# Good practices in using **Blockchain** for the digital transformation of the medical sector

Cyfrowa przyszłość sektora ochrony zdrowia, 18. 10. 2023 Toruń, Poland



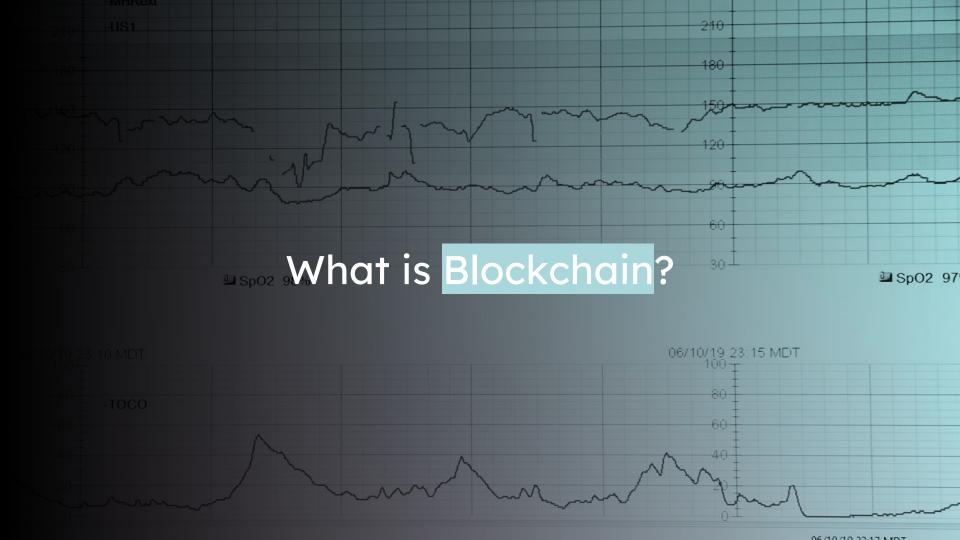
**Oliver Slapal** 

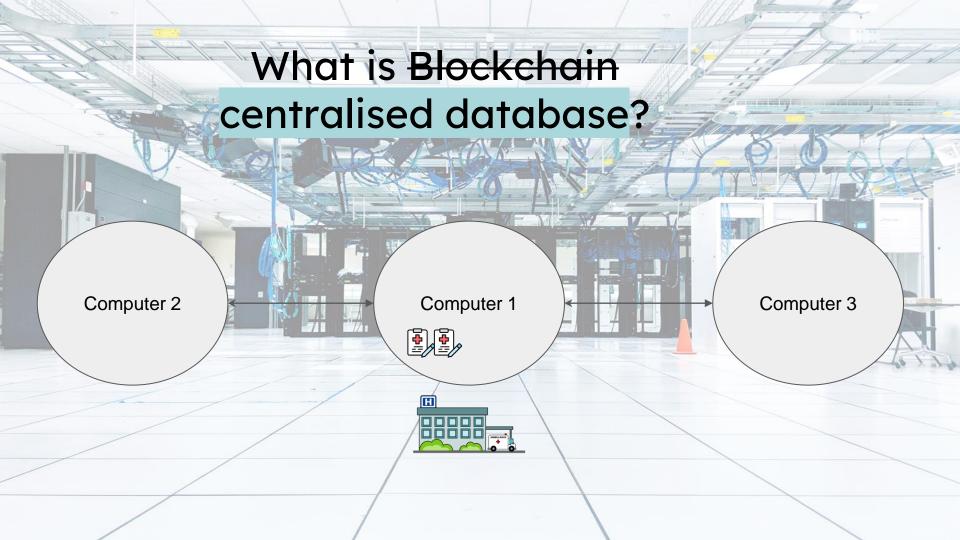
2021 - Today: Data Lake, CTO & Co-Founder

