

VISION EUROPE 2030

Disruptive Technologies, Democratized Trials & Next-Gen Treatment Paradigms

September 2²ⁿ -3rd, 2025

Club University Foundation 11, Rue d'Egmont, 1000 Bruxelles

Setting the Scene: The Urgent Case for a Tech-Driven Revolution

The Innovation Paradox

Across every major disease area—from cancer and cardiovascular disease to neurodegeneration and rare conditions—science is moving faster than systems can absorb. Al-powered diagnostics, liquid biopsy, and decentralized trial models are no longer theoretical—they're clinically validated, scalable, and transformative. Yet health systems remain entrenched in outdated models of care, with regulatory inertia, siloed reimbursement, and geographic inequities delaying access to life-saving innovation.

The result: a growing chasm between what's scientifically possible and what's delivered in practice—costing lives, driving inefficiency, and eroding public trust.

The Global Challenge

Breakthroughs are real, and their potential is measurable:

- **Al-driven diagnostics**: Retinal scans for diabetes, digital voice biomarkers for Parkinson's, and multimodal Al for early detection are exceeding 80% diagnostic accuracy in trials.
- **Minimally invasive monitoring**: Liquid biopsy is now being piloted not only in oncology but also in Alzheimer's and prenatal care.
- **Tumor-agnostic treatments**: New molecular targets are making old trial models obsolete.

Yet fewer than 1 in 5 eligible patients access these innovations due to:

- Regulatory lag Approval frameworks can't match innovation cycles.
- **Geographic inequity** Rural and under-resourced facilities lack access to advanced diagnostics.
- Fragmented reimbursement Technologies like next-generation sequencing (NGS) are funded for cancer but not for rare diseases or inherited cardiovascular risks.



What's Missing

A 21st-century health architecture that:

- Moves at the speed of science
- Delivers equitably across diseases and geographies
- Scales **sustainably** for national budgets and healthcare systems

Conference Vision: From Fragmented to Future-Ready

VISION EUROPE 2030 will catalyze a pan-disease shift—moving from reactive, fragmented care to a system that is **precise**, **proactive**, **and patient-centered**. Sessions will chart a path to:

1. Scale Disruptive Tools

- Al diagnostics: From oncology to cardiology and neurology
- **Liquid biopsy**: From cancer to neurodegeneration and prenatal health
- **Decentralized trials**: From rare cancer pilots to broad chronic disease integration

2. Fix Systemic Bottlenecks

- Regulatory harmonization: Align EU/US pathways for cross-disease biomarkers
- **Reimbursement reform**: Move from volume to value (e.g., outcome-based payments for AI in diabetes)
- Modular data systems: Ensure interoperability across disease areas

3. Close the Equity Gap

- **Joint procurement**: Multi-disease diagnostic platforms (e.g., NGS for both cancer and inherited cardiomyopathies)
- Reflex testing mandates: For high-impact biomarkers like HER2 (cancer) and APOE4 (Alzheimer's)

Who This Is For

The conference convenes those shaping the next chapter of health innovation:

- Policymakers: WHO-Europe, EMA, DG SANTE, national ministries
- Clinicians: Oncologists, cardiologists, neurologists, and primary care leaders
- **Industry**: Pharma, diagnostics, and digital health leaders with cross-therapeutic portfolios
- Patients: Advocacy groups for cancer, rare, chronic, and neurodegenerative diseases
- **Investors**: Public and private funders focused on platform innovation and health equity



DAY 1- September 2nd, 2025.

09.00 - 09.30: Tech for Equity

Setting the Scene: Denis HORGAN, Executive Director, European Alliance for Personalised Medicine

Welcome Addresses:

- Emer Cooke, Executive Director, Chair, ICMRA, The European Medicines Agency
- Olivér Várhely, European Commissioner for Health and Animal Welfare
- András Kulja MEP & MD, Group of the European People's Party, European Parliament

09.30 – 10.30: Tech for Equity: Catalyzing Innovation in High-Income Cancer Systems

Disruptive diagnostic technologies—circulating tumor DNA (ctDNA), liquid biopsy, and Alenhanced pathology—are redefining what's clinically possible in cancer care. Yet despite their precision and predictive power, systemic inertia continues to slow their integration into high-income healthcare systems. This session examines how we can shift from innovation at the margins to innovation embedded in the mainstream.

