

21 y 22 de abril



*II Cumbre*

# de la Economía del Dato Gaia-X España

El momento de los espacios de datos:  
impulso a la economía y la soberanía del dato

📍 Palacio de Congresos de Toledo

Ayuda 27.08.4671.488 financiado por:



GOBIERNO DE ESPAÑA

MINISTERIO PARA LA TRANSFORMACIÓN DIGITAL Y DE LA FUNCIÓN PÚBLICA



SECRETARÍA DE ESTADO DE DIGITALIZACIÓN E INTELIGENCIA ARTIFICIAL



Hospital Universitario Puerta de Hierro Majadahonda

**SHARE: Spanish cAncer data space**

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Hospital Universitario Puerta de Hierro-Majadahonda



**FEDERATED | INTEROPERABLE | AI-DRIVEN |  
SECURE**

**DURATION:** 12 MONTHS

**START DATE :** SEPTEMBER 2025

**END DATE :** JUNE 2026

**FUNDING:** 1 037 293€

### OBJECTIVES

- 1 Build**  
Spanish Lung Cancer Data Space (Federated & EU-interoperable) where hospitals can share data
- 2 Heterogeneous Data Sources**  
Clinical, genomic, demographic, wearables
- 3 Train**  
Predictive AI models (Federated learning)
- 4 Improve**  
Diagnosis, treatment & risk understanding

## Partners

### Coordinator



**holos**

Platform provider

CLARIFY

 **Gradient**  
DATA SOLUTIONS

Interoperable data  
space provider

 **acuratio**

Machine learning  
platform provider

**AUSTRIACARD**  
(HOLDINGS)

Data governance  
platform provider

**Puerta de Hierro**



# WHO WE ARE

- Created in 1964, relocated in 2008
- Public Hospital, belonging to SERMAS
- 613 rooms/beds, 3,172 professionals
- Top 10 by reputation in Spain
- Associated with Universidad Autónoma de Madrid, among the top 100 Universities in the world
- Digital: 1st HIMSS Stage 6 among large hospitals in Madrid
- Serves a population of more than 500.000 people
- 667.680 consultations in 2024
- 27.825 admissions in 2024

## Cancer Care Institutional Context

Quality cancer  
diagnostics and care  
for all the major  
cancers

Multidisciplinary  
**CLINICAL  
CARE**

Basic, preclinical and  
clinical research  
integrated in  
research groups

**CLINICAL  
RESEARCH**

**EDUCATION**



**TRANSLATIONAL  
RESEARCH**

in prevention,  
diagnosis and  
therapy

University partnership &  
Educational programmes for  
clinicians, researchers, and  
patients

Extensive  
international  
networking

Non-evaluated family risk of cancer incidence

Multiple and/or unnecessary visits to the ER

Social/working disruption

Real life patients (out of Clinical Trials)