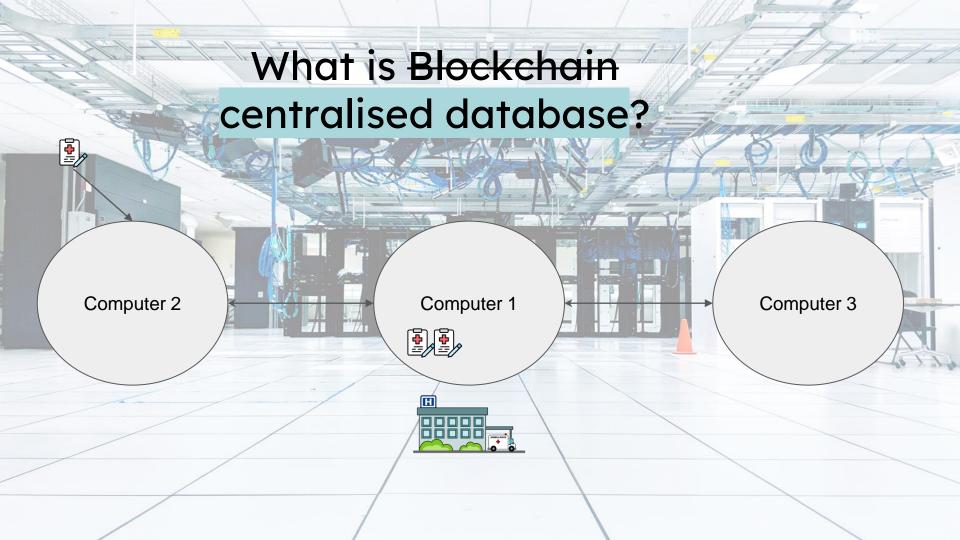
2020 - 2022: Metative, Blockchain Advisor to Web2 Brands

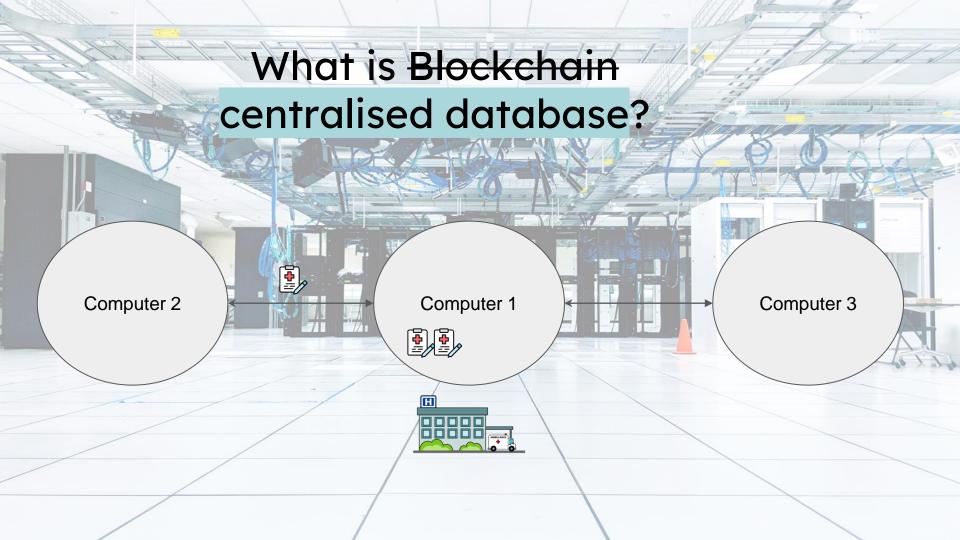
2019 - 2020: CE, Decentralized Venture Partner

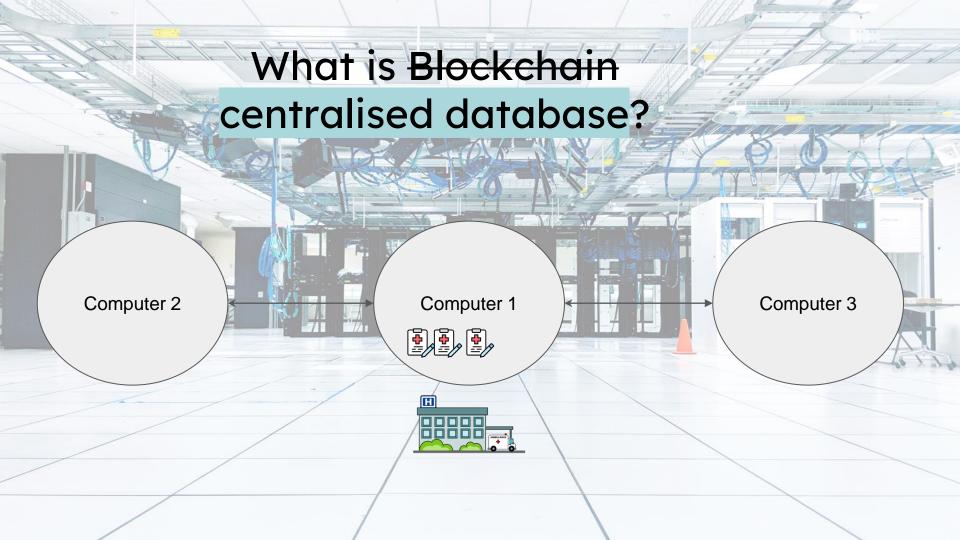
2017 - 2020: Independent, Decentralized Finance Advisor

