



Ethel Symposium: Looking forwards: towards an EHDS enabling infrastructure

Do research need to get data directly from people?
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SITES ARE OVERWHELMED ...

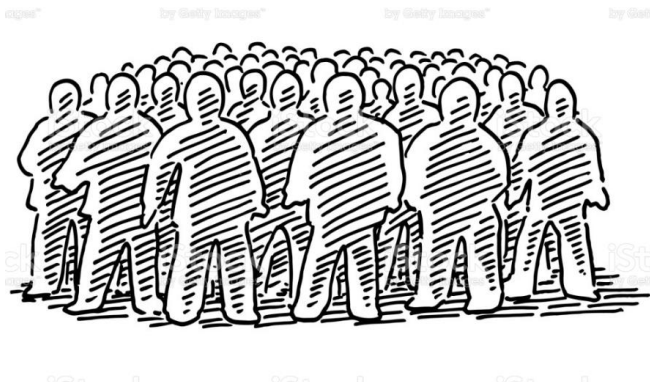


* HCP : Health Care Provider



.... HENCE RECRUITMENT DELAYS OCCUR

HOWEVER, PATIENTS ARE OUT THERE



BUT ONLY 0,2% OF THEM*
ARE BEING REFERRED TO A STUDY

THE CURRENT SOLUTION LANDSCAPE

Historical databases



- Past clinical trials records
- Electronic Medical Records (EMR)
- Market data

Lack of data accuracy :

- Outdated data
- Competition not considered
- No HCP involvement

Promotional efforts



- Advertisements and selecting call centers
- Patient engagement materials
- Patient advocacy groups
- Social media

Increased workload for HCP :

- Referral of non relevant patient
- First patient selection not done by investigators

xShare project

Explore Business use cases in which the EEHRxF and the xShare Button demonstrate value for clinical research with a patient-centric approach

3 BUCs detailed

- *Patient's prescreening*
- *Study feasibility*
- *Study support*

→ BUC situation simulation

BUC : Patient pre-screening



Paul is willing to know if a CT is compatible with their health condition



Results on the PHR :

80% of compatibility with FAST Ongoing in Hospitals Paris, Lille and Lyon

Paul IPS

37 yo
Active CD
Under Azathioprine
Interolerant to Infliximab
Iron deficiency Anemia

PHR
EEHRxF
data



Data Sharing



Prescreening
Tool'
questionnaire



BUC : Patient pre-screening



Results on the
PHR :

80% of
compatibility
with FAST
Ongoing in
Paris, Rennes
and Lyon



Data Sharing to
Paris' hospital



Critical prescreening
information validation
through additional
questions

*FAST requires 3 additional
colonoscopies*



On-site visit



Let's go for a demo !



Paul is eligible and agrees to signs the ICF and is included in the FAST study in Paris' hospital.

Subject ID 1234



Any questions?

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**WE CARE
FOR YOUR DATA**