Long physical and psychological recovery

Management approach towards end of life

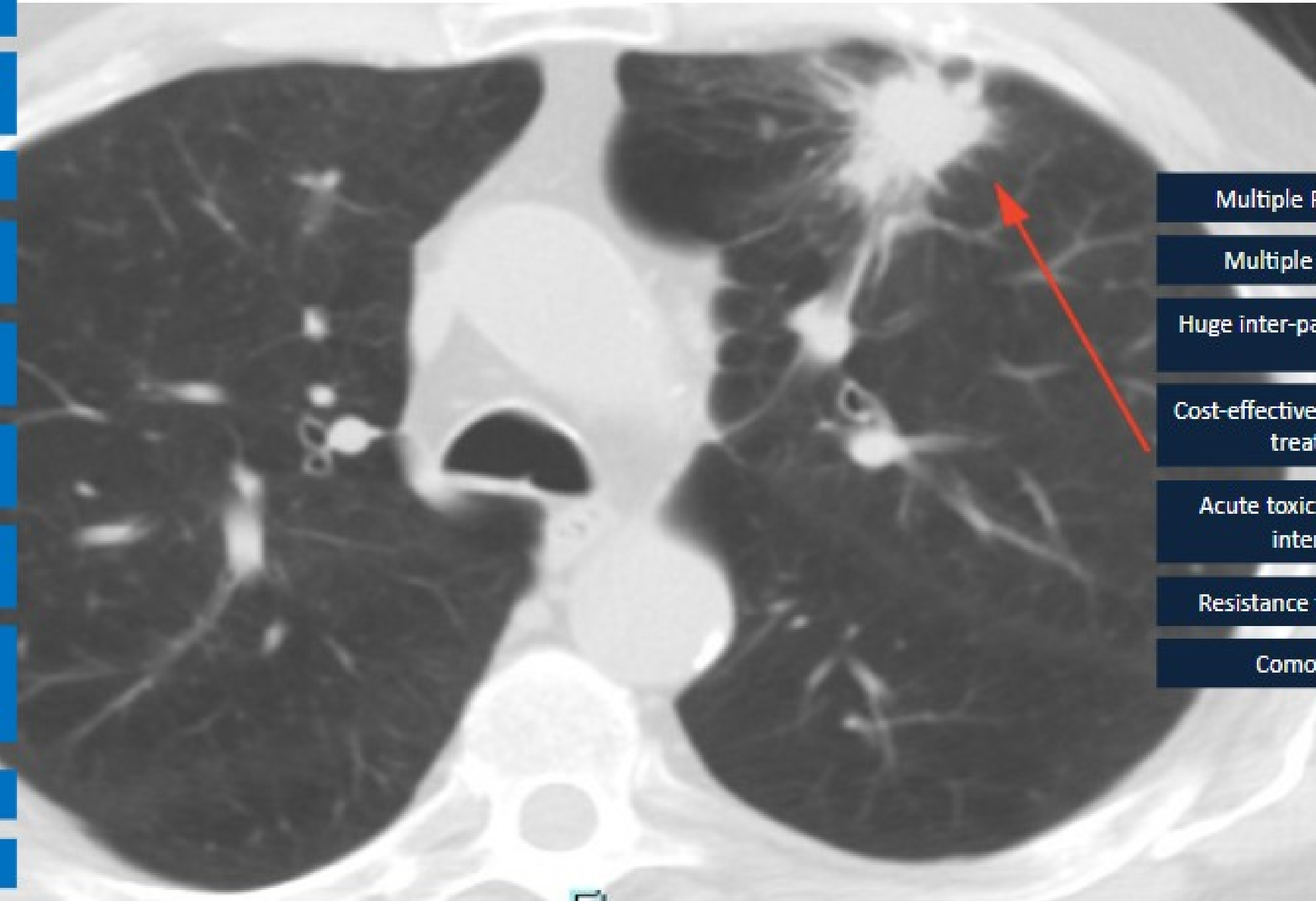
Complex cancer care (with a non evidenced follow-up)