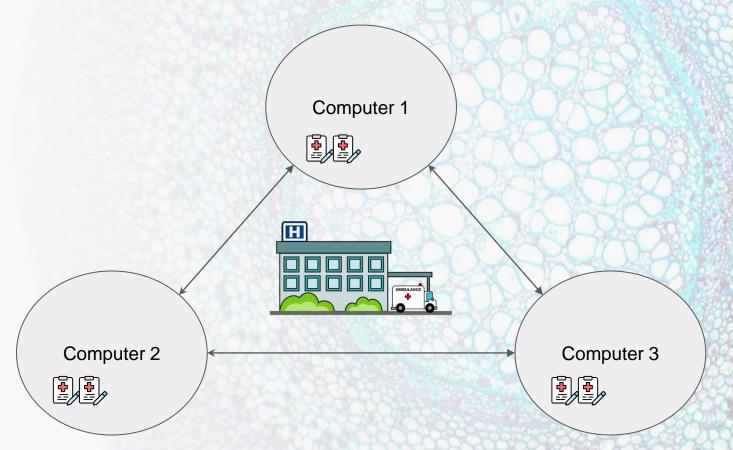


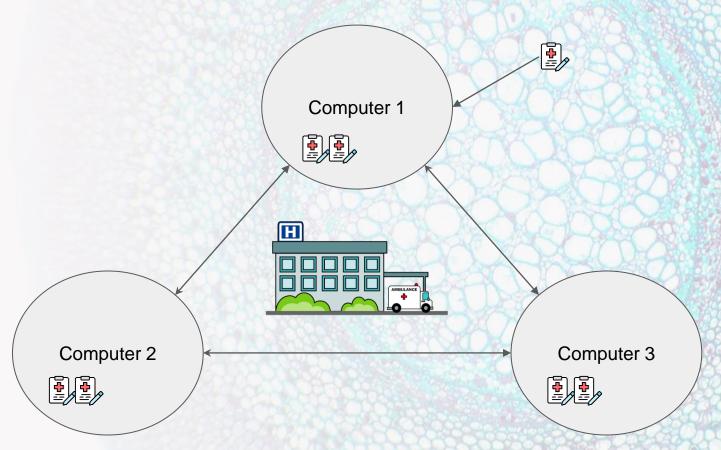


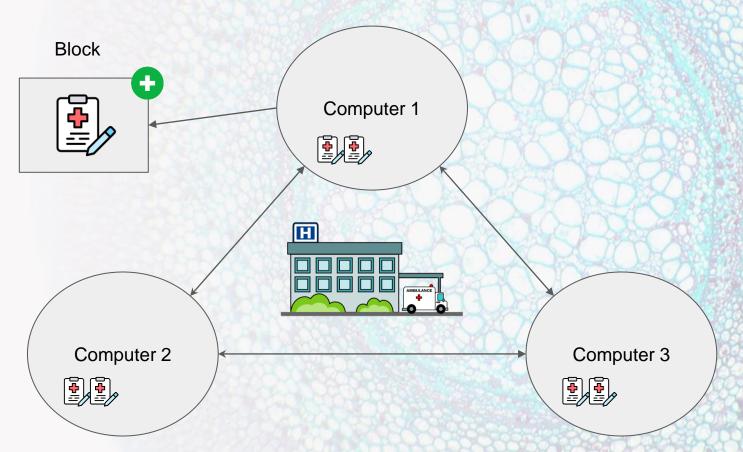


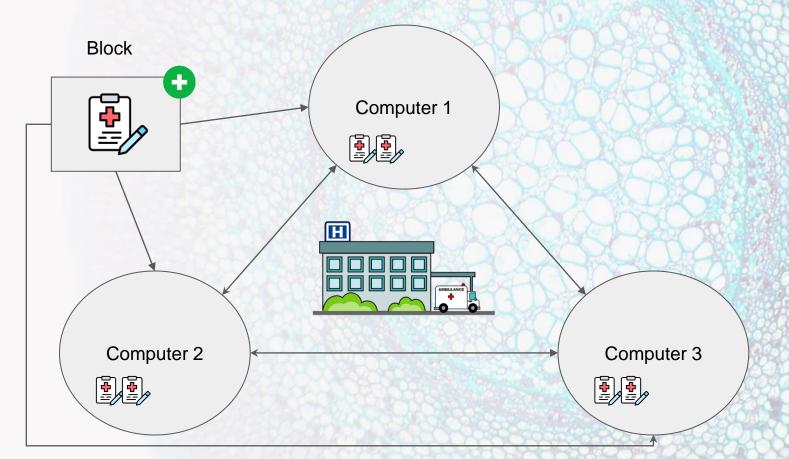


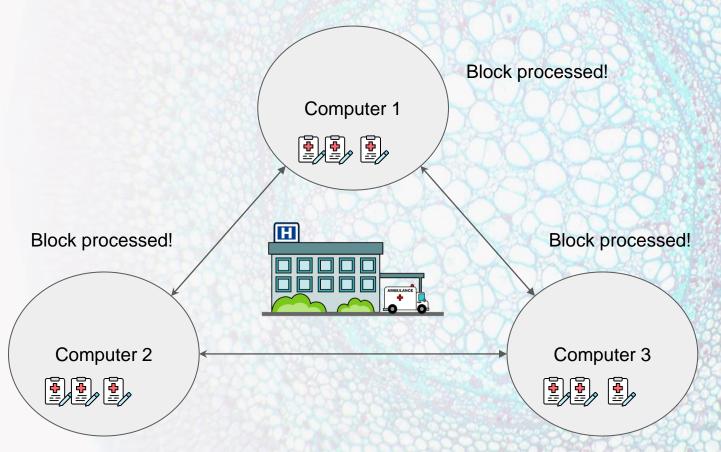












#### **Decentralized**

No single point of failure

**Shared Infrastructure** 

#### **Transparent**

Every actor sees every operation

Operations can be verified

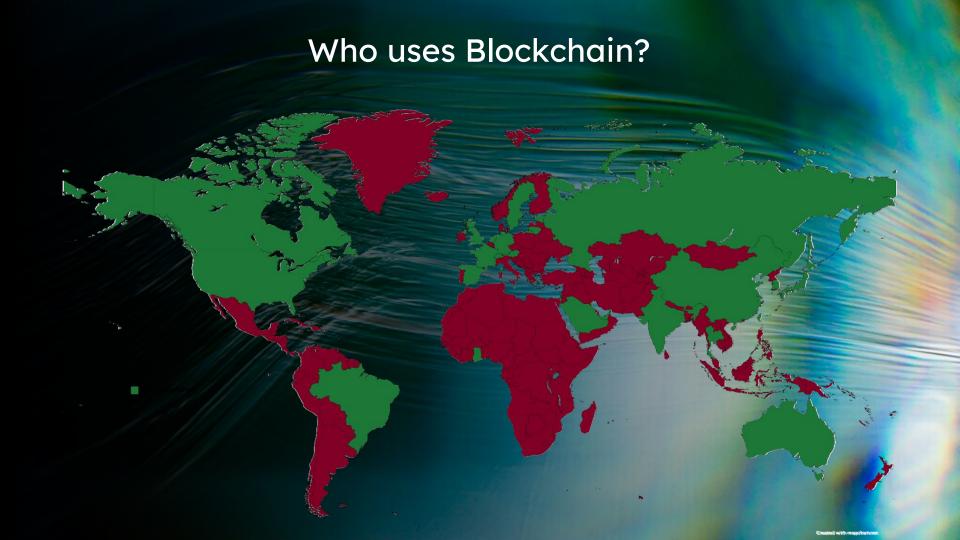
#### **Immutable**

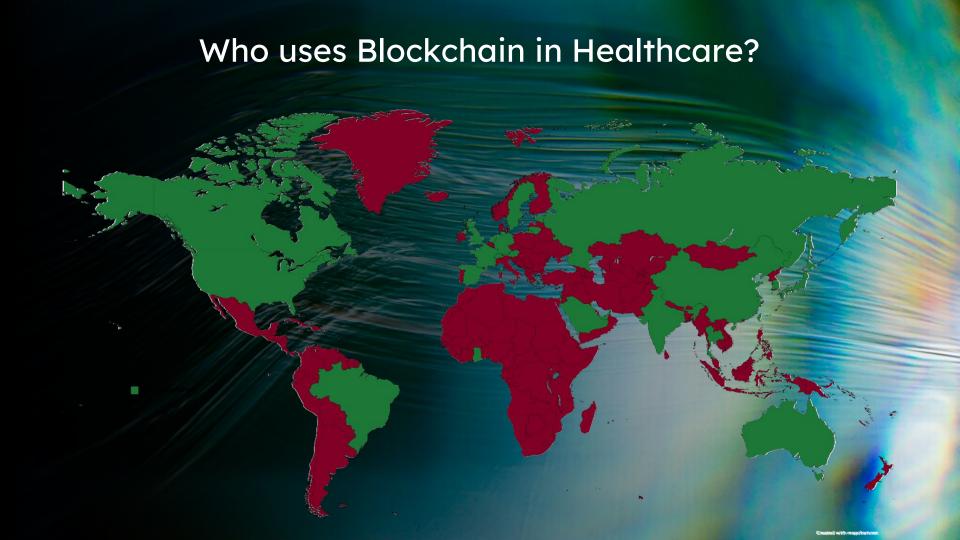