Drawing on real-world examples from across Europe, speakers will explore how emerging tools are reshaping early detection, recurrence monitoring, and diagnostic efficiency.

Topics include:

- Using ctDNA for measurable residual disease (MRD) to anticipate relapse before it manifests clinically
- Replacing invasive procedures with liquid biopsy at scale, reducing patient burden and time to diagnosis
- Deploying Al-assisted digital pathology to expand diagnostic throughput without compromising quality
- Leveraging value-based reimbursement pilots in Germany and the Netherlands to align incentives with patient outcomes
- Advancing joint regulatory and HTA review models to streamline access without compromising safety
- Harnessing EU-wide procurement strategies to reduce cost variation and promote equity

This session is a call to action for policymakers, payers, and providers to break through implementation inertia and redesign healthcare systems that can absorb innovation, scale it efficiently, and deliver it equitably.



Moderator: Jose M. Martin-Moreno, *Professor of Medicine and Public Health*, *Clinical Hospital & Medical School, University of Valencia* (Confirmed)

Setting the Scene:

- Tilly Metz, Member of the European Parliament (Luxembourg), Greens/EFA group and the national party Déi Gréng Les Verts
- Carmen Laplaza Santos, Head of Unit, Health Innovations & Ecosystems, DG RTD, European Commission (tentative)

Panel:

- **Prof. Ruggero De Maria, MD, PhD r,**, President, Italian Alliance Against Cancer (Alleanza Contro il Cancro), Professor of Pathology, Università Cattolica del Sacro Cuore, Rome (confirmed)
- Peder Myhre, Professor, Department of Cardiology from University of Oslo, Norway (Confirmed)
- **Prof. Peter Schirmacher, MD**, Director of Pathology, University Hospital Heidelberg, Chief Medical Officer, European Association for Cancer Research (EACR) (Confirmed)
- Thomas Wejs Møller, Director of Global Regulatory Affairs for Devices at NovoNordisk (Confirmed)
- Anabela Isidro, Coordinator of ECHoS project & Member of the Board AICIB (confirmed)

Q&A

10.30–11.30 Democratizing Trials –Blueprint for Inclusive Innovation

Clinical research in high-income countries has long been constrained by outdated infrastructures, urban-centric recruitment, and narrow eligibility criteria. Yet across Europe and other high-income settings, new models are emerging that challenge this status quo—demonstrating that real-world data integration, decentralized trial design, and inclusive recruitment strategies can accelerate timelines while expanding access.

This session explores the evolving blueprint for trial reform—drawing from examples across the continent, including the Rome Trial, as well as public—private initiatives in France, Spain, the Nordics, and Canada. It will highlight how a combination of technological and structural innovation can unlock a new era of clinical research: faster, fairer, and more fit for purpose.

Key focus areas include:

- **Al-powered patient matching tools** implemented in France and Spain that significantly increased participation from rural, older, and minority populations
- Blockchain-enabled secure data sharing architectures that ensure GDPR compliance while facilitating seamless cross-border recruitment
- Sustainable public-private trial hubs in Northern Europe and Canada that offer replicable models for equitable research access



• **Real-world data platforms** that enable ongoing evidence generation post-approval, improving relevance and policy uptake

This discussion will spotlight how clinical trials can evolve from exclusive academic exercises into truly inclusive, distributed platforms that reflect real-world populations—and generate evidence that is more representative, timely, and actionable.

