

Improving Safety in Polymedication by Managing Drug-Drug-Gene Interactions

Patient involvement in quality and safety research

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Status Quo

26–40% of elderly take >5 drugs

concomitantly¹

197,000

deaths
due to ADRs²

>65%

of ADRs due to DDIs³

79bn €

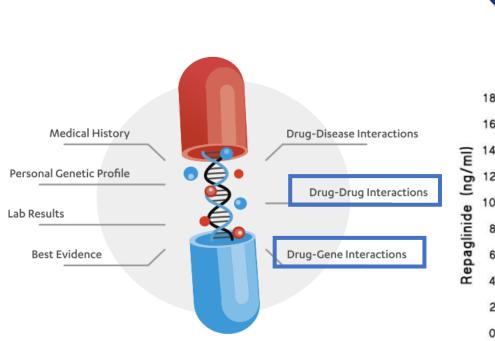
HC cost due to ADRs annually²

>60%

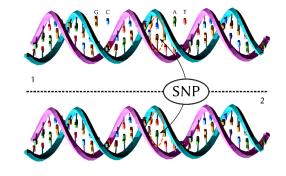
of ADRs due to DGIs⁴

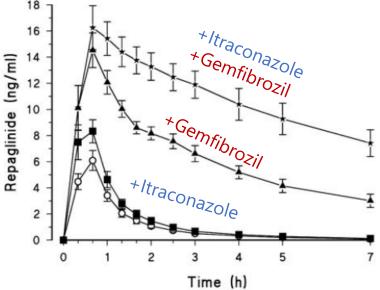


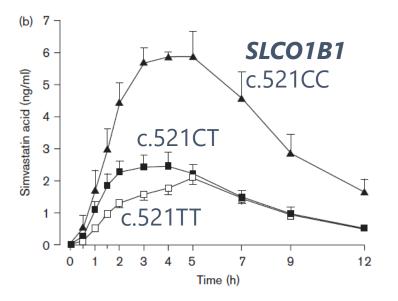
Drug-Drug (DDI) and Drug-Gene Interactions (DGI)



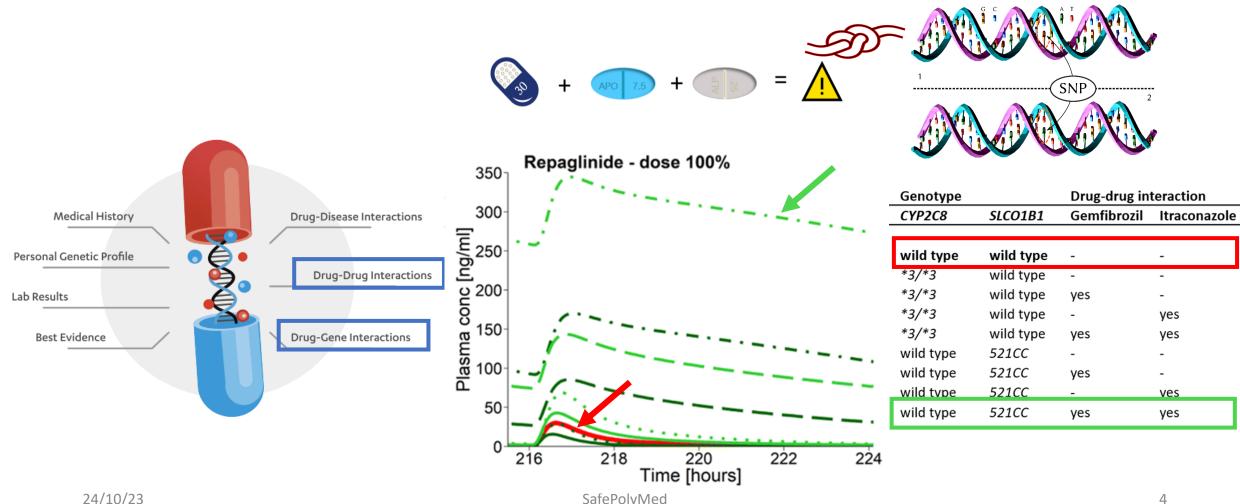








Drug-Drug (DDI) and Drug-Gene Interactions (DGI)



24/10/23

SAFEP**⊘**LYMED

Improve Safety in Polymedication by Managing Drug-Drug-Gene Interactions (SafePolyMed)

