

VIENNA 2025 24-25 JUNE =



# Projects supporting the EHDS primary use



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MyHealth@MyHands coordinator
POTENTIAL UC6 Lead





Person-centred health management through access to your health data using EUDI Wallet services 18 countries, 44 organisations



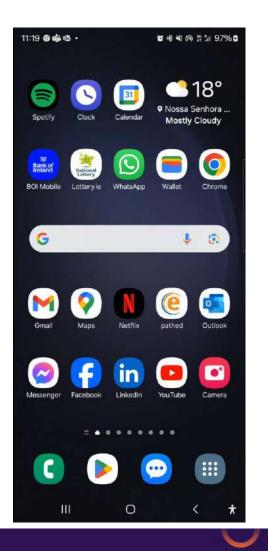
09/12/2024





# Irish patient accessing the Patient Summary and translating to Czech

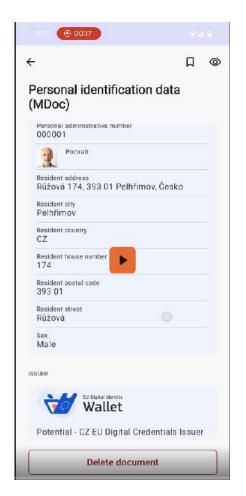




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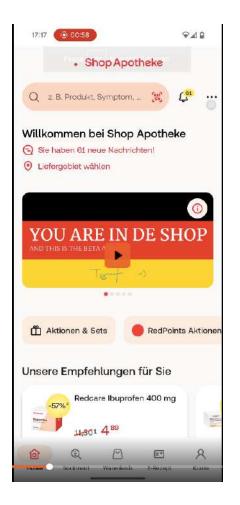