Undetected risk of developing secondary malignancies and toxicities

Financial hardship

Treatment duration

Family burden



Multiple PET-CT scans

Multiple blood tests

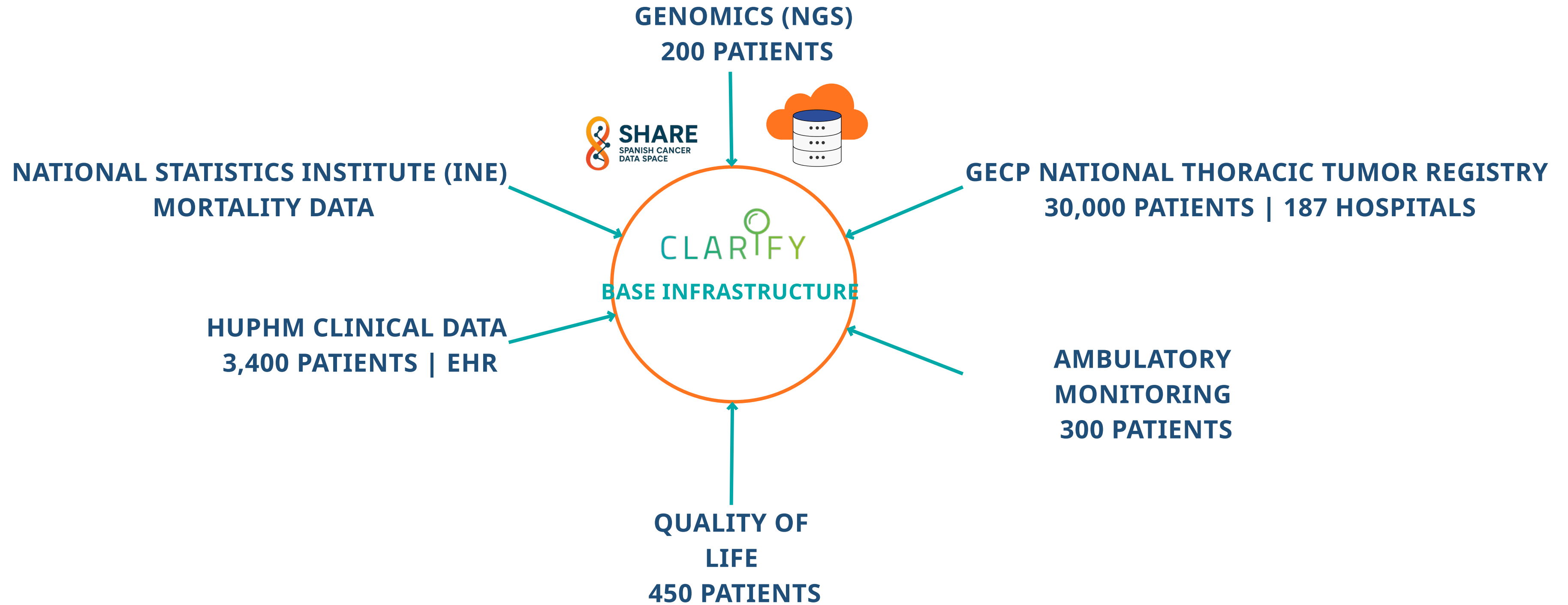
Huge inter-patient variability

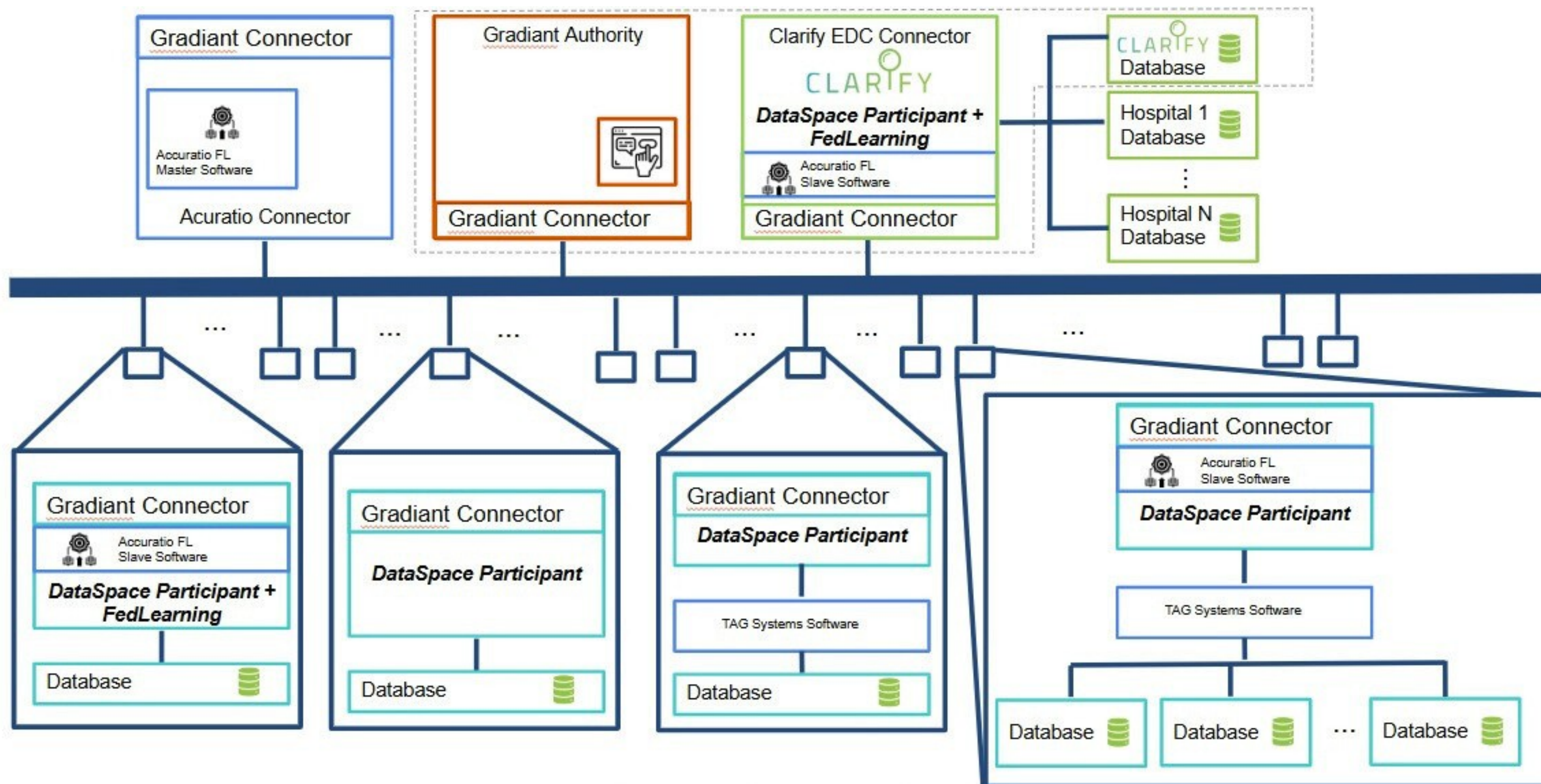
Cost-effectiveness of multiple treatments

