



FRONTIERS HEALTH 2024:

# 24 KEY TAKEAWAYS IN HEALTH INNOVATION

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## A MESSAGE FROM THE CHAIRMAN OF FRONTIERS HEALTH

As we reflect on the success of the 2024 edition of Frontiers Health, we are reminded of the incredible ecosystem that Frontiers Health convenes—a vibrant community of thought leaders, innovators, and stakeholders dedicated to transforming healthcare. This gathering once again provided a platform to explore the cutting-edge innovations shaping the future of healthcare.

The 24 key takeaways presented in this booklet encapsulate the spirit of collaboration and innovation that defines Frontiers Health. From the empowering potential of AI in patient autonomy, the future of telehealth and virtual care, to global commercialization strategies and the urgent need for systemic integration in precision medicine, these insights and more highlight the strides we are making towards a more inclusive, efficient, and patient-centered healthcare system. Additionally, the value of local innovative solutions in addressing global health disparities underscores our commitment to improving healthcare for all.

As the Chairman of Frontiers Health, I am proud to witness the dynamic exchange of ideas and the relentless pursuit of excellence that our conference fosters. Each takeaway is a testament to the hard work and dedication of our speakers, participants, and partners.

As the main sponsor of this year's conference, **Jim Lang**, CEO of EVERSANA said, *"We are thrilled to support an event that not only showcases groundbreaking advancements but also emphasizes the importance of sustainable and scalable solutions. Our commitment to innovation in healthcare is unwavering, and we believe that the discussions and discoveries at Frontiers Health 2024 will pave the way for a brighter future."*

Together, let us continue to push the boundaries of what is possible in healthcare, ensuring that no patient is left behind and that every innovation serves to improve lives globally.

Thank you for being a part of this journey.

Warm regards,

**Roberto Ascione**

Chairman, Frontiers Health 2024

President, Health Innovation, EVERSANA





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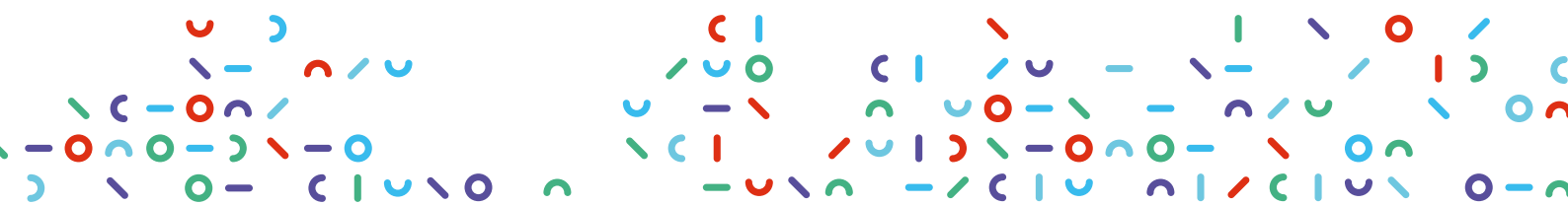
Returning to its original home in Berlin, Germany on the 17th & 18th of October 2024, Frontiers Health was back for another year of insights and innovation. Hosted by EVERSANA, the event united experts from around the world to discuss, and even debate, some of the biggest topics in healthcare.

From AI and data to the dawn of patient autonomy, the event provided an exciting backdrop for pharma execs, innovators, entrepreneurs, payers, investors, patients, and other industry stakeholders to come together and examine current challenges, strategic opportunities, and scalable solutions poised to impact the future of healthcare.

**Here are 24 key takeaways from the 2024 Frontiers Health event.**



1. EMPOWERING PATIENTS THROUGH AI
2. INNOVATION IS A MARATHON, NOT A SPRINT
3. THE HUMAN COST OF DELAYED GENOMIC PROFILING
4. THE FUTURE OF HEALTHCARE IS HYPER-PERSONAL
5. LEAVE NO PATIENT BEHIND
6. CODE + CAPSULES: A PROMISING COMBINATION
7. TELEHEALTH IS NOT DEAD (DESPITE THE RUMOURS)
8. YOU CAN'T TREAT YOUR WAY TO DEFEAT
9. DISRUPTIVE INNOVATIONS REDEFINE SYSTEMS
10. IT'S TIME TO FALL IN LOVE WITH THE PROBLEM
11. THE ROLE OF AI IN COMMERCIALISING PHARMA
12. A CURE: HIDING IN PLAIN SIGHT
13. LOCAL SOLUTIONS FOR GLOBAL HEALTH EQUITY
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15. MENTAL AND BRAIN HEALTH: THE ULTIMATE GROWTH SECTOR?
16. DATA IS KING
17. THE RISE OF DIGITAL-DRUG PAIRING
18. BRIDGING DIGITAL HEALTH IN EUROPE: A TALE OF TWO SYSTEMS
19. THE US PERSPECTIVE: INNOVATION VS REGULATION
20. INSIDE THE UAE'S VISION FOR HEALTH INNOVATION
21. DIGITAL HEALTH IN APAC: OPPORTUNITIES AND IMPLEMENTATION CHALLENGES
22. INTRODUCING A "GOOGLE MAPS" FOR DIABETES MANAGEMENT
23. LISTENING TO THE HEART'S SILENT SIGNALS
24. WOMEN'S HEALTH: FROM MYTHS TO MEDICINE





