



*From left: Teodora Kolarova, INCA; Maria Krini, Cyprus Association of Cancer Patients and Friends; Dr Kim Linton, University of Manchester; Dr Detlev Parow, DAK-Gesundheit; and Dr Alexandre Lourenço, Portuguese Association of Hospital Managers*

## Reshaping our health systems around new technologies and patient needs

### WHAT'S THE KEY TO A SUSTAINABLE HEALTH SYSTEM?

**This session's wide-ranging discussion started with the question of the challenge for health systems to adapt to the new world of revolutionary treatments such as gene therapy and CAR-T cell therapy.**

In its work on CAR-T cell treatment in the UK, a research team at Manchester University has been working with the national health system to understand what systems and processes are needed to deliver CAR-T therapies most optimally to patients. Looking at the workflow for CAR-T technology, it became clear to the development team that the ecosystem needed to deliver CAR-T and similar innovations to patients requires an entirely new approach, that health systems need to understand and adapt to.

It provides hope too. Some 50% of people suffering from Diffuse Large B-Cell Lymphoma are cured with chemotherapy and a further 10% with second-line treatments. But the remaining 40% face a bleak future. The CAR-T breakthrough treatment brings them new hope.

CAR-T is very different from standard cancers therapies. Each patient's T-cells are harvested by the

### KEY MESSAGE

Treat the patient, not the cancer. Let's have more focus on quality of life in this discussion.

research team and manufactured and returned to them for them in a personalised medication where their T-cells are modified and administered to bind to cancer cells and kill them.

This entirely new type of treatment has fundamental implications for the health system and services that are needed to support it. New skills, knowledge of the technology and an entirely new workflow and value chain need to be developed. In the UK, the drug currently treats a small patient population, with promising results. Its process of producing one individual therapy per patient is currently manageable. But to be delivered at scale to a national patient population, a rethink of the health system approach is needed.

But health system renewal is deeper than the need to adapt to the latest technologies, said the group. Looking beyond the revolutionary therapies, audience members and panelists discussed the payer, patient and hospital perspectives on what a next generation health system will look like. It was said that different approaches are possible. But all agreed that the system architecture and services need to be designed around the patient, which is not necessarily the case today.

The comments in summary:

**The patient needs to be at the centre of any new approach.** There's nothing new here. But discussants stressed the fundamental difference between 'considering' the patient's perspective – which can be brought by outsiders – and involving the patient and their needs in the design and decision-making process. One participant remarked that we can factor patient perspectives in our designs but we will never see the situation the way they do. For example, in addition to drug performance, they have practical questions such as: 'can I avoid queueing; why can't we have clean bathrooms...'

**Innovation is about more than high-tech and cutting-edge science.** It is about how we deliver sustainable increases in population health. Health services should include building health literacy to improve long term health in society. One participant asked: 'why aren't we doing one hour per week of health literacy in schools...alongside music and dance?, or educating the next generation about vaccines, diet etc.' These preventive strategies, at scale, will greatly improve population health and reduce pressure on the health system.

Other comments included: 'If we focus only on science and innovation, we miss the picture of what is needed to redesign healthcare. Patients see innovation as practical aspects of their treatment experience that go beyond technology solutions.'

Likewise, a hospital manager's example of new thinking is: 'how can we design a system that delivers healthcare services – not drugs or hospital care?'

The group concluded that new therapies and technologies are of great value to patients and society. But they go hand-in-hand with long-term strategies for prevention that improve population health and reduce the need for treatment and care. Like treatment, prevention should be a core health systems issue.

Concluding health systems considerations:

- » **Researchers** need to be driven by patient needs – from drug development to follow-up and data collection.
- » **Payers** need to understand what a fair price for a product is; or it will be difficult for them to make an informed decision.
- » **Hospitals and healthcare professionals** will strive to develop a common agenda with pharma, payers and patients.
- » **Patients** need to continually send messages to create fundamental system change that revolves around the patient. System change will come from more health literacy, education and prevention.

## How does access to innovative cancer medicines fit in high-quality cancer care and a well-functioning health system?

**Led by the European Cancer Leagues (ECL)**

This session built on research of the ECL Access to Medicines Taskforce, on disparity in availability of cancer treatments in Europe, causes and areas for improvement.

**Dr Kim Linton**, Clinical Senior Lecturer, Division of Molecular & Clinical Cancer Sciences, University of Manchester: Delivering innovative cancer medicine in the modern health care system

### **Panel perspectives:**

**Dr Detlev Parow**, Head of Patient Care Management, DAK-Gesundheit, Germany

**Usman Khan**, Executive Director, European Patients' Forum

**Dr Alexandre Lourenço**, President, Portuguese Association of Hospital Managers, Portugal

### **Moderators:**

**Teodora Kolarova**, ECCO Patient Advisory Committee and International Neuroendocrine Cancer Alliance (INCA); **Maria Krini**, Research & Development Manager, Cyprus Association of Cancer Patients and Friends

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