

Annexe / bijlage

Numéro / Nummer	Acronym	Titre / Titel	Statut / Statuut	Bénéficiaire(s) / Begunstigde(n)	Description / beschrijving	Subside total / Totale subsidie	Commune / Gemeente
1	PISEI	Chronic conditions, self-care and health promotion: A collaborative research to enable patients, their social networks and healthcare providers in Brussels to engage in personalised care planning and health promotion	Accepté	U.C.L. - Université catholique de Louvain	The aim of this project is to identify opportunities for collaboration between patients, their social support networks and health providers to elaborate personalised health care plans that include a health promotion dimension and non-medical strategies. Target innovation: Development and validation of an evidence-based model of participatory intervention, that takes into account the diversity of the patients' health care and health promotion needs, as well as the diversity of the health services currently available in Brussels, with a special focus on emerging professions or new professional functions within existing professions (eg. health system navigators, case management or individualised coaching for effective of health promotion).	535.590	Louvain-la-Neuve
	PISEI	Chronic conditions, self-care and health promotion: A collaborative research to enable patients, their social networks and healthcare providers in Brussels to engage in personalised care planning and health promotion	Accepté	Haute Ecole Léonard de Vinci		283.817	Bruxelles
2	EgoNet	Promoting social support network mapping with severe mentally ill patients to improve care coordination, patient involvement, and personalised care; implementation of an ego-centred network-mapping tool	Accepté	U.C.L. - Université catholique de Louvain	The main objective of the proposal is to improve care coordination, support the involvement of the patient in the organisation of his/her own care, and contribute to adapting the care pathway to each individual situation. To this end, the proposal aims to provide patients and care professionals with a process and tool that helps map, compare, and assess the social support network of vulnerable patients with multiple and complex needs.	411.585	Louvain-la-Neuve
	EgoNet	Promoting social support network mapping with severe mentally ill patients to improve care coordination, patient involvement, and personalised care; implementation of an ego-centred network-mapping tool	Accepté	Haute Ecole Léonard de Vinci		175.124	Bruxelles
	EgoNet	Promoting social support network mapping with severe mentally ill patients to improve care coordination, patient involvement, and personalised care; implementation of an ego-centred network-mapping tool	Accepté	Centre de Recherche et de Développement de l'ECAM - CERDECAM		292.644	Bruxelles
3	IGenCare	Integrated Personalised Medical Genomics Care Solution for Patients with Rare Genetic Diseases	Accepté	V.U.B. - Vrije Universiteit Brussel	The general aim of the IGenCare project is to improve personalized medical genomics health care by implementing extra dimensions at every level: 1/ At the laboratory level we plan to extend the diagnostic yield of rare genetic diseases by a multi-omics /functional genomics/integromics approach through simultaneous analysis of the patient's whole genome, gene expression and epigenetic regulation profile in an integrative way. 2/ At the clinical and patient level we aim to optimise the quality of the counselling trajectory and health care, and the general and mental well-being of the patients as well as the health care team by a/ educating the multidisciplinary team in (expected) functional genomics results for the patients' rare genetic disease genomic results to improve communication b/ mapping and analysing the decision-making process in particular to what extent patients want to be informed and c/ analysing how patient and family counselling answers to what is understood as 'personalised integrative care', starting from a holistic (multi-cultural) and bio-psycho-social paradigm.	217.181	Brussel
	IGenCare	Integrated Personalised Medical Genomics Care Solution for Patients with Rare Genetic Diseases	Accepté	V.U.B. - Vrije Universiteit Brussel		159.275	Brussel
	IGenCare	Integrated Personalised Medical Genomics Care Solution for Patients with Rare Genetic Diseases	Accepté	V.U.B. - Vrije Universiteit Brussel		159.275	Brussel
	IGenCare	Integrated Personalised Medical Genomics Care Solution for Patients with Rare Genetic Diseases	Accepté	V.U.B. - Vrije Universiteit Brussel		691.108	Brussel
	IGenCare	Integrated Personalised Medical Genomics Care Solution for Patients with Rare Genetic Diseases	Accepté	U.L.B. - Université libre de Bruxelles		262.210	Bruxelles

