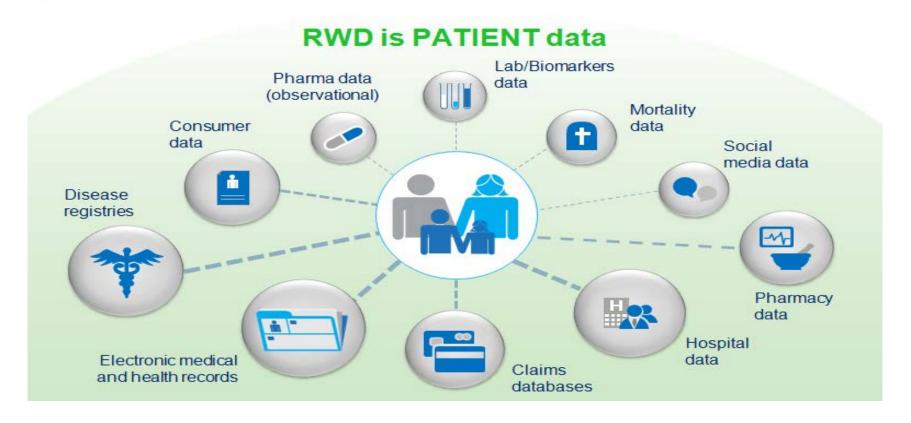


### Definition

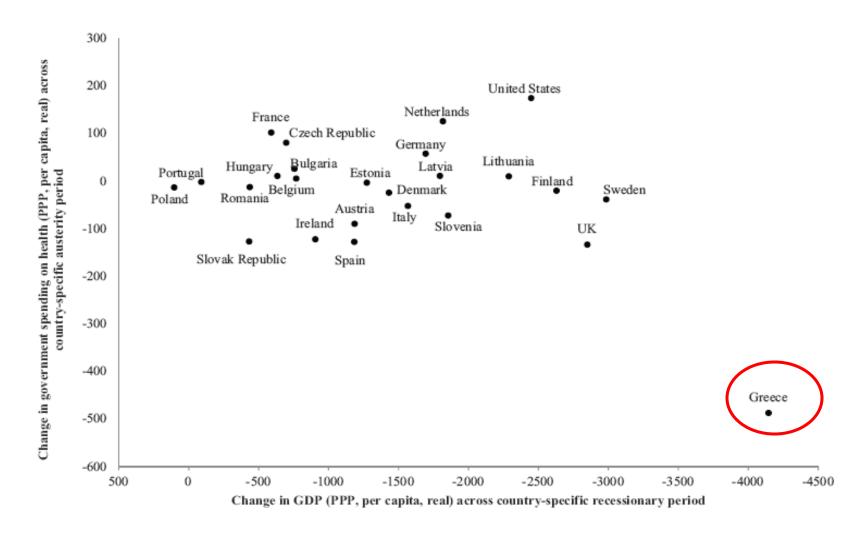
#### Real-World Data (RWD)



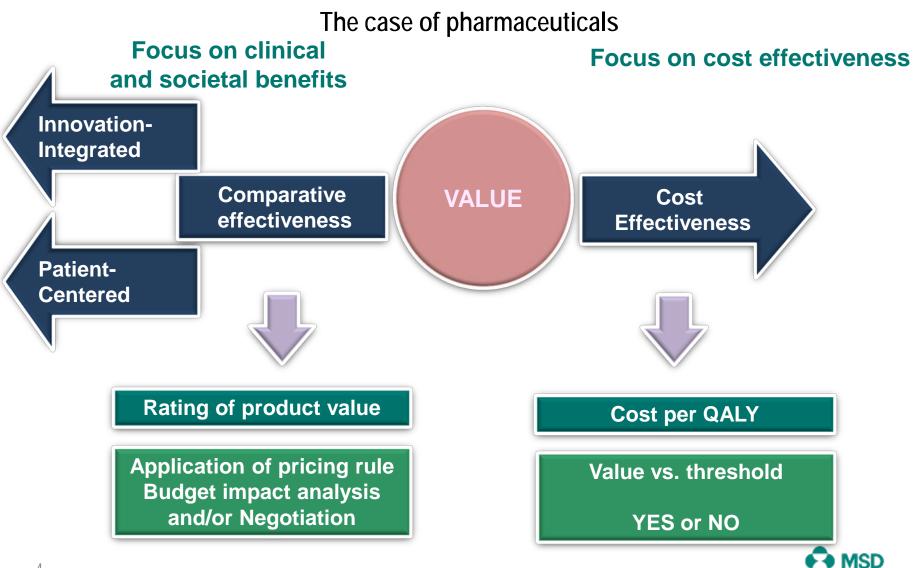
Real World Evidence: Insights generated by Real World Data using appropriate scientific and / or commercial analytics