State cannot be changed or altered

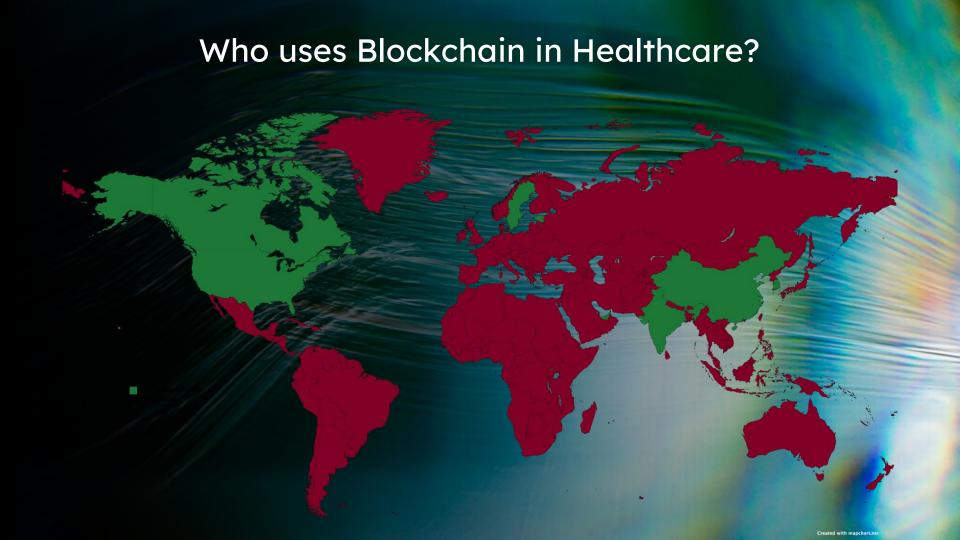








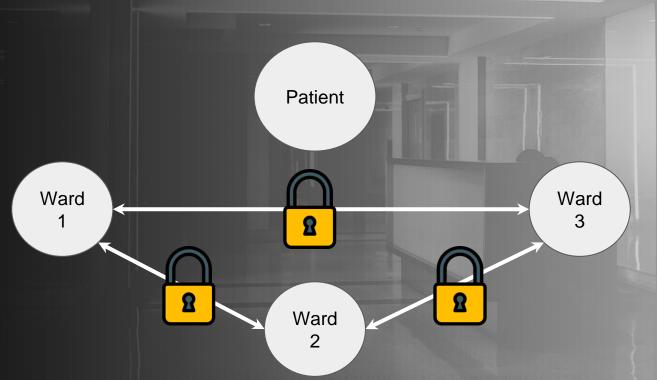








# Only certain types of users have permission – it is permissioned

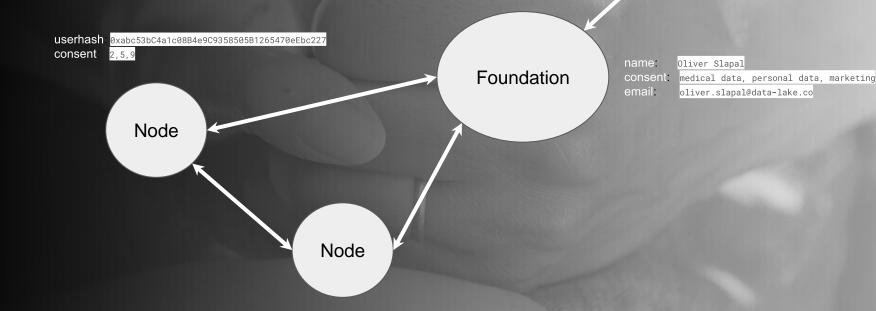






Only certain information are revealed – privacy is preserved with one entity

Private Database



# Information is anonymized and kept in a matching table

userhash 0xabc53bC4a1c08B4e9C9358505B1265470eEbc227 consent 2,5,9