- Increase patient safety and equip health care providers with innovative tools
- Empower patients to proactively manage their own health care by accessible health relevant information
- Increase patient safety towards personalized treatment plans



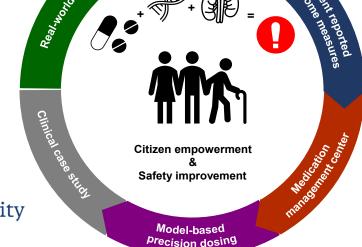




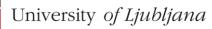








Risk prediction







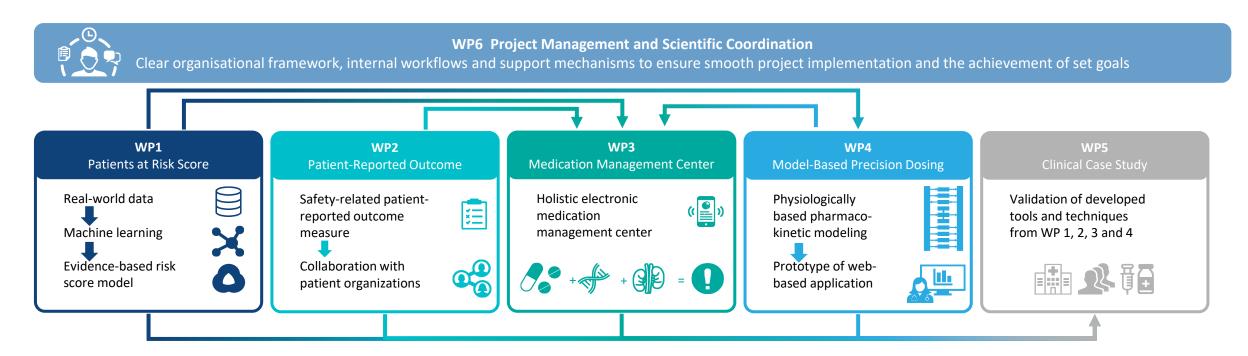
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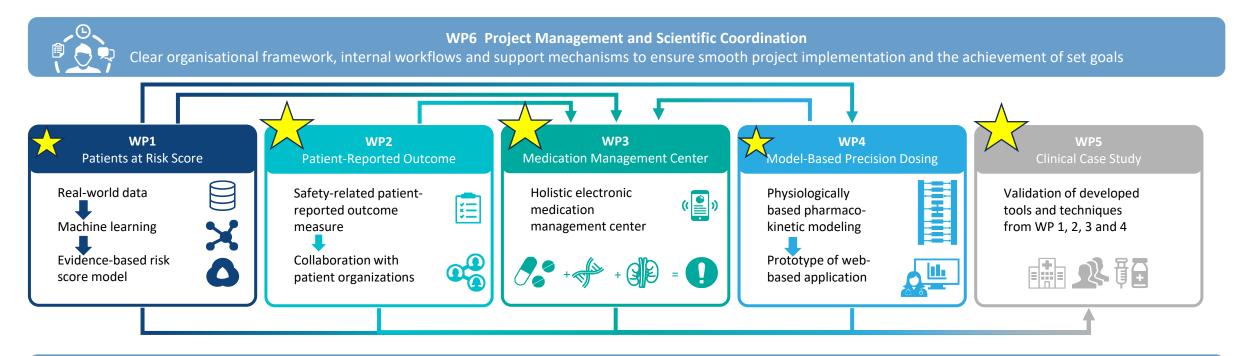
Work Packages





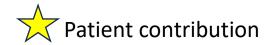
WP7 Innovation Management: Communication, Dissemination, Exploitation
Integrated communication, dissemination and exploitation measures to ensure high visibility, outreach and impact

