

# mHealth – From deployment to a sustainable business

Jeanine Vos, Executive Director mHealth, Connected Living Programme

#### Speakers – Session One



- Abhi Ingle, VP of Sales in Advanced Mobility Solutions, AT&T
- Gari Clifford, Associate Director, Centre for Doctoral Training in Healthcare Innovation, Oxford University and Sana
- Astrid Grottland, Norwegian Centre for Integrated Care and Telemedicine – Renewing Health

### AT&T mHealth Solutions

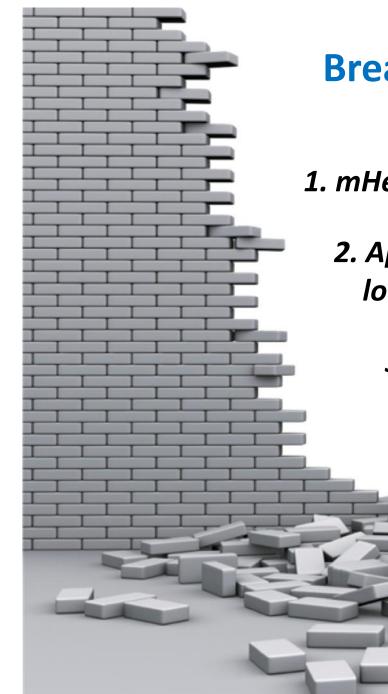
#### **Abhi Ingle**

Vice President Industry & Mobility Application Solutions AT&T

February 2012

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### Breaking Down Perceived mHealth Barriers

- 1. mHealth is only for the young
  - 2. App fragmentation and low engagement
    - 3. Connected device profusion but no data sharing

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#### **Perceived Barrier**

#### mHealth is only for the young



#### **AT&T Perspective**

All ages are very savvy!



ComScore: mobile year in review 2010

#### AT&T is committed to providing ubiquitous solutions beyond SMS & Smartphone apps



#### **Perceived Barrier**

#### mHealth apps - 80% churn

# Over 17,000 mobile & health wellness apps today

PwC 2010, MobiHealthnews 2010, research2guidance 2011



#### **AT&T Approach**

#### Focused approach, sustained use



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#### **Perceived Barrier**

**Connected device profusion, but no data sharing with apps** 



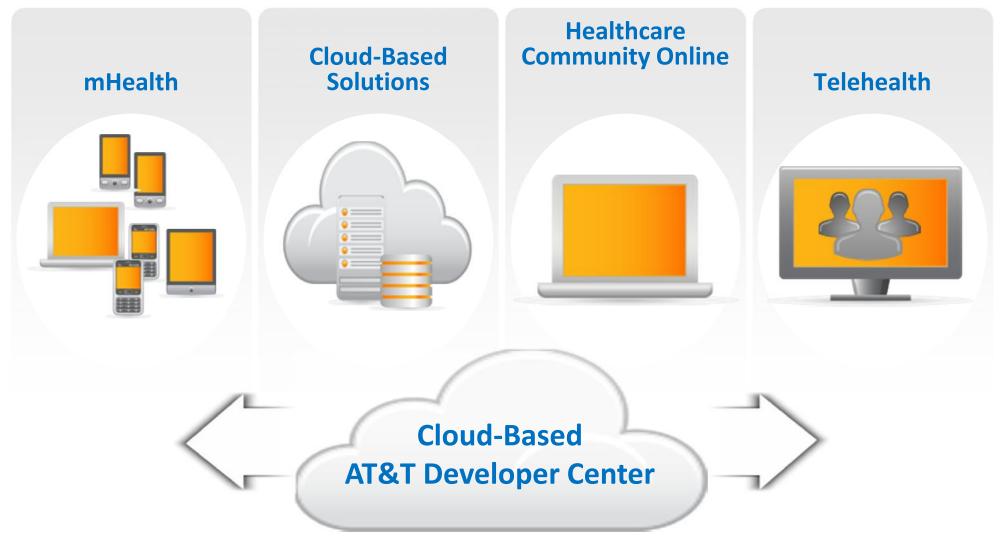
#### **AT&T Response**

#### **AT&T Development Center ForHealth**



#### **AT&T ForHealth Solution Areas**

Harnessing the power of technology and smart networks to create a healthier world



