** Chair and CEO AKU SOCIETY United Kingdom





**Gabor Toth** CEO and Co-Founder InSimu Hungary





**Dmitry** Kaminskiy Managing Partner DEEP KNOWLEDGE VENTURES United Kingdom



LEARNING TO SLEEP

Micael Gustafsson CEO LEARNING TO SLEEP

Sweden



**Darren Atkins** Chief Technology Officer (Automation & AI) EAST SUFFOLK AND NORTH ESSEX NHS FOUNDATION TRUST United Kingdom

**MINISTR** OF HEALTH

**Martin Smatana** Director Institute of Health Policies MINISTRY OF HEALTH OF THE SLOVAK REPUBLIC Slovakia



**Mark Duman** Managing Director

MD Healthcare Consultants Ltd United Kingdom



Aintree NHS University Hospital

## Jonathan Lofthouse

Director of Improvement, Trust Corporate Executive AINTREE UNIVERSITY HOSPITAL NHS FOUNDATION TRUST United Kingdom

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## John Lambert Smith

Executive Director, Health Facilities Planning and Design HAMAD MEDICALCORPORATION Qatar



Johnson-Johnson

## Emmanuel Fombu

Global Strategy and Digital Innovation Leader Johnson & Johnson United States



AstraZeneca

**Paul Agapow** Health Informatics Director ASTRAZENECA United Kingdom

Leonids

Aleksandrovs

Belgium

www.whysummits.com





**Shafique Ur** Rehman CEO REHMAN MEDICAL INSTITUTE

Pakistan

**KONKOINFO.SK** 

**Stefan Korec** 

Oncologist

Founder Onkoinfo.sk

Slovakia



## USZ Universitäts Spitol Zürich

**Sebastian Ebert** Head of Data Management UNIVERSITY HOSPITAL ZURICH Switzerland

HeUDocl

Salah Al-Hidiq

Co-Founder

HeyDoc! United Arab Emirates



**Manish Kohli** Independent Consultant United States & United Arab emirates



**Giovanni Di** Sarro **Global Digital Solutions Business** Partner Lundbeck

Denmark





**David Smith** Professor of Laboratory Medicine and Pathology MAYO CLINIC United States



Health 2.0

EGYPT

**Yara Abo El** 

waffa

Founding Member

HEALTH 2.0 EGYPT

Egypt



**Kathy Farndon** Independent healthcare management consultant, Mentor NHS DIGITAL ACADEMY United Kingdom





Vibhor Gupta Director and Founder PangaeaData.Al United Kingdom



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## Roos van Westrhenen

Assistant Professor DEPARTMENT OF PSYCHIATRY UNIVERSITY MEDICAL UNIVERSITY MAASTRICH Psychiatrist and Clinical pharmacologist PARNASSIA PSYCHIATRIC INSTITUTE AMSTERDAM Netherlands





**Tomas Szemes** Chief Scientific Officer GENETON Slovakia







Sandra **Smieszek** Head of Genetics

VANDA PHARMACEUTICALS United States



genomic Health

## **Antonio La** Regina Head of Southern Europe, Middle East & Africa GENOMIC HEALTH

Switzerland

email: miro@whysummits.com















Christine **McNamee** 

Network Manager Wolfson Centre for Personalised Medicine UNIVERSITY OF LIVERPOOL PHARMACOGENETICS & STRATIFIED MEDICINE NETWORK United Kingdom





# CAMBRIDGE



**Philip Beer** 

Head of Translational Medicine

United Kingdom





Senior Manager Analytics Integration UCB PHARMA





Mansoor Baig Technical specialist / Solution Architect KING FAISAL SPECIALIST HOSPITAL & RESEARCH CENTER Saudi Arabia



Open Targets

Maya Ghoussaini Team Leader, Genetics Core Team OPEN TARGETS United Kingdom





Krzysztof Potempa Founder and CEO BRAINCURES United Kingdom



## DocuMental

Eduard Maron Professor of Psychopharmacology UNIVERSITY OF TARTU Founder and CEO DocuMental Estonia





Jari Forsstrom Chief Medical Officer, ABOMICS Oy Finland





Carylanna Taylor Anthropologist & Filmmaker ANYA (2019. the movie)

United States





Adama Ibrahim Associate Director, POC, Global Clinical Operations BIOGEN United Kingdom





Mats Sundgren Director Health Informatics AstraZeneca Sweden





Valdo Arnera General Manager & Scientific Advisor ERT Switzerland



Gareth Powell Business Development Officer and Patient Engagement Project Lead NIHR Clinical Research Network

United Kingdom



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Diego Herrera Head of Global Data Management and Project Information ALMIRALL Spain



Colin Bullen Consulting Lead HABITS AT WORK United Kingdom





Wojciech Smoron Asociate Global Trial Director NOVARTIS

Switzerland





Svetlana Pidasheva Senior Director, Scientific Affairs AXCELLA HEALTH United States



SANOFI Eddie Guzdar

Medical Head - Neuroscience SANOFI United Kingdom





Lucien Gazi Global Trial Program Head NOVARTIS Switzerland



benguela

Derry Heron Director BENGUELA HEALTH South Africa





Katri Langel Director of Customer Centricity snaploT Spain



## Catherine Brown Managing Director BENGUELA HEALTH South Africa



Sensyne Health

Rabia Khan VP of Systems Medicine SENSYNNE HEALTH United Kingdom









## **Jens Ulrich** Stegmann

Head of Safety and Pharmacovigilance, QPPV GSK VACCINES Belgium





## Alina Tudor Associate Director, Senior PV Physician/Deputy EU QPPV NORGINE United Kingdom



Biogen

**Ricarda Tiemeyer** Head Drug Safety BIOGEN Germany



AstraZeneca

James Whitehead Principal ASTRAZENECA Switzerland





**Philip Eichorn** Senior Director PFIZER United Kingdom

Celgene

Salvatore

**Giorgio Cicirello** 

Senior Director Safety Science & PASS, Global Drug Safety & Risk Management

CELGENE Switzerland





Kaisla Lahdensuo Chief medical officer MEHILÄINEN OY Finland



CSL Behring Biotherapies for Life"

**Mircea Ciuca** Global Therapeutic Area Head - Global Clinical Safety and Pharmacovigilance CSL BEHRING Switzerland





Pedro Lima Regions Medical Safety Head SANOFI GLOBAL Brazil

NOVARTIS

**Agnes Schubert** 

-Tennigkeit

Global Patient Safety

NOVARTIS

Switzerland

**NOVARTIS** 

Mate A. Balazs

Country Head Patient Safety

NOVARTIS

Hungary



## **Jerck**

**Matthias Bödding** Head Global Drug Safety Medicine

MERCK GROUP Germany



Deepa Arora Founder - Director CLINEXEL LIFE SCIENCES India





Francoise Sillan VP Head of Global QPPV Office PFIZER Italy





MSD

Raphael Pareschi Pharmacovigilance Associate Director MSD Brazil





Mateja Raguz DMD Pharmacovigilance Manager TEVĂ Croatia





**Jackie Roberts** 

Executive Director Regulatory, Pharmacovigilance and Medical U/IE/Malta and MENA ACCORD HEALTHCARE United Kingdom



Lambert Creuwels Senior Medical Safety Adviser LUNDBECK Netherlands



## COVINGTON COVINGTON & BURLING LLP

## Adem Koyuncu

Lawyer and Medical Doctor Partner COVINGTON & BURLING Belgium



Health entrepreneur Co-founder of VALERO CLINICAL, DOQME, INTERMISSION and LaBRIUT! Chief Patient and Head of Innovation LUDWIG BOLTZMANN INSTITUE OF HEALTH Austria







Sally Lee Senior Director Epidemiology CELGENE United Kingdom

# Digital health companies and startups:

DocuMental





Finland

Estonia

**United Kingdom** 





Slovakia

Israel

United Kingdom



United Kingdom



LEARNING TO SLEEP

Sweden



S-Case

**United States** 

Slovakia



Ukraine



Slovakia

## Media & Partners



**United States** 







**United Kingdom** 





## Monday April 27

8:50 - 16:30

Track 1 Future of Health - Academia day Track 2 Future of Health - Prevention before care

17:00 - 20:00

Joint program: Great opening ceremony

20:15

**Networking reception** 

## Tuesday April 28

8:50 - 17:30

- Track 1 Digital healthcare transformation
- Track 2 Genomics research and personalized medicine
- Track 3 Clinical trials digital toolbox
- Track 4 Patient safety Pharmacovigilance forum

18:00 - 20:00

Healthcare site visits

Anya – the movie

20:00

Networking evening program

# Wednesday

## April 29

8:50 - 17:30

Track 1 Digital healthcare – innovation

Track 2 Genomics research and personalized medicine

Track 3 Clinical trials digital toolbox

Track 4 Patient safety -Pharmacovigilance forum

## 18:00

Lab visit

20:00

Networking evening program

# Thursday

## Thursday April 30

**Optional networking trips** 

10:000 - 1:00

Option 1 Vienna trip with cultural program

Option 2 Medieval castles trip with cultural program



# Monday April 27, 2020

## Track 1 FUTURE OF HEALTH -ACADEMIA DAY

#### OPENING REMARKS OF CHAIRMAN 8:50

- 9:00 HEALTHY RELATIONSHIPS BETWEEN ACADEMIA, THE HEALTHCARE SYSTEM AND INDUSTRY FOR INNOVATION TO THRIVE Vipul Modi, Transformation Lead for Innovation and Life Sciences, OXFORD ACADEMIC HEALTH SCIENCE **NETWORK, United Kingdom**
- 9:30 THE ROLE OF UNIVERSITIES IN START-UP **ECOSYSTEMS**