Patient contributions



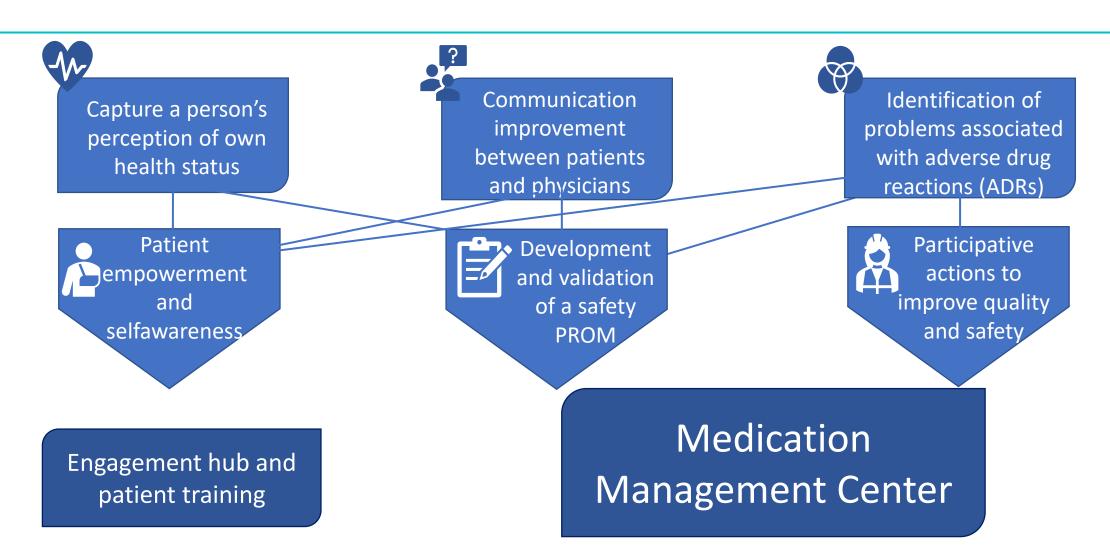


WP7 Innovation Management: Communication, Dissemination, Exploitation
Integrated communication, dissemination and exploitation measures to ensure high visibility, outreach and impact



Patient-Reported Outcome (WP2)





Patient involvement in SafePolyMed

Advisory Committee
Group of 5 Independent
patient experts









Patient Engagement Hub



Delivers to the project



- Training material
- PROM in safety
- Health digital tool

















Patient support

Gathering of a group of patient organizations (POs) and patient experts that have the knowledge, experience, and capacity to provide the patient's point of view and knowledgeable insights into:

- The development of the training syllabus for the training courses
- The development of the core set of PROMs via a Delphi Method
- > Feedback to the Medication Management Centre
- ➤ Input to WP5 with safety PROMs implemented in the medication management system for the clinical pilot study.

Dissemination



Dissemination

Make knowledge and results publicly available free-of-charge

For whom

For those who can learn and benefit from the results, such as: scientists, industry, public authorities, policymakers, civil society



Publishing results in:

- √ Scientific magazines
- √ Scientific and/or targeted conferences
- √ Databases

Why

- ✓ Maximise the impact of the action
- √ Allow other researchers to go a step forward
- ✓ Contribute to the advancement of world class knowledge
- √ Make scientific results a common good

It is a legal obligation!

Article 17 of Horizon Europe

Grant Agreement

Scientific Community & Health Care Professionals

- Open-Access Publications
- Conferences & workshops

Patients & Citizens

- Communication and networking via patient engagement hub
- Patient training courses via EUPATI

Communication



Communication

Inform, promote and communicate activities and results

For whom

Citizens, stakeholders and the media



- ✓ Having a well-designed strategy
- √ Conveying clear messages
- ✓ Using the right channels

Why

- √ Engage with stakeholders
- ✓ Attract the best experts
- √ Raise awareness of how public money is spent
- ✓ Show the success of European collaboration

It is a legal obligation!

Article 17 of Horizon Europe

Grant Agreement

Scientific Community, HC Professionals, Patients & Citizens

- Public events
- Website
- Social Media
- Patient communication via EUPATI

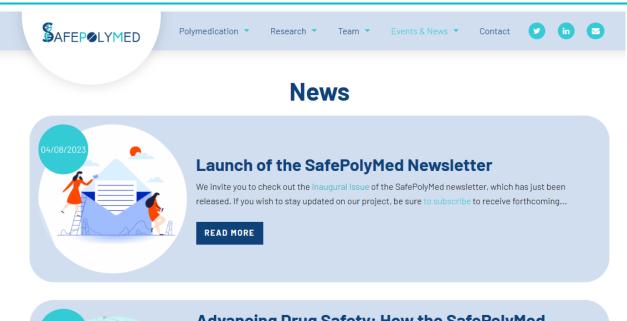
Patients & Caregivers Key Stakeholders

Key Target Groups

 Inform on project & results, also via EUPATI

"Key Players"

Patients as active partners:
 project structure & activities











World Patient Safety Day 2023











Can you tell us a bit more about yourself?