# #1

## EMPOWERING PATIENTS THROUGH AI



**Dave deBronkart**  
"e-Patient Dave" -  
Patient Empowerment  
evangelist.  
#PatientsUseAI

The dawn of patient autonomy marks a significant shift in healthcare, driven by the potential of AI to empower individuals. In an impassioned keynote address, Dave deBronkart, known as "e-Patient Dave", highlighted how AI can open up a new world of patient engagement and self-management, allowing individuals to actively participate in their healthcare, managing records, appointments, and treatments.

DeBronkart defined patient autonomy as "the freedom to pursue our health goals on our own terms, even beyond the clinic. The freedom to keep at it, to persist, to keep asking and enquiring, seeking more and better answers for our own self-defined wants and needs."

This vision calls for removing constraints and providing patients with the necessary data and tools to take charge of their health. By embracing this shift, healthcare can become more inclusive and responsive to individual needs, ultimately improving outcomes and patient satisfaction.

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UNLOCKING THE FUTURE OF AI IN HEALTHCARE: ON INNOVATION, OPEN SOURCE, AND DATA COMMUNITIES

BART DE WITTE  
Initiator Hippo AI Foundation  
Founder Inceptiv (2008)

JAKOB USZKOREIT  
CEO and Co-Founder  
Inceptiv

#2



**Jakob Uszkoreit**  
CEO and Co-Founder  
Inceptiv

## INNOVATION IS A MARATHON, NOT A SPRINT

“People really like to see developments as revolutions,” explained Jakob Uszkoreit, CEO and co-founder of Inceptiv, talking about his work in the development of transformers (the T part of ChatGPT) during his 15-year stint at Google.

“The truth is, revolutions basically never happen,” he continued. “What really happens is years and years of very hard work by lots of people, most heroes unsung, whose shoulders you stand on.”

His words echoed a sentiment seen across Frontiers Health 2024: Longevity. After years of repeated hype cycles, pilotitis, and promise unrealised, innovators are starting to look beyond how we can affect change today, to focus on building a lasting legacy to ensure that tomorrow’s patients will also benefit from innovative ideas.

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# #3

## THE HUMAN COST OF DELAYED GENOMIC PROFILING

In precision medicine, time is not just a metric – it's a lifeline. Luca Quagliata of Thermo Fisher Scientific reveals a stark reality: the current genomic profiling process is fundamentally failing patients, particularly those with advanced cancer.



**Luca Quagliata**

Vice-President and  
Global Head of Medical  
and Scientific Affairs  
Thermo Fisher Scientific

The average turnaround time for molecular profiling of a stage 4 non-small cell lung cancer patient is a devastating 22 days in the US. "You can imagine the amount of distress for a stage 4 cancer patient that has to wait more than 20 days in order to get a diagnosis," Quagliata emphasised. This delay is more than an inconvenience, he explained, it is detrimental for a patient to start on the wrong therapy and switch to targeted therapy once the results are in, and for some, by the time the data is ready, the patient is too far off to receive targeted treatment.

"There are outstanding drugs out there, working really well, but it's just not possible to deliver them to the patients". That has to change, says Guagliata.

In critical conditions like Acute Myeloid Leukaemia (AML) or Myelodysplastic Syndromes (MDS), he said, treatment should occur within three to five days, not weeks. The technology exists – the challenge is systemic integration and breaking down data silos.

"If precision medicine is something that only happens at Harvard Medical School or the MD Andersons of the world, that is not precision medicine because it is only happening for a very limited number of people," he argued. The goal must be universal: "to connect the right patient to the right therapy at the right time, everywhere."

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# #4



**Peter Ohnemus**  
President & CEO  
dacadoo

## THE FUTURE OF HEALTHCARE IS HYPER-PERSONAL

Digital health is evolving from generic solutions to deeply personalised experiences that empower individuals to proactively manage their well-being on their terms.

