Skin Analytics delivers robust **NHS dermatology cost savings**

Net savings from using Skin Analytics' DERM equates to:



£51.89 per patient



£259,000 per for a trust seeing 5,000 skin cancer referrals year



Cost savings quoted are based on comparison with face-to-face pathways

Exeter Test Group health economic analysis

Alongside the Exeter Test Group and supported by our AI in Health and Care Award, we're proud to have conducted our own health economic analysis.

The research paper and the associated model were designed to allow for robust challenge and review of the underlying assumptions. In the analysis, we were keen to reflect real world performance from our NHS partners using DERM, as well as other reference material such as Cochrane reviews and case studies.

Findings show that DERM was less expensive and without losing QALYs (Quality Adjusted Life Years) compared to both face-to-face pathways and Teledermatology.

The net savings from using DERM are illustrated to the left.

Edge Health finds benefits could reach £5.5 million for NHS midlands-wide



The Heath Innovation East Midlands (formally known as East Midlands Academic Health Science Network) funded a review of the Skin Analytics pathway with University Hospitals Leicester by Edge Health, including a review of its health economics. The review by Edge Health was independent and not commissioned by Skin Analytics.

Edge Health reported that the pilot achieved a benefit cost ratio of 1.05, and noted that this ratio was in fact diluted by the cost of providing a second read - an additional step

that is not required and increases referrals with associated time and cost implications.

Whilst the pathway alone saves more money than it costs, the ratio also does not include non-quantified benefits such as reduced Waiting List Initiative clinics, reduced biopsies and reduced long-term care costs.

Indicative scenario analysis of potential future models showed **higher benefit cost ratios from 1.27 to 1.88.** These ratios are mostly driven by greater operational efficiency in imaging clinics as the pathway matures, as well as removing the second read. Based on this analysis, removal of the second read and scaling of the pathway across the region could lead to **NHS Midlands-wide benefits in the region of £5.5 million** in one year.







AI for good

At the core of everything we do at Skin Analytics lies our mission: helping more people survive skin cancer by using AI to enable innovative skin cancer pathways that deliver better patient outcomes that are sustainable for health systems globally.

In addition to pioneering world leading prospective clinical studies and post market surveillance, we have always placed a high priority on health economics.

Since 2018, we have worked with teams from Health Enterprise East, the York Health Economics Consortium, Imperial Trust, as well as the Exeter Test Group to ensure that our services are truly sustainable for the NHS. We also brought an expert health economist, Professor Chris Hyde, into our Clinical Advisory Committee to ensure that decisions we make balance cost effectiveness as well as clinical impact.

"It's been a pleasure working with a company who are genuinely committed to developing the health economic case for their product."



Professor Chris Hyde Professor of Public Health and Clinical Epidemiology

Today, we are uniquely well-placed to answer on the cost effectiveness of using DERM in secondary care, with over three years of comprehensive realworld evidence, derived from the assessment of more than 70,000 patients across 14 NHS sites.

Future reviews:

Commitment to transparency & ongoing improvement

We've always believed in our technology so it's really motivating and affirming to see the results outlined in this document. However, we remain committed to never standing still...

A further independent review as part of our AI in Health and Care Awards Evaluation is expected in early 2024. In addition, as part of our SBRI Cancer Award, we are working on health economic reviews of pathways with DERM operating earlier in the pathway within Community Diagnostic Hubs (CDH). Within this review, we expect to see even greater cost savings generated.

All of this work in secondary care will be under the scrutiny of NICE as part of the Early Value
Assessment expected to be published in April
2024. As a recognized authority in healthcare
evaluation, NICE's review reflects the robustness of our health economic analyses and their relevance
to the broader landscape of dermatological care.

We remain committed to enhancing the pathways we operate with our NHS partners to ensure that they provide ever increasing:



Clinical quality



Cost effectiveness



Better and sustainable patient outcomes





