Orbiso

A new platform for patient education

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The problem

- Spoken patient education alone is often not enough.
- We repeat information that patients could get from other sources.
- AI tools and internet sources are problematic – information can be misleading or incomplete.
- Clinicians do not know what information patients get from other sources.

We need to deliver content that we can guarantee as experts.

We need to deliver the right information, to the right patient, at the right time.



Project goals

Make it easy for experts to create education programs

No need to search for a software supplier or for funding.

No need to deal with legal issues and data protection.

Help them create education materials and deliver them to patients.

Speed up implementation of education programs and make them more accessible.

Save money spent on software development and maintenance.

Ensure **long-term sustainability.**

Who is Orbiso for?

Healthcare professionals

- Everyone who works in physical or mental health care gets a tool that helps them create digital care.

Care recipients

- Patients / clients get the app directly from their own professional, with the key information and a tailored education program.



Our experts

in health, education and technology



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How does the life cycle work?

1

Problem definition *Generate with AI

Women with a proven BRCA1/2 mutation face a higher risk of breast and ovarian cancer. Many carriers do not follow the recommended preventive steps – they lack a clear plan and ongoing support.

Design a program that works

An AI assistant guides you through goals, structure and logic

2

Add the content

Texts, videos, visuals – AI checks behaviour-change principles while you edit

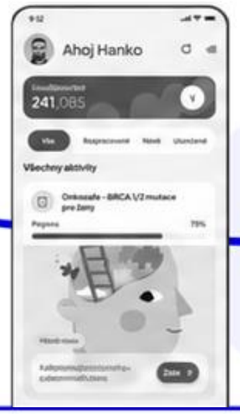
Content | Video | Audio | Surveys

3

Publish the program

To specific people, a private group, or publicly in Orbiso

Generate QR code



4

Users go through the program

Download the app and follow the program

5

Module	Drop-off
M1 What my mutation means	5%
M2 My prevention plan	2%
M3 Regular breast self-exam	40%
M4 Habits for long-term prevention	3%

Monitor, analyse, improve

Live data, communication with users, program iterations

The doctor creates the program alone or with our help

A digital guide for BRCA mutation carriers

Lenka Pavčíková
Jiří Šedo

MASARYK MEMORIAL CANCER INSTITUTE
BRNO

Why do patients need digital education?

- **Care goes beyond the clinic**
  Education in the clinic is short and usually one-time.
- **High-risk groups need support**
  Especially women with a genetic risk.
- **Prevention is a process, not a moment**
  It needs long-term access to trusted information.

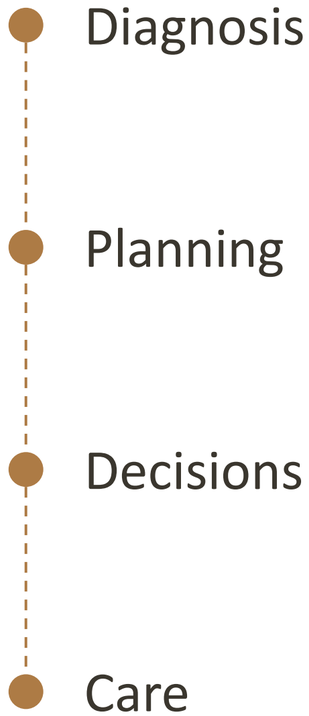
“Education does not end when the patient leaves the clinic.”

STARTING POINT

Before we started building, we asked the patients

What matters to us may not matter to her.
Clinical relevance and patient needs do not always overlap.

- Care for BRCA carriers is long-term
- It includes repeated decisions in different life situations
- Patients' needs change over time