Moderator: Antoni Moliner Monseratt, Vice président - ALAN Vice President of the National Committee of the Rare Diseases Plan of Luxembourg

Setting the Scene:

- **Prof. Paolo Marchetti, MD**, Director of Oncology, Policlinico Umberto I, Rome Past President, Italian Association of Medical Oncology (AIOM)
- Patrice Verpillat, Head of Real World Evidence, European Medicines Agency

Panel

- **Kjetil Tasken**, Head of Institute, Institute for Cancer Research, Oslo University Hospital, Norway (confirmed)
- Irene Braña, Head and Neck Cancer Group at VHIO, is also the Global Principal Investigator of the BoB trial
- Joanna Chorostowska-Wynimko, MD, PhD, DSc, President-Elect, European Respiratory Society (2024-2025) (confirmed)
- Anita Kienesberger Chair of CCI Europe Committee.
- **Toni Andreu**, Scientific Director, European infrastructure for translational medicine. (confirmed)

Q&A

11.30- 12.00 Break

12.00 – 13.00: Precision Oncology 2.0 – Rewriting the Rules: From RCT-Centered Models to Innovation-Ready Systems

As oncology advances toward increasingly personalized and tumor-agnostic approaches, high-income health systems must move beyond rigid, randomized controlled trial (RCT)-centric pathways that struggle to keep pace with innovation. This session explores how clinical and regulatory frameworks can evolve to support next-generation precision oncology.

The discussion will highlight transformative practices that are reshaping oncology evidence generation, including:

- Leveraging real-world data (RWD) from national registries in the UK and Germany to inform treatment strategies for high-mortality cancers like glioblastoma
- Mandating universal molecular profiling at diagnosis, with examples from Sweden and Austria that are embedding genomics into standard-of-care pathways



 Institutionalizing tumor-agnostic drug development by prioritizing rare genomic targets such as RET and NTRK—redefining how eligibility, efficacy, and access are determined

This session will offer a forward-looking roadmap for systems to support precision oncology at scale—grounded in data, designed for flexibility, and driven by patient need.

Moderator: Jose M. Martin-Moreno, *Professor of Medicine and Public Health*, *Clinical Hospital & Medical School, University of Valencia* (Confirmed)

Setting the Scene:

- David Asturiol, Policy Officer "Digital Health" Unit, DG SANTE, European Commission
- Christine Chomienne, Vice-Chair of the Horizon Europe Cancer Mission Board (Confirmed)

Panel:

- Maari Parkkinen Project Coordinator, FinHITS and Development Manager, Findata (Confirmed)
- Goradana Raicevix Toungouze, Scientific Coordinator at Sciensano (Confirmed)
- **Zisis Kozlakidis,** Head of the Laboratory Services and Biobank Group (LSB) at IARC (confirmed)
- Christophe Le Tourneau, Institut Curie, France
- Marc Van den Bulcke, Head of Service, Cancer Centre (Confirmed)

Q&A

13.00- 14.00 Lunch

14.00 – 15.15. Public-Private Power Plays – Building Sustainable Partnerships for Scalable Impact

In high-income settings, philanthropy and public funding alone are insufficient to drive systemic transformation in cancer care. Achieving sustainable, scalable impact requires **strategic alignment between public priorities and private investment**—mobilizing innovation while safeguarding public accountability and long-term value.

This session will explore **pioneering models of public-private collaboration** that are reshaping the landscape of oncology, particularly in data infrastructure, precision medicine, and outcome-based access.

Through the lens of **Managed Entry Agreements (MEAs)**, collaborative pricing frameworks, and adaptive trial models, speakers will highlight how public institutions and private actors are navigating complexity together to accelerate patient access.



Key themes include:

- How DRUP-like clinical trials and initiatives like PRIME-ROSE are informing new access models grounded in real-world evidence
- The role of joint procurement and cross-border collaboration across the Nordic countries, including proposals for joint MEAs to enhance negotiating leverage while maintaining affordability
- The use of molecular tumour board data to support structured, evidence-based MEAs, including planned integration under the Joint Actions

Moderator: Antoni Moliner Monseratt, *Vice président - ALAN Vice President of the National Committee of the Rare Diseases Plan of Luxembourg*

Setting the Scene:

- John Longshore, Head of Scientific Affairs for Global Oncology Diagnostics, AstraZeneca
- Alessandra Moretti, MEP, Member, Committee on the Environment, Public Health and Food

Panel:

