

# ebr

JANUARY 2016

European Biopharmaceutical Review

## SMART PARTS

The cutting-edge technology shaping the future of pharma

## REACH OUT

After a period of decline, R&D gets a boost from outsourcing

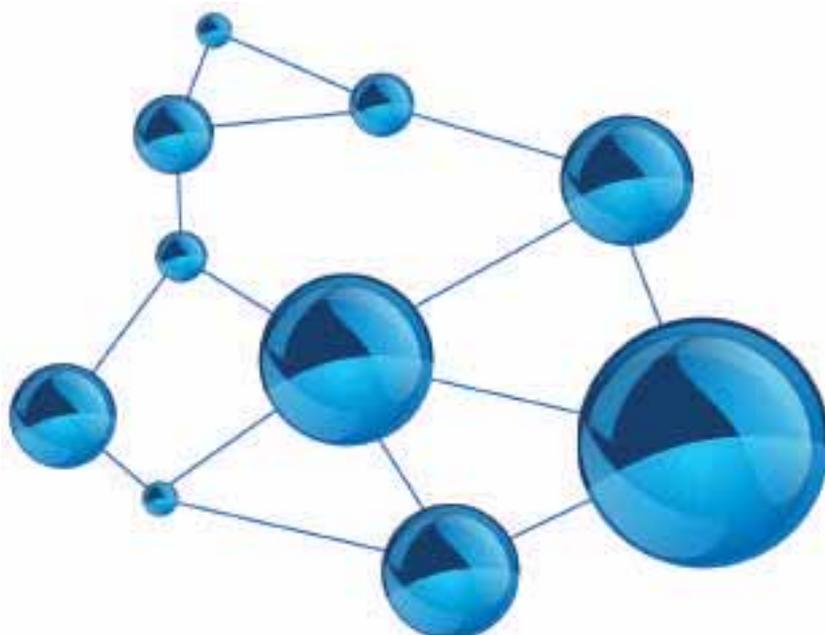
## ASSAYING CHANGE

Could new *in vitro* assays be the future of non-animal testing?



Novo Nordisk  
Pharmatech A/S





# Touch Point

*EBR* talks to Mukhtar Ahmed of BioClinica about new developments in eHealth and how tech innovations are driving better research and patient engagement



Mukhtar Ahmed is President eHealth Solutions, BioClinica, which encompasses two divisions: eClinical and safety and regulatory. During a 25-year career in healthcare research, he has held senior executive positions with multinational CROs and clinical informatics companies. Mukhtar is a visionary with an active thought leadership role in the industry.

## **EBR:** What attracted you to the biopharmaceutical industry?

**Mukhtar Ahmed:** Although I graduated as an engineer and started my career with the likes of IBM and Dowty Aerospace, I developed a deep interest in life sciences and regretted not studying to be a physician. When the opportunity arose to contribute to the world of medicine – and particularly drug research – I took it with open arms, and have not looked back in my 23 years within the biopharma industry.

## **Which part of your job do you most enjoy?**

Interacting with people who have a passion for what they do, and working with customers to find solutions to their scientific and business objectives, is what I enjoy most. It is a very personal kind of interaction for me and it has to work on many different levels.

It takes collaboration and trust to do great things, and having the very best people to help make it all come together is vital.

We have made several key new hires, expanding our leadership, operations, product and project management, and our execution and implementation teams over the past year. All the pieces are in place for us to help take pharma into a new era in clinical research.

## **And which part is the most challenging?**

Our industry has always been global in nature and, while it has become even more global – enabled through digitisation and an expectation for continuous connectivity – there is still a need to meet with people in person. The travel logistics can become challenging when one has to hop between a few continents in a short span of time.

## **You have been with BioClinica a few months now. What new projects are you involved in?**

In the eHealth Solutions business segment that I joined last April, we have launched the eHealth Cloud, which offers

unlimited accessibility to our technology in a variety of delivery options, whether customers want hosting in the public consumer, private cloud, managed cloud or a custom option.

A key element of this is a Cloud Transformation Gateway that provides a secure, standards-based integration exchange to connect our eClinical platform to innovative third-party applications and industry data banks. This is important, given the proliferation of mobile apps and wearable devices that can support patient engagement, point of care and scientific analysis. These applications have created a new world of possibilities, and we want to bring them within the realm of clinical research in a safe and secure way.

Other developments include our eHealth App xChange, an alliance channel for disruptive technology innovation across life sciences and healthcare. It enables research communities to leverage our ecosystem of integrated mobile and cloud applications for unique patient and consumer engagement, digital

medicine, biosensor and scientific analytic capabilities. There is also an eClinical CRO Partner Alliance programme, which aims to accelerate our contract research partners' adoption of eClinical solutions.

### **How quickly are pharma companies embracing eClinical technologies?**

Adoption of eClinical revolves around traditional systems within which electronic data capture is the most prominent and commoditised. But pharma companies are now seeking an alternative to these closed-platform approaches. One vendor cannot solve all of the demands of the industry; and there is a need for an open and highly interoperable platform upon which research communities can conduct their science.

### **What are the benefits of upgrading to such systems?**

There are numerous advantages: optimised business processes,

efficiencies in execution, access to data insights that can lead to alternate and impactful clinical trial planning, access to technology innovation that is pre-integrated, as well as greater patient and investigator enablement.

### **What considerations should be made when going digital?**

Start by defining the most appropriate strategy for digitisation and then ensure the right usecases are evaluated and implemented in pragmatic and measurable stages. It is all about tapping into the efficiencies of these innovative applications and the opportunity for increased patient engagement.

Employing digital health strategies can also reduce costs in different clinical trial areas through improved efficiencies and enhanced communications, workflow, compliance and other factors. New ways of doing things are displacing the old ways, and the use of powerful

technology is enabling sponsors and CROs to harness these advances in clinical research.

### **Are paperless labs a reality?**

They are already a reality in some regions, but I think paper will be with us for a while yet. What we may see is the emergence of mobility apps, biosensor and mobile-imaging solutions that help to capture paper-centric source data at point of creation.

### **What would you like to the next decade to bring?**

Transformation in how research is conducted and a shift towards real-world research designs, so that we can embrace the next generation of bio-cyber innovation. Again, it is all about efficiency, doing things better and faster, and bringing down costs – all through the use of technology.