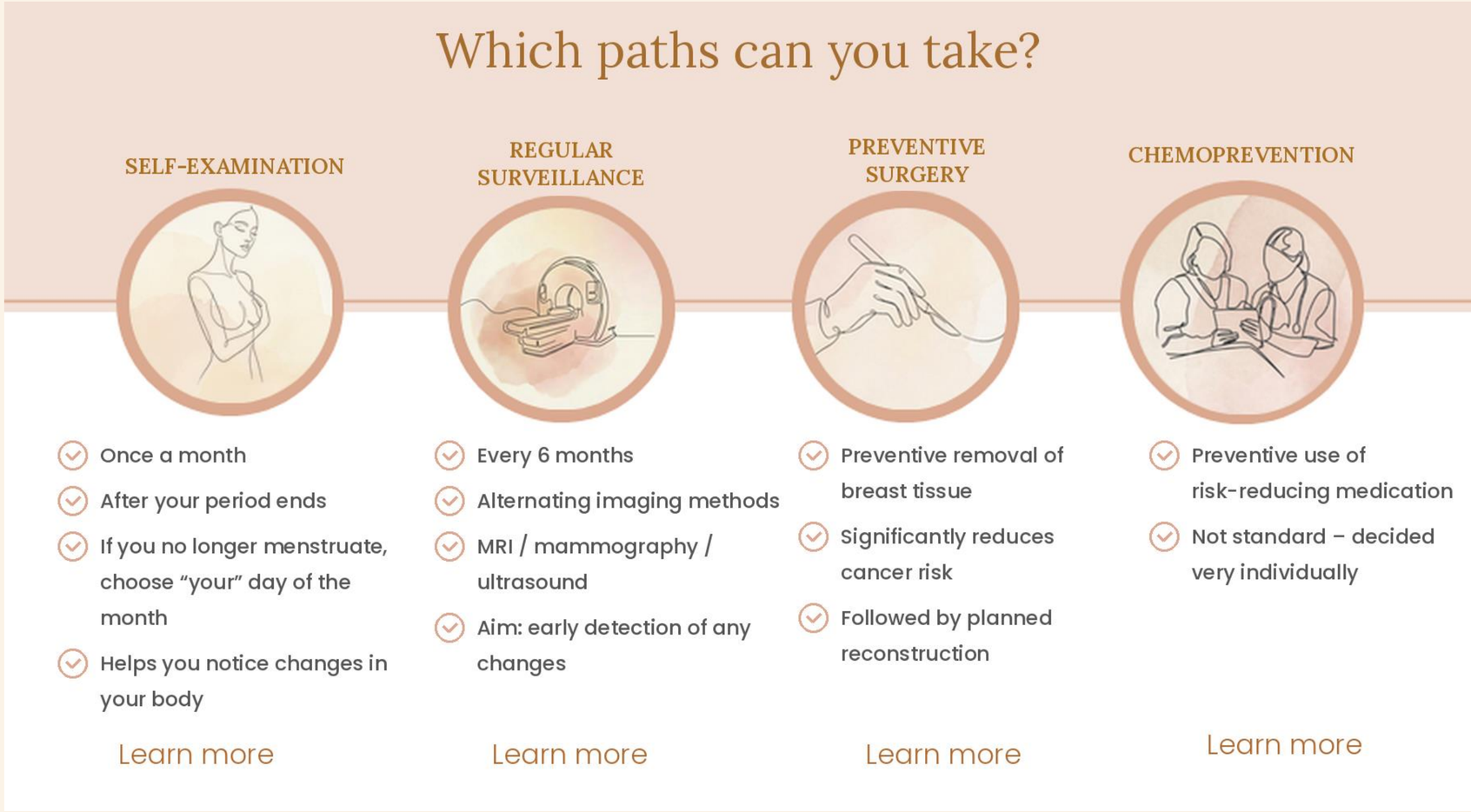


OUR PRINCIPLE

Not more information.
The right one, at the right time.