Hy name is Jenny Camaradia, and ia me alsa UNEVLIGITEN phastons. I am is trained Patients Dipert, a follow of EURHAT, the Unrepear Patients Academy, and nat yourse of EURHORIS preparenting patients across the ELL I serve as a patient advocate in various areas, Including the EAM EURyapean Academy of Neurology/Whintigh Group on Automotic Neurous System Controllers, and also applient enhanced for the EU region in the OneNeurology Global Partnership Initiative, which encompasses more than 400 neurologist and neurodegenerative conditions. Additionally, I host the role of telling an assigned ally member on the KLV NIC Covid-18 epic pare land have contributed to the COVID END evidence synthesis to alid decision-makes network, a QUA partner to the VIMO looking at the full spectrum of pandersing management. How the as Tentions grant written for a Dutton social on Civil port pandersing management. How they are foreign a partner to the NIMO looking at the full spectrum of pandersing management. How the as Tentions grant written for a Dutton social on Civil port of pandersing management. How the as Tentions grant written for a Dutton social on Civil port of the proposal of EURE Academy and the partners of the partners of the NIMO partners of the Partners of the NIMO partners of panders of the NIMO partners of panders of the NIMO partners of panders of partners of par

What is your role in SafePolyMed?

Within Sachroylved, I am supporting the team of childrans and researchers in the consortium by providing consultancy to better embed splatent concerns around the development of the core set of PROs for the project. I am also identifying and modifying the research questions for the development of the Delphi analysis Itself, as well as practical issues around the implementation and delivery of the medication management centries and training materials. Nembers or only family twee suitables (its threatering anaphysicatics shock from different medications over the last 30 years on multiple occasions due to having system mast cell disease. In recognite the limportance of working logister will shocker, patients, and other stakeholsers to support good, safe patient care and ensure a shared understanding of mutual issues and opsis. This project provides a grade opportunity to utilise come of the training have understains of far to improve the research Itself from a patient's point of view and enhance enagement.

This year, the theme of World Patient Safety Day is 'Engaging Patients for Patient Safety.' Why do you think it is essential to involve patients in current research endeavors and clinical practices?

Involvement and engagement are terms often used interchengeably in various contexts, sometimes carrying country-specific interpretations. It is crucial to engage patients in research to ensure that the right questions are asked when identifying and prioritising research topics. Models such as the James Lina Alliance Priority Setting Partnership in the Lik, with a tradition dating bock to the lith century, highlight the importance of innoving citizens in research, institutives like Light provide training for patients to become experts, contributing to the design and delivery of trials and healthcare system reform.









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Towards Safer Drug Treatment and Enhanced Patient Empowerment

#SafePolyMed #FromEuropeForall #HealthForAll



Project Overview and Objectives



Patients at Risk Score (WP1)



Development of a novel, evidence-based risk score model for individual patients with machine learning based on the analysis of large real-world dataset

Estonian Biobank FinnGen **UK Biobank** n = 200 000 n = 500 000 n = 500 000 **Medication use** Medication use (10+ y) Medication use (20+ y) (primary care) **Adverse** events Adverse events Demographic data (ICD-10 & free text) (ICD-10 diagnoses) **Demographic data Demographic data Genotype data** Soon: whole exome Genotype data Genotype data seq

Genome-wide association studies -> novel genetic variants -> polygenic hazard scores

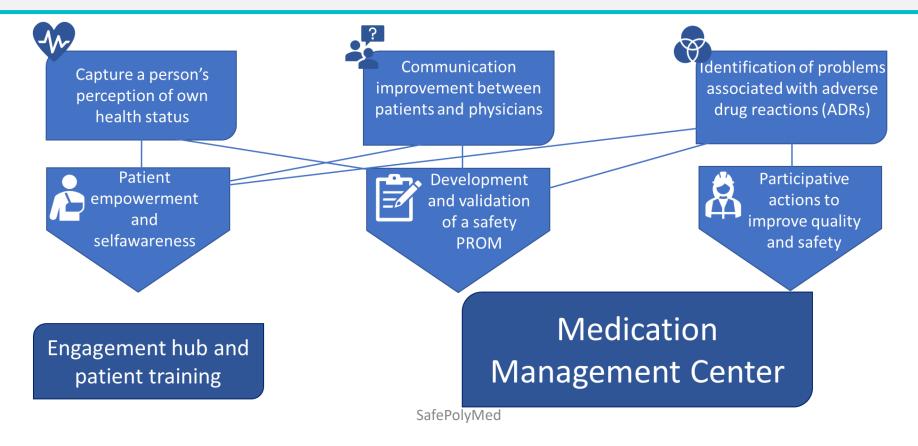
Pharmacogenetic star alleles + novel hazard scores