# Greece was the country with the highest drop in GDP and Health Spending per capita during austerity times



### We need to assess the value of health care resources



### Scientifically credible debate is driven by decision-makers in healthcare and they demand four types of evidence

Safety **Efficacy Effectiveness Efficiency** Measure of Measure of **Measure of** Relationships effect under effect under adverse between costs ideal "real life" effects and benefits conditions conditions Competence of **regulators** Competence of payers/insurers Safety and Efficacy are first steps to Effectiveness and Efficiency need to be proven whilst technology/program is in use provide evidence for a new drug

Efficacy does not imply effectiveness and effectiveness does not imply efficiency, therefore decision makers use:

#### Health Technology Assessment (HTA)

which requires evidence generated through

Clinical and Outcomes (observational) Research

which requires

Reliable and Valid Data Sources

# Care pathway optimization is necessary because services are often disconnected and fail to truly address patient and provider needs

#### **Awareness**

Challenges along a patient's journey



Early symptoms not recognized

#### Diagnosis



Diagnostics not part of all check-ups or not reimbursed

Side effects and drug-drug interactions





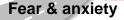
Therapy

Monitoring

Social withdrawal, avoidance, isolation



Intentional & nonintentional nonadherence

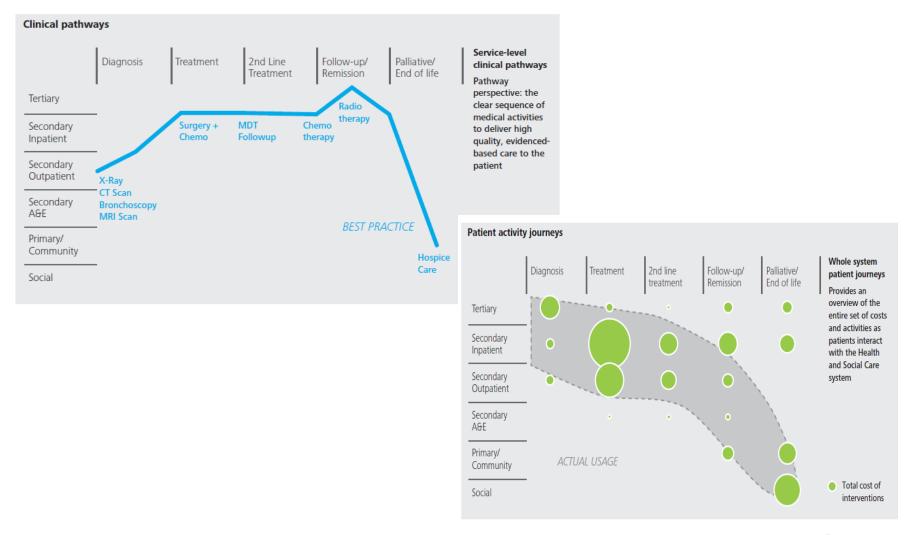




Poor physician-patient communication

Connectivity of patient records enables analytics, understanding and evaluation of inefficiencies in the system. Afterwards, co-creation of appropriate interventions to improve patient outcomes and system efficiency is feasible!

# Identifying patient care pathways and spending patterns





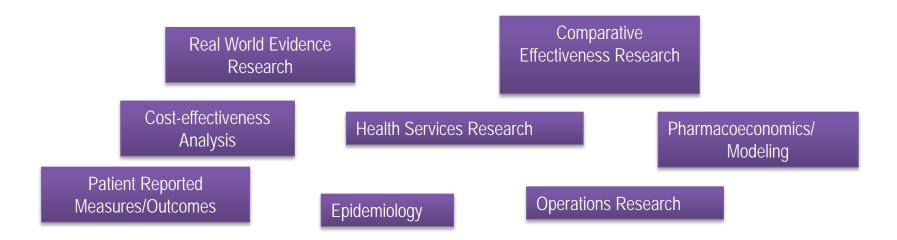
### What is Health Outcomes Research?