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# Rethink Possible



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# **Smartphone Apps:**

# Unbiased signals – open & affordable healthcare technology in low-resource environments

#### Dr. Gari D. Clifford

Director: Intelligent Patient Monitoring Group University Lecturer & Associate Director Centre for Doctoral Training in Healthcare Innovation Institute of Biomedical Engineering Department of Engineering Science Co-founder: Sana Mobile, MIT

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## The global problems with mHealth

- Too few trained medical professionals (50k:1)
- Humans are biased & fallible (medical errors)
- Poor & ad hoc supply chains
- Poor information portability
- Lack of scientific foundation to most apps
- High patient:doctor ratio around the world
- Medicine- inherent High FP rate: wrong paradigm
  - We can't cope with the possibility of overwhelming the healthcare system
- Compliance
  - Lack of evaluation of long term usage
  - Humans prefer recreation, not healthy behaviour







•G. D. Clifford •11



# Solutions

- Open Source infrastructure (Sanamobile.org)
  - BSD license to allow proprietary plug-ins / business models
  - Universal (multilingual) ontologies
  - Portable personal medical record plugs into hospital EMR
  - Multiple expert adjudications
    - Reduces bias and errors
  - Al algorithms trained on human annotations
    - Doctors only have to look at a tiny % of cases
    - Reduces costs, offloads work to phone or cloud
  - Hardware has to use existing supply chains: peer-to-peer
    - Low cost/disposable sensors that plug into USB port









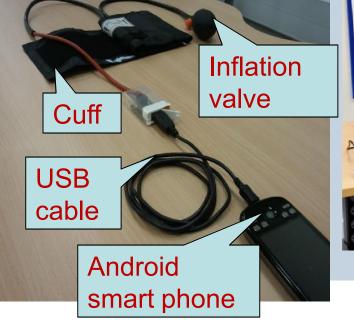


## **Example: CVD**

- New BP monitor plugs into phone to reduce #hops for data
- No wireless transmission components
- USB supplies power no battery
- <\$5 of components
- Can be tuned to specific population
  - Western calibrations are inappropriate









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## **Example: Sleep & Mental Health**

#### Sleep - Use only sensors on phone

- Microphone, accelerometer & camera
- Signals analysed using AI to classify patient
- 90% accurate highly specific!

#### Mental Health

• Phone actigraphy & sleep patterns

leepAp	SleepAp	SleepAp	SleepAp
Welcome in SleepApp SleepApp is a learning and screening tool for Obstructive Sleep Apnea (OSA). It has been designed in order to assess how likely it is for you to have OSA. Note: this application is not a substitute to a night study in a sleep laboratory.	Step 1 Learn about Sleep Apnea	Sample 1 Normal Breathing	Accelerometer
			2
	Step 2 Questionnaire	Sample 2 Snore	2
		Sample 3 Obstructive Sleep Apnea	4
	Step 3 Record		Orientation
			15 15 30
			supine
	Step 4 Sleep analysis		
Ok	-	00:12 00:29	Previous Stop
		00.12	



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schizophrenia

### Acknowledgements

#### People/Teams

Leo Celi & the Sana team @MIT EWH-Oxford IPM Group PIH and OpenMRS Profs. Tarassenko, Mark, Szolovits, Goldberger ...

#### **Funders**

EPSRC / RCUK Wellcome Trust Vodafone Royal Society John Fell Fund Mindray University of Oxford MIT PSC NIH & CIMIT EWH University of Daejeon





www.robots.ox.ac.uk/~gari www.ibme.ox.ac.uk/ipm www.ewh-oxford.org



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### Mobile health deployment in Northern Norway

Astrid Grøttland – Project Manager, Norwegian pilot Norwegian Centre of Integrated Care and Telemedicine.



•MWC - Barcelona, 29.02.2012



... in a nutshell

#### Large scale pilot to assess impact of personal and mobile health systems on chronic patients' care

Three major chronic conditions:

- T2 diabetes
- Lung disease (COPD)
- Cardio-vascular disease (CVD)

Key project parameters:

Duration: 48 months
Budget: €14.000.000 (50 percent from EC)

Nine European regions, 21 partners

Practical demonstrations this afternoon

Common telemed.....