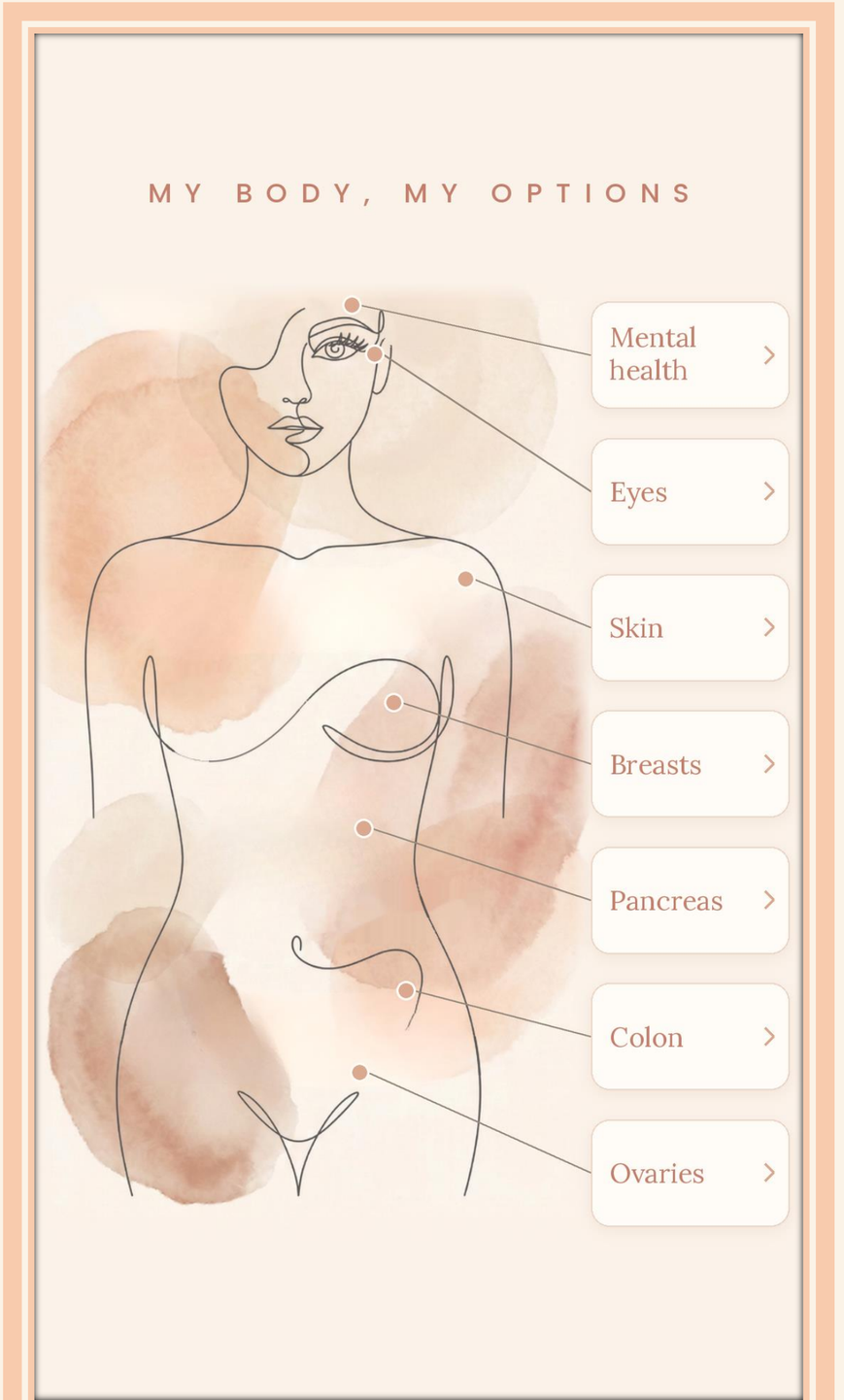
- The right information, in the right context, when it is needed
- The app does not say what to do

  — it explains the options
- It supports informed decisions together with the clinical team



A companion, not an encyclopedia

- Interactive navigation by topic or organ
- The patient chooses the depth — she opens details only when she wants
- Texts, infographics, audio and podcasts with experts



She chooses what interests her right now

Which paths can you take in skin care?

SELF-EXAMINATION



- Check your skin from head to toe
- Watch for new or changing moles
- Don't forget hard-to-see areas

Learn more

UV PROTECTION



- Protect your skin from sunburn
- Use SPF 30–50+
- Clothing, a hat and shade help
- Better to skip the solarium entirely

Learn more

DERMATOSCOPY



- Quick, painless check of moles with a dermatoscope
- Shows changes you cannot see by eye
- Helps detect suspicious moles in time

