

FROM

Pilot to *Scale*

How AI-powered patient care moved from one pathway to a multi-therapeutic-area model, built on a multi-year collaboration with a global life-sciences partner.

STARTED WITH A REAL CLINICAL CHALLENGE

Heart failure follow-up

Health systems are under increasing pressure to manage chronic patients with limited clinical capacity. Heart failure is a clear example: patients require continuous follow-up, early detection of deterioration and coordinated care to reduce avoidable readmissions.

Tucuvi's clinical voice AI, **LOLA**, was deployed to support structured patient follow-up, helping care teams monitor patients remotely, collect relevant clinical information and reduce repetitive follow-up workload.

HEART FAILURE

Outcomes that change practice

61%

✓ PEER-REVIEWED

reduction in the composite risk of HF-related admission and all-cause mortality *

<p style="font-size: 24px; font-weight: bold;">~90K</p> <p style="font-size: 10px;">patient conversations</p>	<p style="font-size: 24px; font-weight: bold;">~9K</p> <p style="font-size: 10px;">patients engaged</p>	<p style="font-size: 24px; font-weight: bold;">90%</p> <p style="font-size: 10px;">engagement rate</p>	<p style="font-size: 24px; font-weight: bold;">4.82/5</p> <p style="font-size: 10px;">CSAT</p>	<p style="font-size: 24px; font-weight: bold;">9.08/10</p> <p style="font-size: 10px;">NPS</p>
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This use case demonstrated that AI-powered follow-up could create value for patients, care teams and health systems at the same time.

FROM ONE PATHWAY TO A SCALABLE MODEL

The heart-failure programme became more than a single deployment. It created a repeatable model for AI-powered patient care that could be adapted to other clinical needs, hospitals and care pathways, creating value for health systems while enabling life-sciences partners to

support scalable patient engagement in real-world settings. The key was the ability to integrate it into real-world clinical workflows, generate trust with care teams and deliver measurable outcomes.

FROM PILOT TO PARTNERSHIP

What started as one use case evolved into a multi-year partnership model. The programme has now reached:

<p style="font-size: 24px; font-weight: bold;">3+</p> <p style="font-size: 10px;">years of active collaboration</p>	<p style="font-size: 24px; font-weight: bold;">7</p> <p style="font-size: 10px;">therapeutic areas deployed</p>	<p style="font-size: 24px; font-weight: bold;">36+</p> <p style="font-size: 10px;">hospitals across Spain</p>	<p style="font-size: 24px; font-weight: bold;">96K+</p> <p style="font-size: 10px;">patient conversations</p>
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This shows how a clinically validated AI follow-up model can become a long-term partnership, supporting patient engagement, pathway transformation and multi-therapeutic-area scale.

SCALED ACROSS THERAPEUTIC AREAS

After proving the model in heart failure, the approach expanded into multiple chronic and complex care pathways.

Heart failure
COPD
Asthma
CLL
Breast cancer
Lupus
Amyloidosis

This evolution shows how a focused AI follow-up use case can become a broader care model across different patient populations and clinical contexts.

WHAT MADE IT SCALE

<p>Trust Adoption depends on clinical confidence, patient safety and strong governance.</p>	<p>Value for patients Technology must make patients feel supported, not disconnected from care.</p>
<p>Value for providers AI must reduce workload and integrate into existing clinical workflows.</p>	<p>Value for Partnership A scalable model to improve patient engagement and follow-up across therapeutic areas, supporting pharma teams in real-world care transformation.</p>

WHY IT MATTERS NOW

The challenge is no longer whether AI can work in one isolated pilot. The real question is whether it can scale safely, clinically and operationally across real-world care settings. This case shows how AI-powered patient follow-up can move from a single pathway into a scalable model for hospitals, health systems and life-sciences partners looking to support patient engagement across therapeutic areas.

Interested in exploring how this model could apply to your organisation?

If you are working on patient follow-up, chronic disease management, care pathway capacity or scalable digital care models, we would be happy to explore how this approach could map to your priorities.

Book a conversation >

Built for *safety*

CE-marked under EU MDR 2017/745 as a **Class IIb medical device** | ISO 13485, ISO 27001, HIPAA and GDPR compliant | ENS compliant | Proactive alignment with the EU AI Act | Full traceability and medical-grade reliability | Accountability ensured through BS 30440:2023 — British Standards Institution — and Cyber Essentials certification | SOC 2 compliant — AICPA framework

* Peer-reviewed source. Olivella A, Méndez Fernández AB, García EG, Torregimeno AO, Ródenas-Alesina E, López RA, Pelaez TM, Soriano-Colomé T, Avilés AS, Uribarri A, Sánchez TS, Bocanegra CP, Baldrich ED, Martínez-Zapata MJ, Rubio-Valera M, Ferreira-González I. Conversational AI for remote monitoring in heart failure: a prospective controlled pilot study. Eur Heart J Digit Health. 2026 Feb 17;7(3):ztag032. doi: 10.1093/ehjdh/ztag032. PMID: 41815105; PMCID: PMC12975182.