More information: <u>www.renewinghealth.org</u>



- Escalating numbers of T2 Diabetes epidemic
- Diabetes caused at least USD 465 billion in healthcare expenditures in 2011 worldwide; 11% of total healthcare expenditures in adults (... acc to the International Diabetes Federation)
- Fewer than 10 % achieve in following all advised goals

Our mission: In an easy way, provide users a better overview of disease-related factors, on a unit that is "always" with them





### Mobile Health Pilot - Norway

#### **Self-help tool: Few Touch Application /** Electronic diabetes diary





# Expected findings

- For the patient:
  - Better health, QoL, self management and control
  - Empowerment and motivation
- For the health service:
  - Better patient and more personalised patient care
  - Less short and long term complications
- For society:
  - Cost Savings
  - Healthier population







#### Financing model? – Ownership and support?



Feedback – so far...

- Feedback from users:
  - Application: Only positive feedback
  - On the telephone:
    - Too small interface, limited sound quality
    - Challenges with touch screen and functionality
  - Half of the drop-outs blame it on the telephone functionality
- Feedback from GP's / health care:
  - Interesting like it sorry, but have no time for it.
  - Support and payment?
- <u>Technological challenges:</u>
  - Issues with device interoperability and standards (lack of...) between platforms.



### Thank you

 Astrid Grøttland, Senior project manager, Renewing Health Norway.



Norwegian Centre for Integrated Care and Telemedicine <u>astrid.grottland@telemed.no</u>

www.renewinghealth.eu













# Panel \* Discussion



















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#### Speakers – Session Two



- Lyse Brilloet, Head of Strategy and Marketing, France Telecom Orange
- Clin McClellan, Senior Director, Strategic Marketing, Qualcomm
- Horst Merkle, Director, Information Management Systems Diabetes Care, Roche Diagonostics Corporation
- Màrio Romão, Senior Policy Manager, Intel



# Lyse Brillouet, Head of Strategy and Marketing, Orange Healthcare



Orange Healthcare - MWC 2012 mhealth - Lyse Brillouet Head of Strategy & Marketing

# SORIN - Remote monitoring of cardiac patients in the USA





Orange Healthcare - MWC 2012 mhealth - Lyse Brillouet Head of Strategy & Marketing

# Orange is working on three fields, joining up Healthcare

#### Services for Health Professional

For hospitals, surgeries and pharmacies, and the professionals and patients within them.

joining up all of the people and infrastructure within the healthcare ecosystem, enabling superior coordination, collaboration and information flow between all parties

#### Health management

Managing health conditions outside of traditional care environments in places such as the home.

joining up traditional and non traditional healthcare environments, enabling high quality care and condition management within the broader community, giving patients more choice over their care provision

# Prevention and wellness

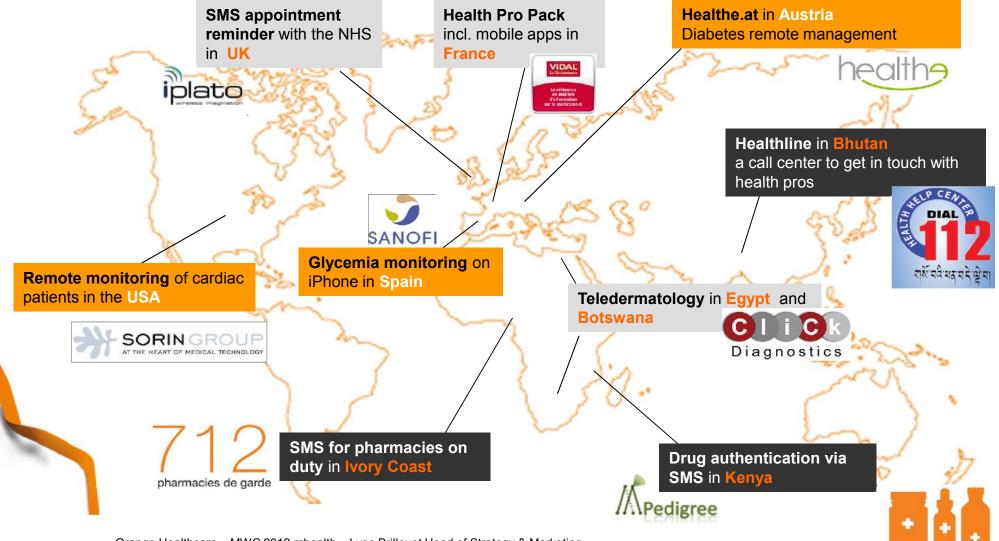
Preventing health conditions before they arise.