“In the future, I don’t think you will ever sell a pill alone,” argued Peter Ohnemus of dacadoo. “It will have to be outcome-based and it will need to be an experience that you enjoy.”

Currently, global healthcare spending reveals a critical imbalance. “We spend trillions of dollars on healthcare annually, but just \$25 million on prevention,” Ohnemus notes. This unsustainable approach threatens healthcare systems worldwide, with escalating costs placing immense pressure on patients and providers.

By focusing on relative, easy, and fun (REF) lifestyle navigation tools, we can make preventive care both affordable and universally accessible.

“The big problem we have in digital health is that there are no heroes,” he said. This lack of compelling narratives hinders public understanding and engagement – a challenge the industry must address to drive meaningful transformation

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# TRANSFORMATION HAPPENS ON THE FRONTIERS

**ROBERT**  
Conference Chair  
President, Health

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# #5

## LEAVE NO PATIENT BEHIND



**Felix Thielmann**  
 Head of Marketing  
 - Project Lead DB  
 Medibus DB Regio Bus

With a projected global shortage of 10 million healthcare professionals by 2030, many rural areas, including parts of Germany, are becoming “medical deserts”, where access to healthcare is scarce.

But, while this may be seen as a healthcare problem, solutions can come from unexpected places, as illustrated by the DB Medibus project. As Felix Thielmann, head of marketing – project lead DB Medibus, explained, rather than wait for others to provide essential medical services to isolated communities, the team identified an opportunity, and went for it; transforming buses into mobile clinics, equipped with medical equipment and staffed by trained personnel. In essence, to prevent residents from being left behind as local resources diminished, they decided to bring resources directly to those most in need.

Thielmann emphasises the importance of this initiative, stating, “How can we bring back infrastructure to [rural] areas, to keep people living where they want to live, let people age in the houses that they want to age in, and not forcing them to move into the cities where there is an abundance of doctors.”

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**David Benshoof Klein**  
CEO & Founder  
Click Therapeutics

## CODE + CAPSULES: A PROMISING COMBINATION

One exciting development emerged at the intersection of medication and software: combination products. David Benshoof Klein, CEO of Click Therapeutics, showcased how “software-enhanced drugs” that integrate digital therapeutics with traditional pharmacotherapies are gaining attention.

“We believe that soon many drugs will have these new dosage forms that combine robustly validated digital therapeutics with traditional pharmacotherapy,” Klein explained. Using migraines as an example, he demonstrated how these innovative treatments go beyond symptom suppression, adapting to individual patient patterns.

Clinical data showcased remarkable results. “The average patient in the intervention group went from 7.5 monthly migraine days to about 4.5,” Klein noted, highlighting the transformative potential of this combined pharmacological and digital approach to healthcare.

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# #7

## TELEHEALTH IS NOT DEAD (DESPITE THE RUMOURS)



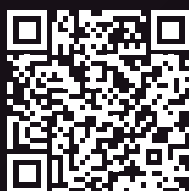
**Sue Thomas**  
Director  
Google Health

Despite rumours of declining investment trends, telehealth is not dead. It is advancing to support precision medicine, as noted by Sue Thomas from Google Health. Innovations in AI and remote patient monitoring now enable personalised, home-based care. For instance, cardiac rehab can be conducted remotely, allowing patients to recover without frequent clinic visits.

“The people who don’t access rehab are those who are from lower socio-economic backgrounds, often because they can’t take time off work, or they work shifts, or the transport system doesn’t permit frequent travel into town where the centre is. Telehealth empowers individuals to have control over their health, which we know that people want to do.” She says

Thomas emphasises telehealth’s broader potential, saying, “One of the problems is in the name - the word ‘tele’ at the front [makes us] think of calls or screens, and that we are limited to that, but it can be so much broader than that.”

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**Nadeem Sarwar**

Founder and Head  
– Transformational  
Prevention Unit  
Novo Nordisk

## YOU CAN'T TREAT YOUR WAY TO DEFEAT

Driven by the realisation that current healthcare systems predominantly focus on managing patients after they become ill, healthcare is shifting towards preventing diseases, rather than merely treating them.

The biopharmaceutical industry often targets those already diagnosed or at risk, rather than preventing illness in the first place. As Nadeem Sarwar from Novo Nordisk highlighted, "What if you could see your future and predict what was going to happen to you based on your genetics, your blood, or your shopping habits?"

He described this model as "Predict, Pre-empt, Partner," using data to identify health risks early, intervene before issues arise, and collaborate globally to create sustainable health solutions. He argued that waiting for patients to become ill before intervening is not sufficient, stating: "You cannot defeat something if you wait for it to happen. You can't treat your way to defeat."