A scientific discipline that evaluates the effect of health care interventions on patient health status, often involving economic, clinical or humanistic outcomes\*

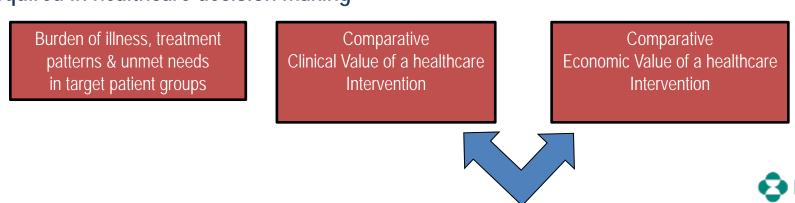


<sup>\*</sup> Definition from ISPOR Book of Terms

### Several (and many more than listed here) terms are used in connection with Health Outcomes



...but in general three key areas appear in published scientific literature and are required in healthcare decision making



Value for money/Cost-effectiveness

# Outcomes Research (OR) Methods are versatile and interdisciplinary

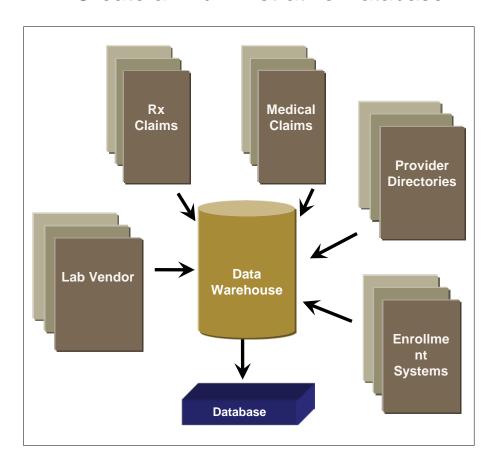
- Observational studies incl. comparative effectiveness research
  - Prospective (incidence)
  - Cross-sectional (prevalence)
  - Retrospective (case series, case-control)
- Economic Models
  - Budget impact (Rx and Dir. Medical costs)
  - Cost effectiveness
- Disease progression models
- Naturalistic trials
- Other Approaches
  - Literature reviews/synthesis & meta analyses
  - Indirect comparisons
  - Patient/Provider Preference Methods and surveys



### Key Data Sources for Outcomes Research (OR)

- Randomized Clinical Trials (combined in metaanalysis or post-hoc analyses)
- Primary Data Collection (e.g. chart reviews, surveys)
- 3. Secondary data sources
  - Disease and product registries
  - Administrative databases
    - De-identified health data collected as a by-product of patient care
    - Data are collected from insurance carriers, health plans, third-party administrators, pharmacy benefit managers, etc.
      - Claims data (INGENIX, Marketscan, CERNER, RAMQ)
      - Electronic Health Records (GE Healthcare, CPRD)

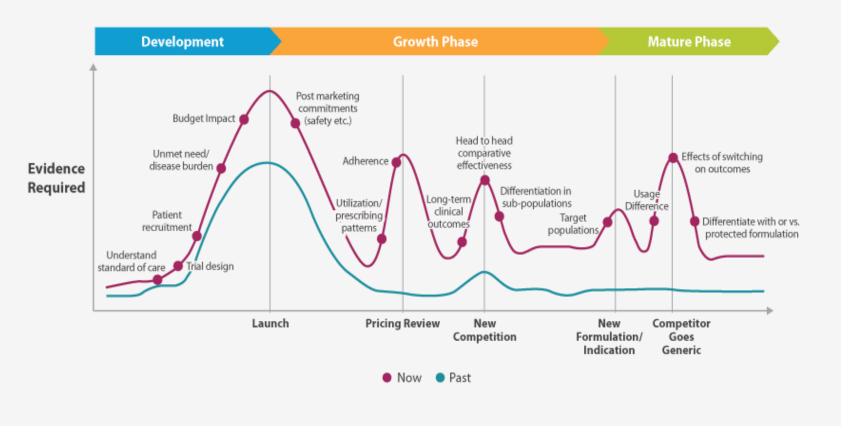
### Example of Data Resources Used to Create an Administrative Database





