KRIS VETTE

VETTE SOLUTIONS LTD

Analysis

&

development

of

Blockchain Solutions

DISTRUBUTED LEDGER TECHNOLOGY AND HEALTHCARE

REAL WORLD USE-CASE

OR

HYPE?

ANDREAS ANTONOPOULOS

"Putting your medical records on a blockchain is a terrible idea".

…No characteristic (censorship resistance, trust, transparency, decentralisation) of blockchain that could be of advantage.

….central databases are far more effective.

HEALTHCARE SYSTEMS SINCE TODAY A TALE OF TWO CITIES

1. Modern, rapidly advancing

2. But basic care failure. At worst Mid-Staffordshire Enquiry UK…care, data and transparency failure... but everyday practice too, 17 year lag

Can never solve 1 without 2

LET'S LOOK AT BASIC CARE

- Know what the 'Standard' is.

- Real-time patient data to all interconnected players in the health 'ecosystem'.

- Track care and patient parameters dynamically – things change everyday.

EXAMPLE PATIENT

- Cancer patient

- Multi Disciplinary Team inputs

- Complex care

- Regional Centres – but distributed patients

PATIENT CENTRED CARE?

SYSTEM CENTRED CARE - MANY MOVING PARTS, MANY PIPES, HARD TO NEGOTIATE OR SYNCHRONISE – FOR EVERYONE
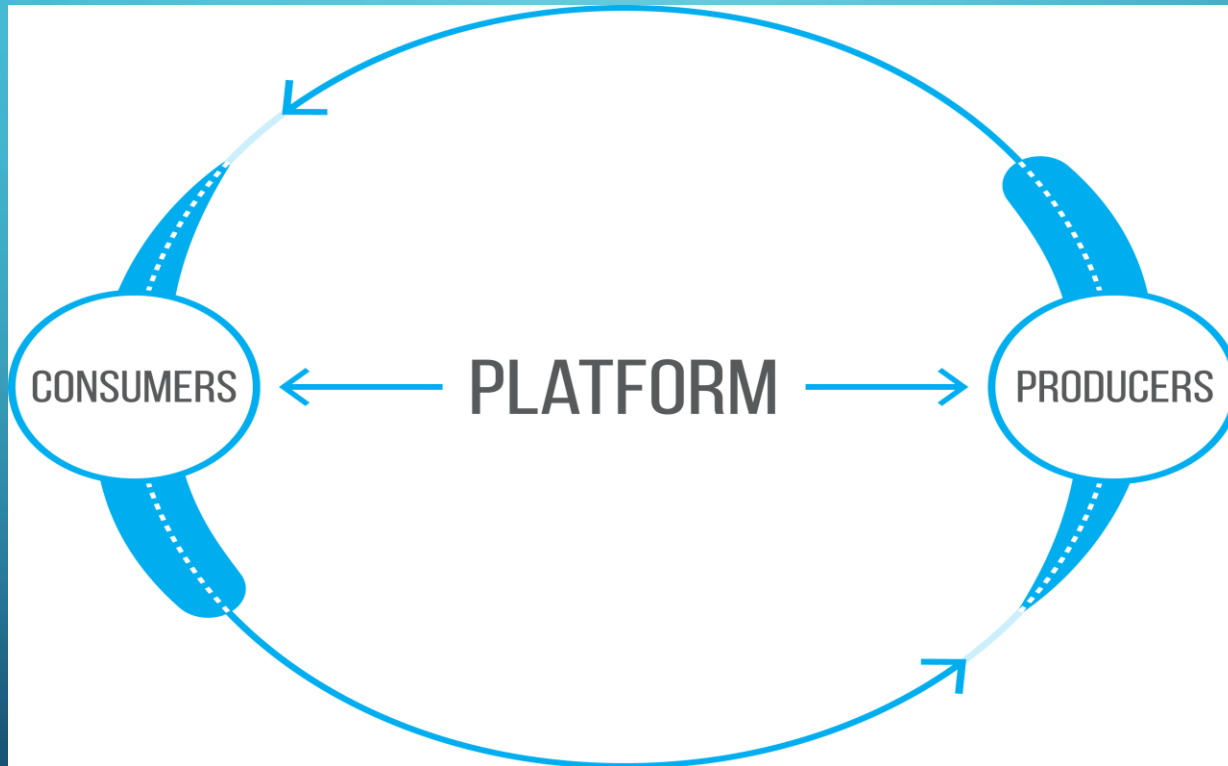
THE ANSWER – CENTRALISED DATABASES

'CENTRALISED' DATABASES ARE FAST BUT DON'T GIVE SYSTEM WIDE ACCESS (IN PRACTICE)

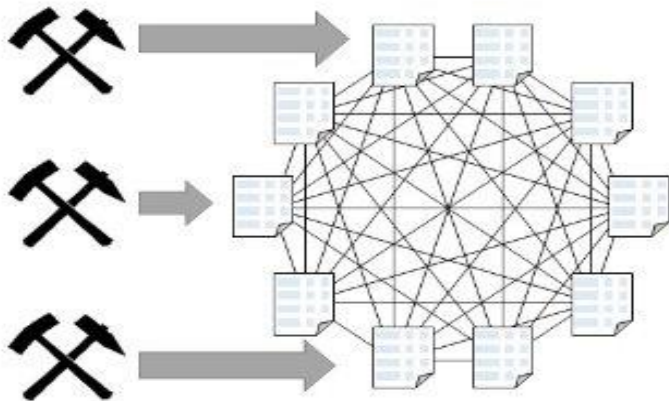NHS 'Connecting for Health Project 13B GBP cost

Limited outcomes

Patient Experience better? Outcomes better?