Case study of forming a new entrepreneurship alliance between three of the top 5 most entrepreneurial universities in Berlin

Hannes Rothe, Assistant professor on IT-Entrepreneurship **FREIE UNIVERSITÄT BERLIN, Germany** 

SPEED NETWORKING BREAK AND 10:00 EXPO VISIT, MORNING COFFEE



## **COOPERATION WITH DIFFERENT** HEALTHCARESTAKEHOLDERS

- Academia and FUNDS/ Investors/Startup Hubs
- Academia and Hospitals
- Academia and Pharma
- · Academia and Tech companies

#### Vipul Modi, Transformation Lead for Innovation and Life Sciences, OXFORD ACADEMIC HEALTH SCIENCE **NETWORK, United Kingdom**

Christine Durinx, Executive Director SWISS INSTITUTE OF BIOINFORMATICS, Switzerland Irene Fialka, CEO, INiTS, Austria

#### 11:00 UNIVERSITY HOSPITAL RESEARCH PRESENTATIONS

6 PRESENTATIONS OF UNIVERSITIES WITH SOLUTIONS FOR HEALTHCARE OUTCOMES IN CLINICAL RESEARCH AND UTILIZING AI DATA ANALYSIS

LUNCH 12:00

#### **STARTUP PITCH: 6 Startups connected to** 13:00 universities

## Track 2 FUTURE OF HEALTH -PREVENTION BEFORE CARE

#### OPENING REMARKS OF CHAIRMAN 8:50

#### **KEYNOTE: EXPANDING THE LIMITS OF** 9:00 HEALTHY LONGEVITY

This session will focus on innovations on the individual and population level in aging, including using AI, lifestyle and public health measures. Would we live to 150? Is it even possible in this daily hectic life? How to take control of your health and aging rate? We asked well know expert.

Dmitry Kaminskiy, Managing Partner, DEEP KNOWLEDGE **VENTURES, United Kingdom** 



#### PANEL DISCUSSION: Securing the future 9:30 disrupting the pharma business model

From hospital collaboration in generics and gene testing companies conducting clinical trials, to a new wave of digital disruptors chipping away at pharma value chain, pharmaceutical companies face competition in every part of their business. Meanwhile, the industry is being pulled in two seemingly countervailing directions - through a one-to-few business model increasingly focused on specialization and targeted drugs on the one hand, and the commercial necessity of building one-to-many business models focused on patient outcomes, disease management and prevention on the other.

- · Is population health management (PHM) a threat or an opportunity for pharma, and how can pharma play in this space? Can pharma make a business out of prevention?
- Will we see players in the currently fragmented PHM ('emerging') platform of care') space coalesce into major health brands?
- With the growing firepower of big tech invested in health, will we see tech-pharma mergers in the future?
- As incursions of new players shatter the pharma status quo, what are the growth strategies pharma companies can employ to preserve to protect market profitability and maintain industry competitiveness?
- What does the disintermediation of the physician mean for pharma? · What is the next big area of pharma business ripe for disruption?

#### 10:00 WILL ARTIFICIAL INTELLIGENCE **TRANSFORM THE PREVENTIVE MEDICINE?**

- We will address the interactions between wellness and technology and where AI and machine learning might take us on the prevention journey IF we understand how to change people's behaviours.
- · Derry and Catherine would add a prologue to Colin's talk highlighting the current shortcomings of preventative programmes against the backdrop of managed care and cost control mechanisms used by funders.

#### Derry Heron, Director, BENGUELA HEALTH, South Africa Catherine Brown, Managing Director, BENGUELA HEALTH South Africa

Colin Bullen, Consulting Lead, HABITS AT WORK **United Kingdom** 

NETWORKING BREAK 10.30



Monday April 27, 2020

## 14:00 THE MOLECULAR BIG DATA REVOLUTION – RESHAPING THE LANDSCAPE OF ESSENTIAL RESEARCH INFRASTRUCTURES

Be it genomic, proteomic, genetic or clinical, with the advent of new technologies ever-larger amounts of biological data are continuously generated and collected. Interpreting such a wealth of information is becoming increasingly difficult, and very little research can be performed today without the help of bioinformatics tools, infrastructure and specialized expertise.

An academic, non-profit organization, the SIB Swiss Institute for Bioinformatics guides researchers in the life sciences through a growing mass of information. More than 7 million scientists and clinicians around the world use its resources. Its network includes more than 800 researchers, biologists, biocurators, statisticians, developers and bioinformaticians: those of the SIB itself and those of some 20 partners including the main research institutes and universities in Switzerland. Through the example of SIB, you will learn how the molecular big data revolution is reshaping the landscape of essential research infrastructures and how to benefit from this expertise to empower your advances in life sciences and health.

Christine Durinx, Executive Director, SWISS INSTITUTE OF BIOINFORMATICS, Switzerland

## 14:30 SPONSORED PRESENTATION: SUPPORTING STARTUP ECOSYSTEM THROUGH CORPORATE PARTNERSHIP

## 15:00 **KEYNOTE:** ROLE OF ACADEMIA IN THE HEALTHCARE TRANSFORMATION

- Impact of education on the economy of the country
- Importance of education of healthcare professionals enabling transformation of healthcare, mastering digital skills, pursuing patient centricity and quality of care
- Importance of research coming out of universities university hospitals connected to real words problems opposed to many startups coming out of "garage"
- University research as driver of innovation, foundation of startups that will not only help to improve healthcare outcomes but also fuel the economy of the country in the future as successful competitors in the Global economy.

#### Michel Goldman, Director, INSTITUTE FOR INTERDICSIPLINARY INNOVATION IN HEALTHCARE Professor, UNIVERSITE LIBRE DE BRUXELLES, Belgium

15:30 MEDICAL EDUCATION INNOVATION CASE STUDY

Gabor Toth, CEO and Co-Founder, InSimu, Hungary

16:00Q&A ROUNDTABLE SESSIONS WITH<br/>SELECTED SPEAKERS FROM THE DAY

16:30 CLOSING REMARKS OF CHAIRMAN

## 11:00 **KEYNOTE:** HOW BETTER SLEEP CAN GIVE PEOPLE A BETTER LIFE AND SAVE BILLIONS OF EUROS FOR SOCIETY

Bad sleep is on the WHO list of the top 10 health issues in the world, but most people suffering from sleeping disorder can be cured efficiently and drug free though online CBT in combination with live sleep coaching. Learn more about how bad sleep affects us in our daily life, the best 5 ways to sleep well and how better sleep will save costs for the traditional health care system. Micael will also talk about how they have managed to get 94 percent success rate with their patients and what to think about when you implement new digital solutions.

Micael Gustafsson, CEO, LEARNING TO SLEEP Sweden

#### 11:30 **PANEL DISCUSSION:**

Why TRUE Stories/Why Interview / WHY talks PREVENTIVE MEDICINE – IN THE WORLD OF TOP ATHLETE

- Does the sport's world using technology that we should know about?
- Is there a nutrition you have to follow to stay on the top for a long time?

## 12:00 **DIGITAL HEALTH PIONEERS:** PRESENTATIONS OF 6 DIGITAL HEALTH COMPANIES WITH SOLUTIONS FOR HEALTHCARE OUTCOMES



## 14:00 PANEL DISCUSSION: PREVENTIVE MEDICINE IN SPORT AND NUTRITION – OBESITY – NOVEL APPROACHES TO A PUBLIC HEALTH FAILURE • Why the sport and nutrition are playing the important role in our health?

We asked the experts in this area for culinary and lifestyle medicine.

## 14:30 SPONSORED CASE STUDY: MENTAL HEALTH – FROM STRESS TO BURNOUT TO MENTAL DISORDERS TO WELLBEING

• The global burden of mental illness, both in terms of human suffering and economic loss, is catastrophic and rapidly growing. Worldwide, mental health conditions affect more than a third of the world's population. How to prevent and what we can do?