joining up people to the tools and information they need to manage their own health and well-being in the course of their everyday lives – whenever they need to, wherever they are.





# mHealth provides world wide opportunities, covering a very large range of services



Orange Healthcare – MWC 2012 mhealth – Lyse Brillouet Head of Strategy & Marketing

# Thank you



Orange Healthcare – MWC 2012 mhealth – Lyse Brillouet Head of Strategy & Marketing



Connecting the Wireless Health Network February, 2012



### **Redefining Personal Health Management**

# Wireless solutions enabling consumers to take charge of their health

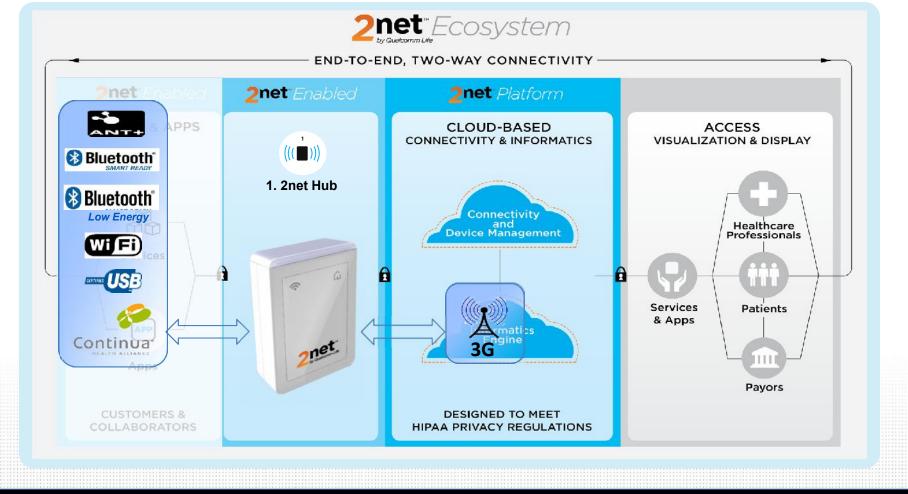


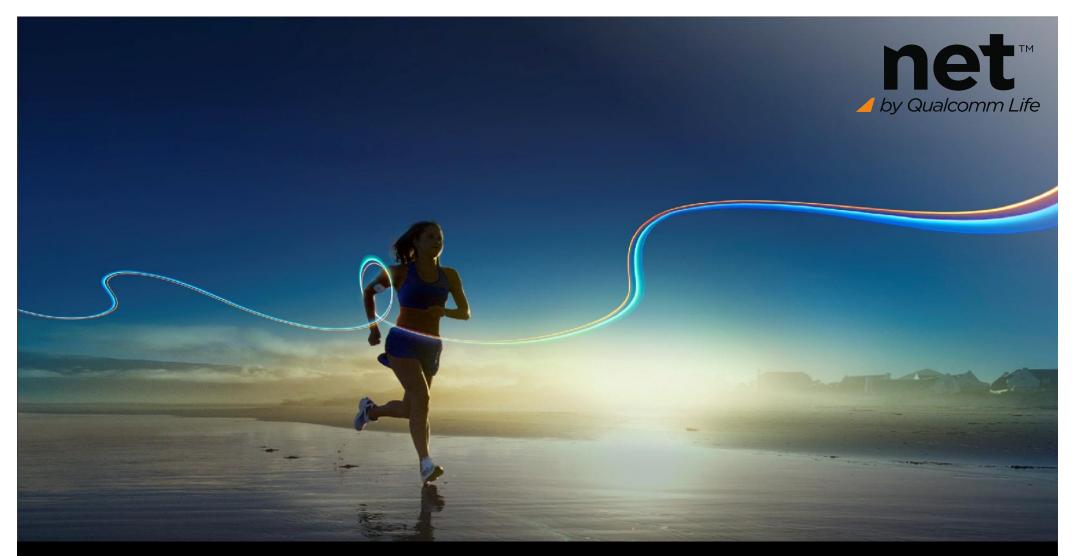
Company confidential 2011





#### The In-home 2net Hub Gateway





#### Thank You

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#### Mobile Health – A Sustainable Business

Mobile World Conference, Barcelona, 29. Feb. 2012

Horst Merkle, Roche Diabetes Care, Indianapolis USA



Roche



- Roche ranks among the world's leading healthcare companies with strong businesses in pharmaceuticals, in-vitro diagnostics and diabetes care