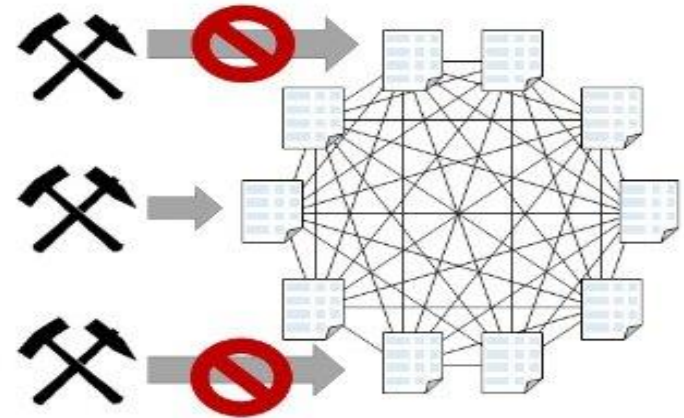# 21ST CENTURY CONTROL THE DATABASE = CONTROL THE MARKET
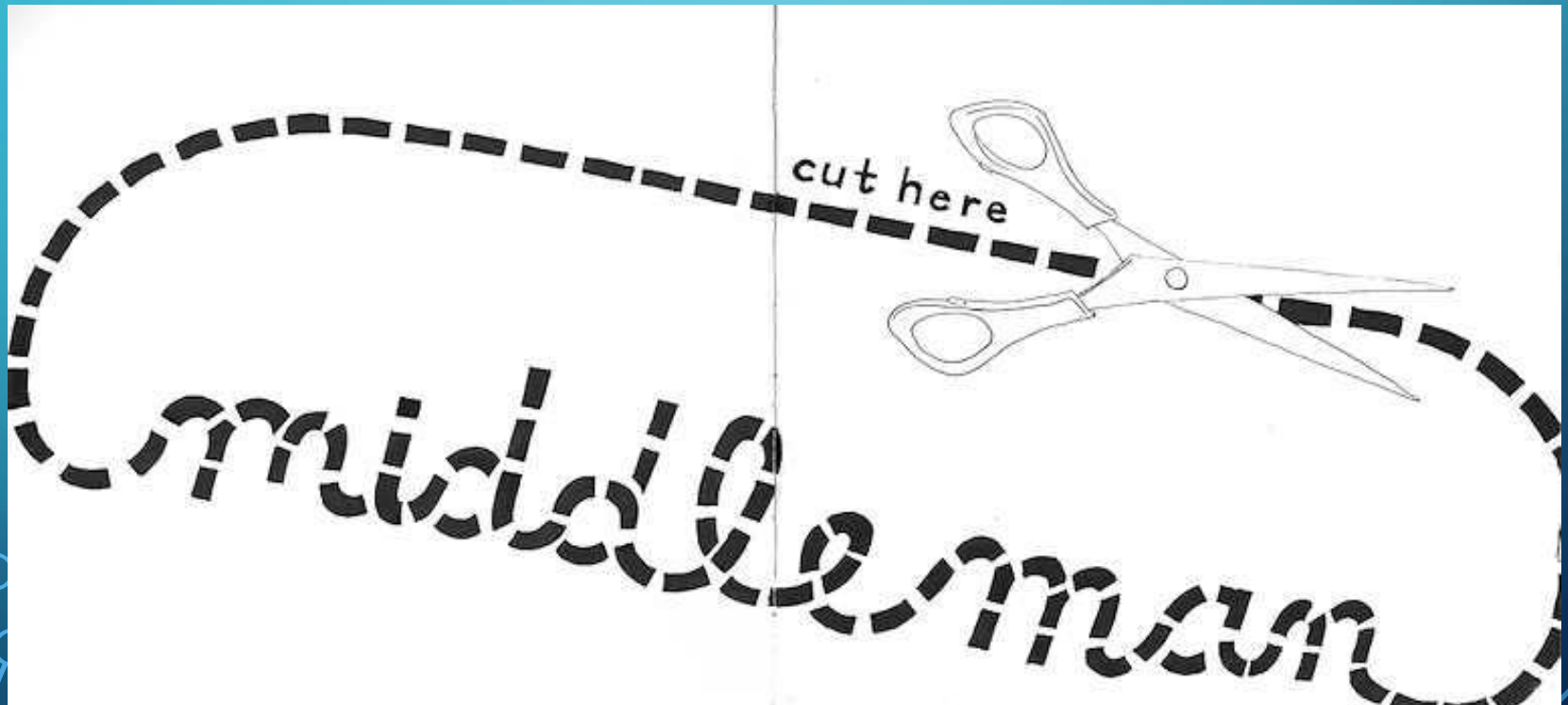
PUBLIC VS PERMISSIONED SOLUTIONS

Permissionless Blockchain

Permissioned Blockchain

BLOCKCHAINS CHANGE 'OWNERSHIP OF DATA' – INCENTIVISE 'CO-OPERTITION'

cut here

middleman

THREE STAGES OF ECOSYSTEM THINKING'

1. Access to Records – Distributed Interoperability (Permissioned)

2. Patient Control of Data – Decentralised Private Key (Public)

3. Transparent Outcomes – Immutable Data Integrity & Traceability.

IN SUMMARY

Blockchain has a place in healthcare because it solves a significant generalised problem.

It provides the 'rails' for real-time access to a current clinical picture across multiple parties in a complex 'ecosystem' of care.

The 'Antonopoulos thesis' is wrong.

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