

## PARALLEL SESSION 3

Friday 12 October, 10:30–12:00

### 3.1. Workshop: The role of public health epidemiology in the health technology assessment

*Chairs: Giuseppe La Torre<sup>1\*</sup>, Paolo Villari<sup>2</sup>, Alastair H Leyland<sup>3</sup>*

<sup>1</sup>Institute of Hygiene, Catholic University of the Sacred Heart, Rome, Italy

<sup>2</sup>Department of Experimental Medicine and Pathology, University 'La Sapienza', Rome, Italy

<sup>3</sup>MRC Social and Public Health Sciences Unit, University of Glasgow, Glasgow, Scotland and

<sup>o</sup>Organizer: EUPHA section on Public Health Epidemiology

\*Contact Person: giuseppe.latorre@rm.unicatt.it

Health systems in developed nations have to face with the growing spread of chronic diseases and in the meanwhile have as principal aim providing a high quality, efficacious and efficient service.

Sir Walter Holland indicated as priority objectives of public health the following: improvement of community health, reduction of population health risk factors, improvement of health care providing.

But an emerging problem in public health is the limitedness of resources behind the spreading of new technologies and the growing of health needs, due to population aging and diffusion of incorrect life-styles.

Public health interventions are designed to control, prevent and reduce health problems, such as obesity, sexual transmitted diseases, road and domestic injuries, but to decrease also the burden of chronic-degenerative and infectious diseases. In this way the role of epidemiology is fundamental in order to give the process the right methodological approach. In this scenario the link and the relationship between public health epidemiology and health technology assessment (HTA) seems to be a good tool for giving answers not only on the burden of disease in a certain population, efficacy and effectiveness of health technology, but also on social and organizational impact of a technology, seen in a broader sense, and represents the prerequisite for the economic evaluations and systematic reviews.

The relationship between public health epidemiology and HTA, as an example, could face with issues such as vaccinations, disease screenings, health promotion and educational campaign.

The aim of the workshop is to give an overview of the framework of HTA and how HTA has changed over time (Battista) and the possible relationship between HTA and epidemiology (Holland).

Prof. Finn Børlum Kristensen, Head of Danish Agency of HTA, and Prof. Walter Ricciardi will play the role of discussants of the lectures from Battista and Holland.

#### **Discussants**

Finn Børlum Kristensen – DACHETA Copenhagen – University of Southern Denmark, Odense.

Walter Ricciardi – Institute of Hygiene – Catholic University of the Sacred Heart – Rome, Italy.

#### **Health technology assessment and public health: a time for convergence**

**Renaldo N. Battista**

*RN Battista*

Department of Health Administration and Canada Research Chair in Health Technology Assessment (HTA), University of Montreal, Quebec, Canada

Health technology assessment (HTA) is a field of application of several disciplines that constitute the core of public health science. Whereas the development paths of HTA and public health are distinct, a shared interest in knowledge translation underscores the need to bolster convergence between them. Different scenarios of convergence are examined at the conceptual, disciplinary and methodological and organizational levels. The future of health systems as well as population health will benefit from greater harmonization between public health and HTA.

#### **Public health epidemiology in the health technology assessment: risks and opportunities**

**Walter Holland**

*W Holland*

London School of Economics and Political Science, London, UK

Formal evaluation of procedures and equipment has become the norm in most health services, particularly for pharmaceutical agents. However, it should also be applied for the assessment of methodologies used on populations for the promotion of health and disease prevention.

There are examples of health technology assessment (HTA) for the evaluation of screening, e.g. for breast cancer, in France and in the UK. In Sweden formal HTA's have been applied for polio vaccination and water fluoridation. However, in most countries HTA has largely been concerned with individual clinical care rather than population (public health) subjects.

My discussion will deal with historical examples of HTA for health improvement e.g. the assessment of measures to reduce maternal mortality, the introduction of the Clean Air Act in the UK in 1956 and the banning of smoking in public places. Part of the reason for the neglect of HTA for measures to improve health rather than only treat disease is due to complexity of the necessary measures, the politically changed nature of the possible interventions, the lack of charisma of public health and the belief that most measures are 'common sense'. Suggestions for how epidemiology can provide the necessary framework for HTA for health improvement and disease prevention will be given as well as possible topics (and approaches) to broaden the application of HTA from its narrow disease treatment perspective.