

Bringing Humanity Back to Healthcare



Technology can seem impersonal, but it can also be the driver for enabling more personal connections with patients.

From the development of medicines by pharma companies to advancements in treatment protocols to using data to better apply therapeutic regimens, the healthcare industry is committed to using the best scientific and technological developments to improve outcomes. While this science-driven focus is crucial, it often fails to take into account the human element.

“As technologies such as robotic surgery become commonplace, healthcare delivery systems acquire and consolidate small physician practices, and we increasingly apply artificial intelligence and machine learning against vast reams of anonymized patient data, medicine has become increasingly impersonal,” says Jayson Dallas, M.D., president and CEO of Aimmune Therapeutics. “But none of us wants to feel like a dataset when we’re sitting in front of our doctor. So how do we ensure the patient experience doesn’t suffer as medicine evolves?”

One of the problems, says Laura Wilson, patient strategy at Fingerpaint, is that the fragmented healthcare environment encourages each profession to only pay attention to the most relevant body systems, symptoms, and treatments. “This fragmentation, when coupled with limited time together in an exam room, forces providers and patients to discuss and react to immediate health challenges rather than having the time to step back and think holistically,” she says.

Another problem is that physicians are constrained in the amount of time they can spend with patients, often spending much of their time on data entry activities. According to research from Medscape, 89% of physicians spend less than 24 minutes with patients.

“Humanity is being able to have more than seven minutes of quality time with your doc-

tor when you go in for a visit,” says Jim Murphy, CEO of Greenphire. “To bring humanity back to healthcare we, as an industry, need to put more focus on the patients and one-on-one interaction.”

Garth McCallum-Keeler, managing partner, chief strategy officer, at Calcium believes humanity never left healthcare, it just got subsumed by the processes of “doing medicine.” “The hyper-systematic way in which day-to-day medicine is practiced generally does not allow HCPs the time to know the patient, know the nuances of the patients’ concerns and needs, and is designed to quickly and effectively narrow the range of treatment options appropriate to the patient,” he says. “It is efficient, but neither the patient nor the HCP walk away feeling like a relationship was built, only that a box was checked. Likewise, marketing efforts are designed at creating connections — often emotional — but at a generalized level that will work across a specific segment of the customer base. The intention is to connect to the individual, but primarily as a way to activate them. In both cases, humanity has not been lost, but it exists at an ephemeral depth and duration.”

Roberto Ascione, founder of Healthware International, also believes that humanity hasn’t left healthcare, but the relationship between patient and physician has undergone a lot of changes over the years. “These changes have been driven by many external pressures, not least of which is the cost of delivering care, the resulting shrinking of time spent between doctor and patient, and the commodification of services overall,” he says.

For some, the problem is very much about profit vs. patient. “To bring humanity back to healthcare, we would need to decrease profit motives by lessening or removing them altogether,” says Lori Styles, senior medical director at AbbVie.

Craig Lipset, founder of Clinical Innovation Partners, says the market gets the healthcare system that economic incentives are aligned to drive. “If we provide financial incentives for treating sick people, then we have today’s sickcare system,” he says. “If we want healthcare that includes humanity, then we should align incentives, such as using patient-reported satisfaction and feedback in a transparent way.”

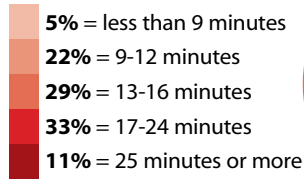
A Holistic, Patient-Focused Approach

The faceless, nameless healthcare industry has been the proxy for all things wrong with healthcare, says Elyse Margolis, practice leader, healthcare, at W2O. Bringing humanity back starts with bringing patients to the table.

“The good news is that efforts are underway that are moving things in the right direction,” Ms. Margolis says. “We are starting to see industry and the FDA seek greater patient input in clinical trial design as evidenced by the Patient Focused Drug Development (PFDD) movement, where patient community inputs are factored in at the trial design stage rather than once a trial is underway. Additionally, entities such as the Institute for Clinical and Economic Review (ICER) are being called to the mat to put patients at the center of their healthcare value framework models.”

Kathi Henson, chief operating officer, pa-

Amount of time U.S. primary care physicians spent with each patient as of 2018



Source: Medscape

tient services and chief patient officer, Ever-sana, says the FDA has stepped up by not only incorporating the voice of the patient into the drug approval process, but also with digital health innovation to ensure more timely, safe and effective access for patients. “It will be up to state governments to do the same by ensuring that pharmacy regulations do not prohibit access,” she says. “For service providers to be successful, they will need to continue to invest in technologies that reduce strain on physicians, give patients more access to real-time information, and streamline access to patients no matter where they are. For all stakeholders to be successful they must continue to make strides in incorporating the voice of the patient in everything they do.”

