“Innovating better health outcomes for a developing world”

The Narrative	• We want to develop new, better products that will meet unmet needs • We should provide solutions to patient population that is more acutely aware of disease outcome than other populations • We should provide early detection of pharmacodynamic outcomes • We should provide clinicians with information to move patients onto alternative care pathways much earlier than we currently achieve • Enhance the reputation of your company by your participation

	Stakeholder	**Role, contribution, benefit**
The Consortium and its tractability	• Patient advocates • Regulators • Therapy developers (“pharma”) • Device and technology companies • CROs	• Emotional drive to adoption, • Early adoption, incorporate regulation into design, • £/product, philanthropy reputation • £/product, philanthropy reputation • Service provision, new business

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Opportunity	• Work on high cost therapies, for example monoclonal antibodies • The therapies are highly targeted, and need a personalized diagnosis • Provides new business through development of a companion diagnostic • Oncology is an area with severe patient outcome • Paediatrics is an area where new sampling modalities are required • Benefits will accrue from improved precision of the assessment/diagnostic method, that provides enhanced clinical outcome or care pathway choice • Benefits accrue to companies, by segmenting out patients to trial on new therapies “find the needle in a haystack” • Benefits accrue to the health economy by selecting responding patients • Benefits accrue by opening currently closed markets e.g. work WITH China
Risk/Benefit Calculations	• Risk management is a barrier to innovation • Failure of technology is not failure – carry out failure mode analysis • Understand probability of success, and assess patient rejection • Understand protection & ownership of data • Difficulty in using ‘old’ drugs, may reveal new unknowns about your drug with regulatory implications.