- More than 80'000 employees worldwide
- World leader in Diabetes Care
  - ACCU-CHEK® brand provides innovative portfolio for improved diabetes care
    - Blood glucose monitors, Insulin delivery systems, Information management solutions
  - Strong commitment to interoperability to support health care professionals and promoting patient empowerment through enabling technologies.
  - Active promoter of the Continua Health Alliance

**ACCU-CHEK**<sup>®</sup>

#### **Roche Diabetes Care Product Portfolio**

#### Serving all Stakeholders



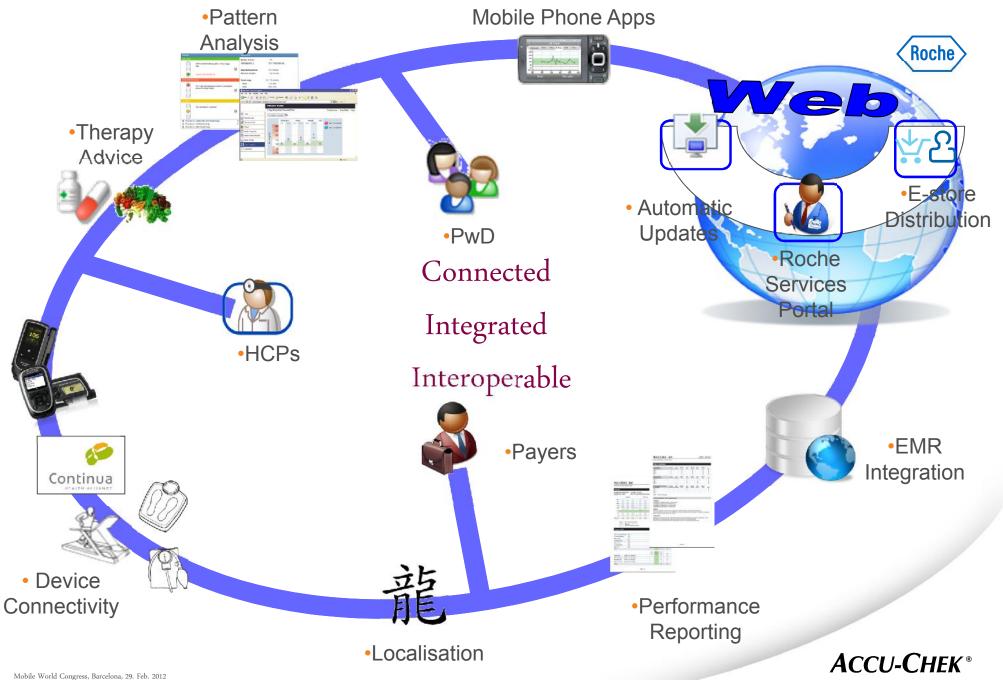
Therapy Support **Self Management** Efficacy & Efficiency Analysis **Blood Glucose** Disease Management Monitoring Insulin Delivery **Data Repository** ACCU-ONSE 260

#### **Core Business**

#### **Supporting Services / Competitive Differentiator**

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Thank you





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# Panel Discussion































# Thank you!