Acute toxicities and drug interaction

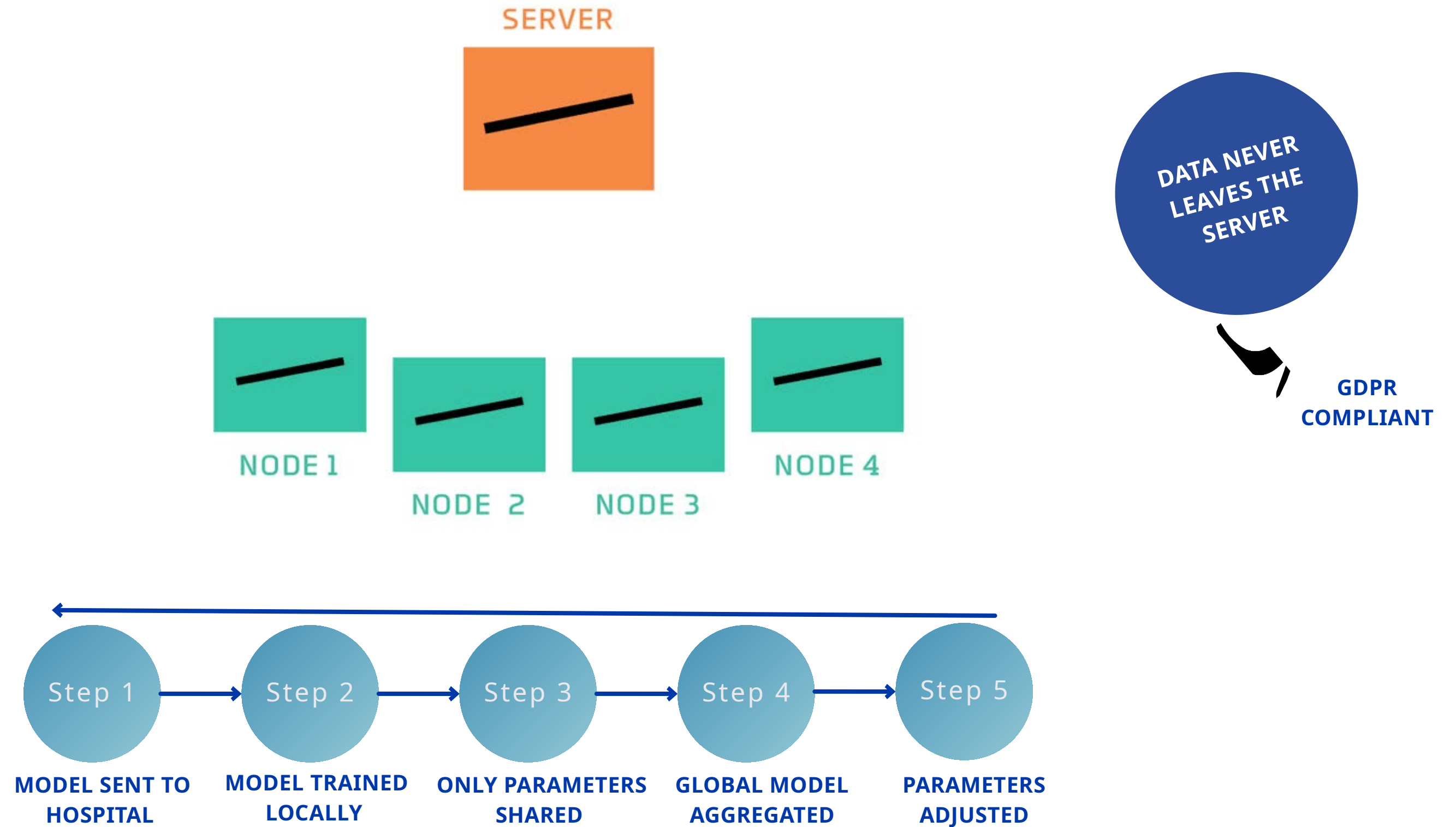
Resistance to treatments

Comorbidities





Multiple Instances of the different Profiles



# 01

## PREDICTION OF RISK OF PROGRESSION AND SURVIVAL

### CLINICAL QUESTION:

Which patients are at higher risk of early progression or death (<6 months) or late progression (>12 months)?

# 02

## PREDICTION OF EARLY RELAPSE AFTER CURATIVE-INTENT TREATMENT

### CLINICAL QUESTION:

Which patients are at high risk of relapse within <6 months or >12 months after surgery or radical treatment?

# 03

## PREDICTION OF TREATMENT RESPONSE (IMMUNOTHERAPY)

### CLINICAL QUESTION:

Which clinical-genomic profile best predicts an objective response to treatment?

# 04

## PREDICTION OF FUNCTIONAL DECLINE AND QUALITY OF LIFE

### CLINICAL QUESTION:

Which patients are likely to develop significant deterioration in quality of life or chronic toxicity?



## SAVE THE DATE



**26 de Mayo  
2026**



**C. Joaquín  
Rodrigo, 2, 28222  
Majadahonda, Madrid**



**De 9:00 H a 15:30  
H**



**FEDERATED | INTEROPERABLE | AI-DRIVEN | SECURE**