Número / Nummer	Acronym	Titre / Titel	Statut / Statuut	Bénéficiaire(s) / Begunstigde(n)	Description / beschrijving	Subside total / Totale subsidie	Commune / Gemeente
4	MOC-UP	Multidisciplinary Oncology Consultations using Patient-centric Decision Support: Beyond Black-box Systems	Accepté	V.U.B. - Vrije Universiteit Brussel	The MOC-UP project aims to have positive impact on cancer disease management, by targeting one of the principal instruments employed in the decision-making process of current oncological care: the multidisciplinary oncology consultation. The rationale underlying our approach is that for clinical decision-support to be relevant in a MOC-setting, it should be multi-factorial (based on data coming from multiple disciplines), easy-to-use (allowing it to be integrated in the clinical workflow), and understandable (allowing interpretation for both the caregiver and the patient). The principal outcomes of the MOC-UP project include clinical decision-support models for treatment response and outcome based on multi-modal data, that can assist in selecting the optimal treatment for a certain patient; interactive visualizations for high-dimensional dimensional data, allowing to enhance the interpretability of decision support systems for expert clinical researchers; integrated dashboards allowing to visualize the multi-modal patient data during MOCs, monitor the evolution of the patient during follow-up, and compare it to the relevant population; infographic representations of the clinical knowledge and decision formation, adjustable to the patient needs in terms of health literacy, aimed at improving patient-empowerment and promoting shared-decision making.	298.746	Brussel
	MOC-UP	Multidisciplinary Oncology Consultations using Patient-centric Decision Support: Beyond Black-box Systems	Accepté	V.U.B. - Vrije Universiteit Brussel		285.546	Brussel
	MOC-UP	Multidisciplinary Oncology Consultations using Patient-centric Decision Support: Beyond Black-box Systems	Accepté	V.U.B. - Vrije Universiteit Brussel		214.510	Brussel
	MOC-UP	Multidisciplinary Oncology Consultations using Patient-centric Decision Support: Beyond Black-box Systems	Accepté	V.U.B. - Vrije Universiteit Brussel		134.012	Brussel
	MOC-UP	Multidisciplinary Oncology Consultations using Patient-centric Decision Support: Beyond Black-box Systems	Accepté	U.C.L. - Université catholique de Louvain		200.750	Louvain-la-Neuve
	MOC-UP	Multidisciplinary Oncology Consultations using Patient-centric Decision Support: Beyond Black-box Systems	Accepté	EORTC		100.256	Bruxelles
	MOC-UP	Multidisciplinary Oncology Consultations using Patient-centric Decision Support: Beyond Black-box Systems	Accepté	Intuïtim		159.714	Bruxelles
5	DiaType	Personalized medicine in diabetes: towards an etiology-based diagnosis and better patient care	Accepté	U.L.B. - Université libre de Bruxelles	This multidisciplinary consortium brings together clinician investigators, exercise physiologists, $\beta$ cell imaging experts, and pancreatic islet and stem cell biologists that together aim to reach detailed clinical phenotyping and genotyping of patients in order to develop precision medicine in diabetes to improve patient care in the Brussels region. A two-step approach will be taken: The project will 1) apply currently available tools for personalized diabetes medicine, and 2) generate new tools required for more accurate personalization, based on novel diabetes subtypes, estimation of remaining $\beta$ cell mass, response to therapy, etc. Attention will be paid to diabetic patients from different origins (e.g. North African and Turkish), in which lifestyle and genetic factors contribute to high diabetes prevalence rates and more severe disease. Precision medicine in diabetes will be developed by DiaType consortium partners from academic hospitals and medical faculties, and implemented across different health care levels in the Brussels region with the support of diabetes associations and primary health care providers and associations. Western diets, physical inactivity and obesity lead to stress in organelles of pancreatic islet $\beta$ and $\alpha$ cells, including the endoplasmic reticulum and mitochondria, islet dysfunction and death, and the development of type 2 diabetes. Dysregulation in these same organelles plays a role in some monogenic forms of diabetes. Disease mechanisms will be studied, capitalizing on the recent breakthrough of human induced pluripotent stem cell differentiation into $\beta$ and $\alpha$ cells, already implemented in the partners' laboratories. This patient- and disease-relevant model will be used for functional, genomic and proteomic analyses, and to test therapeutic targets. Data will be compared to current state-of-the art models, i.e. clonal human $\beta$ cells and human islets. This will enable us to identify master regulators of islet cell dysfunction in monogenic and type 2 diabetes and, based on this knowledge, propose targeted therapies for the disease.	505.024	Bruxelles