- Iselin Dahlen Syversen, Head of Department for Negotiation of New Drugs, Norwegian Hospital Procurement Trust (Sykehusinnkjøp HF), Norway (TBC)
- Live Fagereng, Project Manager at PRIME-ROSE,
- Iwona Ługowska, Maria Skłodowska-Curie National Research Institute and Oncology Centre (MSCI), Warsaw, Poland
- Alejandro Piris, Head of the Scientific Coordination/ Management Area at the Vall d'Hebron Institute of Oncology (VHIO) in Barcelona (Confirmed)
- Hendrik Van Poppel, Chairman of the European Association of Urology (EAU) Policy Office

Q&A

15.15-15.30 Coffee

15.30- 16.30: Spotlight 1: Bridging the Innovation Gap: Precision Cardiology for the Next Decade

Despite transformative advances in oncology, precision cardiology remains underleveraged across high-income countries. As cardiovascular disease continues to be the leading cause of death globally, the integration of disruptive technologies—AI, biomarkers, and digital diagnostics—into cardiology is essential to improve outcomes and optimize system sustainability.

This session will highlight the urgency of bringing cardiovascular innovation up to pace with scientific and digital progress. It will explore how artificial intelligence can enhance diagnostic



precision, how biomarker-guided strategies can personalize care pathways, and how scalable platforms can democratize access across diverse healthcare settings.

Expert speakers will discuss road-tested initiatives and emerging models from across Europe that demonstrate the feasibility and clinical value of next-generation tools. The session will also address the barriers that have limited uptake to date—fragmented data infrastructure, regulatory bottlenecks, and misaligned reimbursement—and propose actionable strategies to overcome them.

Ultimately, this session aims to reframe cardiovascular care through the lens of precision health, offering a blueprint for equitable, efficient, and scalable system transformation.

Moderator: European Society of cardiology (Tentative)

Political Setting the Scene: Romana Jerković, Group of the Progressive Alliance of Socialists and Democrats in the European Parliament

Setting the Scene:

 Hans-Peter Brunner-La Rocca, University of Maastricht, public co-lead (confirmed)

Panel

- Dr. Jana Seuthe Hamburg / DE MSH Medical School Hamburg (Confirmed)
- Robin van Stokkum, Digital Health Technologies, TNO, Dutch organisation for applied research and innovation (confirmed)
- Adrian Voors, Professor of Cardiology, Groning, Clinical Investigator, Netherlands Heart Foundation (Confirmed)
- Birgit Beger, Chief Executive Officer. European Heart network

Q&A

16.30- 17.30: Spotlight 2: Neurology Breakthroughs

Neurology remains one of the most challenging frontiers in precision medicine. With neurodegenerative diseases such as Alzheimer's, Parkinson's, and multiple sclerosis on the rise, early and accurate diagnosis is critical—but traditional clinical pathways are often too slow, subjective, and resource-intensive to meet this challenge.

This session explores the cutting edge of AI and machine learning in neurology, highlighting how advanced algorithms are driving earlier detection, enhancing prognostic accuracy, and supporting more personalized care pathways. From the analysis of multimodal neuroimaging and voice biometrics to the integration of wearable sensors and digital cognitive assessments, new models are achieving diagnostic accuracies exceeding 90% in some settings.

Yet, systemic gaps remain: rare neurological diseases are underrepresented in research, algorithm performance standards are not harmonized, and complex methods such as deep neural networks or gradient boosting remain underutilized in clinical practice. This panel will address these limitations while showcasing real-world applications—from automated ALS progression tracking to Al-assisted differential diagnosis in dementia.

As regulatory agencies and health systems seek to balance innovation with implementation, this session will offer a roadmap for embedding neuro-Al into routine care—one that supports equity, transparency, and robust clinical validation.

Key Question: How to reconcile RWD with traditional RCTs in neurology?