eP - Remote
Presentation
Onlinghamacy



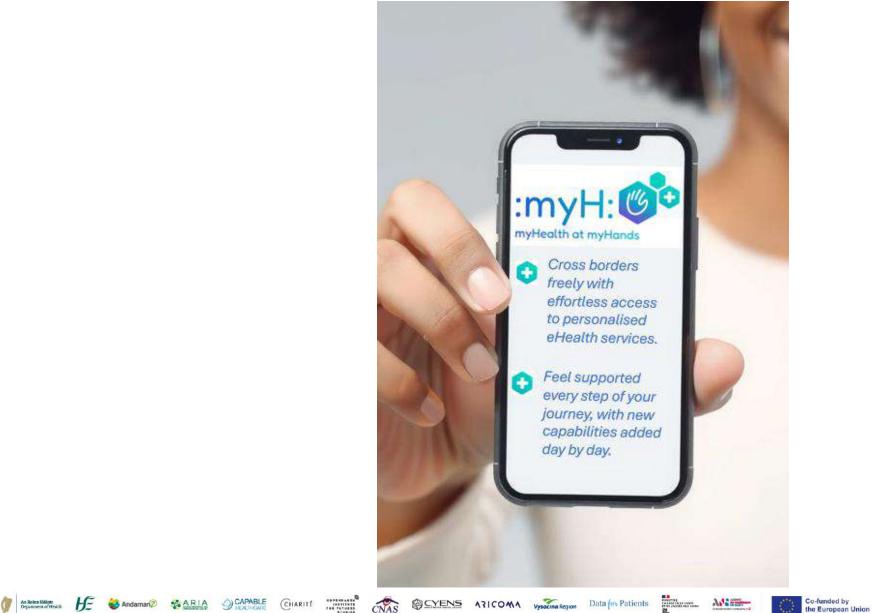
Wallet App: Aricoma CZ

Relying party: RedCare Pharmacy DE

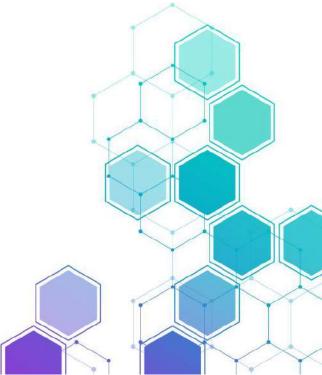


https://nextcloud.shop-apotheke.com/s/FdyR8fW2Fef85qc

9/12/2024







































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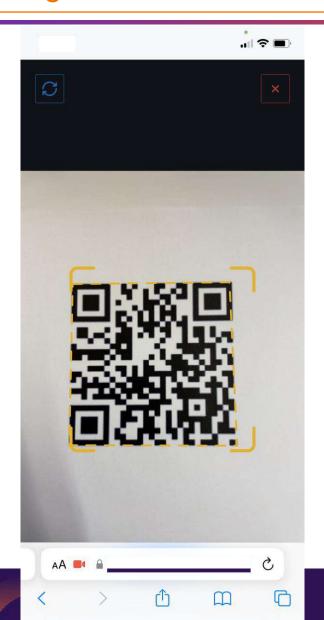






### A QR Code – OR...?

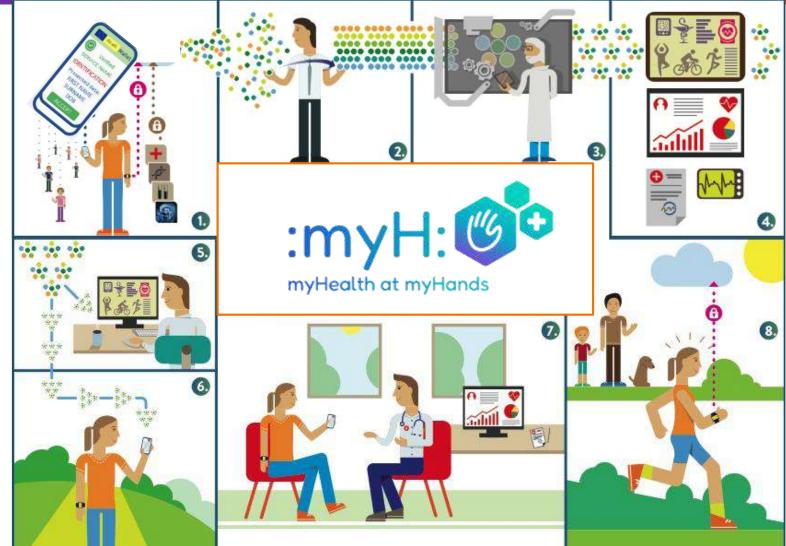






## A Gateway to Patient Autonomy



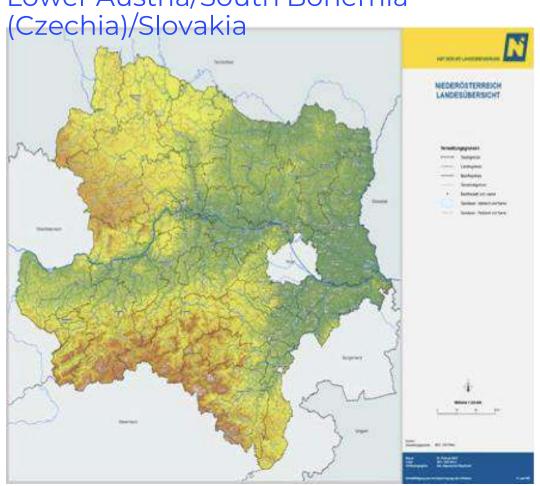




### ross-border Patient **Mobility**



Lower Austria/South Bohemia



Better data means better possibilities. Independent, well-coordinated

information for citizens in their own language.

"Cross-border Cooperation can also help in optimizing costs due to the shared use of resources and a better return on resource investment. Moreover, the diffusion, dissemination and implementation of innovative and effective public health interventions are ongoing challenges for the public

Source: Cross-border patient mobility in selected EU regions. European Union, 2022