Machine learning models integrating different layers of data -> novel models



Patient-Reported Outcome (WP2)

Improving adherence, patient satisfaction and safety by empowering patients to assess and report ADRs through PROMS

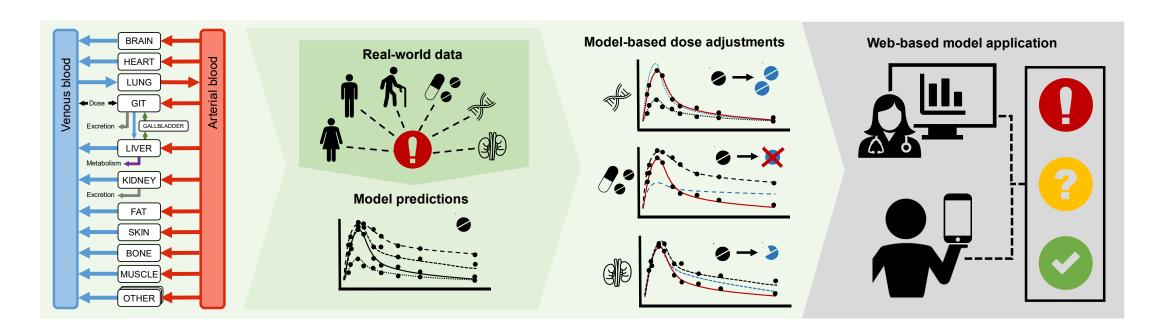


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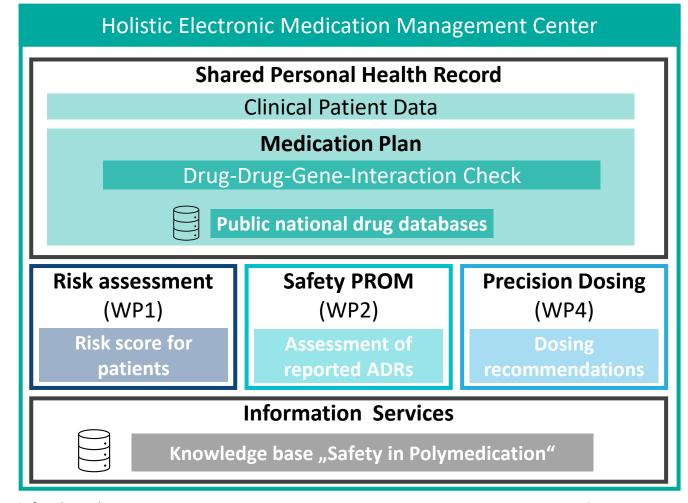
Development of precision dosing models with help of PBPK modeling and extension to web-based decision support systems





