

# Identifying the patient journey and treatment lines patterns in metastatic pancreatic cancer using patient-reported outcomes (PRO) from a digital patient-powered network (PPN)

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## INTRODUCTION

Patient-reported outcomes (PRO) address a critical need in value assessment of cancer treatments, outcomes, costs and quality of life (QOL). It is a broad representation of patients and can provide insights that are not available from clinical trials. Belong PPN is a social network for cancer patients and caregivers. It provides patients with access to other patients, healthcare professionals and disease management tools. In this study, we used PRO from the Belong patient-powered network (PPN) to explore the patient journey and treatment lines patterns of metastatic pancreatic cancer (MPC) patients in Israel.

## METHODS

We conducted a retrospective analysis using real-world evidence (RWE) and PRO collected from Israeli users of the Belong PPN (Figure 1). Data included patient-reported outcomes and medical records provided voluntarily and anonymously. The treatment journeys of 75 patients from Israel, diagnosed with MPC between March 2015 and December 2017 were mapped. Specific treatment lines were identified using Belong's artificial intelligence (AI) engines. Data was further validated manually by the research team to assure accuracy.

## RWE & PRO data sources in BELONG

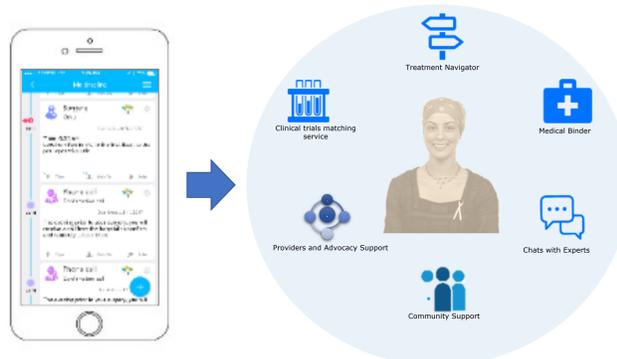


Figure 1. Data sources from BELONG's PPN

Data sources for patients' journeys on BELONG's platform:

- Patient profile (self reporting)
- Chats - patients with patients
- Chats – patients with physicians
- Documents (uploaded by patients)
- Treatment task manager

## RESULTS

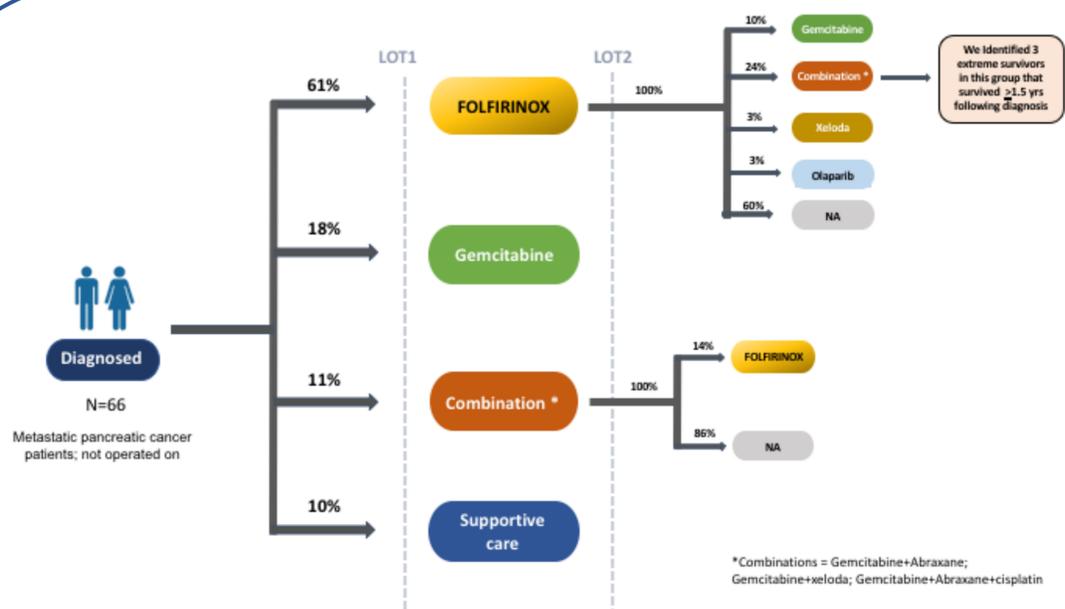


Figure 2. Treatment journeys of MPC BELONG users

We were able to map the treatment journeys of 88% (n=66) of the MPC patients (Figure 2). We detected up to 4 treatment lines and identified extreme survivors within this population (n=3). The data showed us three first-line treatment choices for MPC patients in Israel: FOLFIRINOX, Gemzar (Gemcitabine) and any treatment combination. FOLFIRINOX was the most abundant first-line treatment choice in MPC and was given to 61% of patients. Gemzar alone was used in 18% and different drug combinations in 11% of patients. Eleven percent of the patients received no treatment following their MPC diagnosis and were admitted to best supportive care.

## CONCLUSIONS

Data from patients using the Belong PPN was able to provide insights into the treatment journeys of MPC patients in Israel, the four first-line treatment prevalence and the following lines of treatment. Continuous evaluation of RWE and PRO from the Belong PPN would allow comparative effectiveness research of cancer treatments and lead to improved evidence-based care and patients' QOL.