According to Robert Goldman, Ph.D., head, global clinical research and medical affairs, Sunovion Pharmaceuticals, the shift to a more patient-driven approach has led those involved in the patient journey — industry, insurers, healthcare providers, pharmacy providers — to try to better understand the perspective of the patient.

“It is incumbent upon the pharmaceutical industry to translate the results of clinical trials in a way that is easier for patients to understand and to work with patients, care partners, and advocacy organizations to help bring the patient perspective earlier into the drug development process,” Dr. Goldman says.

Ms. Henson says as much as she likes to believe we are starting to see the shift from treatment to prevention, she also believes the industry is experiencing a shift to patient-centered care. “It is imperative that all key stakeholders in the healthcare continuum connect with patients and incorporate their voice into the treatments and services provided,” she says. “The opportunities to do so exist — from the time of drug development with manufacturers to drug approval with the FDA, to commercialization and access with service providers. Patients are becoming better consumers of healthcare, and are taking more

interest in their overall health, demanding that information is more readily available to them. Patient communities and advocacy groups are more empowered and engaged than ever before. We see manufacturers engaging patients in the drug development process, particularly in rare disease. Manufacturers will need to ensure that patient-centricity is more than just talk.”

Ms. Wilson says it is encouraging to see the ways that patients and care partners are starting to have a voice in defining meaningful outcomes from clinical trials and/or genuinely helping to co-create valuable education and support programs with pharmaceutical companies. “Listening to the voice of the patient can help us understand, empathize, and respond in ways that truly reflect the innate humanity of healthcare,” she says.

“We must keep in mind that no two humans are the same and our whole approach, from diagnosis through treatment, must reflect this tenet,” says Kevin Hrusovsky, president, chairman, and CEO of Quanterix.

While precision medicine allows researchers and care providers to tailor care to the individual, personalized treatments are too costly for the average patient, Mr. Hrusovsky says.

“By focusing on prevention, we can fundamentally transform the way we view medicine,” he says. “Resources can be funneled into preventative strategies and technologies that address the earliest signs of disease.”

Matt McNally, CEO of Outcome Health, says the industry needs to commit to better content designed to support patients in each room and stage of their journey at the point of care. “We need to put the heart back into a world that is overly focused on technology, data, and products,” he says. “Determining from the start how something can support patients, both rationally and emotionally, is hard work. Those communicating with patients, caregivers, and providers need to understand how it feels and what is desired to create a truly relevant and meaningful experience.”

Dr. Dallas says Aimmune has found that connecting with patient advocacy groups is enormously helpful. In fact, the company’s roots are in the advocacy community.

“Aimmune was founded in 2011 by a community that was frustrated with the lack of progress in developing treatments for any kind of food allergy,” he says. “As the voice for large numbers of patients, advocacy groups bring powerful insights since they don’t just represent patients with specific conditions or needs, they are those patients. We are continually learning from the experiences of our patients — from improving clinical trial design,

The Human Perspective



ROBERTO ASCIONE
Healthware Group

I believe technology has the ability to enhance and improve the doctor/patient relationship in many ways.



JENNIFER BUTLER
Medisafe

Digital therapeutics has opened a new horizon for putting humanity back into healthcare, which is demonstrating promising outcomes for patients.



OLIVIER CHATEAU
Health Union

By marrying technology and data with methods of connecting with people on an emotional and human level, companies put themselves in a better position to help to deliver the best health outcomes.



DR. JAYSON DALLAS
Aimmune Therapeutics

We are developing therapies that will change medical practice and re-write medical textbooks. The key, however, is to always ensure that the patient and his or her family is at the center of everything we do.



DR. ROBERT GOLDMAN
Sunovion

There must continue to be empathy and continued commitment to improving the quality of human life.



KATHI HENSON
Eversana

It is imperative that all key stakeholders in the healthcare continuum connect with patients and incorporate their voice into the treatments and services provided.



KEVIN HRUSOVSKY
Quanterix

We have an unbelievable number of digital health tools at our disposal, from artificial intelligence to sleep monitors, which can create a more personalized, human-driven approach and provide the foundation for true change.



CRAIG LIPSET
Clinical Innovation Partners

If we want healthcare that includes humanity, then we should align incentives, such as using patient-reported satisfaction and feedback in a transparent way.

The Human Perspective



DEBORAH LOTTERMAN
precisioneffect

To infuse more humanity into the extraordinary care that is being delivered today, we need to embrace the advances and technologies that allow us to deliver it.