Specialist involved in project and policy



### Pan-European Cancer Care



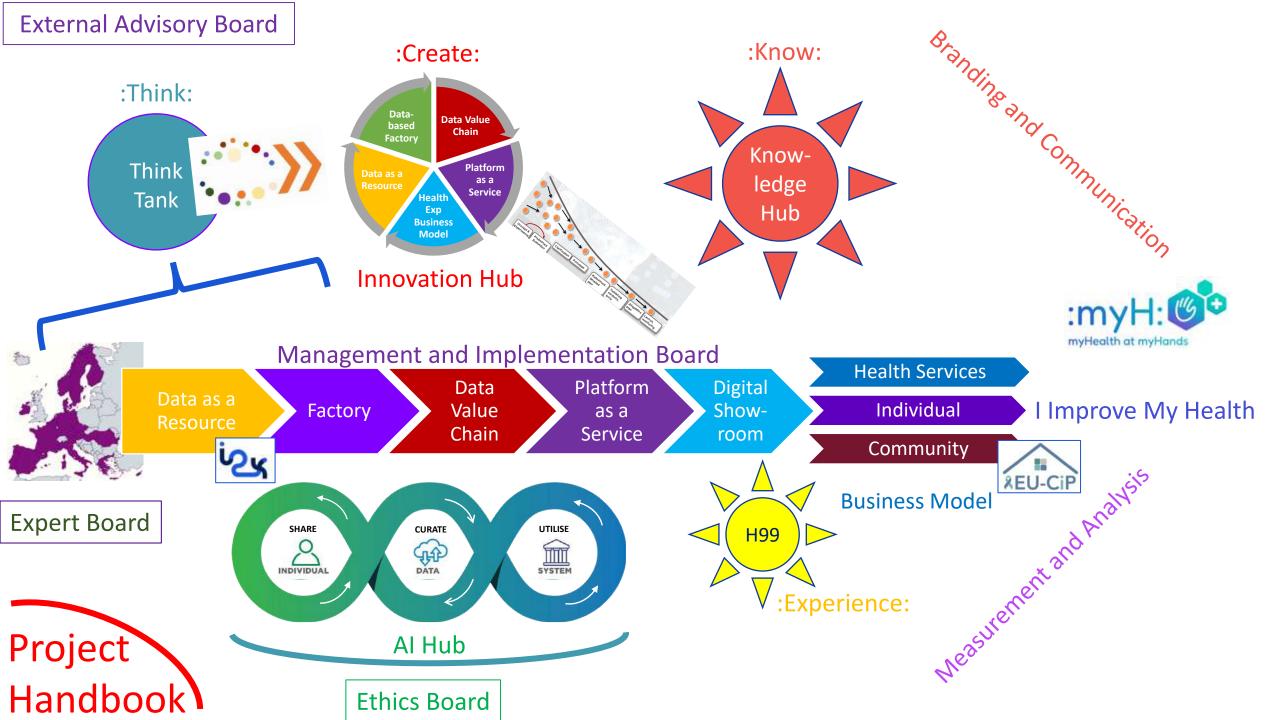


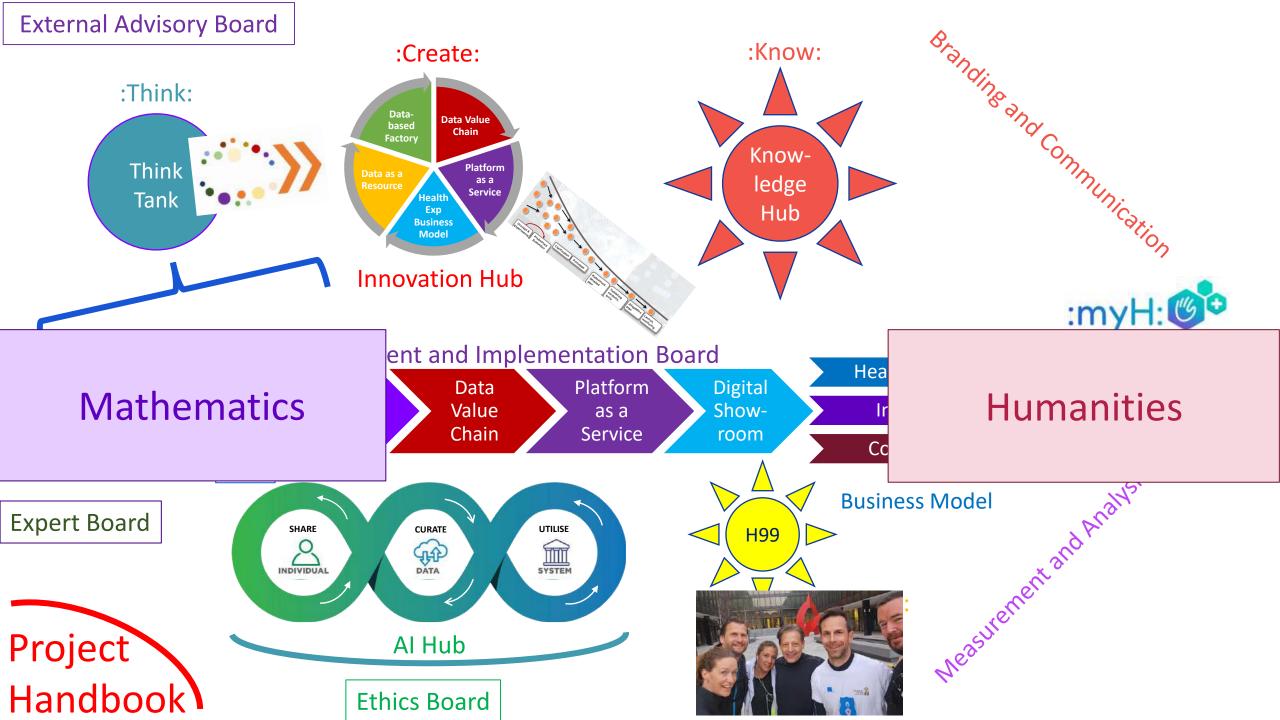
Commissioner Mairead McGuinness (2020–2024) with participants and organisers of the Joint Euro-American Forum on Cancer 2024. Photo courtesy of the All-Island Cancer Research Institute (AICRI)

Source: European Cancer Roadmap to 2030

The European Health Data Space (EHDS) represents an excellent prospective tool for improving the sharing and use of health data