Moderator: Frédéric Destrebecq, Executive Director at the European Brain Council (confirmed)

Setting the Scene:

- Romana Jerković, Group of the Progressive Alliance of Socialists and Democrats in the European Parliament
- Francisca Vargas Lopes, Health Policy Researcher at the Health Division of the Organisation for Economic Co-operation and Development (OECD)

Panel:

- **Ulrike Bußhoff** (DLR Projektträger), Coordinator of the CSA BrainHealth
- Roberto Grasso, Department of Oncology and Hemato-Oncology, University of Milan (Confirmed)
- Rossana Alessandrello Value Based Procurement Director, AQUAS (Confirmed)

Q&A

19.00- 21.30: Speakers Dinner & Reception in the European Parliament: Keep the Person in Personalised HealthCare

Hosted: András Kulja MEP & MD, Group of the European People's Party, European Parliament

WELCOME Recepton:

- **Dolors Montserrat**, (Spain, EPP) ENVI
- Tilly Metz, (Luxembourg, Greens) ENVI, SANT
- Tomislav Sokol, (Croatia, EPP) EMPL

Conference Dinner



• **Keynote**: **Mariana Mazzucato**, *Professor in the Economics of Innovation and Public Value at University College London*

Stakeholder speakers:

- Ingrid Kruecken vice president of Europa Donna Luxembourg (confirmed)
- Aistė Štaraitė, Heart Failure Development Executive, Global Heart Hub(Confirmed)

Q&A



09.00– 10.15: Innovation Without Access Is Failure – Delivering Genomic Equity in High-Tech Health Systems

Even in high-income countries, cutting-edge innovation often fails to reach the patients who need it most. Genomic medicine holds extraordinary promise—but its benefits remain unevenly distributed across geography, institution type, and tumor profile.

This session confronts the structural barriers that prevent equitable access to precision diagnostics and therapies, and outlines pragmatic solutions to close the implementation gap.

Key focus areas include:

- Expanding access to molecular testing in hospitals and community cancer centers
- Reimbursing genomic tests for patients with rare or currently untargetable mutations to avoid systemic exclusion
- Accelerating access to tissue-agnostic therapies, guided by the emerging convergence of ESMO, ASCO, and EMA frameworks
- Designing inclusive systems that ensure no patient is left behind due to postcode, trial design, or institutional capacity

This session aims to reframe access as a core pillar of innovation—not a downstream consideration—while proposing tangible pathways to achieve true genomic equity in high-tech health systems.

Moderator: **Jose M. Martin-Moreno**, *Professor of Medicine and Public Health*, *Clinical Hospital & Medical School*, *University of Valencia* (Confirmed)

Setting the Scene:

Roberto Viola, Director-General of DG CONNECT, European Commission



• Roisin Adams, NCPE, Chair of the Health Technology Assessment Coordination Group

Panel:

- **Benjamin Gannon**, Vice President Europe & Americas at Guardant Health (confirmed)
- **Zsuzsanna Devecseri**, Global Head, Medical Affairs, Oncology, Novartis
- **Neeme Tõnisson**, *Professor*, *Estonian Biobank*, *Institute of Genomics*, *University of Tartu* (confirmed)
- Peter Kapitein, Patient Advocate at Inspire2Live (confirmed)
- **SPARC: Manuel Ottaviano, Ph.D,** Associate professor, Researcher, Project Manager, Universidad Politecnica de Madrid, Spain (Confirmed)

Q&A

10.15 – 11.30 Data That Delivers – Building a Smarter, Sustainable Healthcare Data System

Precision oncology cannot thrive on data volume alone. To translate insights into outcomes, health systems must prioritize **data quality, interoperability**, and **long-term sustainability**. This session explores the foundational shifts needed to move from fragmented data silos to a fit-for-purpose ecosystem that truly supports clinical decision-making and innovation.

Two core enablers will be addressed:

- From Collection to Curation: Moving beyond passive data accumulation toward active, standards-driven curation—supported by robust quality metrics, metadata protocols, and certification frameworks (e.g., ISO 20387). The aim: real-world data that is reliable, comparable, and decision-ready.
- Sustainable Business Models: Developing financial models that balance public benefit with economic viability—such as tiered-access strategies, collaborative "data clubs," and hybrid public-private stewardship networks. The session will examine how these models can ensure continuous data generation, governance, and reuse.

Through real-world examples and actionable policy levers, this session will outline how the EU and other high-income systems can future-proof their oncology data infrastructure—supporting precision care at scale, sustainably.