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# #9

## DISRUPTIVE INNOVATIONS REDEFINE SYSTEMS

A lightbulb moment is more than just an idea, a lightbulb represents an entire system of change, driven by a novel technology. As Thimeo Werner, associate partner and senior director for Innosight illustrated, to create disruptive change through prevention, innovators need to take a leaf out of Thomas Edison's playbook.



**Thimeo Werner**  
Associate Partner  
& Senior Director  
Innosight

"To create disruptive change through prevention, we need a coherent business model, we need an aligned value network, and it would certainly be helpful to have a supportive regulatory environment," he said.

The dilemma is that, while there are examples of new business models that will help to replace legacy systems, they are largely isolated efforts and, in order to scale preventative health globally, we need some degree of system change. To this end, Werner highlighted three strategic imperatives to enable business model change:

- Adopt a future back approach: Envision the future and systematically bring it to life
- Separate from core business: Protect prevention initiatives from core business conflicts
- Follow disruptive patterns: Target underserved and overlooked segments

"There is reason to believe that prevention is here to stay," he concluded. "If we find the right business model to unlock this, we have a huge chance to provide relief to a system."

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# #10



**Anna-Maria Heidinger**  
Head of DSPACE  
Daiichi Sankyo Europe

## IT'S TIME TO FALL IN LOVE WITH THE PROBLEM

Building successful digital health collaborations requires stakeholders to embrace “falling in love with the problem,” emphasised Anna-Maria Heidinger, head of DSPACE, Daiichi Sankyo Europe in a special interactive workshop dedicated to unpacking the key challenges and opportunities companies face when scaling digital health solutions.

Many pilot projects fail to advance due to a lack of long-term commitment and shared objectives. The session underscored the importance of transparency, clear objectives, and addressing capacity issues. By partnering with start-ups that offer complementary strengths, rather than attempting to build everything internally, pharma can support more sustainable and impactful digital health initiatives.

Heidinger also highlighted the importance of establishing realistic timelines and clear expectations to bridge the gap between the agile nature of start-ups and the slower decision-making processes of pharma companies. Addressing operational realities from the outset, such as clarifying team roles and setting milestones, she said, can create a more harmonious collaboration.

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# #11

## THE ROLE OF AI IN COMMERCIALISING PHARMA



**Alyssa Fenoglio**

Vice President,  
Global Head of  
Digital Commercial  
TEVA Pharmaceuticals

Consumers, including our own patients, HCPs, and pharmacists are engaging with other industries that have risen the bar for what a consumer experience should be. Traditionally, healthcare has lagged behind such innovations, but with the help of AI the industry is steadily catching back up.

“The good news is that GenAI helps us leapfrog some of the gaps that we have had in healthcare to provide better experiences, through hyperpersonalisation and insight generation,” explained Alyssa Fenoglio, vice president and global head of digital commercial at TEVA Pharmaceuticals.

“We have to get our house in order before we think about partnering,” she stressed. “We need to know our own strategy. It needs to be defined by us and not a consultant. Then, we need to start considering how we address business cases using AI.

“You really have to think about what competitive advantage you want to build for your company and then decide the build, buy, or borrow depending on the use case.”

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# #12

## PATIENT AND HIP DRIVEN INNOVATIONS



## A CURE: HIDING IN PLAIN SIGHT



**Grant Mitchell**

Co-Founder and CEO  
Every Cure

“Every drug that we currently have, should be utilised to treat every single disease that it possibly can,” opened Grant Mitchell, co-founder and CEO of Every Cure during his keynote presentation on AI-driven drug repurposing.

Using the inspiring story of his co-founder’s journey from rare disease patient with no known cure, to discovering an existing medicine that allowed him to survive well beyond his prognosis – to illustrate his point, Mitchell posed a poignant question: “How many more cures are sitting on the pharmacy shelf, hiding in plain sight?”

The problem, he continued, is that there are only around 4,000 FDA approved medications for 4,000 diseases, and 19,000 diseases that lack a single approved therapy.

“The solution is repurposing,” he said. “Since many diseases share underlying mechanisms, repurposing existing drugs is the fastest and most efficient way to treat conditions with the highest return on investment for saving lives.”

Drug repurposing is not just a cost-effective innovation, he argued, but a moral imperative.