for both primary and secondary health purposes. For cancer patients, new opportunities for cross- border care can be achieved.

Extend and increase support for twinning of cancer centres to achieve an EU Network of Comprehensive Cancer Centres.





### WP7 End-User Experience in Health Co-Management



### BREAST CANCER PATIENT JOURNEY FOR WOMEN

You can also reach the patient route stations by clicking on the image.

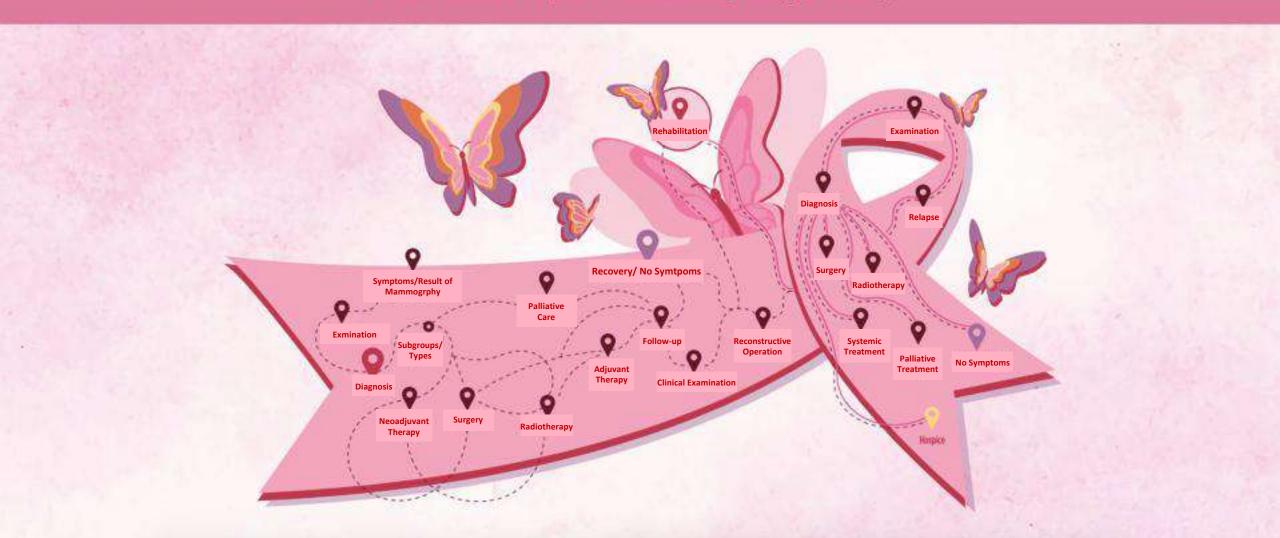


Figure 3. The Care Delivery Value Chain (Breast Cancer).