## 15:00 **STARTUP PITCH: PRESENTATIONS OF 6** STARTUP COMPANIES WITH SOLUTIONS FOR HEALTHCARE OUTCOMES

16:00 CLOSING REMARKS OF CHAIRMAN



## JOINT PROGRAM

17:00	GREAT OPENING CEREMONY
17:10	WELCOME ADDRESS
17:20	CULTURAL PERFORMANCE
18:00	CONFERENCE IN A GLANCE, CHAIRMEN INTRODUCTIONS
18:30	KEYNOTE 1: PRESCRIPTION TO A REVOLUTION OR HOW TO CREATE A PATIENT-LED HEALTHCARE Roi Shternin, Health entrepreneur, Co-founder of VALERO CLINICAL, DOQME, INTERMISSION and LaBRIUT!, Chief Patient and Head of Innovation, LUDWIG BOLTZMANN INSTITUE OF HEALTH, Austria
19:00	KEYNOTE 2
19:30	KEYNOTE 3
20:00	CLOSING REMARKS
20:15	NETWORKING RECEPTION





April 28, 2020

## Track 1 DIGITAL HEALTHCARE – TRANSFORMATION

8:50 OPENING REMARKS OF CHAIRMAN



- 9:00 SPEED NETWORKING BREAK AND EXPO VISIT, MORNING COFFEE
- 9:30 **KEYNOTE:** UNDERSTANDING OBJECTIVES OF DIFFERENT PLAYERS IN THE HEALTHCARE ECOSYSTEM AND WHAT STRATEGIES THEY HAVE

In their mission to address unmet medical need and deliver differentiated products, pharma companies and other players in the sector are adapting their business models to deliver increased value. Three forces are converging to drive this change:

- Personalised Healthcare the personalisation of healthcare either to a specific individual or a group of patients
- Precision medicine a medicine designed to be of optimised efficiency or therapeutic benefit for a specific individual or a group of patients
- Smart Healthcare use of technology to improve healthcare delivery or quality of life

This session will answer what health system innovation will be needed, and how can clinical adoption by physicians and healthcare systems be encouraged?

- What are the challenges in bringing precision medicine to patients?
- What patient engagement strategies will be needed?
- What are the innovative payment models to enable more Personalised Healthcare?
- How will pharma adjust its commercial and operating model to account for the expected growth of these personal treatments in the years ahead, and is the level of personalization they entail a sustainable business model for pharma?
- How pharma and other players will address pricing challenges of precision medicine?

Bernard Munos, Consultant, InnoThink, FasterCures, National Academy of Medicine, Scientist.com United States

## 10:00 PANEL DISCUSSION: UNDERSTANDING OBJECTIVES OF DIFFERENT PLAYERS IN THE HEALTHCARE ECOSYSTEM AND WHAT STRATEGIES THEY HAVE

Bernard Munos, Consultant, InnoThink, FasterCures, National Academy of Medicine, Scientist.com United States

Martin Smatana, Director, Institute of Health Policies MINISTRY OF HEALTH OF THE SLOVAK REPUBLIC Slovakia

## 10:30 **DIGITAL HEALTH PIONEERS: PRESENTATIONS** OF 6 DIGITAL HEALTH COMPANIES WITH SOLUTIONS FOR HEALTHCARE OUTCOMES

## Track 2 GENOMICS RESEARCH AND PERSONALIZED MEDICINE

## 8:50 OPENING REMARKS OF CHAIRMAN

## 9:00 **KEYNOTE:** MAINSTREAMING OF COMPLEX GENOMIC PROFILING INTO ROUTINE CANCER CARE

- Bridging the gap between research and clinical practice is critical to unlock the full potential of genomics
- Cancer genomics holds the key to accelerating drug discovery and development
- Transitioning of current state-of-the-art knowledge and technologies in routine clinical practice facilitates genomic profiling of all cancer patients at a price that is within reach of public healthcare systems

#### Philip Beer, Head of Translational Medicine CAMBRIDGE CANCER GENOMICS, United Kingdom

## 9:30 DIGITAL HEALTH PIONEERS:

PRESENTATIONS OF 6 DIGITAL HEALTH COMPANIES WITH SOLUTIONS FOR HEALTHCARE OUTCOMES

10:30 SPEED NETWORKING BREAK AND EXPO VISIT, MORNING COFFEE



## 11:00 PANEL DISCUSSION: IMPACT OF

- GENOMICS RESEARCH ON HEALTHCARE • Understanding the role of genomics research in Pharma, Clinical Research, Drugs and Therapies Development, Healthcare and how it impacts it
- Evolution of Genomics research, fall of genome sequencing price, opportunities for genomic ventures
- Overview of BIG PHARMA activities in Genomics
- Overview of Genomics research utilizations and ventures:
   Personal Genomics (23andme, Futura Genetics, Veritas Genertcis,
- Personal Genomics (23anome, Futura Genetics, Veritas Genericis, Counsyl)
- Pharmacogenomics (MyDNA, Verge Genomics)
- Genomics combines with Artificial Intelligence (Deep Genomics, IBM Watson for Genomics, Verily Life Sciences, DeCODE)
- Precision Oncology (Foundation Medicine, Rosetta Genomics, Color Genomics, Quest Diagnostics)
- Genetic ancestry (National Geographic's ancestry test, Ancestry)
- Bioinformatics and technology enabling genome sequencing
- (Illumina, Nanopore Technologies, Edico Genome, BGI)
- CRISPR (Intellia Therapeutics, Editas Medicine, CRISPR Therapeutics)

## Antonio La Regina, Head of Southern Europe, Middle East & Africa, GENOMIC HEALTH, Switzerland

Vibhor Gupta, Director and Founder, PangaeaData.AI United Kingdom

Vanessa Michelini, Distinguished Engineer, Master Inventor IBM Academy of Technology, Watson for Genomics Executive, WATSON HEALTH, United States



April 28, 2020

11:30 LUNCH

#### **HEALTHCARE LEADERS PANEL** 12:30 **DISCUSSION: HEALTHCARE CHALLENGES AND** STEPS TO ADDRESS THEM

Tackling the fundamental problems of healthcare – Shortage of skilled workforce and quality of care. The needed transformation in the structure of healthcare fails to catch up with the rapid progress of the medical technology.

- · What infrastructure is necessary to transform healthcare?
- · How can technology help to tackle those challenges?
- How can authorities and healthcare providers better understand Tech and how it should be used and deployed, and How Tech can understand better needs of Healthcare providers and Authorities?

#### Martin Smatana, Director

#### Institute of Health Policies, MINISTRY OF HEALTH OF THE **SLOVAK REPUBLIC, Slovakia**

Vipul Modi, Transformation Lead for Innovation and Life Sciences, OXFORD ACADEMIC HEALTH SCIENCE **NETWORK, United Kingdom** 

Priit Tohver, Advisor for digital services innovation **MINISTRY OF SOCIAL AFFAIRS, Estonia** anish Kohli, Independent Consultant **United States & United Arab emirates** 

#### 13:00 **STARTUP PITCH**

PRESENTATIONS OF 6 STARTUP COMPANIES WITH SOLUTIONS FOR HEALTHCARE OUTCOMES

#### **BEST PRACTISE INTERVIEWS:** 14:00 HEALTHCARE SYSTEM DIGITALIZATION SUCCESS STORY

#### **UNITED KINGDOM**

Kathy Farndon, Independent healthcare management consultant, Mentor, NHS DIGITAL ACADEMY **United Kingdom** 

## **ESTONIA**

Priit Tohver, Advisor for digital services innovation **MINISTRY OF SOCIAL AFFAIRS, Estonia** 

NETWORKING BREAK AND EXPO VISIT, 14:30 AFTERNOON COFFEE

#### PATIENT CENTRICITY PANEL 15:00 **DISCUSSION: CONCEPT OF PATIENT CENTRICITY ACROSS HEALTHCARE ECOSYSTEM**

- In this panel session we discuss how the old paradigm of the paternalistic model of medicine is transforming into an equal level partnership between patients and professionals and how it is aided and augmented by disruptive technologies.
- Medical professionals and policy makers have a huge responsibility in involving patients as partners in designing care and decision making and guiding them in using the myriad of digital health technologies.
- We will show different examples of successful projects through Pharma, Healthcare providers and Tech companies that involved empowered patients and we will give advice to healthcare stakeholders how to successfully involve patients as partners.



- **RESEARCH ADVANCEMENTS IN UK**
- Overview of market, major players, opportunities and challenges
- Current State of technology used
- · Who does what, where, what kind of therapeutical research, what are the outcomes
- · (Academia research, Labs, Research Institutions, Pharma)
- Role of governments
- · Financing of research
- What are the main challenges for Genomics research utilization in the National HealthService?
- · What strategy is the Governments using to overcome these challenges?
- Breakthrough Project in Genomics (100.000 Genomes project, Highlights of ongoing human immune cell atlas effort, etc)

Kathy Farndon, Independent healthcare management consultant, Mentor

## **NHS DIGITAL ACADEMY, United Kingdom**

#### Julia Wilson, Associate Director WELLCOME SANGER INSTITUTE, United Kingdom

Philip Beer, Head of Translational Medicine **CAMBRIDGE CANCER GENOMICS, United Kingdom** 



## **GENOMICS RESEARCH IN** CENTRAL AND EASTERN **EUROPE CASE STUDIES: ESTONIA & SLOVAKIA**

- SLOVAKIAN POPULATION CANCER 13:00 SCREENING - HOW BIOMEDICAL STARTUP **CAN ACCELERATE ADOPTION OF GENOMICS RESEARCH IN HEALTHCARE** Tomas Szemes, Chief Scientific Officer **GENETON**, Slovakia
- **ESTONIAN GENOME PROJECT: FROM** 13:30 **BIOBANKING TO PERSONALISED MEDICINE** Andres Metspalu, Professor of Biotechnology Head of the Estonian biobank, Institute of Genomics, **UNIVERSITY OF TARTU, Estonia**