	DiaType	Personalized medicine in diabetes: towards an etiology-based diagnosis and better patient care	Accepté	U.L.B. - Université libre de Bruxelles		262.856	Bruxelles
	DiaType	Personalized medicine in diabetes: towards an etiology-based diagnosis and better patient care	Accepté	U.L.B. - Université libre de Bruxelles		321.133	Bruxelles
	DiaType	Personalized medicine in diabetes: towards an etiology-based diagnosis and better patient care	Accepté	U.L.B. - Université libre de Bruxelles		297.546	Bruxelles
	DiaType	Personalized medicine in diabetes: towards an etiology-based diagnosis and better patient care	Accepté	U.C.L. - Université catholique de Louvain		208.832	Louvain-la-Neuve
	DiaType	Personalized medicine in diabetes: towards an etiology-based diagnosis and better patient care	Accepté	U.C.L. - Université catholique de Louvain		454.765	Louvain-la-Neuve
	DiaType	Personalized medicine in diabetes: towards an etiology-based diagnosis and better patient care	Accepté	V.U.B. - Vrije Universiteit Brussel		148.500	Brussel

Numéro / Nummer	Acronym	Titre / Titel	Statut / Statuut	Bénéficiaire(s) / Begunstigde(n)	Description / beschrijving	Subside total / Totale subsidie	Commune / Gemeente
	DiaType	Personalized medicine in diabetes: towards an etiology-based diagnosis and better patient care	Accepté	V.U.B.- Vrije Universiteit Brussel		155.540	Brussel
6	Care Test	HealthCARE RElationship and diagnostic self-TEST in Brussels-capital region	Accepté	U.C.L. - Université catholique de Louvain	<p>The sale of diagnostic self-tests in pharmacies in Belgium is a recent phenomenon. Several self-tests including tests for detecting HIV, gluten intolerance, allergies, iron deficiency, occult blood in stools, urinary tract infections, Lyme disease, cholesterol levels, male fertility, bacteria in the stomach, ... have been gradually introduced since November 2016, and will be marketed during the year 2017. A number of these tests are already available at an approximate cost varying between € 12.90 for tests for urinary tract infections and € 29.90 for the HIV test. While the introduction of these self-tests can be a way to empower patients and help them to take informed decisions about their health, it also represents a challenge for the healthcare relationship. On the one hand, it will impact on the relationship between patients and health care providers as it will increase the capacity for informed decision making. Informed decision making by patients, defined and conceptualised as occurring when a person has adequate knowledge about the intervention in terms of its likely risks and benefits, and makes a decision consistent with their personal values and preferences, reflects the changing roles of patients and health care providers against the backdrop of an ageing population and the increasing prevalence of chronic diseases. An essential requirement for enhancing informed decision making is the availability of facilitating strategies allowing patients to make choices consistent with their values and preferences. However, despite the increased attention on such strategies, scant research has been conducted on their implementation and impact. On the other hand, the introduction of self-tests also impacts the relationship between health care professionals. As testing for and diagnosing of illnesses has thus far been a task of medical professionals, making self-tests available to patients via pharmacies involves a shift in the roles of health carers and requires an optimisation of the communication between pharmacists and general practitioners (GPs) physicians regarding the follow-up of patients. The research will explore how the introduction of diagnostic self-tests in pharmacies influences the healthcare relationship, and to identify the factors that may encourage or impede a partnership relationship between the healthcare providers and patients. The research will improve the understanding of how the introduction of self-tests in pharmacies influences the relationship between patients and health professionals and the interactions between GPs and pharmacists.</p>	413.497	Louvain-la-Neuve
	Care Test	HealthCARE RElationship and diagnostic self-TEST in Brussels-capital region	Accepté	U.L.B. - Université libre de Bruxelles		232.009	Bruxelles
	Care Test	HealthCARE RElationship and diagnostic self-TEST in Brussels-capital region	Accepté	V.U.B.- Vrije Universiteit Brussel		299.203	Brussel