Moderator: Antoni Moliner Monseratt, Vice président - ALAN Vice President of the National Committee of the Rare Diseases Plan of Luxembourg

Setting the Scene:

• Falk Ehmann, Head of Innovation and Development Accelerator, European Medicine Agency (EMA Tentative)



• Marcus Guardian, General Manager of the International Horizon Scanning Initiative (IHSI). (confirmed)

Panel:

- Marcis Leja, University of Latvia Coordinator of EUCanScreen (confirmed)
- Joanne M. Hackett, Vice President Health System Services, IQVIA (confirmed)
- Etienne Richer, Director, Genomics Programs, Genome Canada (confirmed)
- **George Kapetanakis,** President, Hellenic Cancer Federation ELLOK (confirmed)
- Jens K. Habermann, Director General, BBMRI (confirmed)

Q&A

11.30- 11.45 Break

11.45 – 13.00 Choose Europe, Back Health: Translating the Draghi Vision into Scaled Healthcare Innovation

The Draghi Report calls for a bold new EU industrial and investment strategy grounded in sovereignty, resilience, and cross-border scale. But what does this mean for healthcare? With growing innovation gaps between EU member states and global competitors, now is the time to embed health as a central pillar of Europe's industrial and strategic future.

This session explores how the **Choose Europe** narrative can be extended to healthcare: strengthening Europe's position as a global leader in biomedical innovation, digital health, and equitable access. It will unpack the policy tools, investment mechanisms, and regulatory shifts needed to turn the Draghi recommendations into actionable momentum—placing health not as a cost, but as a high-value strategic asset.

Key Themes:

- Aligning health innovation with Europe's industrial strategy and open strategic autonomy
- Leveraging EU cohesion and recovery funds to close East–West innovation divides
- Scaling Europe-led platforms in genomics, digital health, and AI
- Incentivizing industry to "Choose Europe" for trials, manufacturing, and innovation deployment
- Positioning health within broader security, resilience, and economic competitiveness agendas

Moderator:

Setting the Scene:

- Raili Sillart. Estonian Ministry of Social Affairs.
- Vlad Vasile Voiculesc, MEP, European Parliament



Panelists

- Rui Amaral Mendes, Department of Community Medicine, Information and Health Decision Sciences, Faculty of Medicine, University of Porto (confirmed)
- Sahar van Waalwijk van Doorn-Khosrovani, Senior Advisor, CZ, The Netherlands (confirmed)
- Pascal Garel, Chief Executive, European Hospital and Healthcare Federation (HOPE) (confirmed)
- Ilaria Passarani, Secretary General of PGEU,
- European Haematology Associatoon

Q&A

13.00- 14.00 Lunch

14.00– 15.00 Spotlight 3: Precision Frontiers in Obesity and Chronic Disease: Rethinking Risk, Trials, and Treatment

As precision medicine reshapes the treatment landscape for chronic diseases, obesity stands at the crossroads of innovation and inequity. With AI-driven trials, biomarker-guided therapies, and digital tools enabling unprecedented personalization, a new frontier is emerging—yet remains out of reach for many health systems and populations. Fragmented data ecosystems, limited trial diversity, and siloed innovation efforts continue to hinder widespread impact.

This session explores how precision medicine can transform obesity and chronic disease management when paired with inclusive research, interoperable data strategies, and integrated care pathways. Drawing lessons from oncology's progress, it will examine how chronic disease frameworks can evolve to harness the full potential of next-generation therapeutics and diagnostics.

Discussion will focus on:

- Applying precision medicine tools—such as genetic profiling, metabolomics, and microbiome analysis—to stratify obesity risk and personalize interventions
- Leveraging AI and real-world data to design more adaptive, inclusive, and representative trials for obesity and chronic disease treatment
- Building equitable data infrastructures to ensure algorithmic performance across populations, geographies, and socioeconomic groups
- Designing cross-sector financing and policy mechanisms that enable access to precision interventions beyond pilot projects and academic centers

This session will chart a forward-looking strategy for embedding precision approaches within chronic disease care, moving from fragmented innovation to scalable, system-wide solutions. By aligning technology, policy, and clinical practice, it aims to redefine how we prevent and treat obesity and related conditions in the decades ahead.