#### PANEL DISCUSSION: GENOMICS 14:00

- **RESEARCH IN CENTRAL AND EASTERN EUROPE** • (EU based - population 100m+ /Poland 38m, Hungary 10m, Czech Republic 10m, Slovakia 5m, Romania 19m, Bulgaria 7m, Croatia 4m, Slovenia 2m, Lithuania 3m, Latvia 2m, Estonia 1m/
- Non EU based population 200m+ /Russia 147m, Ukraine 42m, Belarus 10m, Serbia 7m/)
- · Overview of market, major players, opportunities and challenges
- Current State of technology used
- · Who does what, where, what kind of therapeutical research, what are the outcomes
- (Academia research, Labs, Research Institutions, Pharma)
- Role of EU, Role of governments
- · Financing of research
- Current state of international collaboration

Andres Metspalu, Professor of Biotechnology Head of the Estonian biobank Institute of Genomics, UNIVERSITY OF TARTU, Estonia Tomas Szemes, Chief Scientific Officer **GENETON**, Slovakia









Tuesday April 28, 2020

#### **SPONSORED PRESENTATION: PATIENT** 15:30 ENGAGEMENT

In this session we will illustrate case studies how different Healthcare Ecosystem players are partnering with empowered patients to build strategies that are compelling to regulators and payers. We will address how to lead patient engagements from the perspective of different Healthcare Ecosystem players from patient data analytics to mHealth interventions. We address how could patients and different Healthcare Ecosystem players work together.

#### PANEL DISCUSSION: KEY INITIATIVES 16:00 WORLDWIDE TO ADOPT PATIENT - FOCUSED **MEDICINES DEVELOPMENT - AN INTERACTIVE** UPDATE AND DISCUSSION WITH DIFFERENT **STAKEHOLDERS**

Health stakeholders agree on the importance of improving patient engagement across all phases of medicines development to treatment. What can we learn from the experience and perspectives of different stakeholders? How can we use these insights to address challenges and barriers and forge a more collaborative, connected Healthcare ecosystem engaging patients? What tools are available or in co-creation and how can we measure the impact of our Patient engagement efforts?

Stefan Korec, Oncologist, Founder Onkoinfo.sk, Slovakia

#### **SPONSORED PRESENTATION: DIGITAL** 16:30 HEALTHCARE

#### 17:00 **PANEL DISCUSSION: INVESTING IN THE FUTURE OF HEALTH**

- · As the pharma and healthcare landscape evolves, investors face both risk and opportunity.
- · How do investors pick winners in today's uncertain environment?
- Where do they see risks and opportunities emerging?
- Will investors support the industry's gradual orientation towards prevention and health management?
- · To what extent are investment decisions being driven by considerations of reimbursement models?
- Is digital health in a bubble?
- Which health-tech and digital products are showing the best ROI?
- What is the Future outlook for Investments in Digital Health?

#### 17:30 CLOSING REMARKS OF CHAIRMAN

- 18:00 HOSPITAL VISIT
- NETWORKING EVENING PROGRAM 20:00



#### **STARTUP PITCH: PRESENTATIONS OF 6** 14:30 STARTUP COMPANIES WITH SOLUTIONS FOR HEALTHCARE OUTCOMES

NETWORKING BREAK AND EXPO VISIT. 15:30 AFTERNOON COFFEE

## **GENOMICS RESEARCH IN** MIDDLE EAST

**BUILDING BIOBANK IN SAUDI ARABIA** 16:00 Mansoor Baig, Technical specialist / Solution Architect KING FAISAL SPECIALIST HOSPITAL & RESEARCH **CENTER, Saudi Arabia** 

#### 16:30 A PERSONAL 'DIGITAL TWIN' FOR EVERY **EUROPEAN CITIZEN**

DigiTwins is a large research initiative that aims at establishing a personal Digital Twin for every European citizen. The community consists of more than 200 partners from industry, academic and clinical research institutions in 32 different countries.

DigiTwins combines a transdisciplinary team of visionary scientists, clinicians, public health experts, policy makers, medical informatics experts, experts in Artificial Intelligence, experienced science management professionals, serial entrepreneurs, industry researchers and patient group representatives as well as experts from cross-cutting fields, such as economics, regulation, ethics, health insurance, data security and privacy.

Hans Lehrach, Emeritus Scientific Member MAX PLANCK INSTITUTE FOR MOLECULAR GENETICS Germanv

#### 17:00 **KEYNOTE: COMBINING AI & GENOMICS TO** ADVANCE TREATMENT AND DIAGNOSIS

Vanessa Michelini, Distinguished Engineer, Master Inventor IBM Academy of Technology, Watson for Genomics **Executive, WATSON HEALTH, United States** 

#### **PANEL DISCUSSION: DATA IN** 17:30 **GENOMICS**

- Access to data, privacy, governance, storage, integration
- · data democratisation,
- How technology for genome data and associated data analysis is transforming to meet the changing needs of healthcare.
- Processing and analysing raw genomics data to support the clinical environment.
- The importance of building a collaborative community of common interests.
- Genomic Big Data Analytics how to navigate siloed genomic data on multiple platforms and apply the data in a clinical context

Vanessa Michelini, Distinguished Engineer, Master Inventor IBM Academy of Technology, Watson for Genomics Executive WATSON HEALTH, United States

Leonids Aleksandrovs, Senior Manager Analytics Integration, UCB PHARMA, Belgium

Julia Wilson, Associate Director, WELLCOME SANGER **INSTITUTE**, United Kingdom

18:00 NETWORKING BREAK





## ANYA – THE MOVIE

## 18:15 ETHICS OF GENETIC TESTING: PANEL DISCUSSION Carylanna Taylor, Anthropologist & Filmmaker ANYA (2019, the movie), United States

## 18:35 CLOSING REMARKS OF CHAIRMAN

## 18:40 ANYA – THE MOVIE

ANYA is a contemporary sci-fi love story about a newlywed couple who turn to a scientist for help having a baby and find themselves at the center of a genetic puzzle with far reaching implications and an ethically ambiguous solution

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20:00 NETWORKING EVENING PROGRAM





April 28, 2020

## Track 3 CLINICAL TRIALS DIGITAL TOOLBOX

#### OPENING REMARKS OF CHAIRMAN 8:50

#### **KEYNOTE: CLINICAL TRIALS DATA, DIGITAL** 9:00 **STRATEGY & TECHNOLOGIES**

- What are the components of a Digital Strategy for Pharmaceutical Companies in Drug Development.
- What technologies can change the face of Clinical Trials?
- · How Digital tools play critical role in overcoming challenge to recruit and retain patients to fit the study protocol
- · The use of wearable and mobile applications to enhance patient recruitment, retention and adherence.
- What is the outlook for clinical trials, could trials be conducted entirely using measurements taken with remote devices?
- Importance of patient centric design of clinical trials. What are the changes in legislation and how to comply with new regulations?
- · Which tools allowed from regulatory are the best to motivate the patients?
- How to provide the right information about the clinical trials to the patients?
- What are the challenges for the patient recruitment and retention in rare diseases?

Valdo Arnera, General Manager & Scientific Advisor **ERT. Switzerland** 

#### PANEL DISCUSSION: PATIENT CENTRIC 9:30 **APPROACH - NEW PARADIGM AND OPPORTUNITIES IN CLINICAL DEVELOPMENT**

Clinical Development has become highly innovative, more complex and high costly. Personal Treatment Approach as well as patient Welfare and Health Care is more adopt and implement in clinical trials. From Regulatory point of view Patients Report Outcomes, Quality of life, Patients Satisfaction have become important endpoints to determine the success of treatment Patients nowadays are more Aware, Technology Driven, exposed to influx of information as well as more active in their roles and agreement to participate in clinical trials. The paradigm must be changed by the Industry: Patients do not only generate clinical data, but also play important and critical role in the Success of clinical development of any given product under development.

- Patients Role in Clinical Trials must be changed to be more active.
- · Design of any clinical trial must be shared with group of patients and or patients support group.
- · Clinical Trials are to be Tailored to Patients' Needs.
- Informed Consent Forms which are scientific by nature to written in a Laymen Language are better Reviewed and receive input from Patients suffering the investigated disease.
- Study endpoints which are to meet regulatory requirement need to also incorporate Endpoints Related to patients benefit ad welfare.
- The change in patients Centric Paradigm in Clinical trials will be further presented and discussed

Valdo Arnera, General Manager & Scientific Advisor **ERT, Switzerland** 

## Track 4 PATIENT SAFETY -PHARMACOVIGILANCE FORUM

#### OPENING REMARKS OF CHAIRMAN 8:50

#### **PANEL DISCUSSION: COOPERATION** 9:00 FOR PATIENTS SAFETY



In this session we discuss how to cooperate for better Patients Safety outcomes with other stakeholders including Pharma, regulators, healthcare providers, patient groups and technology providers

- · How to cooperate to facilitative legislation, how to cooperate for better reporting
- · Roles of the stakeholders, how to use technology and what it can do, measuring impact of Pharmacovigilance.