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# DRIVING HEALTH EQUITY IMPACT THROUGH INNOVATION

**KRISTIN MILBURN**  
SVP Marketing Ecosystem & Strategy  
EVERSANA

**TONY ESTRELLA**  
Lead for Health Equity and Access  
World Economic Forum

**DAVID RABINOWITZ**  
Principal  
Deloitte Consulting LLP

**PETER SPEYER**  
Head of Data & Analytics  
Novartis Foundation



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# #13

## LOCAL SOLUTIONS FOR GLOBAL HEALTH EQUITY



**Tony Estrella**

Lead for Health Equity and Access  
World Economic Forum

Achieving health equity on a global scale means starting locally – a theme championed by Tony Estrella from the World Economic Forum. Through the concept of “place-based change”, Estrella highlighted how specific, community-driven health solutions can address unique challenges faced by underserved populations.

The World Economic Forum’s “Zero Health Gaps Pledge”, signed by over 150 organisations, underscores a commitment to such localised efforts. Rather than applying a one-size-fits-all approach, place-based change prioritises adaptability, recognising that each community has distinct social, economic, and environmental factors that impact health.

Estrella, alongside colleagues, called on public and private organisations to form partnerships that can support these unique community needs sustainably. For global health equity to become a reality, Estrella argues, healthcare solutions must be both scalable and sensitive to local contexts – a call for transformative action rooted in empathy and inclusivity.

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# #14

## CONSUMERS RULE

As consumers gain greater access to tools that can be used to monitor and measure their health, healthcare is increasingly becoming a consumer-driven business. Rhiannon White of Clue underscored the importance of serving consumers directly, during the “Consumers Rule” panel, stating, “Tracking equals insight, and insight equals data, and data equals agency.”

This approach, she stressed is vital in addressing unmet needs in women’s health. However, she continued, there are limitations for a D2C approach.

“No matter how good your consumer subscription app is, only a certain proportion will ever pay and the reality is that most people either can’t, or won’t pay out of pocket,” she said. “The more convinced people are of the benefits of these digital solutions, the more they want them to be provided, to be paid for by whatever payer ecosystem that they live in.”

While fellow panellists countered that this reality was likely 10 years away in the UK and Germany, Raghav Gupta of Aktiia noted that demand is already being seen in blood pressure monitoring: “We are starting to see this flywheel effect, where consumers bring it to their clinicians, and the clinicians are then hearing about it and starting to adopt.”

Hamish Grierson of Thriva and Sokratis Papafloratos of Numan both stressed the need for understanding consumer behaviour and providing personalised health solutions. Grierson pointed out, “Whether or not every single business has to start D2C to create evidence in order to go B2B is hugely market specific.” The panel concluded that, while D2C offers immediate consumer feedback and rapid learning, the ultimate goal may involve evolving into B2B2C or Rx models to maximise impact and reach.



**Rhiannon White**  
CEO Clue

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# #15

## MENTAL AND BRAIN HEALTH: THE ULTIMATE GROWTH SECTOR?



**Nawal Roy**

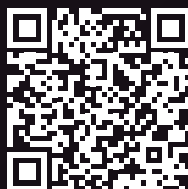
Founder and CEO  
Holmusk

“At this stage what we are affecting is not highly scalable and is certainly not effective,” argued Nawal Roy, founder and CEO of Holmusk, during a panel discussion on the topic of scaling mental and brain health solutions, which currently cost the global economy around \$35 trillion. Despite their significant burden, investments in these areas lag behind fields like oncology.

“I see it as an ultimate growth sector,” he said. “We understand our body and the metabolic disease area very well, but we don’t understand the mind and brain. The next 30 years will be all about that. If we as a society want to solve healthcare, then mental health just can’t be ignored. It is one of the largest comorbidities, if you look at it from a healthcare perspective as a primary or secondary indicator; it is one of the largest factors.”

“Mental health doesn’t kill you, but it makes you disabled and that is going to bankrupt us if we don’t solve it,” he warns.

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# #16



**Alan Crowther**

General Manager,  
Global Pricing & Access  
EVERSANA

## DATA IS KING

Alan Crowther from EVERSANA brings a fresh perspective on artificial intelligence, pointing out that today's "AI" is really just advanced predictive algorithms. These algorithms can perform impressive feats with numbers, words, and sentences, but they lack true reasoning.

Instead, Crowther emphasised that the real game-changer is the explosion of data. "It's not the technology that is advancing – it's the data. The more data we have, the more we can make predictions."

While GenAI is currently creating a buzz of excitement (and some trepidation), it is in the more mature predictive AI space where Crowther forecasts we will see the most progress in the near future, as data continues to advance. However, with this influx of new data and tools, training will be vital to achieve success.

"A new tool is great," he said. "But if you don't train people to use it, the results will be exactly what you expect."