Learn more

YOUR OPTIONS





- Skin-sparing mastectomy



- Simple mastectomy



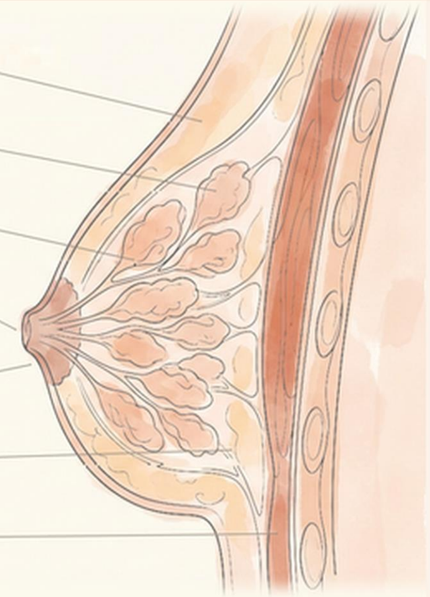
- Nipple-sparing mastectomy



- Unilateral mastectomy

I want to learn more:

- breast anatomy



Subcutaneous fat
volume and a soft shape.

Lobule
milk during breastfeeding.

Milk duct
Thin channels that carry milk to the nipple.

Nipple
Where the milk ducts open to the surface.

Areola
The darker skin around the nipple.

Connective tissue
Firm bands that hold the breast and give it shape.

Pectoral muscle
Lies under the breast tissue, on the chest wall.

And what about your mind?

When you find out about the BRCA mutation

When surgery is behind you

When decisions are coming

When you are worried about your children

When you are learning to live with BRCA



When it sometimes gets too much

OBSAH Sbalit vše

- Úvod
  - Co je BRCA mutace
  - Co to znamená pro tebe
  - Jak se BRCA mutace dědí
- Psychika
- Prsa
  - Jak o ně pečovat
  - Samovyšetření
  - Pravidelné sledování
  - Klinické vyšetření
  - Preventivní operace prsou
    - Obsah 53
    - Obsah 54
    - Obsah 55
    - Obsah 56
    - Obsah 57
    - Obsah 58
    - Obsah 59
    - Obsah 60
    - Obsah 61
    - Obsah 62
    - Obsah 63
    - Obsah 64

Bradavku šetřící mastektomie

Nipple-sparing mastektomie (NSM)

Co to znamená?

- Tato operace zachovává kůži prsu, dvorec i bradavku.
- Odstraňuje se žlázová tkáň, která nese riziko vzniku nádoru.

Co může být přínosem?

- nejpřirozenější vzhled hrudníku po rekonstrukci
- zachování kompletního NAC (nipple-areola complex)

Co může být náročné?

- není vhodná pro každou ženu
- citlivost bradavky se většinou ztrácí nebo mění
- bradavka může být intraoperačně odstraněna, pokud není bezpečná

Redukce rizika?

- U správně vybraných žen výrazně snižuje riziko vzniku rakoviny prsu, podobně jako jiné typy preventivních mastektomií.

IN PRACTICE

Audiovisual materials

- Animated graphics
- Short videos
- Video podcasts





TONE OF THE APP

From information to guidance

- Calm, respectful and supportive language
- Honest about risk, without creating fear
- A safe place to come back to again and again

Learning to live with a BRCA mutation

At first, a BRCA mutation can take up a lot of space in your world.
In your thoughts, feelings and decisions.



Over time, this can change.
Some things settle. Some decisions are made.

But BRCA can come back to mind.
Before a check-up, for example. Or at times when you are thinking about your next steps.

During these periods, it can help to notice when the topic comes back more often – for example, while you are waiting for results.

When it sometimes gets too much
– jump to the last section

Welcome – wherever you are on your journey!

Maybe you only recently found out about your BRCA1 or BRCA2 mutation.
Maybe you already have part of the journey behind you. Or you are deciding what comes next right now.

Whatever your story is, this is a place where you can calmly understand, at your own pace, what the mutation means for you.

And where you don't have to do it alone.



A complement, not a replacement for clinical care



Does not replace

The geneticist, oncologist, surgeon or a personal consultation.

Works between visits

After the first visit, the patient gets an invitation. She can go through the program before the next visit.

Helps her prepare

Prepare questions for the next visit. Go back to what was said in the clinic.

The goal is not to give the patient more information.

The goal is to help her find trusted information, understand it
and use it when she needs it.

We do not want to build a digital encyclopedia.
We want to build a digital guide through long-term care.

Thank you for your attention.