Christine McNamee, Network Manager Wolfson Centre for Personalised Medicine **UNIVERSITY OF LIVERPOOL, PHARMACOGENETICS & STRATIFIED MEDICINE NETWORK, United Kingdom** 

Kaisla Lahdensuo, Chief medical officer **MEHILÄINEN OY, Finland** 

James Whitehead, Principal **ASTRAZENECA**, Switzerland

Matthias Bödding, Head Global Drug Safety Medicine **MERCK GROUP, Germany** 

Mateja Raguz, DMD Pharmacovigilance Manager **TEVA**, Croatia

9:30 DIGITAL TOOLS FOR LEADING PATIENT SAFETY AND EFFECTIVENESS OF CARE IN HOSPITALS AND MEDICAL CLINICS

- Patient experience, patient reported outcomes and adverse effects measured with mobile tools
- · Nurses are alerted and contact patients who report suboptimal outcomes
- Full visibility of data to chief physicians
- · Full visibility of own data for clinicians with benchmark data on colleagues

Kaisla Lahdensuo, Chief medical officer **MEHILÄINEN OY, Finland** 

10:00 HOW ASTRAZENECA HAVE USED MEDICAL DEVISE FOR PATIENT SAFETY AND OUR APPROACH TO MONITORING THEIR SAFETY & PERFORMANCE.

James Whitehead, Principal **ASTRAZENECA**, Switzerland



10:30 SPEED NETWORKING BREAK AND EXPO VISIT, MORNING COFFEE

#### 11:00 **KEYNOTE: STATE OF PHARMACOVIGILANCE** WORLDWIDE

- What is the current state of Pharmacovigilance in EU and non-EU countries, USA, Latin America and Asia?
- How legislation helped for better health and impact on the industry?
- What are the challenges with legislation changes implementation?
- · What is the outlook for reaching Patient Safety goals and what measures are key for positive outcomes?

Pedro Lima, Regions Medical Safety Head **SANOFI GLOBAL**, Brazil



April 28, 2020

## 10:00 PANEL DISCUSSION: DIGITAL PHARMA: HOW PHARMACEUTICAL COMPANIES ARE SHIFTING THE FOCUS OF CARE TO PATIENT EXPERIENCE

In this session we will present best practice case study experience on development and use of mobile health (mHealth) technologies to be used in clinical trials and to empower patients to self manage their diseases, with continuous, realtime feedback to Patients.

**Eddie Guzdar,** Medical Head - Neuroscience **Sanofi, United Kingdom** 

**Svetlana Pidasheva,** Senior Director, Scientific Affairs **AXCELLA HEALTH, United States** 

Lucien Gazi, Global Trial Program Head NOVARTIS, Switzerland

#### 10:30 CASE STUDY: TRENDS IN ONCOLOGY PATIENT RECRUITMENT SERVICES

Delays to oncology clinical studies are often a direct result of patient recruitment challenges. Prospective selection of patients whose tumours harbour specific molecular alterations provides patients with the opportunity to be enrolled in studies of investigational agents where there is theoretically the greatest likelihood of clinical benefit. Whilst targeted treatments for cancer may be an incentive to patient participation, these tailored studies require innovative solutions to enable recruitment of eligible patients within planned time frames. Potential solutions will be exemplified based on experience in an ongoing early clinical study.

- Utility of patient matching services in oncology clinical studies
- Implementation and adoption of molecular profiling approaches for patient selection
- Site activation strategies for prospective recruitment of patients with uncommon markers
- 11:00 SPEED NETWORKING BREAK AND EXPO VISIT, MORNING COFFEE
- 11:30
   PATIENT VOICES

   Nick Sireau, Chair and CEO
   AKU SOCIETY, United Kingdom

12:00 **DIGITAL HEALTH PIONEERS: PRESENTATIONS** OF 6 DIGITAL HEALTH COMPANIES THAT PROVIDE HEALTHCARE IT INNOVATIONS FOR CLINICAL TRIALS

- 13:00 LUNCH
- 14:00 INNOVATION IN CLINICAL TRIALS: CELL AND GENE THERAPIES AS TARGETED MEDICINES. HOW TO MAKE THEM ACCESSIBLE TO ALL?

Lucien Gazi, Global Trial Program Head NOVARTIS, Switzerland



11:30

## BREXIT AND THE IMPACT ON PHARMACOVIGILANCE

While Brexit's full effect will take time to emerge, there was a consensus in the room that the healthcare industry is braced for a period of uncertainty. Two key areas of concerns came out throughout the discussion: The healthcare sector is expecting a significant impact on market access and potential disruption in the availability of life-saving products to UK and European patients. Delays are also due to the need for companies to transfer say, UK-located licenses to a EU market, move Pharmacovigilance functions, etc. which may be particularly challenging for small and mid-sized pharmaceutical companies.

Jackie Roberts, Executive Director Regulatory, Pharmacovigilance and Medical U/IE/Malta and MENA ACCORD HEALTHCARE, United Kingdom

## 12:00 BREXIT AND THE IMPACT ON

PHARMACOVIGILANCE PANEL DISCUSSION Role of the UK QPPV (access to relevant information, link to EU QPPV, UK-relevant periodic reports)

- Positioning of the UK PV system post Brexit incl. will there be a UK PSMF, ICSR reporting logistics, (future) CT directive, PV and GCP inspections
- SmPCs in Europe versus UK
- Interactions btw MHRA and EU HAs

12:30 LUNCH

## 13:30 PANEL DISCUSSION: CONSEQUENCES OF REGULATORY DEVELOPMENTS FOR THE PHARMACEUTICAL INDUSTRY ON THE PHARMACOGIVILANCE

- The EU life sciences regulatory landscape is evolving quickly and irrevocably. It is important, therefore, that companies track and monitor legislative and industry developments, as the changing environment holds significant license to operate implications for pharmaceutical and medical device companies that supply products to the EU. Although timelines continue to fluctuate, manufacturers, distributors, providers, and other stakeholders should evaluate the individual and collective impacts of new regulations and take a proactive approach to managing regulatory change.
- Overview of EU regulatory changes and what is their impact on Pharmacogivilance.
- Identification of Medicinal Products (IDMP) Data Standards, Enhanced EudraVigilance System, Falsified Medicines Directive and other key and up to date regulations. What are the next steps in Pharmacovigilance legislation?

Jackie Roberts, Executive Director Regulatory, Pharmacovigilance and Medical U/IE/Malta and MENA ACCORD HEALTHCARE, United Kingdom



April 28, 2020

## 14:30 CASE STUDY: UTILISING BIG DATA TO ENHANCE PATIENT RECRUITMENT: ANALYSING PUBLIC INFORMATION FOR FEASIBILITY AND SITE SELECTION

The path to clinical trial success is burdened with underperforming site selection, poor patient recruitment and frequent delays. Such barriers result in failures to meet targets and dwindling statistical significance. Comprehensive planning via a feasibility survey can alleviate these issues however, it has been suggested that the accuracy of a survey may be below 10%. As big data becomes more applicable in the clinical trial setting, capitalizing on the wealth of publicly available clinical data is essential.

- How clinical business intelligence platforms links trial, investigator and site information to provide a robust feasibility analysis to help address the following questions:
- Estimation of appropriate patient cohorts
- Key Opinion Leaders in the field
- Competing and historic trials across the therapeutic area
- Suitable geographic setting for a trial
- IRB and timing issues that may affect trial start-up

## 15:00 NETWORKING BREAK AND EXPO VISIT, AFTERNOON COFFEE

15:30 PATIENT ENGAGEMENT IN CLINICAL DEVELOPMENT: YOUNG PEOPLE ARE THE FUTURE

Engaging young people in the design of clinical trials: The insight that this group can bring and how their involvement can ultimately lead to better study design, recruitment and retention.

**Gareth Powell**, Business Development Officer and Patient Engagement Project Lead

NIHR Clinical Research Network, United Kingdom

## 16:00 STARTUP PITCH: PRESENTATIONS OF 6 STARTUP COMPANIES WITH SOLUTIONS FOR CLINICAL TRIALS

17:00 Q&A ROUNDTABLE SESSIONS WITH SELECTED SPEAKERS FROM THE DAY

17:30	CLOSING REMARKS OF CHAIRMAN
18:00	SITE VISIT

20:00 NETWORKING EVENING PROGRAM

## 14:00 LIABILITY ISSUES IN PHARMACOVIGILANCE

- There is always a risk that any Pharmacovigilance activity, even executed with the highest business and ethical standards, and with the highest compliance results, could be challenged, sometimes many years later. As a member of a Pharmcovigilance team, you may have to one day justify your actions in front of a group of plaintiff's lawyers, because of a claim that the company you worked for did not fulfill its mandate on patient safety.
- This presentation will explain most common Offenses that might be subject to trial and civil liability, Safety Referral procedures and liability implications, Relevance of Pharmacovigilance inspections and Pharmacovigilance audits.
- We will explain who can be personally liable and how: National Pharmacovigilance Officer, QPPV, Managing Director and Pharmacovigilance employees and what is the protection against liability cases and insurance questions.

