

01 CASE STUDY OVERVIEW

From prescription to outcome

Reinventing Patient Support for Diabetes in Egypt Through Human Care + Digital Transformation

Medication access alone does not guarantee better outcomes. Hospitalia's next-generation PSP model connects Patient Educators, physicians, digital engagement, monitoring, home healthcare and real-time program intelligence around one continuous patient journey.



+8 pp

MODELED ADHERENCE IMPROVEMENT

From benchmark baseline to stronger program adherence.

Illustrative benchmark scenario

SAME PEOPLE.
HEALTHIER LIVES.
A STRONGER
EGYPT.

+80
Additional adherent patients per 1,000

3.1×
More patients achieving $\geq 1\%$ HbA1c reduction in an Egyptian digital-health pilot*

81.9%
Internet penetration in Egypt

38.3%
Diabetes education exposure in the cited Egyptian cohort



NO PROPORTIONAL INCREASE IN MANUAL PROGRAM COMPLEXITY.

Design Your PSP →

Speak to Our Patient Support Team →

* In a small Egyptian randomized pilot, 16/34 intervention patients versus 6/39 control patients achieved at percentage-point HbA1c reduction. The average between-group HbA1c difference itself was not statistically significant, so this should be interpreted as a promising local signal rather than an expected PSP outcome.

PEOPLE + TECHNOLOGY + BETTER OUTCOMES

02 — THE EGYPTIAN OPPORTUNITY

Highly connected patients. Persistent gaps in chronic-care support.

Egypt already has the infrastructure required for digitally enabled patient support.



81.9%
CONNECTED



57.2%
OUT-OF-POCKET

**A MARKET WHERE
ACCESS, AFFORDABILITY
AND CONTINUITY MUST
BE DESIGNED TOGETHER.**

SAME PEOPLE.
HEALTHIER LIVES.
A STRONGER
EGYPT.

KEY MARKET INDICATORS

— A HEALTHIER WORKFORCE. A STRONGER TOMORROW.



96.3 million
Internet users



81.9%
Internet
penetration



116 million
Active cellular
connections



57.2%
Out-of-pocket expenditure
as a share of current health
expenditure in Egypt
in 2023.

THE STRATEGIC OPPORTUNITY

The opportunity is not simply:
‘Put the PSP online.’

**Use digital connectivity
to make patient support
more continuous, accessible
and intelligent.**

A STRONGER TOMORROW



More engaged
patients



Stronger
adherence



Lower
long-term costs



Healthier
communities



SUPPORT
TODAY.
A HEALTHIER
TOMORROW.

Illustrative interface

03 THE SUPPORT GAP

Taking medicine is not the same as achieving the treatment goal.

A prescription may be written. Medication may even be taken. But the patient's journey can still fail between understanding, behavior, monitoring, follow-up and clinical control.



“
**More than a prescription.
A fuller journey.
A healthier tomorrow.**



85.5%
MEDICATION-TAKING
BEHAVIOR

Patients who reported taking their diabetes medication as prescribed.



38.3%
RECEIVED
EDUCATION

Patients who received any education about diabetes in the study period.



28.9%
PARTICIPATED
IN EDUCATION

Patients who actively participated in a diabetes education session.



17.4%
AT GUIDELINE-
DEFINED TARGET

Patients who achieved their guideline-defined HbA1c target.



Important: these figures are different dimensions observed within the study and should not be interpreted as a causal conversion funnel.

Bridging the support gap means turning medication access into real-world health outcomes for people across Egypt.

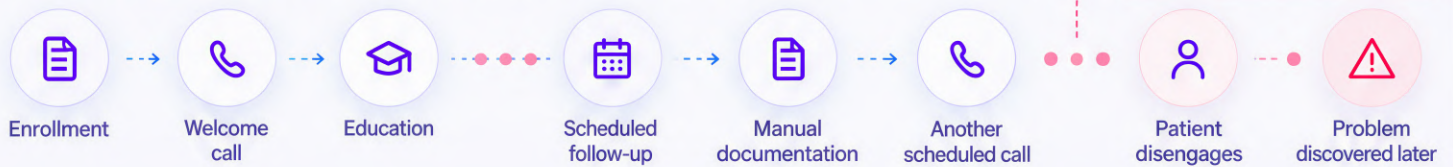
From medication access
to meaningful outcomes.

04 THE TRANSFORMATION

From scheduled follow-up to continuous patient management.

Replacing fragmented, periodic touchpoints with a continuous, connected journey that keeps patients engaged and supported.

TRADITIONAL PSP | Periodic contact. Missed opportunities. Patients fall through the cracks.



DIGITALLY ENABLED PSP | Continuous support. Proactive insights. Better outcomes.



FROM: "Who is due for a call?"