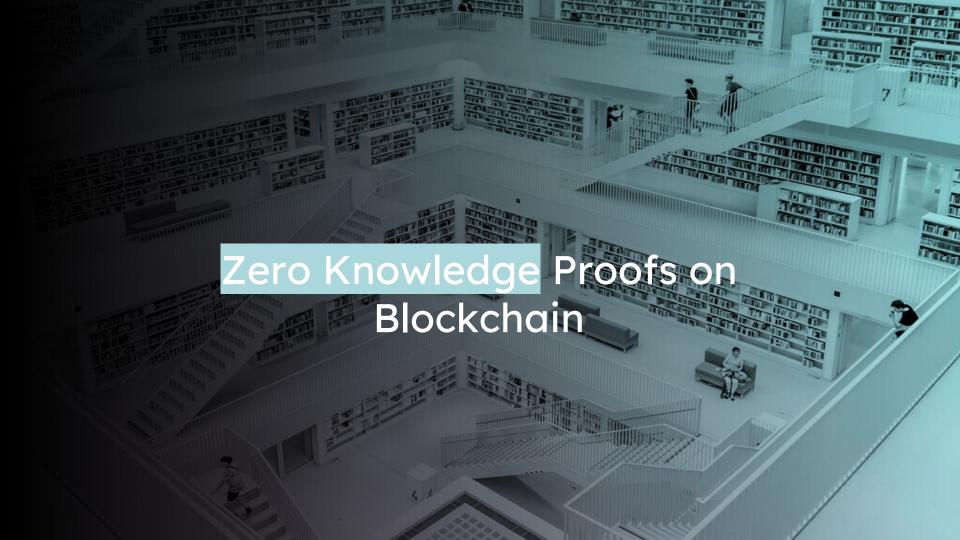
name

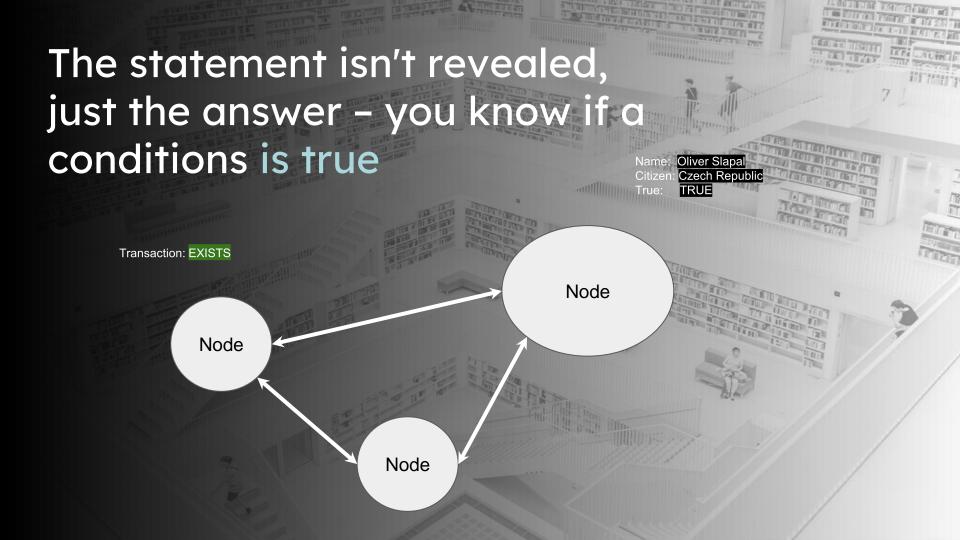
Oliver Slapal

consent email

medical data, personal data, marketing

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# So which to choose?

#### **Private Blockchain**

Higher costs, need to run your own chain or outsource from private blockchain providers. Limited inclusivity. High centralization.

#### **Centralized Matching Table**

Need to store personal information in a centralized environment. Little to no public information. Transparency only to the ones knowing certain information about each record made.

#### **Zero Knowledge Proofs**

Data might be malformed, there are thousands of calculations made, yet they are lengthy. Difficult verifying the correctness. Limited capabilities (entries must be numbers).

# They all work...as long as patient's privacy is preserved

# Thank you!