Adem Koyuncu, Lawyer and Medical Doctor, Partner COVINGTON & BURLING, Belgium

## 14:30 PANEL DISCUSSION: EUDRAVIGILANCE PANEL - THE NEW EUDRAVIGILANCE (EV) SYSTEM - WHERE WE ARE NOW?

Lambert Creuwels, Senior Medical Safety Adviser LUNDBECK, Netherlands

## 15:00 PANEL DISCUSSION: SIGNAL

- We will be looking at the latest technology being used to pick up
- adverse events in an increasingly globalised market. Alina Tudor, Associate Director, Senior PV Physician/Deputy

## EU QPPV, NORGINE, United Kingdom

Mircea Ciuca, Global Therapeutic Area Head - Global Clinical Safety and Pharmacovigilance CSL BEHRING, Switzerland

#### 15:30 PANEL DISCUSSION: RISK MANAGEMENT



Exploring case studies across different companies to mitigate risk within PV.

Jens Ulrich Stegmann, Head of Safety and Pharmacovigilance, QPPV, GSK VACCINES, Belgium

Philip Eichorn, Senior Director, PFIZER, United Kingdom

Mircea Ciuca, Global Therapeutic Area Head - Global Clinical Safety and Pharmacovigilance CSL BEHRING, Switzerland

Agnes Schubert -Tennigkeit, Global Patient Safety NOVARTIS, Switzerland

Deepa Arora, Founder - Director CLINEXEL LIFE SCIENCES. India

16:00 NETWORKING BREAK AND EXPO VISIT, AFTERNOON COFFEE

 16:30 PANEL DISCUSSION: GOOD PHARMACOVIGILANCE PRACTICES (GVP)
 • Good pharmacovigilance practices (GVP) implementation

Ricarda Tiemeyer, Head Drug Safety, BIOGEN, Germany

- 17:00 CASE STUDY: PSURS: BENEFIT-RISK EVALUATIONS – THE PATIENT PERSPECTIVE
- 17:30 CLOSING REMARKS OF CHAIRMAN
- 18:00 SITE VISIT
- 20:00 NETWORKING EVENING PROGRAM



April 29, 2020

## Track 1 DIGITAL HEALTHCARE – INNOVATION

8:50 OPENING REMARKS OF CHAIRMAN

## 9:00 PANEL DISCUSSION: INNOVATION

- Overview of Technology Advancements transforming Healthcare
   What digitalization means
- mHealth, Al, Blockchain, IoT...
- Infeaturi, Al, Biockchain, Ior.
- Concept of Open Innovation

## Irene Fialka, CEO, INiTS, Austria

Giovanni Di Sarro, Global Digital Solutions Business Partner Lundbeck, Denmark

Yara Abo El waffa, Founding Member, HEALTH 2.0 EGYPT Egypt

- 9:30 SPEED NETWORKING BREAK AND EXPO VISIT, MORNING COFFEE
- 10:00 DIGITAL HEALTH: PRESENTATIONS OF 6 DIGITAL HEALTH COMPANIES WITH SOLUTIONS FOR HEALTHCARE OUTCOMES
- 11:00 AINTREE UNIVERSITY HOSPITAL CASE STUDY: DIGITAL TOOLS DEPLOYMENT IN HEALTHCARE Jonathan Lofthouse, Director of Improvement, Trust Corporate Executive, AINTREE UNIVERSITY HOSPITAL NHS

Corporate Executive, AINTREE UNIVERSITY HOSPITAL NHS FOUNDATION TRUST, United Kingdom

11:30 LUNCH

12:30 MOBILE APPs REVOLUTIONIZING HEALTHCARE - CASE STUDY

Salah Al-Hidiq, Co-Founder, HeyDoc!, United Arab Emirates

## 13:00 STARTUP PITCH: PRESENTATIONS OF 6 STARTUP COMPANIES WITH SOLUTIONS FOR HEALTHCARE OUTCOMES

14:00 MAKING TIME MATTER WITH INTELLIGENT AUTOMATION IN HEALTHCARE In this session, Darren Atkins, Chief Technology Officer for Automation

and AI at East Suffolk and North Essex NHS Foundation Trust (ESNEFT) will demonstrate how Intelligent Automation is saving thousands of hours and improving patient outcomes within the UK's National Health Service. He will share his learning, offer helpful advice and inspire his audience to do the same.

**Darren Atkins,** Chief Technology Officer (Automation & Al) EAST SUFFOLK AND NORTH ESSEX NHS FOUNDATION TRUST, United Kingdom

14:30 NETWORKING BREAK AND EXPO VISIT, AFTERNOON COFFEE

## Track 2 GENOMICS RESEARCH AND PERSONALIZED MEDICINE

8:50 OPENING REMARKS OF CHAIRMAN

## 9:00 KEYNOTE: SEQUENCING OVERVIEW

- opportunities, impact of human genome sequencing on the industry,
- impact on the healthcare system
- challenges
- steps to take to sequence whole nation
- Overview of sequencing market who are the main organizations doing human genome sequencing – for what kind of research – what are the outcomes
- Technology what it can do
- Who sponsors the research big pharma, government, clinics..

David Smith, Professor of Laboratory Medicine and Pathology, MAYO CLINIC, United States

## 9:30 DIGITAL HEALTH PIONEERS:

## PRESENTATIONS OF 6 DIGITAL HEALTH COMPANIES WITH SOLUTIONS FOR HEALTHCARE OUTCOMES

10:30 SPEED NETWORKING BREAK AND EXPO VISIT, MORNING COFFEE



## 11:30 **ROUNDABLE DISCUSSION:**

Audience will be divided to different groups each to focus on one disease area. Each roundtable will be lead by topic expert.

• Sequencing data for rare diseases: how to apply sequencing data to rare disease research and assess shareability

**GENOMICS in Advancing Cancer Prevention and Early Detection** 

## **GENOMICS in Rare Disease Treatment**

GENOMICS In Brain Diseases Treatment: Krzysztof Potempa, Founder and CEO BRAINCURES, United Kingdom

Eduard Maron, Professor of Psychopharmacology UNIVERSITY OF TARTU, Founder and CEO DocuMental, Estonia

12:00 LUNCH







April 29, 2020

#### **BUILDING AND DESIGNING A PATIENT** NGS' IMPACT ON DRUG DEVELOPMENT: CASE 15:00 13:00 CENTRIC HOSPITAL FOR THE FUTURE STUDY The majority of drugs that enter clinical trials fail due to the lack of John Lambert Smith, Executive Director, Health Facilities Planning and Design, HAMAD MEDICALCORPORATION efficacy. This highlights the need to explore additional sources of Qatar evidence to inform drug discovery. The completion of the human genome sequencing project, in addition to high through-put technologies, have both led to a rise in genome-wide association PANEL DISCUSSION: HOSPITAL OF THE 15:30 studies (GWAS) and whole-genome/exome sequencing experiments. FUTURE This resulted in an unprecedented explosion of knowledge on the • Key aspect from designing to operations number of genes and genetic variants that influence common complex • (patient centricity, tech deployment ..) diseases and rare mendelian diseases. In this talk, I will focus on how Shafique Ur Rehman, CEO, REHMAN MEDICAL INSTITUTE human genetics can be used to guide therapeutic target identification with a particular focus on translational data from GWAS. I will also Pakistan discuss Open Targets Consortium, a partnership between academia ebastian Ebert, Head of Data Management **UNIVERSITY HOSPITAL ZURICH, Switzerland** and industry, that integrates large-scale genetics and genomics data together with drug information to create new biological evidence and influence the way drug targets are identified, prioritised and validated. 16:00 **BUILDING ROBUST IT STRATEGY TO FULLY** AND EFFECTIVELY UTILIZE DIGITAL Maya Ghoussaini, Team Leader, Genetics Core Team **OPEN TARGETS, United Kingdom INNOVATION: CASE STUDY** Sean Hickey, Interim CIO, ELYSIUM HEALTHCARE Ireland 13:30 PANEL DISCUSSION: NGS' IMPACT ON <u>i</u> DRUG DEVELOPMENT 16:30 PANEL DISCUSSION: CURRENT STATE how NGS technologies facilitate drug development, and will present several cases where NGS workflows have had a meaningful impact. **OF DIGITAL HEALTH TECHNOLOGIES** - Understanding the application of NGS to clinical studies **DEPLOYMENT IN HOSPITALS THROUGH** DIFFERENT REGIONS, CHALLENGES AND - Discover the impact an NGS analytics platform can have on drug SOLUTIONS development - Discussion of the role of whole genome sequencing in clinical Emmanuel Fombu, Global Strategy and Digital Innovation Leader, Johnson & Johnson, United States practice and how that could be accomplished Leonids Aleksandrovs, Senior Manager Analytics Integration, UCB PHARMA, Belgium **PANEL DISCUSSION: FUTURE OF** 17.00 Sandra Smieszek, Head of Genetics **HEALTHCARE DATA VANDA PHARMACEUTICALS, United States** Martin Smatana, Director, Institute of Health Policies Philip Beer, Head of Translational Medicine **MINISTRY OF HEALTH OF THE SLOVAK REPUBLIC CAMBRIDGE CANCER GENOMICS.** United Kingdom Slovakia 14:00 **CASE STUDY: PRACTICAL ADVISE ON USING** SEQUENCING (JOINT PRESENTTION WITH **TECH PROVIDER - SPONSOR)** • Setting up a sequencing lab or outsourcing? • When to set up a lab, different tech options, and different research CLOSING REMARKS OF CHAIRMAN 17:30 scenarios, what resources to have Outsourcing options – pros and cons • Who are the main third party sequencing providers - (there will be 18:00 SITE VISIT startups or institutions, that cannot fund investment in in house sequencing - option third part sequencing - success stories of organizations doing outsourced sequencing NETWORKING PROGRAM 20:00 **STARTUP PITCH: PRESENTATIONS OF 6** 14:30 STARTUP COMPANIES WITH SOLUTIONS FOR **HEALTHCARE OUTCOMES** NETWORKING BREAK AND 15:30