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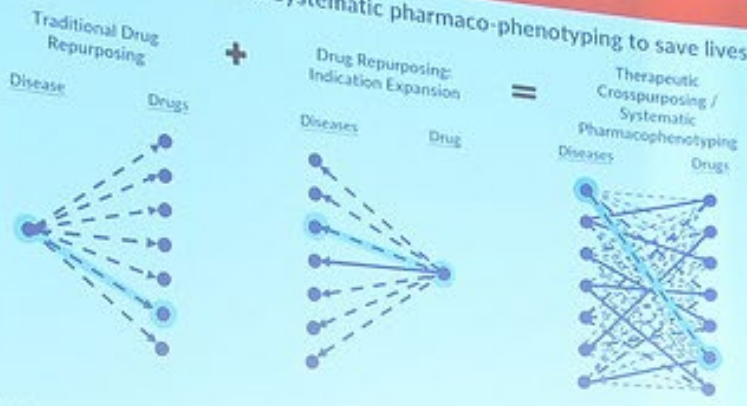


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# Advancing a new field of systematic pharmaco-phenotyping to save lives



Kobayashi, et al. 2020 (in submission)

EVERY CURE



**GRANT MITCHELL**  
Co-Founder and CEO  
Every Cure



From Breakthrough to Repurposing: Unleashing the Potential of FDA-approved Medication

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# #17

## THE RISE OF DIGITAL-DRUG PAIRING



**Marty Culjat**

SVP, Global Head  
of Digital Medicine &  
Regulatory Innovation  
EVERSANA

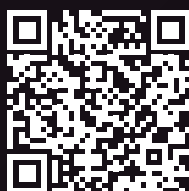
Digital-drug pairing is an innovative area within the pharmaceutical industry, combining software with drugs to enhance patient outcomes and streamline healthcare processes. This approach leverages digital health solutions to support, monitor, and optimise drug therapies, providing a more holistic treatment experience.

A notable example of this is the new US framework called Prescription Drug Use-Related Software (PDURs). As EVERSANA's Marty Culjat highlighted, PDURs represents a shift from traditional companion solutions, offering greater flexibility. "Up to now everything's been sort of a companion solution that might be branded or unbranded or kind of a standalone solution."

He continued, "This new framework is much more flexible in that it allows you to optionally prescribe software with the drug if you could demonstrate a clinically meaningful benefit."

Despite the challenges of pairing software with drugs, Culjat noted that "a lot of pharma companies today are exploring this opportunity," recognising its potential to highlight the clinical value of software in enhancing drug efficacy.

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# #18

## BRIDGING DIGITAL HEALTH IN EUROPE: A TALE OF TWO SYSTEMS

France and Germany are blazing trails in digital healthcare reimbursement - but they're taking distinctly different paths, illustrating the challenges of harmonising digital health adoption across Europe.



**Louisa Stüwe**

Project Director at the Digital Health Delegation French Ministry of Health

While both frameworks aim to integrate digital tools into healthcare systems, they differ significantly in approach and execution. Germany's DiGA fast-track system opens the door quickly: digital health tools can start receiving reimbursement while building their evidence base. It's a "prove-as-you-go" approach that aims to get innovations to patients faster. Conversely, France's PECAN (La prise en charge anticipée numérique) emphasises a centralised process, requiring national health agency oversight and comprehensive data on clinical utility.

"We are not just replicating DiGA data and transposing it in the French system, as it is still not the same healthcare pathway," explained Louisa Stüwe, Project Director - Digital Health Delegation, Ministère de la Santé. "It is highly important to look into the healthcare pathways that exist in France and look at the data that can come into the French system."

These disparities create friction for companies aiming for multi-country adoption. Such fragmentation hinders scalability and forces developers to navigate country-specific criteria, raising costs and delaying patient access. Harmonising these systems through standardised criteria or mutual recognition agreements could transform Europe's digital health ecosystem, creating a more efficient path to market for innovative solutions.

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# #19

## THE US PERSPECTIVE: INNOVATION VS REGULATION



**Andy Molnar**

CEO

Digital Therapeutics Alliance

The US healthcare reimbursement landscape presents unique challenges for digital health innovators, characterised by multiple payer systems and diverse reimbursement pathways. However, Andy Molnar, CEO, Digital Therapeutics Alliance identified two emerging pathways that are streamlining market access:

**Provider-Based Billing:** Digital health solutions are increasingly integrated into clinical workflows, allowing healthcare providers to bill for these tools alongside traditional medical services.

**Pharmacy Benefit Integration:** By leveraging existing pharmaceutical reimbursement infrastructure, digital health companies can reduce administrative complexity and improve patient access.