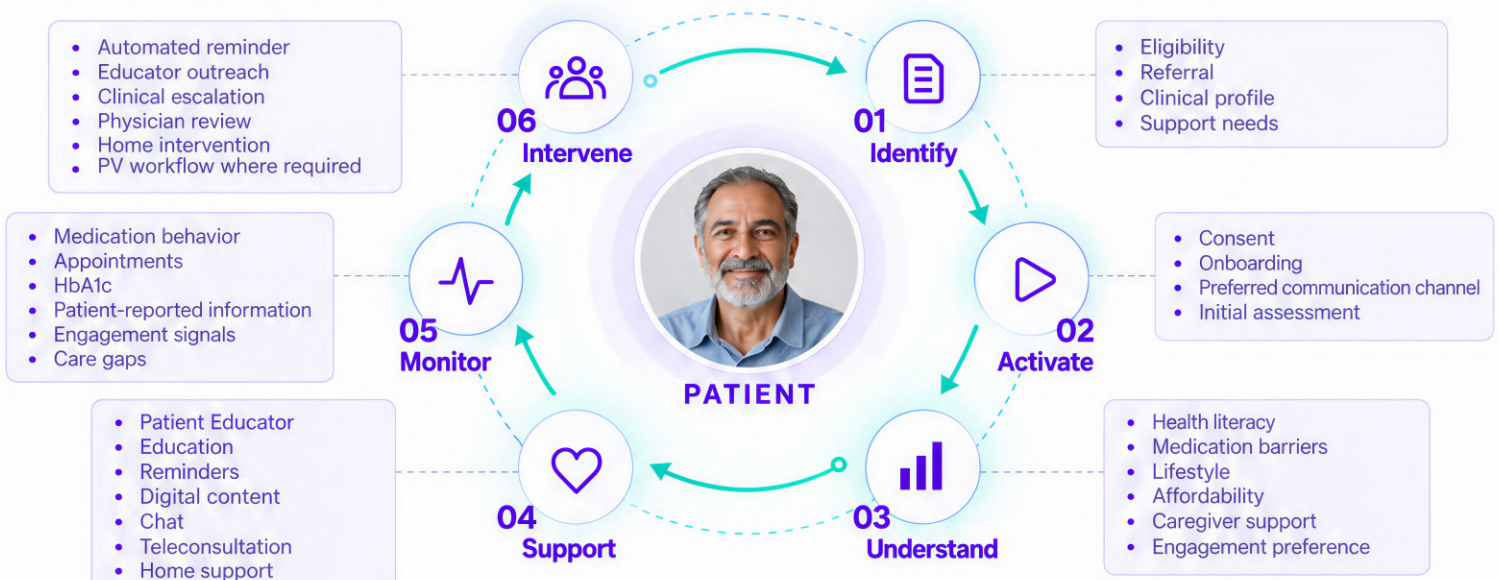


TO: "Who needs intervention today?"

05 THE NEW PSP OPERATING MODEL

One patient. One longitudinal journey. Multiple coordinated interventions.

Every interaction changes what happens next.



05 EGYPTIAN PROOF OF DIGITAL POTENTIAL

Even relatively simple digital interventions have shown a measurable signal locally.

A randomized pilot in Cairo evaluated daily educational SMS and weekly reminders for people with diabetes.



6 of 39 control patients achieved $\geq 1\%$ HbA1c reduction.

15.4%
of control patients



16 of 34 intervention patients achieved $\geq 1\%$ HbA1c reduction.

47.1%
of intervention patients

3.1x

as many patients reaching the $\geq 1\%$ -reduction threshold.



The mean HbA1c reduction between the groups was not statistically significantly different. This supports feasibility and potential, but does not prove that SMS alone produces superior overall glycemic control.

06 BENCHMARK-MODELED IMPACT

What could better patient support mean at scale?

For strategic planning, use a conservative 60% modeled baseline and a +8 percentage-point PSP improvement.

1,000-PATIENT MODEL

600
60%

Baseline adherent

80
8%

Additional adherent

320
32%

Not adherent



MODELED BASELINE
600 adherent patients

60%



MODELED DIGITAL + HUMAN PSP
SCENARIO
680 adherent patients

68%



+80 / 1,000

POTENTIALLY
ADDITIONAL
ADHERENT PATIENTS

SAME PEOPLE.
HEALTHIER LIVES.
A STRONGER
EGYPT.

Benchmark-modeled potential — not Hospitalia client results.

06 — DIGITAL × HUMAN

The winning model is not app versus educator. It is app × educator.



AN EXAMPLE PATIENT JOURNEY



Instead of discovering disengagement months later, the program can act while the problem is still manageable.

07 — FROM ACTIVITY REPORTING TO OUTCOME INTELLIGENCE



08 — EXECUTIVE SCORECARD

Metric	Baseline / reference	Benchmark / target	Type
Adherence	60%	68%	Modeled
Adherent patients / 1,000	600	680	Modeled
Diabetes education exposure	38.3%	≥70%	Target
Education participation	28.9%	≥60%	Target
Follow-up completion	Client baseline	≥90%	Operational
High-risk alerts addressed within SLA	Client baseline	≥90%	Operational
Required PV event routing	Defined denominator	100%	Compliance

Egyptian education references are derived from the IOMPS cohort. Adherence figures are modeled, not observed client results.

09 — THE VALUE TO EVERY STAKEHOLDER



The Future of Patient Support in Egypt Is Continuous

A modern PSP should know who needs support, why they need it, when intervention is required, who should intervene, and whether that intervention changed the outcome.

HUMAN CARE. DIGITALLY ORCHESTRATED. OUTCOMES MEASURED.

Design Your PSP →

Discuss Your Patient Journey →

Built around your therapy area, patient population, operating model and compliance requirements.