EXPO VISIT, AFTERNOON COFFEE

April 29, 2020



## PHARMACOGENOMICS (IMPLEMENTATION OF PHARMACOGENOMICS TO THE HEALTHCARE SYSTEM)

## 16:00 UK CASE STUDY: BUILDING MULTISTAKEHOLDERS NETWORKS FOR ADOPTION OF PHARMACOGENOMICS IN THE HEALTHCARE

Christine McNamee, Network Manager Wolfson Centre for Personalised Medicine UNIVERSITY OF LIVERPOOL, PHARMACOGENETICS & STRATIFIED MEDICINE NETWORK, United Kingdom

## 16:30 NETHERLANDS CASE STUDY: PHARMACOGENOMICS (PGX-PSY) IN PSYCHIATRY: THE DUTCH PERSPECTIVE

In 2017 van Westrhenen started an outpatient clinic were she started to implement pharmacogenetics in psychiatric clinical practice in The Netherlands. Also, she instigated the development of a Dutch Guideline on implementation of pharmacogenomics in daily psychiatric practice. She works at Parnassia Psychiatric Institute Amsterdam where she sees new patients for pharmacogenomics n every week and delivers a personalized medication advise based on DNA and other personal characteristics. In this lecture the Dutch Guideline, experiences from the outpatient clinic, also with regard to reimbursement from insurance companies, digitization of outpatient care and international initiatives on pharmacogenomics will be discussed.

**Roos van Westrhenen,** Assistant Professor DEPARTMENT OF PSYCHIATRY UNIVERSITY MEDICAL UNIVERSITY MAASTRICH, Psychiatrist and Clinical pharmacologist, PARNASSIA PSYCHIATRIC INSTITUTE AMSTERDAM, Netherlands

17:00 HOW TO ANALYZE AND INTERPRET GENETIC DATA TO PREDICT A PATIENT'S RESPONSE TO DRUGS

Jari Forsstrom, Chief Medical Officer ABOMICS Oy, Finland

#### 17:30 PANEL DISCUSSION: PHARMACOGENOMICS

Christine McNamee, Network Manager Wolfson Centre for Personalised Medicine UNIVERSITY OF LIVERPOOL, PHARMACOGENETICS & STRATIFIED MEDICINE NETWORK, United Kingdom

**Roos van Westrhenen**, Assistant Professor **DEPARTMENT OF PSYCHIATRY UNIVERSITY MEDICAL UNIVERSITY MAASTRICH, Psychiatrist and Clinical pharmacologist, PARNASSIA PSYCHIATRIC INSTITUTE AMSTERDAM, Netherlands** 

Jari Forsstrom, Chief Medical Officer, ABOMICS Oy, Finland

## 18:00 CLOSING REMARKS OF CHAIRMAN

## 18:10 LAB VISIT

20:00 NETWORKING EVENING PROGRAM



April 29, 2020

## Track 3 CLINICAL TRIALS DIGITAL TOOLBOX

## 8:50 OPENING REMARKS OF CHAIRMAN

## 9:00 KEYNOTE: DATA MANAGEMENT IN CLINICAL TRIALS

Clinical trials can often be long, overpopulated and expensive. Data scientists can help to reduce these costs by enabling drug companies to implement:

**Data-Based Patient Selection:** Pharmas use multiple data sources – including social media and public health databases – and more targeted criteria (e.g., genetic information) to identify which populations would work best in trials.

**Real-Time Monitoring:** Companies now monitor real-time data from trials to identify safety or operational risks and nip problems in the bud. **Drug Safety Assurance:** Data scientists can even tap into side-effect data to predict whether a compound will provoke an adverse reaction before it even reaches trial.

Examples of healthcare data sources that will benefit from big data and analytics:

- Claims: are the documents providers submit to insurance companies to get paid. A key is the establishment of national standards for electronic healthcare transactions in order to improve efficiency by encouraging the widespread use of Electronic Document Interchange (EDI) between healthcare providers and insurance companies. Claim transactions include International Classification of Diseases (ICD) diagnostic codes, medications, dates, provider IDs, the cost.
- Electronic Health/Medical Record data (EHR or EMR): EHR incentive programs were established to encourage professionals and hospitals to adopt and demonstrate meaningful use of certified EHR technology. EHRs facilitate a comprehensive sharing of data with other providers and medical applications. EHRs contain the data from the delivery of healthcare which includes diagnosis, treatment, prescriptions, lab tests, and radiology. Health Level Seven International (HL7) provides standards for the exchange, integration, sharing, and retrieval of electronic health record data.
- Pharmaceutical R&D: Clinical Trials Data, Genomic Data.
- Patient behavior and sentiment data.
- Medical Device Data: Patient sensor data from the home or hospital.

**Diego Herrera**, Head of Global Data Management and Project Information, **ALMIRALL, Spain** 

## 9:30 **PANEL DISCUSSION: REAL TIME DATA** UTILIZATION IN CLINICAL TRIALS

**UTILIZATION IN CLINICAL TRIALS** With the development of miniature biosensors, sophisticated athome devices, smart pills and bottles, smartphones and health apps, monitoring a patient's health has never been easier. Pharmaceutical companies are increasingly interested in how the real-time data from these tools can be used to support R&D, analyze efficacy and increase

drug sales. In addition to knowing how their drugs are being used, companies also want to hear how customers view their products. Opinions about new drugs are often generated through patient/physician and patient/patient

experiences in a way that creates messy, unstructured data sets. However, if properly organized and analyzed, this data can be a rich trove

of information on:

- Patterns in drug-drug interactions
- What drives patients to stop taking medications
- Which patients will not stick to their prescriptions

Pharma companies that succeed in patient engagement efforts increase their chances of regulatory and commercial success

## Track 4 PATIENT SAFETY -PHARMACOVIGILANCE FORUM

8:50 OPENING REMARKS OF CHAIRMAN

## 9:00 KEYNOTE: TRENDS IN PHARMACOVIGILNACE

 Innovations in technology, access to more sources of data and increased global regulatory requirements are driving a number of new trends in the Pharmacovigilance space. Safety professionals have been under pressure to continually deliver more and increase their overall response time while utilizing either the same or declining resources. "Doing more with less" is a key tenant fueling these noted trends.

 This presentation will address the trending topics in the industry and how they are changing the industry, including Harmonization, Automation and Outsourcing. These trends will have a significant impact on Pharmacovigilance in the coming years.

Salvatore Giorgio Cicirello, Senior Director Safety Science & PASS, Global Drug Safety & Risk Management CELGENE, Switzerland

## 9:30 DIGITAL TOOLS IN PHARMACOVIGILLANCE – 3 PRESENTATIONS

## 10:00 PHARMACOVIGILANCE OUTSOURCING

Learning to work alongside vendors to be able to successfully outsource; lightening the load and increasing efficiency.

- Now 70 percent of global biopharma companies outsource at least part of their Pharmacovigilance work and its not uncommon for some emerging biotech companies to have entirely virtual Pharmacovigilance programs.
- Companies interested in pursuing outsourcing models for Pharmacovigilance must be certain that they have the right processes and training in place to effectively monitor outsourced programs, as oversight is critical to their success.
- This session will discuss Pharmacovigilance outsourcing strategies and best practices, what are the trends in outsourcing, Market segments and Outsourcing models. Learn how to better anticipate, and mitigate, the risks that may come with outsourcing.

Alina Tudor, Associate Director, Senior PV Physician/Deputy EU QPPV, NORGINE, United Kingdom

10:30 SPEED NETWORKING BREAK AND EXPO VISIT, MORNING COFFEE

## 11:00 CASE STUDY: REAL WORLD DATA, MEASURES, IMPLICATIONS AND IMPACT ON DECISION MAKING

 WHY real world data is considered as cornerstone of Pharmacovigilance? WHY is real world data and real world evidence Important in Pharmacovigilance? What are some of the key challenges of working with Real World Evidence?

- This case study will give deep insights into building decision-relevant evidence from big, real-world data.
- What are the major types of RWD? Are they "big data" and what is the role of RWD/RWE in a drug lifecycle?
- How can real-world data become real-world evidence?
- Detailed examples of how to asses four key characteristics of successful RWD analyses (Meaningful, Valid, Expedited, Transparent)

**Sally Lee,** Senior Director Epidemiology **CELGENE, United Kingdom** 



April 29, 2020

10:00

## PANEL DISCUSSION: CONNECTED HEALTH – DEVELOPMENT OF REFERRAL PLATFROMS THAT CONNECT PATIENT, HEALTHCARE PROVIDERS AND PHARMA.

