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A bootcamp for digital health executives seeks to demystify the inner-workings of the drug industry



By [Casey Ross](#)^{2 3} June 1, 2021



Naomi Fried is launching PharmStars, a 10-week bootcamp to help digital health companies. *Courtesy Naomi Fried*

Naomi Fried has watched the same plot unfold over and over again: A digital health startup pitches software to accelerate drug discovery, track medication use, or identify patients for clinical trials. But initial interest from pharma executives quickly fades. They stop returning emails, often with no explanation.

But if the reasons are mysterious to startups, they are not to Fried, who has spent her career driving technology innovation at Biogen, Boston Children's Hospital, and Kaiser Permanente. She said the startups are simply misunderstanding their audience and the business concerns that drive decision-making.

To close what she calls the pharma-startup gap, Fried on Tuesday is launching [PharmStars](#)⁵, a 10-week bootcamp to help digital health companies understand the inner-workings of the pharmaceutical industry and how its executives think about technology. She spoke with STAT about the consequences of the current divide and how the program, which will start Sept. 1, can help accelerate the adoption of promising products. This interview is lightly edited for clarity.

Describe the gap you're seeing. Digital health is a growing industry, but why is it struggling to work with the pharmaceutical industry?

There is a real disconnect between pharma and digital health startups around the way they communicate, the language they use, and their cultures. Pharma is very cautious, process-oriented and risk-averse. Startups are used to moving quickly and pivoting. They don't tend to have a lot of process in place, and their first concern is not regulatory restriction. These differences are what makes it hard for these two groups to get together.

What will be included in the 10-week program?

We're calling it PharmaU. It has three components. It has a structured curriculum to teach startups everything they need to know to engage with pharma; a personalized mentoring program in which each startup works with

the PharmStars staff and we review their value proposition and their pitch; and the third component is workshops for our pharma members where they can discuss some of the challenges of introducing digital health in large, conservative, scientifically-oriented companies.

How is the program supported financially?

We're funded by our pharma members. (Membership includes three of the world's largest drug makers.) The startups apply to participate. We select 10 startups, which pay a very nominal fee. It's really just to make sure they have some skin in the game. We don't take equity. We don't take a percent of the deals. Our goal and our mission is to get the two parties to the table. And once they are together and speaking the same language, that will really accelerate the adoption of digital health, which will ultimately benefit patients and outcomes.

What's being lost? What are some of the technologies that might advance discovery and help patients?

There are companies that help with medication adherence; there are companies that support telehealth, which could be used during clinical trials as well as once a patient is on therapy. There are digital therapeutics (software programs) that can be standalone solutions or companions that go along with drugs; there are apps to support side-effect tracking; there are digital diagnostics to help screen patients for clinical trials or help doctors decide whether a patient should even be prescribed medication. There is a huge universe of companies for whom pharma is an excellent partner.

What are the common barriers to adoption?

In their haste to build solutions, digital health companies sometimes haven't put quality management programs in place. They may not be compliant with all the data privacy rules, like HIPAA or GDPR (General Data Protection Regulation in Europe). These are things pharma takes very seriously. It's not

uncommon for a digital health startup to not be prepared for — or possibly even fail — a data audit that pharma would require before partnering with them. I think startups are often surprised by the amount of process and care pharma takes before moving forward on the legal and regulatory side.

Do you recall a failed pitch that exemplifies the disconnect?

I remember a company had a digital therapeutic that could be used for patients taking one of the pharma company's drugs. They came in and told their story and talked about their solution and presented data, which was great. But they never closed the loop and they failed to articulate the value to the pharmaceutical company. They didn't explain what the business model would look like. They were expecting the pharma company to do too much of the work in thinking and understanding how this would be part of their broader strategy.

About the Author



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