### Product lifecycle proves an unfailing source of RWE

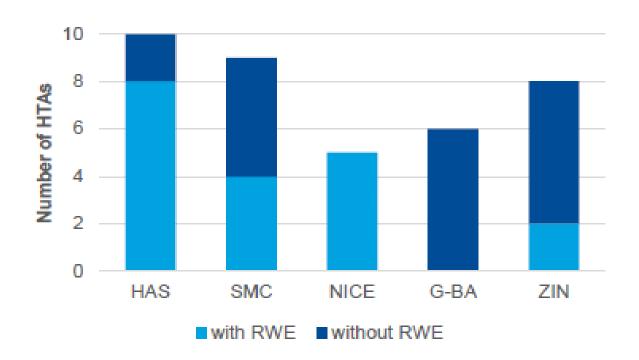
### **RWE Intensifying Across Product Lifecycle**



Source: **IMS** Health



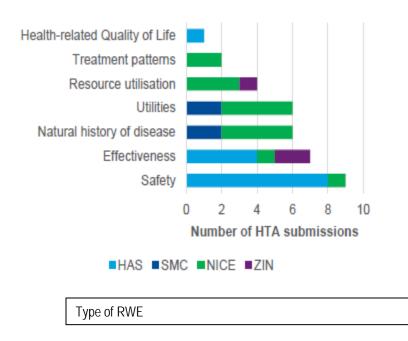
### Real World Evidence in Health Technology Assessment

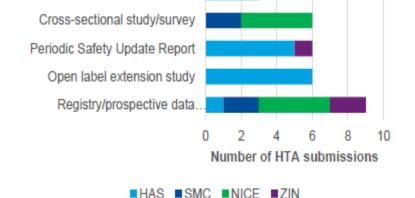


Number of HTAS between 2011 and 2014. in France, UK, Germany



# Real World Evidence data can adapt to individual country needs





Case series

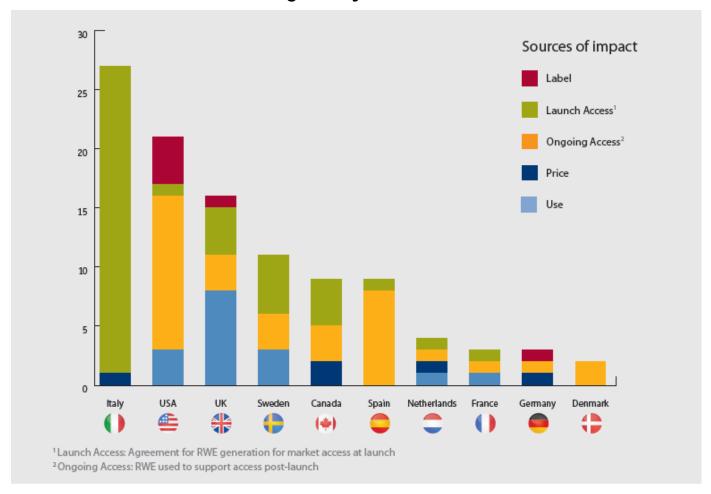
Retrospective data collection

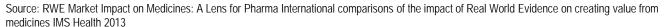
Data collection methods



# Big data development as an enabler for integrating care

#### RWE is the gateway to market access







# Η σύμπραξη Ε.Ε. και ΕΓΡΙΑ (ΙΜΙ) περιλαμβάνει και έρευνα στον τομέα των RWE





#### # Home

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01/01/1970:

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#### **GETREAL**

Incorporating real-life clinical data into drug development



#### Summary

Incorporating data from 'real life' clinical settings into drug development and associated decision-making represents a serious challenge for pharmaceutical companies, regulators, and health authorities alike. By bringing together all key stakeholder groups (namely industry, academia, regulatory agencies, reimbursement agencies, healthcare budget holders, and patient groups) to share their insights and know-how, GETREAL will develop new approaches for incorporating real life data into drug development, and pave the way for a greater consensus on this issue.

