



INTERNATIONAL SOCIETY FOR PHARMACOECONOMICS AND OUTCOMES RESEARCH
ISPOR NEW ZEALAND CHAPTER

HEALTH TECHNOLOGY ASSESSMENT
and NZ Chapter AGM

Wednesday 18th April 2018
11.00am - 3.15pm, Auckland City Hospital

SPEAKERS

Nick Wilson is Professor of public health medicine and co-director of the BODE3 research programme. Nick leads the research translation component of the programme.

Health technology assessment informs funding in public health and in hospitals. This seminar covers both how HTA is being used in New Zealand practice, and the measurements of patient preferences that are critical for HTA to be used to improve population health.

PROGRAMME

- 11.00 am **Welcome**
James Harris, President, ISPOR (NZ)
- 11.15 am **Interactive league table: a tool for decision-makers?**
Nick Wilson, Tony Blakely, Giorgi Kvizhinadze and other members of the BODE³ Team
The BODE³ Programme uses detailed epidemiological and cost data from Health Tracker and the Integrated Data Infrastructure (IDI). Models are typically multi-state life-table models built in Excel. A major issue with league tables is the underlying comparability of evaluations; methodological consistency in our work facilitates the use of a league table to present results. It has been possible to compile an online interactive league table with many methodologically comparable evaluations of health sector interventions. <https://nzcms-ct-data-explorer.shinyapps.io/trimleaguetable2/>. The online table facilitates comparison of health gains (QALYs), health system costs and ICERs for: cancer prevention and control (n=24 interventions), tobacco control interventions (n=14), dietary sodium reduction (n=32) and falls (n=23). Examples of results that have been generated in BODE³ publications, but which are not yet included in the league table, include: cost-effectiveness planes, graphing results by time horizon (eg, QALY gains in the first 10 years, 10-20 years, etc), interventions for which results are still preliminary (diet interventions and CVD pharmacotherapies) and the integration of relatively comparable results from Australian work (eg, ACE-Prevention). We welcome feedback from health officials and researchers regarding the utility of the online interactive league table, and further expansion.
- 11.55am **Annual General Meeting**
President's report, Election of Officers, Treasurer's report
- 12.30pm **Lunch** (provided)



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Professor Stephen Munn is a transplant surgeon at Auckland City Hospital where, for the past 13 years, he has chaired the Northern Region Clinical Practice Committee, a hospital-based Health Technology Assessment programme. Stephen also sits on: The Pharmacology and Therapeutics Advisory Committee of PHARMAC; HealthPACT; and The Joint Procurement Authority

Carsten Schousboe, a Senior Health Economist with PHARMAC, is evaluating HR-QOL systems for his PhD with the University of Otago.

Professor Carlo Marra is Dean of the School of Pharmacy at the University of Otago. He researches health outcomes, including assessment of quality of life, preferences, and cost-effectiveness analyses

- 1pm **Hospital HTA *Stephen Munn***
The Northern Region Clinical Practice Committee (NRCPC) is a hospital-based health technology assessment unit that deals with practical questions raised by advocates who wish to invest in new health technologies or disinvest/restrict access to existing health technologies. Pragmatic advice is offered to decision-makers based on the comparative safety, efficacy and cost-utility of technologies – mostly medical devices, diagnostics and services. The NRCPC has been in operation for 13 years and offered advice on over 100 submissions concerning investment and disinvestment decisions about health technology. Evidence shows that such advice is largely acted upon by the decision-makers at DHB level which is gratifying. However, the context of new health technology implementation and evidence from post-implementation audit shows that eligibility creep occurs at a very early stage which has implications for real world versus ideal cost-utility. An overview of the activities of the NRCPC will be provided with examples of real-world, post-implementation outcomes.
- 1.40pm **Choosing the best measures of Health Related – Quality of Life (HR-QOL) *Carsten Schousboe***
Health Technology Assessment measures health benefits with Quality-Adjusted Life Years, which rely on measuring quality of life (QOL). Studies highlight that the different QOL instruments, each with different descriptive systems and valuation techniques, lead to differences in the values generated and risks of important effects being missed. No gold-standard method exists for choosing the most suitable approach, yet consensus is that one must be chosen. Agencies such as NICE in the UK are also struggling with this issue. Carsten will outline his proposed approach for PHARMAC to choose a new reference standard for measuring QOL and QALYs, and the findings of his research to date.
- 2.30pm **An overview of preference-based studies using examples *Carlo Marra***
Choice and preference-based studies are increasing in the literature. They also have been used to help make decisions around public policy (transportation, health). Using examples from his own work or that of colleagues, Carlo will highlight different methodologies and discuss their pros and cons.
- 3.15pm **Close**



NZ HEALTH TECHNOLOGY ASSESSMENT

REGISTRATION FORM

To register for the meeting please fill in the registration form below and send to:

ispornewzealand@gmail.com

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Company or Institution: _____		
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Cost:	<input type="checkbox"/> \$100 non-member	<input type="checkbox"/> \$50 Student non-member
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