“Billing on the pharmacy benefit is something that people have really fought for over the past seven years,” said Molnar. “A combination product – digital therapeutic with a drug – actually opens up that model again.”

These developments are supported by regulatory evolution, including PDURS reforms, which create frameworks for innovative hybrid solutions. However, Molnar emphasised that broader payer alignment and standardised commercial pathways remain critical for widespread adoption.

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# #20



**Yacine Hadjait**

Innovation in Health  
Science & Digital Health  
Dubai Health

## INSIDE THE UAE'S VISION FOR HEALTH INNOVATION

The United Arab Emirates is transforming its healthcare landscape, with Dubai leading a bold mission to become a global innovation powerhouse. In 2021, Dubai Health emerged as the region's first integrated academic healthcare system, marking a critical shift from regulatory management to entrepreneurial partnership.

"Before 2021, everything was managed by the Dubai Health authority, including health services – financing – insurance, health services regulation, and health services – delivery – patient care," explains Yacine Hadjait. Now, "the mission to work with the private sector and investment and entrepreneurship and innovation was given to the academy healthcare system."

By eliminating traditional innovation barriers, the UAE has created an environment that attracts top talent and investment. Healthcare start-ups can launch within five days, and a sophisticated AI strategy mandates that "in every public entity there is now a chief AI officer that has to put in 12 months [of] clear 10-year roadmaps for AI impact," explained Hadjait.

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# #21

## DIGITAL HEALTH IN APAC: OPPORTUNITIES AND IMPLEMENTATION CHALLENGES



**Roberta Sarno**

Founder and Director  
D-Health Consulting

The Asia-Pacific region presents a dynamic landscape for digital health adoption. While innovations like AI-enabled chronic disease management show promise, Roberta Sarno of the Digital Therapeutics Alliance noted regulatory fragmentation and literacy disparities as significant barriers.

Leading markets like Japan and Singapore are establishing specialised assessment pathways and reimbursement mechanisms to accelerate digital health adoption. These initiatives create potential blueprints for other APAC nations.

“The issue here is not the amount of innovation that we have,” she said. “Now, our role as the healthcare ecosystem is to make sure that these technologies reach the patient.”

Sarno called for multi-stakeholder collaboration to address cultural and infrastructure challenges, emphasising the need for sustainable financing and inclusive design to ensure equitable access to digital health solutions across diverse populations.

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# #22



**Anand Iyer**  
Chief AI Officer  
Welldoc

## INTRODUCING A “GOOGLE MAPS” FOR DIABETES MANAGEMENT

Diabetes management is an arduous challenge for patients. Tracking glucose, meals, exercise, and overall wellness requires constant attention. However, as Welldoc’s Anand Iyer explained, with the aid of intelligent, real-time health navigation, AI-powered diabetes management can transform the patient experience.

“We actually have an opportunity to transform the entire care continuum,” he said. “If we could support the patient at the point of care through AI coaching... let them stand on AI shoulders and maybe reach further, can they better manage the disease?”

He highlighted how Welldoc’s system acts like a “Google Maps for patients” – continuously monitoring and adapting to individual health needs. By transforming diabetes management from reactive to proactive, the platform offers patients a sophisticated support system that simplifies tracking glucose, meals, exercise, and overall wellness.

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# #23



**Pierantonio Russo**

Corporate Chief Medical  
Officer, EVERSANA

## LISTENING TO THE HEART'S SILENT SIGNALS

With nearly 23% of atrial fibrillation cases remaining undetected, researchers are pioneering predictive technologies, using machine learning to identify potential cardiac risks up to six months before traditional methods.

“The current process for a patient is: they feel a symptom, go to their primary care or GP. That primary care GP has to agree with the symptoms and make a determination of what happens next,” explained EVERSANA’s corporate chief medical officer, Dr Pierantonio Russo.

However, using iRhythm’s monitoring technology and advanced data analysis, Russo explained that such predictive models can pinpoint high-risk individuals before symptoms appear, a shift that would benefit both patients and providers. “We truly believe that using big data tokenisation – so matching data sets – we can now predict arrhythmias in patients that are asymptomatic at a high enough rate that it’s cost-effective,” he said.

“The more we work with this, the better we get,” Russo notes, highlighting the adaptive nature of these machine learning approaches.

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# #24



**Burcak Simsek**

Global Lead  
Contraception Women's  
Healthcare  
Bayer

## WOMEN'S HEALTH: FROM MYTHS TO MEDICINE

Women's healthcare faces critical challenges of underfunding and systemic barriers. With only 4% of healthcare R&D spending directed towards women's health issues beyond reproductive care, innovators are demanding transformative change.

