

What the Heck is a Hackathon?

By John Esdaile, MD, MPH, FRCPC, FCAHS

You may well not have been to a hackathon yet as they are still a relatively new, but exciting, way to develop innovative technologies for politics, education, game design and most recently, healthcare. Google, Microsoft and NASA used a hackathon to develop software to help aid in disaster management and crisis response. The British Government held one to improve the lives of people with dementia. Eli Lilly Canada and Havas Life Manchester facilitated a hackathon in Vancouver, with 19 participants, who were either consumer-patients, consumer-patient advocates, nurses, physiotherapists, pharmacists, rheumatologists, scientists and knowledge-translation experts.

The goal was simple: To identify two key problems for patients and healthcare professionals dealing with rheumatoid arthritis (RA) and to develop functioning website prototypes to deal with these issues—in 30 hours, non-stop. Well, almost non-stop.

Identifying Problems and Challenges

Arthritis Consumer Experts set the hackathon stage by presenting an overview of the literature on identified and unidentified “gaps” in the consumer-patient journey with RA. Afterwards, several hours were devoted to focusing on two problems short-listed by the “hackers” through an iterative process—adherence to medication and unmet needs for patients. Small teams brainstormed ideas. More than 200 thoughts on how to solve these two problems were generated. The walls of the room were literally papered with sticky notes of endless sizes and colours.

Idea Reduction

With more than 200 ideas, there was a huge challenge to distill them into three or four main approaches. Incredibly, this was done. Three ideas were generated with the assistance of Havas Life magicians who had flown to Vancouver. Paper prototypes of the websites were developed. The teams sponsoring different ideas presented and, after considerable discussion, two ideas were selected:

(1) *Joint Partners:* This website is for real people living with RA to show others that they can succeed and should move forward with great hope. The concept was that no

one could inspire people living with RA as well as peers and that fellow patients could be very convincing that a full life was possible despite RA. The website would provide a patient-to-patient support network where individuals could share their experience, hints and tips and find local support.

(2) *The RA Café:* The second website aims to help people integrate RA into their lifestyle and improve adherence. The concept was a one-stop resource for RA patients that would help them overcome the barriers to better health behaviours, and lead to better adherence and better outcomes. It would help patients in dealing with the many healthcare professionals they would interact with and provide high-quality, credible information as well as peer support and mentoring.

While those attending went to dinner, the Havas Life team that had flown to Vancouver from Manchester, England went to work.

The Magic begins

The time difference between Vancouver and Manchester allowed those in Vancouver to start working immediately on developing prototypes of the website. Around midnight, the Manchester team took over and continued the development process. Early the next morning, the Havas Life Vancouver team were able to present the new websites based on the paper prototypes. It was simply magical to see two strikingly different websites with many aspects already functioning. Everyone got the opportunity to play with the prototypes and make suggestions for the future.

Next Steps

It was an incredible experience to start one morning with empty walls and piles of blank sticky notes and to have two prototype websites 30 hours later. The Vancouver representatives and the unseen Havas Life team members in Britain made the impossible seem easy. Next steps will include external review, further focusing, additional refinement, and the hope will be that in the not too distant future at least one website will be launched that will help patients with RA help themselves do better and lead fuller, more confident lives.

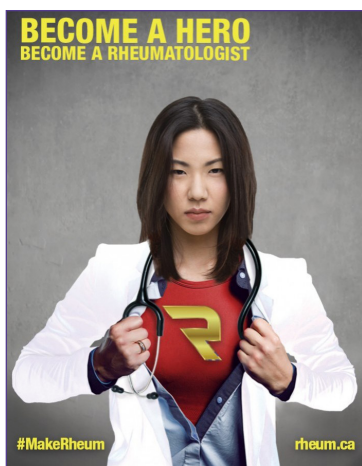
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Spreading the Word About Rheumatology at the Ontario Medical Students Weekend (OMSW)

By Jane Purvis, MD, FRCPC

The Ontario Rheumatology Association (ORA) Manpower Committee and the CRA human resources program, Training the Rheumatologists of Tomorrow (TROT), have been working together in various ways to increase the visibility of rheumatology to first-year medical students. Our most impactful activity thus far has been our participation at the Ontario Medical Students Weekend (OMSW). This annual event is held in one of the six medical school cities, and this year's event took place in London, Ontario, on October 14-15, 2016.

The ORA and CRA had a booth in the Medical Expo room and we greeted 550 first-year medical students in just one day! Students had the opportunity to speak to a rheumatologist to learn what rheumatology is all about and to try on gloves that simulate deforming rheumatoid arthritis. The students were given information on the CRA Summer Studentship opportunity, and they received information on how to contact the program directors at each of the medical schools, so they could pursue electives if desired. The #MakeRheum posters were on display as well as the now famous *RheumCareer* pens. We had the busiest booth in the room and were the only medical subspecialty in attendance. This continues to be a valuable opportunity to reach medical students early in their careers, so that rheumatology can



be considered as the excellent career choice that we all know it to be.

Each year, a survey has been conducted to gauge the impact of the booth on the students who visit. The coordinator of the #MakeRheum campaign approached 30 students during the day to fill in a questionnaire regarding their experience. Both years the data have been striking!

This year, nine of 30 had heard about the subspecialty, and all of these students are considering an experience in rheumatology. A further 21 had not heard of rheumatology but, after visiting the booth, 18 said that they

would consider pursuing an experience in rheumatology; two were undecided; and one indicated that he/she would not ("just would like some exposure now. My interest has been piqued"). That is, 90% of the undergraduate medical students who had a chance to hear about rheumatology from a passionate rheumatologist want an experience in rheumatology. We need to consider how to build capacity to satisfy this demand!

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The Bottom Line

If someone invites you to a hackathon, say yes! It will be a lot of fun.

Thanks to Arthritis Consumer Experts for setting the hackathon stage by the consumer-patient perspective on the RA journey and to Eli Lilly Canada for supporting and driving this idea forward.

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