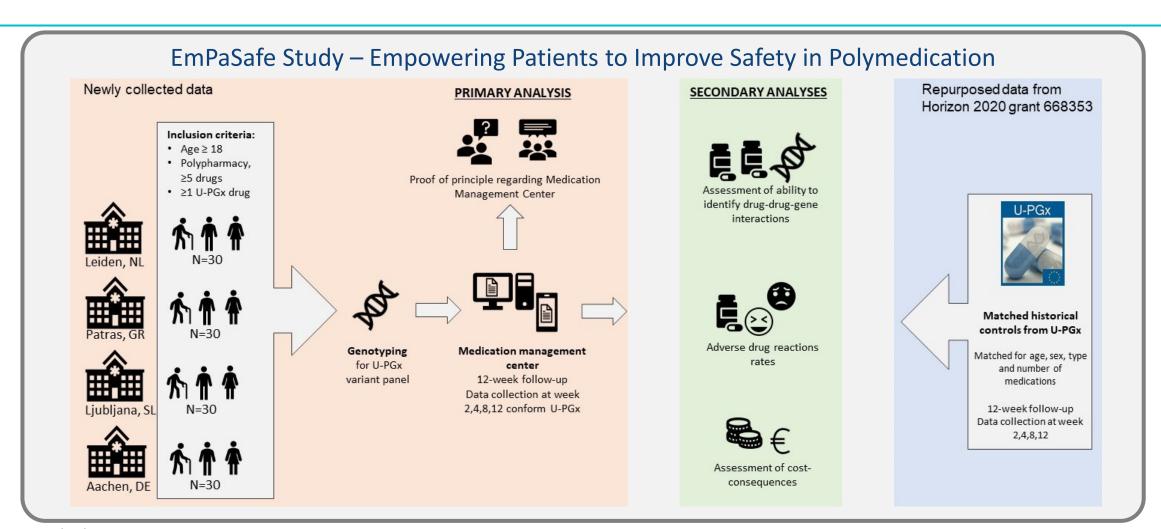


- Integrate, harmonise and standardise medication data
- Comprehensive, sustainable knowledge base concerning polymedication
- Increasing access to health relevant information
- Ensure quality and comparability of health data according to ethical, legal and regulatory guidelines









Key Results of SafePolyMed

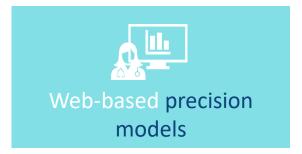












Supporting citizens in managing their own health care

innovative tools for health care professionals to manage polypharmacy

Results from the proof of principle study EmPaSafe to validate developed tools

Dissemination and Communication

→ Dissemination

- Scientific community
 - Open science principle
 - Participation in scientific conferences
 - Organisation of SafePolyMed satellite event
- Patients and citizens
 - Communication and networking via patient engagement hub
 - Patient training courses via EUPATI

Exploitation

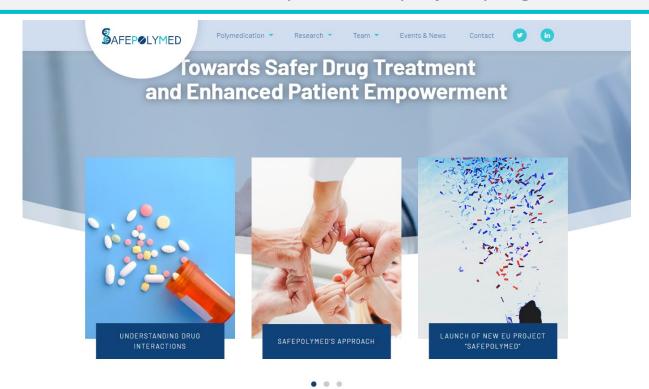
***** Exploitation Strategy and Activity Planning Workshops

Communication

- Project website as information hub
- Communication and networking via social media
- ❖ Patient communication via close link to European Patient Academy

SAFEPOLYMED.eu

- Information on project objectives and background for health care professionals and citizens
 - Updates on project progress and recent publications







01 JUNE 2022START DATE



24-25 NOV 2022 1st FACE-2-FACE



42 MONTHSOF DURATION



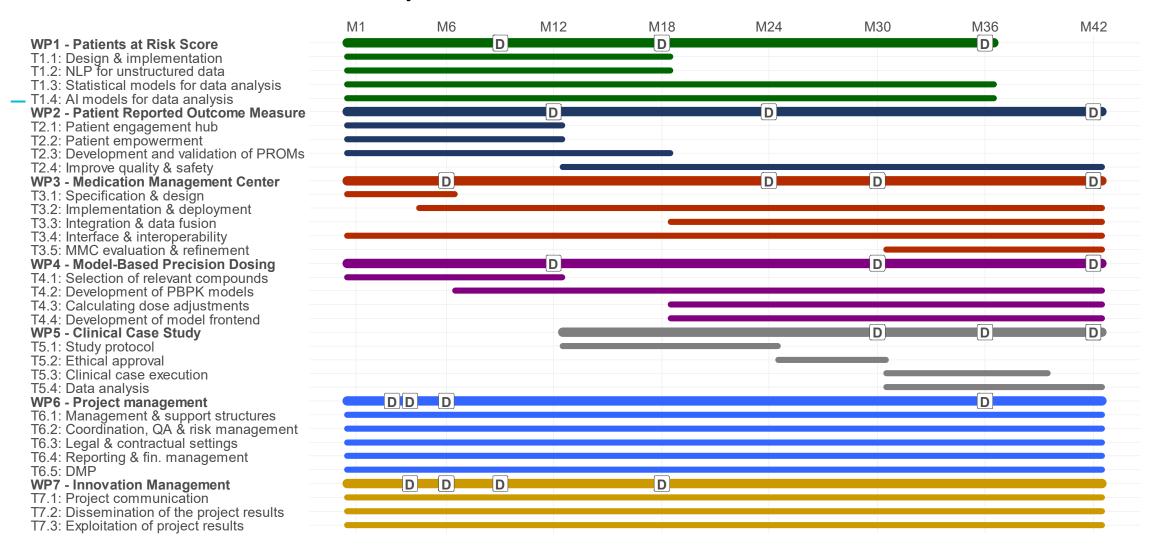




Thank you for your attention!