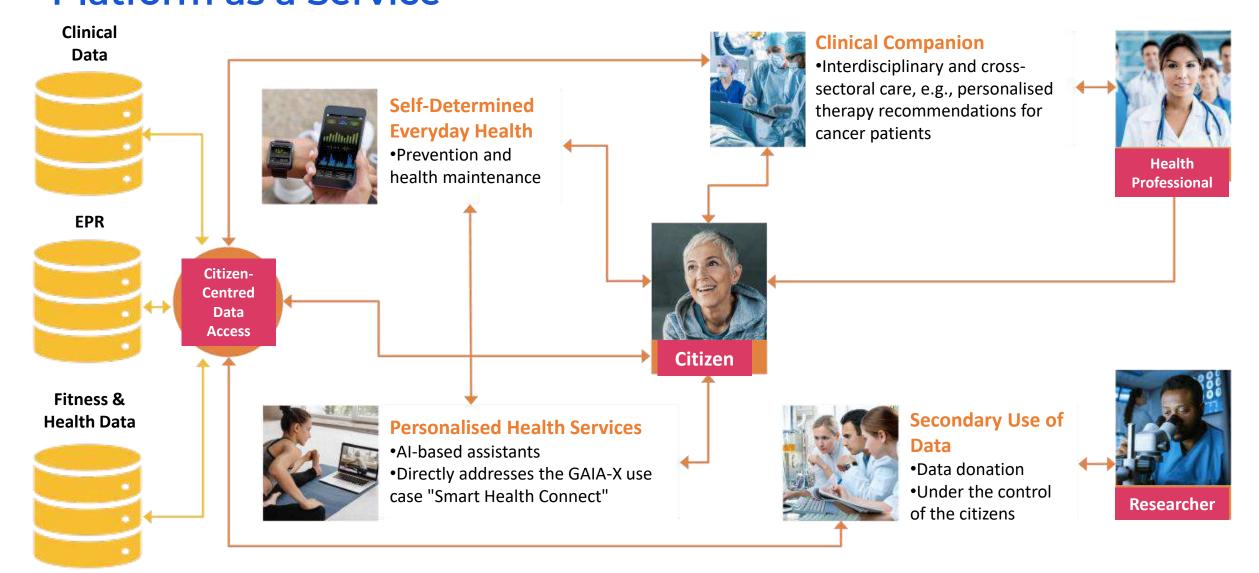
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Breast Cancer Specialist Other Provider Entities