more 🕶

#### Facts & Figures

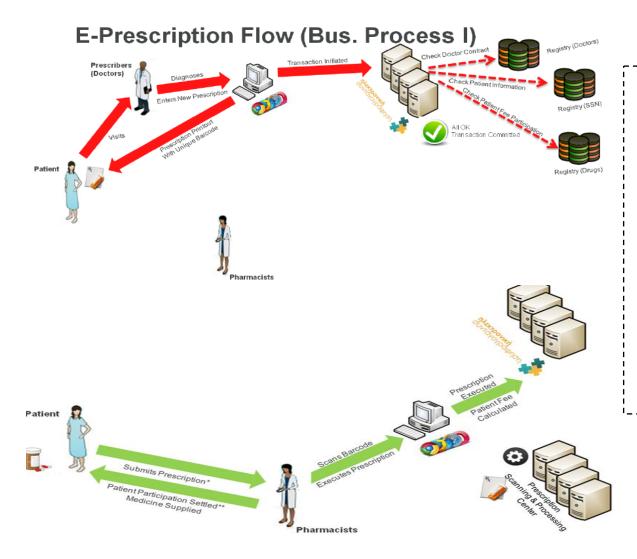
Start Date 01/10/2013 End Date 31/12/2016

Contributions €
IMI funding 8 000 000

EFPIA in kind 6 910 397 Other 2 041 883 Total cost 16 952 280



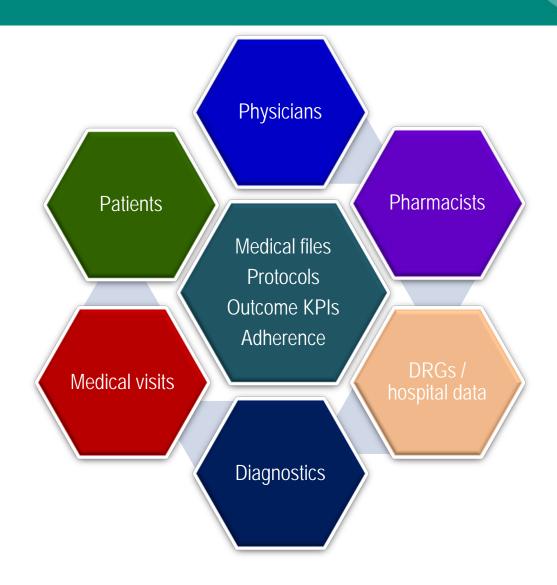
# In Greece we are unique in having developed the e-prescription system



With the addition of appropriate clinical data the GR e-prescription system can become one of the best live observational studies lab for all categories of medicines giving health in Greece an enormous investment opportunity