"We really want to change this narrative... not only providing solutions, but finding a way to value women's healthcare globally," says Burcak Simsek from Bayer during a roundtable discussion on Women's Health.

Key challenges identified by the panel include:

- Limited funding for women-led healthcare start-ups
- Investor bias in later-stage investments
- Lack of established research models
- Regulatory uncertainties

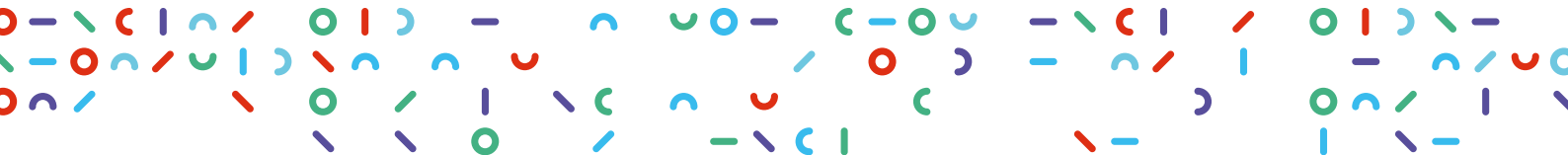
Tamara Orlova from Flo Health highlighted the potential of digital products to help patients understand their bodies, address myths and misconceptions, and foster innovation through targeted investments and collaborations. For example, using data captured using continuous monitoring tools to provide proactive and personalised care. As she noted, "The beauty of digital product is that we can listen to her data, to her symptoms continuously in a safe, data protected environment.

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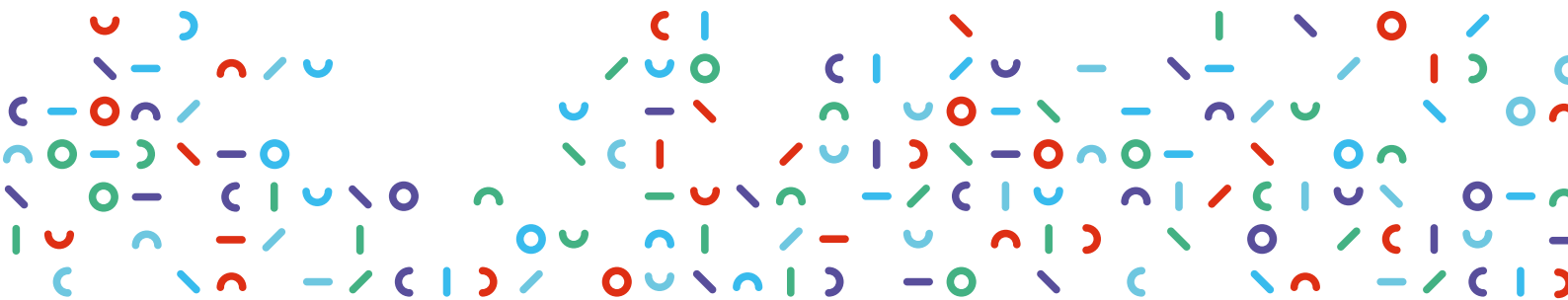
# ABOUT FRONTIERS HEALTH

Frontiers Health is the leading global health innovation summit, spotlighting breakthrough technologies, adoption and integration of innovation, novel commercialization approaches, digital therapeutics and software-enhanced therapies, scientific breakthroughs, investment strategies, advancements in health equity, and ecosystem development. Bringing together thought leaders, entrepreneurs, industry leading executives, innovators, patients and doctors, healthcare systems, and NGOs. The conference serves as a dynamic platform to explore key challenges, strategic trends, and innovative, scalable solutions reshaping the future of healthcare.

Founded by the chairman Roberto Ascione, Frontiers Health is operated by EVERSANA and will be celebrating its 10<sup>th</sup> anniversary edition November 2025 in Berlin.

If you'd like to dive deeper into any of these topics or watch the full sessions on replay, get your playback pass [here](#).

**Curious to learn more or join us next year?** We'll be convening again in Berlin on November 11<sup>th</sup> & 12<sup>th</sup>! Please reach out to us at [info@frontiers.health](mailto:info@frontiers.health) or find out how you and your company can get involved or learn more on [www.frontiers.health](http://www.frontiers.health).





# FRONTIERSHEALTH



These insights were curated by the editorial staff of pharmaphorum, a leading online destination for healthcare and pharmaceutical industry news, insight, and debate. Contributions were provided by:



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Founded in 2009, pharmaphorum's mission has always been to educate, inform, engage, and connect pharmaceutical industry leaders and to equip them to thrive in healthcare's evolving digital future. pharmaphorum is an EVERSANA company.

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