INFORMING AND ENGAGING	Advice on self screening     Consultations on risk factors	Counseling patient and family on the diagnostic process and the diagnosis	Explaining patient treatment options/shared decision making     Patient and family psychological counseling	Counseling on the treatment process     Education on managing side effects and avoiding complications     Achieving compliance	Counseling on rehabilitation options, process Achieving compliance Psychological counseling	Counseling on long term risk management Achieving compliance	
MEASURING	Self exams     Mammograms	Mammograms Ultrasound MRI Labs (CBC, etc.) Biopsy BRACA 1, 2 CT Bone Scans	• Labs	Procedure-specific measurements	Range of movement     Side effects     measurement	MRI, CT     Recurring     mammograms     (every six months     for the first 3 years)	
THE PATIENT • Mammog	Office visits	Office visits	Office visits	Hospital stays	Office visits	Office visits	1
	Mammography     Lab visits	Lab visits	Hospital visits     Lab visits	Visits to outpatient radiation or chemotherapy units Pharmacy visits	Rehabilitation     facility visits	<ul> <li>Lab visits</li> <li>Mammographic labs and imaging</li> </ul>	\
		High risk clinic visits			Pharmacy visits	center visits	
	MONITORING/ PREVENTING	DIAGNOSING	PREPARING	INTERVENING	RECOVERING/ REHABING	MONITORING/ MANAGING	
Control of factors (ob high fat die Genetic scr Clinical exa	<ul> <li>Medical history</li> <li>Control of risk factors (obesity, high fat diet)</li> <li>Genetic screening</li> </ul>	Determining the specific nature of the disease	Choosing a treatment plan Surgery prep (anesthetic risk assessment, EKG)	Surgery (breast preservation or mastectomy, oncoplastic alternative)	In-hospital and outpatient wound healing Treatment of side effects (e.g. skin damage, cardiac complications, nausea, lymphedema and chronic fatigue)	Periodic mammography Other imaging  Follow-up clinical exams Treatment for any continued or later onset side effects or complications	
	Clinical exams     Monitoring for lumps		Plastic or onco- plastic surgery evaluation Neo-adjuvant chemotherapy	Adjuvant therapies     (hormonal     medication,     radiation, and/or     chemotherapy)			
			cinotherapy	chemotherapy/	Physical therapy		

# WP4 Sustainable Value-Creation Mechanism in the Platform as a Service





#### WP6 User Interface of the Data Value Chain







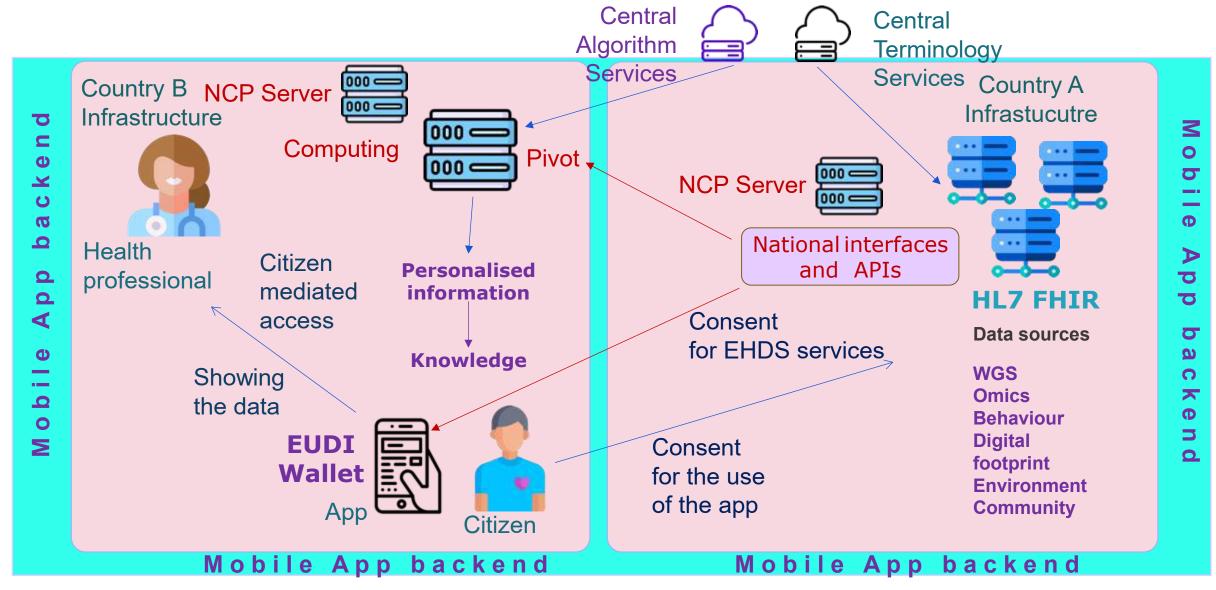


Identification and authentication Presentation of "attributes"

