

The bottleneck is rarely the analysis

Data access is a governance problem, not a technology problem.

Healthcare analytics tools exist. The challenge is compliant access to the data.

Governance determines evidence feasibility.



PROBLEM

Governance enters too late

Many studies are designed before access pathways, ethics requirements and custodian expectations are understood.

Late governance creates delays.



Institutional agreements

Hospitals and data custodians need clear permitted use, responsibilities and approval pathways.

Access begins with trust.



Ethics and de-identification

IRB processes, privacy controls and de-identification methods shape what can be studied.

Compliance is part of study design.



Local legal frameworks

China, Australia, Korea, Japan and other APAC markets have different data rules and expectations.

A regional study is never governance-neutral.



Governance architecture before analytics

- 1 Feasibility
- 2 Governance
- 3 Extraction
- 4 Harmonization
- 5 Analysis
- 6 Reporting

Order matters.



CALL TO ACTION

Good evidence planning starts before the data request

The fastest studies are usually the ones with governance designed early.

Where does governance sit in your evidence workflow?

#DataGovernance #RealWorldData #HEOR
#ChinaHealthcare #MedicalAffairs #APAC



The challenge is no longer whether healthcare data exists.

It is whether the right evidence can be generated fast enough?

Yes, it can.

Aurumetrics supports pharmaceutical and life sciences teams with real-world data intelligence, strategic commercial insight and evidence generation.

GLOBAL MARKET FOOTPRINT

APAC-focused with evidence and data partnerships spanning:

China • Australia • Japan • South Korea • Taiwan • New Zealand

Additional support across the UK, EU, US, and other global markets on an ad hoc basis.

CAPABILITIES

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Advancing Analytical
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