

Question 1

Indicate which statements are true. Multiple possibilities

- a. Parallel import of drugs is strictly forbidden in the EU
- b. Due to its central location, in Belgium, the share of drugs available through parallel import is among the highest in the EU
- c. A Technology Transfer Office (TTO) can be linked to a university and helps in protecting intellectual outputs, finding the right (industrial) partners for further development, and setting up licensing deals with the partners
- d. Innovation = invention + commercialisation
- e. Innovation = invention x commercialisation

- a. False – false – true – true - false
- b. False – true – true – false – true
- c. True – true – false – false – false
- d. False – false – true – false – true
- e. False – true – false – false – true

FEEDBACK:

The correct answer is d.

a. Parallel import of drugs is strictly forbidden in the EU. False. When legal requirements are met, it is possible – under the internal market law for goods and services - to import drugs from other EU Member States, even if the drugs are also produced in Belgium. The qualitative and quantitative composition of the **active substance** in the imported drugs needs to be identical and the therapeutic effect of the imported drugs need to be the same as the reference drugs (but the composition of the drugs does not necessarily need to be identical).

b. Due to its central location, in Belgium, the share of drugs available through parallel import is among the highest in the EU. False. In Belgium, the share of parallel imports in pharmacy sales is 1,7% (low compared to 24% in Denmark, 21.3% in Sweden, 15.3% in Netherlands, 9.7% in Germany, and 7.5% in UK).

c. University technology transfer offices (TTOs) are responsible for technology transfer and other aspects of the commercialization of research that takes place in a university. TTOs engage in a variety of commercial activities that are meant to facilitate the process of bringing research developments to market, often acting as a channel between academia and industry. Technology transfer offices may work on behalf of research institutions, governments and even large multinationals.

d. & e. Innovation = invention x commercialisation. Innovation is the product of commercializing an invention. Without commercialization ($c = 0$), the invention does not reach the customer/target public and hence, we cannot speak of innovation ($\text{innovation} = i \times c = 0$)

Question 2

Multiple answers are possible

Health informatics will revolutionize the information society into a knowledge society. Please choose the correct statement.

1. Services will collaborate to deliver an integrated and holistic solution to its users
2. It will improve collaboration between professionals and patients
3. It will gather empirical data integrated across large population, collected systematically and therefore comparable (>< clinical studies)

- a. 1 is correct
- b. 2 is correct
- c. 3 is correct
- d. all of the statements are correct
- e. none of the statements is correct

FEEDBACK:

The correct answer is d. All of the above are correct is the right answer. The mission, and challenge, for health informatics is to enable healthy citizens, patients and professionals to collaborate within a knowledge-empowered social network in which patient specific information and personalized real-time evidence are seamlessly interwoven.

Question 3

Only 1 answer is perfect

What is the real definition of innovation?

1. An innovation that the customer uses
2. An invention that brings value to the customer
3. An invention that can be brought to the market
4. An invention that lead to the set-up of a start-up company
5. An innovation that was described in a business plan

FEEDBACK

The correct answer is 2

Question 4

We hope to reduce the burden of disease by

- (1), i.e. identifying groups at risk,
- (2), i.e. applicable when the pathological process is still reversible,
- (3), i.e. tailored therapies with a minimum of adverse effects,
- and (4), i.e. restoring the patient's health status.

- (1) targeted prevention – (2) early diagnosis – (3) improved treatment – (4) curing the patient
- (1) precision medicine – (2) probiotics – (3) special treatment – (4) patient-reported outcomes
- (1) personalized medicine – (2) imaging, storing blood samples and data processing – (3) including patients in clinical trials – (4) providing medicines to the patient

FEEDBACK

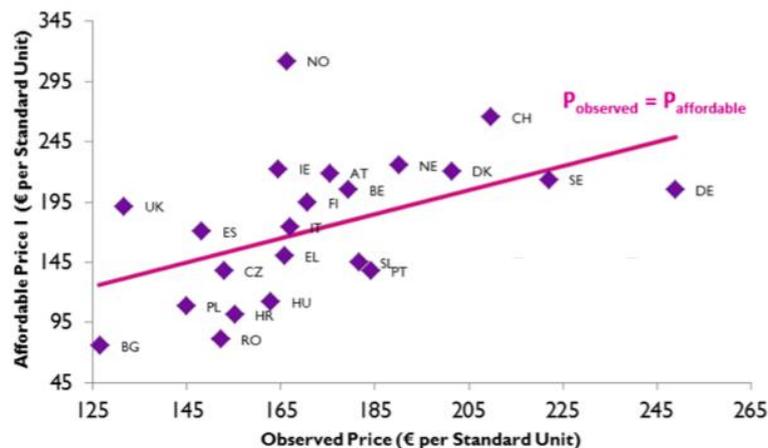
The correct answer is a.

We hope to reduce the burden of disease by

- targeted prevention, i.e. identifying groups at risk,
- early diagnosis, i.e. applicable when the pathological process is still reversible,
- improved treatment, meaning tailored therapies with a minimum of adverse effects,
- and 4) curing the patient, i.e. restoring the patient's health status.

Question 5

Multiple possibilities are correct



- Above the pink line: pharma can bargain to increase the price
- Under the pink line: regulatory agencies can bargain to ask pharma to decrease their price
- Under the pink line: pharma can bargain to increase the price
- Above the pink line: regulatory agencies can bargain to ask pharma to decrease their price

FEEDBACK

The correct answer is 1 and 2

- Above the pink line: pharma can bargain to increase the price, the affordable price is not reached yet. (people have additional money left)
- Under the pink line: regulatory agencies can bargain to ask pharma to decrease their price. The price of the product is higher compared to what the society/people can pay.