Digital signature

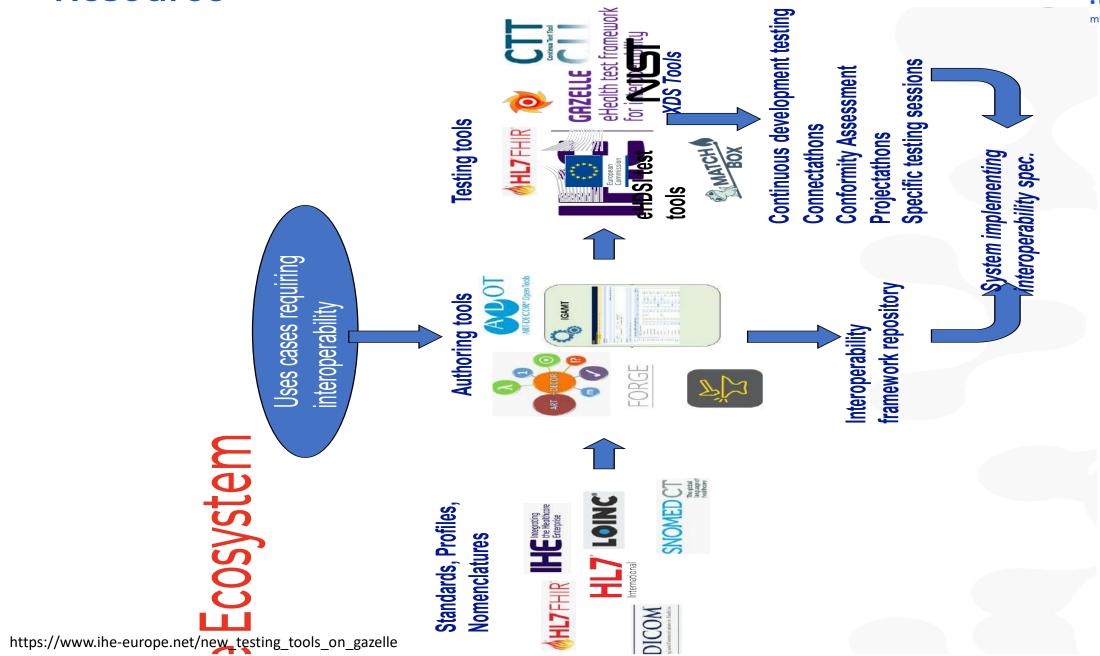
### WP5 Core Infrastructure of the Factory





## WP3 Evaluation, Testing, and Integration for Data as a Resource





WP2 Communication, Dissemination, and Engagement :n through Branding as Mental Packaging







#### Humanisation





Károly Polányi (Carl Polanyi) – The Great Transformation Decommodization of "Human Resource" Deterritorialization of Money/Capital driven society



Mihály Polányi (Michael Polanyi) – The Tacit Dimension Tacit Knowledge (Human) vs. Explicit Knowledge (Machine) Experience Based Practices



Sustainability by Design – Bauhaus goes Digital Value creation in everyday life László Moholy-Nagy, Marcell Breuer



### European Value-Based Platform Mod:myH: myHealth at myHands

### Public Good

**Facilitate the Adoption of New** 

**Technologies:** Create an environment that supports the integration of new technologies, such as artificial intelligence (AI), to enhance tility the analysis and utilisation of health data for generating health value.



Privacy

DATA **ASSET TRIANGLE** 

Improve Security and Privacy: Establish robust security and privacy protocols that can be adopted by all involved systems, ensuring the protection of citizens' health data

**Develop a Flexible Infrastructure:** Create an infrastructure capable of supporting both government-to-government (G2G) and peerto-peer (P2P) interactions, enabling more efficient and secure health data exchange.



Findable Accessible Reusable

#### **Harmonize Standards:**

Aligning digital wallet Interoperable standards and health data formats to ensure interoperability between different systems and





Citizens are becoming aware of the value of shared data and demanding reliable public services.

The Institute for Healthcare Improvement states that the market is incapable of organising itself for appropriate value creation.

Because there are no authentic health metrics.

According to The Medical Futurist (Bertalan Meskó), there are very few digital health management solutions on the market (US).

New health players are entering the health sector without the principle of solidarity and the aim of the public good.

Value creation from data can only be achieved through the 'fit for purpose' principle, as discussed in TEHDAS WP8.