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Panel:

Q&A

15.00– 16.00 Spotlight 4: Cardiometabolic Disease & Cancer – Harnessing Al for Integrated Prevention

The convergence of cardiometabolic disease, cancer, and obesity is reshaping the chronic disease burden across populations. Cardiovascular disease, type 2 diabetes, obesity, and certain cancers now frequently co-exist—creating a new era of complex, multimorbid patient profiles. Artificial intelligence (AI) and advanced analytics offer an unprecedented opportunity to shift from reactive care to proactive, precision-driven prevention across these interconnected conditions.

Yet despite strong innovation pipelines, AI-enabled tools for early detection, risk stratification, and longitudinal monitoring remain poorly integrated into health systems. Barriers in reimbursement, regulatory approval, and clinical adoption continue to slow down the very innovations that could prevent high-cost, high-morbidity outcomes.

This session will explore critical gaps and emerging solutions in aligning precision prevention with systems-level readiness. It will focus on two high-impact opportunities where AI could change the trajectory of multimorbidity management:

- **AI-powered risk prediction models** for cardiovascular events, metabolic syndrome progression, and obesity-related cancers—tools that could transform primary care and screening pathways, but face delayed adoption due to reimbursement uncertainty and limited multi-condition integration.
- **Digital biomarker platforms** that combine continuous monitoring (e.g., glucose, heart rate, inflammatory markers) with predictive analytics—showing potential for earlier interventions and reduced hospitalizations, yet struggling with fragmented data ecosystems and misaligned HTA frameworks.

The discussion will center on how to:

- Align AI innovation with national prevention strategies and value-based care models
- Incentivize evidence generation that reflects multimorbidity and real-world complexity
- Build regulatory pathways and procurement frameworks that support multi-use, Aldriven tools
- Develop public-private partnerships to accelerate system-level readiness for integrated chronic disease prevention



By addressing cardiometabolic conditions and cancer together through an AI lens, this session will outline a pathway toward smarter, earlier, and more equitable prevention across Europe and beyond.

Key Question: Who pays for preventative digital tools?

Moderator: **Delia Nicoară**, Public Health and Management Specialist, Oncology Institute "Prof. Dr. Ion Chiricuță," Cluj-Napoca, Romania (Confirmed)

Setting the Scene:

- Elisabeth Dupont, Regional Manager, IDF Europe
- **Dr. Marco Marsella**, Deputy Head of Unit, DG SANTE (Health Systems and Products), European Commission
- Maria Walsh, Group of the European People's Party, European

Panel:

- Chantal Mathieu, President, European Association for the Study of Diabetes
- Elisabeth Dupont, Regional Manager, IDF Europe

16.00 – 17.15 Concluding Session: Toward a Technology-Driven Cancer Control Framework Designing a Blueprint for High-Income Systems in the Next Decade

This final session consolidates insights into a shared roadmap: a Technology-Driven Cancer Control Framework for HICs and the EU. Proposed components:

Core Diagnostic Infrastructure

- o Universal access to NGS, MRD, and liquid biopsy
- Publicly funded diagnostic bundles tied to treatment pathways
- Federated EU-wide data standards and registries

Regulatory Innovation

- o Adaptive approval pathways for diagnostics and digital tools
- Real-world validation as part of EMA conditional approvals
- National sandbox frameworks for experimental care models

• Procurement and Reimbursement

- o Equity-adjusted DRG models and risk-sharing contracts
- Public-private diagnostic funding pools
- o EU joint procurement for diagnostic platforms

Governance

- National implementation accelerators modeled on Genomics England or Denmark's Cancer Registry
- Inclusion of patient organizations and academic consortia in framework oversight
- Shared performance indicators (e.g., time-to-molecular diagnosis, recurrence-free survival tracking)



The session will conclude with a draft Declaration for Precision Oncology Acceleration to be endorsed by policymakers, patient groups, industry, and multilateral actors—creating a shared implementation agenda for 2025–2030.

Moderator: Antoni Moliner Monseratt, Vice président - ALAN Vice President of the National Committee of the Rare Diseases Plan of Luxembourg

Panel

• **David Novillo Ortiz,** *Unit Head and Regional Adviser, Data and Digital Health* (WHO)