ELYSE MARGOLIS
W2O

Humanity in healthcare means moving the patient from the examining table to the head of the table, and we've never been more equipped as an industry to make that happen.



GARTH MCCALLUM-KEELER
Calcium

Humanity never left healthcare, it just got subsumed by the processes of "doing medicine."



MATT MCNALLY
Outcome Health

We have a responsibility to think beyond just the place where messages are delivered, to take into account the raw, authentic emotions that happen during these most fragile moments of the journey.



JIM MURPHY
Greenphire

Specifically for clinical trials, there should be a greater emphasis placed on appreciating the time, effort, and sacrifice patients give in order to participate in a study.

to making our packaging more convenient, to how best to communicate. They are eager to help and we welcome that dialogue."

Mr. McCallum-Keeler says one area where humanity has dominated the practice and discourse of medicine is in the ultra-orphan space. "The needs of the affected individuals are so acute, are so challenging, and are so personal, that all members of the HCP and patient community are entwined — the sharing and interconnectedness allows for deeper levels of empathy and emotional connectedness," he says. "In these communities, the needs of each patient take precedence over everything else — the humanity and dignity of the patient are never lost. How can we reclaim humanity in healthcare? Listen to those affected and allow their stories, in turn, to have a lasting effect on us."

According to Olivier Chateau, co-founder and CEO of Union Health, it's also important to reach past the patient advocates and bring in perspectives from the average person living with chronic health conditions.

Technology: Cause or Cure?

The most transformational way to bring humanity back to healthcare is to balance out the influx of algorithms and data sources with the emotional components of truly living with a chronic health condition, Mr. Chateau says. "This starts by remembering that no two people with the same condition have the same patient journey," he says. "Algorithms can be beneficial for determining the needs of a majority of people or a generalized audience, but the truth remains that no algorithm can accurately capture the nuances of an individual journey. By marrying the burgeoning capabilities of technology and data with methods of connecting with people on an emotional and human level, companies put themselves in a better position to help to deliver the best health outcomes."

While the days of home visits by doctors are over, digital interfaces with professionals or programs to provide personal support and guidance offer the personal connection to support patients where they are in their unique journey on therapies, says Jennifer Butler, chief marketing officer at Medisafe. "These personal connections can now be established beyond the office visits supporting patients in time of need — whether that's in the middle of the night with a telehealth conference call, a chatbot session for mental health support, or digital medication management support guiding a patient through a first injection," she says. "Digital therapeutics have opened a new horizon for putting humanity back into healthcare, which is demonstrating promising outcomes for patients."

According to Mr. Ascione, technology can take over some of the more tedious tasks doctors face today, so that their focus can be solely on treating their patients, which was what inspired them to become doctors in the first place. "Technology can also assist doctors by helping to monitor patients dealing with chronic illnesses between visits and allow them to reach out if warning signs are identified based on changes in biometric data collected remotely," he says. "This can help patients and their caregivers feel more cared for and humanize the relationship between patients and their healthcare providers."

Technologies can infuse more humanity into the extraordinary care that is being delivered today, says Deborah Lotterman, chief creative officer at precisioneffect. For example, she says the Internet of Healthcare Things will allow clinicians and larger networks of providers to detect minute changes in status and appropriately titrate medication and behavior recommendations. "With technology able to shoulder a greater share of observation and calculation, front-line healthcare providers will need to be trained to be ever-more astute, observing and questioning, coaching and reassuring," she says.

Ms. Margolis says technologies such as virtual reality allow medical students and physicians to stand in the shoes of their patients.

Technology is also key to ensuring clinical trial staff are focused less on administrative work and more on patient care and making them feel they are the top priority, Mr. Murphy says. "Sponsors can seek out ways to streamline processes, such as using technology for patient reimbursements, instead of manually processing checks or issuing cash, and offering a system to handle patient logistics, such as travel to and from the site," he adds. "Every minute saved in paperwork for the site is another minute that can be shared with the patients to honor their commitment and time dedicated to the study."

There's a fine balance with technology and Mr. Lipset notes that technology must move from being disruptive to supportive to the provider. "As an example, a patient encounter where providers have their backs to the patient while typing into health record forms is not conducive to humanity," he says. "When technology can be aligned to liberate healthcare providers to focus exclusively on the patient — and incentives aligned with time provided — then we may find a path for humanity in healthcare."

However, Dr. Goldman says while technology, including AI, will continue to play a role in improving the healthcare process, ultimately human expertise and interaction make the difference in the care of patients. ^{PV}

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