Back Up

Project timeline





Project Duration:
42 months
(June 1, 2022 –
November 30, 2025)
Funding: € 5,650,442.81

SafePolyMed as part of Horizon HLTH 2021 alongside BE-SAFE, **DELIVER** and **SAFEST**





24/10/23

Impact

26–40% of elderly

take >5 drugs

concomitantly²

>65%

of ADRs

due to DDIs³



~38% ~25% of ADRs of ADRs assumed to be expected to be preventable⁵ reduced 20-30% ~10% of patients increase show poor in adherence adherence⁶ 400m € savings annually



197,000

deaths due to ADRs¹

79bn €

HC cost

due to ADRs

annually¹

>60%

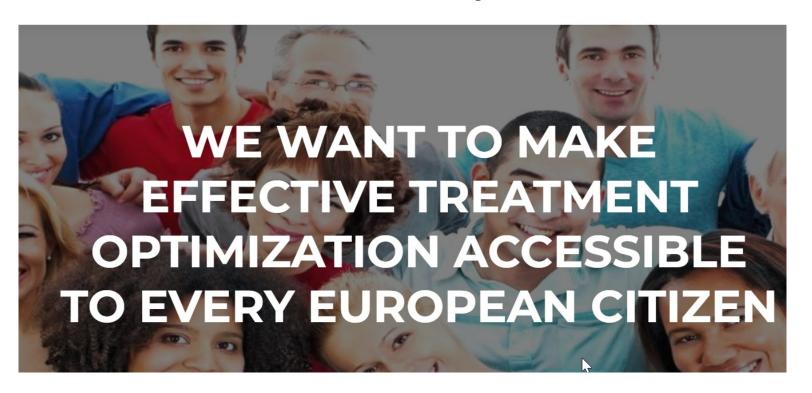
of ADRs

due to DGIs⁴

Impact



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A controlled prospective real-world implementation study of a 12-gene pharmacogenetic panel to prevent adverse drug reactions in 6,944 patients in seven European countries.

J. Swen,,T. Lehr,...., HJ Guchelaar Lancet, 2022, accepted

Interpretation: Genotype-guided treatment using a 12-gene pharmacogenetic panel significantly reduced the incidence of clinically relevant adverse drug reactions (OR 0.70; 95% CI 0.61 – 0.79; p < 0.0001)

24/10/23

To increase patient safety and equip health care providers with innovative tools

To increase citizen participation and resilience in health care

To support development and uptake of innovative health care services in Europe

Risk prediction Real-world obis A September 1 Confer Citizen empowerment & Safety improvement Model-based **Precision** dosing

To empower patients/citizens to proactively manage their own health care

To increase patient safety towards personalised treatment plans

SafePolyMed Consortium

Participant	Participant organisation name	Principal Investigator	Country
Experts in Precision Dosing and Modeling (Project Coordinator)			
USAAR	Saarland University	Thorsten Lehr	DE
Clinical Partners			
LUMC	Leiden University Medical Center	Jesse Swen	NL
UKA	University Hospital of RWTH Aachen	Julia Stingl	DE
UL	University of Ljubljana	Vita Dolzan	SI
UPAT	University of Patras	George P. Patrinos	GR
Patient Organisation			
LeNET	LeukaNET	Jan Geißler	DE
Experts in AI and Machine Learning			
FORTH	Foundation for Research and Technology - Hellas	Manolis Tsiknakis	GR
UTARTU	University of Tartu	Lili Milani	EE
UH-FIMM	University of Helsinki	Samuli Ripatti	FI
Experts in Health Information Systems			
FhG-IBMT	Fraunhofer Institute for Biomedical Engineering IBMT	Sabine Müller	DE
GOZ	Gospodar zdravja d.o.o.	Gorazd Hladnik	SI
Experts in Project Management, IP & Innovation Management			
EURICE	EURICE – European Research and Project Office GmbH	Christina Eder	DE

