

## Demystifying Data in Medical Affairs *Webinar Series*

Part I: What does data mean to medical affairs and how can we optimize its use?

Part II: Approaches to overcome the issues with data (December 14, 2022)

Part III: Current capabilities for data (February 2023)

Part IV: The next steps for you to begin using data (March 2023)

October 26, 2022

## ***Demystifying Data in Medical Affairs Part I:***

# ***What Does Data Mean to Medical Affairs and How Can We Optimize Its Use?***

# Today's Session

This webinar will focus on three areas:

- What data sources are available in Medical Affairs?
- How is this data currently used? What opportunities are we missing?
- Real world examples of current data usage

# Today's Speakers

Moderator:



**Greta James-Chatgilaou**

Director, Field Medical Strategy & Execution

**Biogen Australia & New Zealand**

Panelists:



**Jeff Lange**

Director, Center for Observational Research

**Amgen**



**Jon Zdon**

Associate Medical Director – Medical Excellence APAC

**Takeda**



**Jan van Overbeeke**

Partner

**McKinsey & Company**

# Overview: Data and analytics can accelerate multiple activities within Medical Affairs' value chain

## Strategy

### Medical Unmet Needs at its core

A new approach to understand patient journey and to define + quantify metrics in medical needs, so Medical strategy are pivoted around MUN and execution of it can be tracked (access gaps, HCP education etc. on top of patient outcomes)

### Innovative evidence generation

Rapid-cycle, integrated evidence generation across health economics and outcomes research (HEOR), real-world evidence (RWE), Phase IIIb/IV studies etc. supported by micro-analysis that tailors to the needs of individual patients

### Regional/micro-segmentation Omnichannel

Across touchpoints, provide tailored information focused on improving outcomes, supported by a reimagined insight-generation process that pools customer data across sources

## Evidence

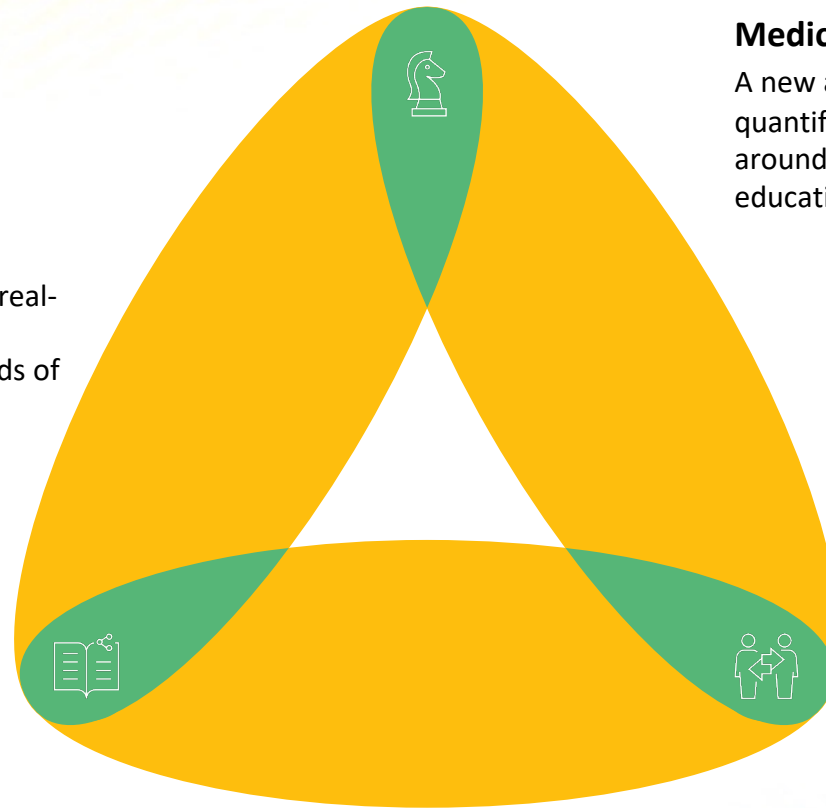
### Data democratization

Paradigm shift in engagement with HCP from using research output to more open innovation with HCP, for example decision support software or direct access to trial interpretation

## Engagement

### Content creation from engagement data

Generating insights using AI to combine all data about customers to understand what are their most critical needs and what actually works to address each need with different microsegments of customers (e.g. mining from free-text comments on CRM by the field, Feedback data from engagements)



# Leveraging data and analytics is often more complicated than anticipated, where use-cases for Medical Affairs are no exception

## Defining purpose

## Obtaining data

## Data Engineering

## Data science

## Delivery

### What we often see

Purpose, aim and/or output image is **not clearly defined** before the analyses  
“Go and Find something interesting” type of expectations from organization leaders to analysts

There are **wide varieties** of RWE data, across **multiple sources** (e.g. EHR, claims, product and disease registries, data from personal devices and health applications, emerging unstructured data such as images and free-text information)

Most of these data are **not designed for such use** when collecting, and thus **not straight forward to use** for analyses (e.g. includes a lot of “garbage”, inconsistent entries, irregular patterns)

Often the models for Medical Affairs activities are under **more strict** requirements from authorities on its **fairness, reproducibility, explainability** etc.

MA organisations are often **not the most experienced** in data and analytics driven solutions

### What should be done

Have a through discussion within the organization to **well define clear purpose** of the data and analytics, which is required to identify the data source and approach efficiently

The right data for the purpose must be **carefully considered** based on **coverage, information included/not included and any limitations** on the source

Making a meaningful **intermediately data mart** leveraging a combination of domain knowledge, data source understanding and database programming skills

The data science techniques that can be used are more limited and should be **chosen carefully** to ensure **being compliant** in all of its aspects

The end user should be provided with easy and intuitive **visualization**, sophisticated **change management** and deeper **integration** of the solution **into daily operations** (e.g. through MLOps)

# Q&A

*Please type any questions or comments  
you have into the Q&A box!*

# Join Us for Part II

## Demystifying Data in Medical Affairs Webinar Series Part II

### **Approaches to Overcome the Issues With Data** **(December 14, 2022)**

Moderator:



**Greta James-  
Chatgilaou**

Director, Field Medical  
Strategy & Execution

**Biogen Australia & New  
Zealand**



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# Thank you!