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name the cancer collaborative

project # CADTHSYMP

date 01.05.2019

notes HIGHLIGHTS FROM THE CADTH SYMPOSIUM
EDMONTON, ALBERTA APRIL 14-16
SUPPORTING HEALTHCARE TRANSFORMATION

supporting health system transformation

the annual canadian agency for drug and technologies in health [CADTH] symposium was held in edmonton, alberta with nearly 700 professionals ranging from HTAers, health economists, prescribers, policy makers, decision makers, industry and patient groups convening over two days with the conference theme on supporting healthcare transformation.



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highlights



becoming a global hub

as Canada seeks to double its health and biosciences sector and become a top three global hub by 2026, what actions are necessary to create a favourable environment for investment but also for health system transformation?

to meet these challenges CADTH suggests collaboration amongst the organizations that deliver HTA | HTM across Canada to build a more connected healthcare ecosystem that better manages the introduction and use of technologies while supporting health system transformation. While it's an extremely challenging time, with new and robust drug pipelines with novel mechanisms of actions and blockbuster drugs in oncology and non-oncology, it's also extremely exciting and interesting to think of the impact that these new therapies and technologies can have on patients. However, it will be key not only amongst the organizations who deliver HTA | HTM but with all the stakeholders to realize the potential Canada has to becoming a global hub.

driving change, fostering collaboration, modernizing our approaches and political willingness in setting healthcare priorities, delivery models, organizational structures and funding with the ultimate goal of providing better health, better patient experiences and better value while also recognizing the value of the patient in the discussion will be a crucial role in not only supporting health system transformation but in transformation of how we deliver health care.

the perfect storm in health system transformation

We are only at the cusp of this torrent of innovation in technologies and therapies that bring about the possibility of real change. The fusion of digital innovation and machine learning, artificial intelligence, digital health products, new forms of personalised medicine we are entering the fourth industrial revolution. Despite these significant breakthroughs and innovations in technology, transformation can not be met without the social and cultural changes that are necessary and go hand in hand. Change, however happens so much faster than what most of us think it will happen - none of the textbooks in the medical curriculum, not even those of today have touched on the possibility of taking out a patient's T-cells, re-engineering them in a lab and re-infusing them back to kill cancerous cells and saving patient's lives, or of how modern technology such as FaceTime and Skype can assist not only in connecting doctors to patients but doctors to a wider medical community. As we consider health care transformation and supporting this transformation, perhaps the most important change will be the role of the patient, not only within their own care but including them in roles of leadership and governance, but also taking over their health information and demanding better access to better technology and communication.

driving change
fostering collaboration
modernizing approaches



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key takeaways

forget winter. AI is coming

with advances in computing power, connectivity and increased availability of health care data AI is moving from science fiction to reality. it will become a standard product in healthcare, and it should be looked at as just another technological advance that helps improve healthcare- but it might move slower than all the hype about how AI is going to disrupt healthcare.

biosimilars has come

while there are several biosimilars entering the global market simultaneously, this is not happening in canada - we are seeing canada lag behind other countries in the uptake of biosimilar medications in oncology. there is a clear need for education, alignment across provinces and a long-term strategy that creates a favourable environment for the entry of biosimilars into the space while also considering patient preference. canada theoretically has much to gain from using biosimilars but we have not seen this happen yet.

the endgame. a pan-canadian collaborative

instead of a silo-based system that works to keep each service as inexpensive as possible, we need a value-based procurement system. information sharing, alignment, conversations, and collaboration are important, as is leveraging expertise to add to the credibility and transparency of the HTA | HTM work being done.

are we seriously still talking about rwe

is HTA | HTM ready to live by and accept the results issued by RWE?
how will reassessment be made a part of the framework?
does the government want and have the capacity to receive this information?
while we are collecting RWE, the environment is changing.

future considerations for RWE

RWE for long-term comparative effectiveness and safety
better understanding
continue collaborative development of joint RWE

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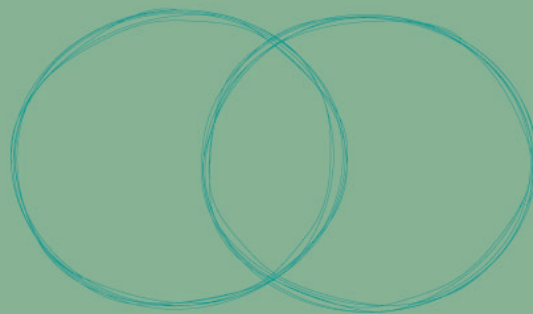
collaboration was certainly a buzz word at this year's symposium, from a pan-canadian collaborative, to more collaboration amongst HTA processes' within canada, and finally greater collaboration amongst stakeholders.

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