## DIGITALIZATION AND E-RECRUITMENT

- Digital platforms in clinical trials and patient recruitment
- Opportunities and limitations in online patient recruitment for clinical trials
- Developing apps and novel technology for the clinical trial industry how will this change the way CRO's and Pharma companies interact with the patients and each other?
- How to make digital platforms accessible, compelling and with attractive and responsive design for the patients?
- 10:30 CASE STUDY: CONNECTED, CONTINUOUS & COORDINATED: HOW mHEALTH IMPROVES STANDARDS OF CARE AND ENABLES CONNECTED THERAPIES IN ORDER TO IMPROVE THERAPIES AND OUTCOMES Modern healthcare is undergoing an unprecedented shift from volume-driven to value-driven medicine, characterized by outcome-

volume-driven to value-driven medicine, characterized by outcomebased payment models and enabled by disruptive technologies that are decentralizing health care and engaging the patient at all stages of pharmaceutical development, sparring denial trials through post market. As more and more medical devices generate a wide variety of data, a growing Internet of Medical Things (IOMT) is enabling new care delivery models that are safe, scare, and Intelligent. We will address factors that are driving the shift toward connected, patient- centered health and how mobile connected solutions are transforming health care.

**Svetlana Pidasheva,** Senior Director, Scientific Affairs **AXCELLA HEALTH, United States** 

11:00 SPEED NETWORKING BREAK AND EXPO VISIT, MORNING COFFEE

## 11:30 PANEL DISCUSSION: CLINICAL DATA MANAGEMENT

Clinical Data Management (CDM) is a critical phase in clinical research, which leads to generation of high-quality, reliable, and statistically sound data from clinical trials. This helps to produce a drastic reduction in time from drug development to marketing. Team members of CDM are actively involved in all stages of clinical trial right from inception to completion. They should have adequate process knowledge that helps maintain the quality standards of CDM processes. Various procedures in CDM including Case Report Form (CRF) designing, CRF annotation, database designing, data-entry, data validation, discrepancy management, medical coding, data extraction, and database locking are assessed for quality at regular intervals during a trial.

## **Tools for CDM**

- Regulations, Guidelines, and Standards in CDM
- Database designing
- Data collection
- CRF tracking
- Data entry
- Data validation
- Roles and Responsibilities in CDM

Diego Herrera, Head of Global Data Management and Project Information, ALMIRALL, Spain

**Wojciech Smoron**, Associate Global Trial Director **NOVARTIS, Switzerland**  11:30 PANEL DISCUSSION: SOCIAL MEDIA & DIGITAL TECHNOLOGY

Latest trends in adverse event reporting from social media
 Mate A. Balazs, Country Head Patient Safety

NOVARTIS, Hungary

## 12:00 SPONSORED PRESENTATION: INSPECTION PROCESS, DIFFERENCES, TRENDS, PREPARATION AND RESPONDING

12:30 LUNCH

## 13:30 PRESENTATION: THE ROLE OF QPPVS

We will address the challenges QPPVS is tackling and see what is the experience of your QPPVS peers tackling similar issues and how they cope with them. Focus will be on Inspection, Quality oversight and processes, Business partner/PV Agreement management, Outsourcing and PSMF. You will discuss legal considerations for QPPVs and some practical day-to-day issues for QPPVs in different company sizes and types. It will be interest to those who need to understand more about the role, those who support the QPPV and those who may be thinking of taking on a QPPV role. It may also be of interest to any new or existing QPPVs who wish to refresh their knowledge.

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Francoise Sillan, VP Head of Global QPPV Office PFIZER, Italy

## 14:00 PANEL DISCUSSION: DATA PROTECTION: THE NEW EU REGULATION AND INITIAL EXPERIENCES

## 14:30 SPONSORED CASE STUDY: BIG DATA, AUTOMATION AND AI IN SAFETY

A key area being explored in the field to enhance work processes through automation, such as interpretation, identification and prediction, for optimum efficiency.

## 15:00 PANEL DISCUSSION: TRANSPARENCY AND PATIENT ENGAGEMENT - PROACTIVE

**PHARMACOVIGILANCE APPROACHES** Do we correctly communicate the risks of medicines and vaccines to the general public? Focus on making patients' aware of all adverse reactions and on communicating risk minimization measures.

- Pharmacovigilance approaches and patient centric innovations.
- Use of technology for Patient Engagement.
- Active engagement and capacity building with patient communities and healthcare professional bodies to support impact research

## Philip Eichorn, Senior Director, PFIZER, United Kingdom Agnes Schubert -Tennigkeit, Global Patient Safety NOVARTIS, Switzerland

Mate A. Balazs, Country Head Patient Safety NOVARTIS, Hungary

15:30 DIGITAL TOOLS IN PHARMACOVIGILLANCE – 3 PRESENTATIONS

16:00 NETWORKING BREAK AND EXPO VISIT, AFTERNOON COFFEE







April 29, 2020

12:00	DIGITAL HEALTH PIONEERS: PRESENTATIONS OF 6 DIGITAL HEALTH COMPANIES THAT PROVIDE HEALTHCARE IT INNOVATIONS FOR CLINICAL TRIALS	16:30
13:00	LUNCH	
14:00	PANEL DISCUSSION: DECENTRALIZED CLINICAL TRIALS Adama Ibrahim, Associate Director, POC, Global Clinical	17:00
14.00	Operations, BIOGEN, United Kingdom	
14:30	CASE STUDY: OPTIMISE YOUR CLINICAL TRIALS USING ELECTRONIC HEALTH RECORDS:	
	<ul> <li>We will explore healthcare and pharmaceutical sector collaborations and look at possibilities of taking advantage of EMRs to enhance pharmaceutical innovation for patient benefit</li> </ul>	17:30
	<ul> <li>New business models for using health data in emerging data eco- system</li> <li>Key governance drivers that can enhance progress and interoperability</li> </ul>	18:00
	<ul> <li>of health data points need to be in continuity</li> <li>Unlocking synergies between healthcare, payers, pharma and patients regarding the digitalization of health data</li> </ul>	20:00
	Mats Sundgren, Director Health Informatics AstraZeneca, Sweden	
15:00	NETWORKING BREAK AND EXPO VISIT, AFTERNOON COFFEE	
15:30	SnapIoT PRESENTATION – CASE STUDY Katri Langel, Director of Customer Centricity snapIoT, Spain	
16:00	<b>STARTUP PITCH:</b> PRESENTATIONS OF 6 STARTUP COMPANIES WITH SOLUTIONS FOR CLINICAL TRIALS	
17:00	MULTISTAKEHOLDERS DISCUSSION PANEL: HOW ARTIFICIAL INTELLIGENCE IS REVOLUTIONIZING CLINICAL TRIALS Rabia Khan, VP of Systems Medicine SENSYNNE HEALTH, United Kingdom	
17:30	CLOSING REMARKS OF CHAIRMAN	
18:00	SITE VISIT	
20:00	NETWORKING EVENING PROGRAM	

## 3:30 ADVERSE EVENT REPORTING - ARE YOU COMPLIANT?

This is interactive roundtable discussion with a subject matter expert. Raise your concern and issues to be directly addressed and benchmark with the experience of your peers.

 Insights on ways we can ensure AEs are being monitored and captured properly and we use all possible sources of data and we have functioning Pharmacovigilance system to be compliant with regulations.

## 17:00 PANEL DISCUSSION: PV IN EMERGING MARKETS

• Applying what we know about drug safety to the emerging markets and what we can expect for the future.

Raphael Pareschi, Pharmacovigilance Associate Director MSD, Brazil

- 17:30 CLOSING REMARKS OF CHAIRMAN
- 18:00 SITE VISIT



20:00 NETWORKING EVENING PROGRAM





## Networking and expo program

## NETWORKING MORNING COFFEE, EXPO VISIT

MONDAY TUESDAY – WEDNESDAY

10:00 - 11:00 9:30 - 11:30

## LUNCH

MONDAY TUESDAY – WEDNESDAY 12:00 - 14:00 11:30 - 14:00

CALL STANCE

## NETWORKING AFTERNOON, COFFEE, EXPO VISIT

MONDAY 16:00 - 17:00 TUESDAY – WEDNESDAY 15:00 - 17:00

## MONDAY

17:00 - 20:00	<b>GREAT OPENING CEREMONY</b>
20:15	NETWORKING RECEPTION

## TUESDAY

18:00 - 20:00SITE VISITS20:00NETWORKING EVENING PROGRAM

## WEDNESDAY

18:00 NETWORKING EVENING PROGRAM

## THURSDAY - FULL DAY TRIP - NO SESSIONS, NO EXPO

OPTION 1 10:00 - 1:00 VIENNA TRIP WITH CULTURAL PROGRAM

OPTION 2 10:00 - 1:00 MEDIEVAL CASTLES TRIP WITH CULTURAL PROGRAM

## DIGITAL HEALTH PIONEERS AND STARTUP PRESENTATIONS

MONDAY: 11:00 - 15:30

TUESDAY - WEDNESDAY: 9:30 - 17:00



# FUTURE of HEALTH

"Where Great Minds meet Today to improve the Health of the society Tomorrow."

# CONTACT US

(feel free, we are humans)

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