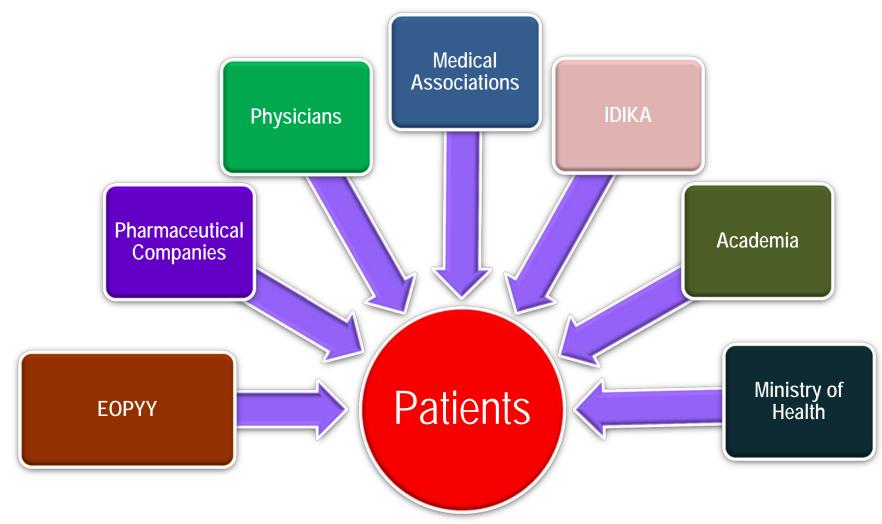


### The e-prescription database uniquely combines almost all providers, patients and services in the same platform



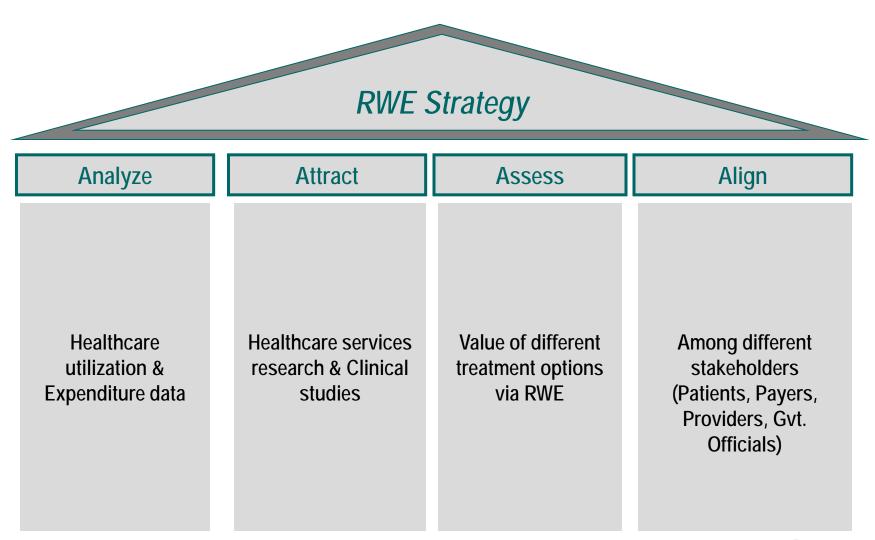


# Clever Partnerships can improve governance and data quality





### Greece as a World Class Excellence Centre for Real World Evidence





### A Vision and a Roadmap based on collaboration

- Building Capabilities
- Academia, Public Sector, Private entities
- Establishing collaborating frameworks
- Institutional Developments
- Focus on value and health care priorities
- Innovation and quality drive



### Key prerequisites for successful registry development & research are in place in Sweden

Strategic, financial and legal support by the government

Facts: A decline in clinical research, ageing population, increase in rate of HC expenditure

#### Actions taken in 2009:

- 1) A national strategy to build a world-leading platform in value based health care within 10 years was established
- 2) Annual governmental financial support to quality registries
- High quality data & oversight (annual monitoring)

"Health care needs transformational changes in order to improve productivity and secure that the broader population can get access to high quality care and

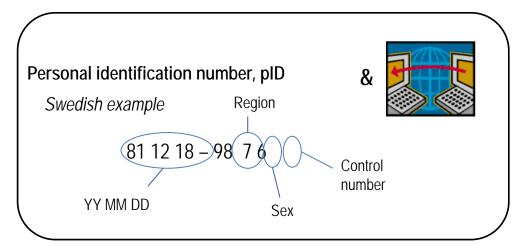
Framework for collaborative registry research



### The Swedish system

#### National longitudinal health registries

Catch patients and their use of health care



National health registries (ex)

Prescription databases

Medical birth registries

Cancer registries

Cause of death registries

Hospital discharge registries

Other data
sources

Background information,
education, income,
occupation etc.

Biobanks

Patient records

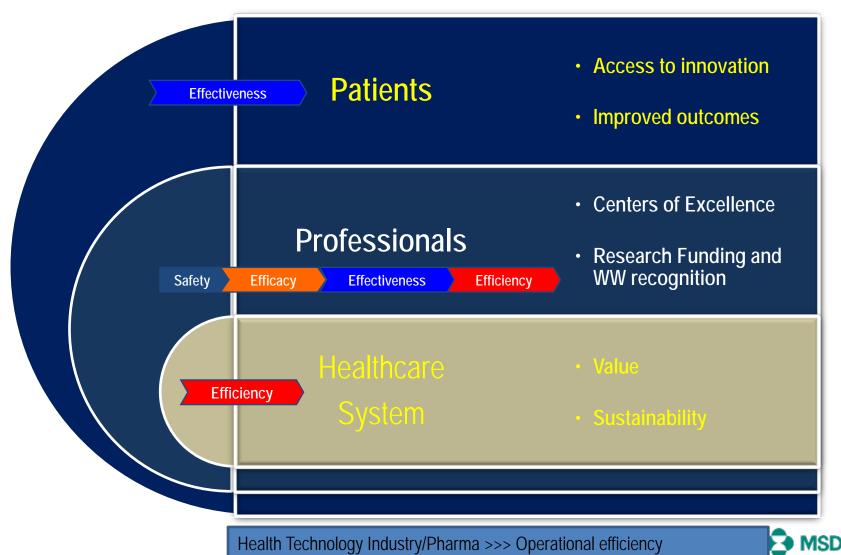
Health surveys

#### Disease-specific quality registries

- Their purpose is to improve patient care
- In Sweden approx 100 nation-wide health care disease specific quality registries



# There are benefits of developing infrastructure for observational/health outcomes research for all



Thank you

