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Breaking news

- The Guidelines and Economists Network International (**GENI**) website has just been launched. The main goal of the network is to increase knowledge on the strategies to integrate Clinical Practice Guidelines (CPGs), clinical and cost effectiveness evidence into national decision making and clinical practice. Besides, they are expecting to support the intersectoral work among different stakeholders such as governments and insurance bodies. For further information, visit the following link:

<http://geni-econ.org>

- The European center for Disease prevention and Control (ECDC) has opened a call for proposals to carry out a systematic literature review on cost-effectiveness interventions to prevent and control healthcare associated infections (HCAI). For further information, visit the following link:

http://ecdc.europa.eu/en/aboutus/calls/Lists/Calls%20for%20tender/ECD C_DispForm.aspx?List=a70e951a%2D9260%2D4909%2Dbc27%2Dcefd2af6e9a4&ID=626&RootFolder=%2Fen%2Faboutus%2Fcalls%2FLists%2FCalls%20for%20tender

The section's objectives in perspective

Acknowledging that “ideally, all policies should be health policies”, as quoted by Dr. Marc Danzon (former director of the WHO), the section objective of *increasing knowledge about economic impact assessment of public health intervention*, becomes a central issue if we are to succeed in demonstrating to different stakeholders such as government bodies or the private industry that every single project or policy has a health and in consequence an economic impact.

The World Health Organization regional Europe has just launch: “Health economic assessment tools (HEAT) for walking and for cycling “

<http://www.euro.who.int/en/what-we-do/health-topics/environment-and-health/Transport-and-health/publications/2011/health-economic-assessment-tools-heat-for-walking-and-for-cycling.-methodology-and-user-guide>

The tool is aimed at assessing the impact on health of transport infrastructure by measuring the economic value of the health benefits that occur as a result of the reduction in mortality due to physical activity (cycling or walking).

Interestingly, the development of this tool is a very good example of the challenges that researches are facing to come up with consistent data that can be trusted and used by those designing and implementing projects in diverse areas such as infrastructure, environment and so on.

Therefore, the network could focus on developing new strategies to overcome the caveats of the current report. It means, as a further step to achieve concrete goals as a network, it would be interesting to figure out the solutions of the following questions:

- How to measure the impact of possible negative effects of air pollution within the HEAT tool?
- How to make the data suitable for younger and elderly population?, as they have been not considered in the current HEAT tool.
- What could be the best method to value health?

Calendar of events

What: 11th Annual International Conference on Health Economics, Management & Policy.

When-Where: 25 - 28 June 2012. Athens, Greece.

Further information: www.atiner.gr

What: European Conference on Health Economics.

When-Where: July 18, 2012 . Zurich, Switzerland

Objective and topics: to discuss progress in health economics. Main topics: a) economics of health insurance, b) markets for health care: competition vs regulation, c) economics of prevention and addiction, d) equity and health, e) pharmaceutical economics.

Further information: www.eche2012.ch

What: Course on advanced modelling methods for health economic evaluation.

When-where: September 12, 2012. Glasgow, Scotland.

Objectives and topics: the course covers standard Markov models and adds greater sophistication such as: adding time dependency, making models probabilistic, populating decision models using regression models, presenting the results of probabilistic models and undertaking value of information analysis.

Further information: <http://www.glasgow.ac.uk/hehta>

What: Course on economic evaluation in clinical trials

When-where: September 17, 2012. Glasgow, Scotland

Objectives and topics: to gain knowledge on the economic evaluation of clinical trials. Main topics: the effect of distributional assumptions, univariate and multivariable approaches for the analysis of costs and QALYs, sample size and power calculations and their interpretation, reporting sampling uncertainty for the comparison of cost and effects.

Further information:<http://www.glasgow.ac.uk/hehta>

What:The IUHPE's European Conference.

When-Where:27-29 September 2012. Tallinn, Estonia.

Objective and topics:to discuss the impact of recent economic changes on population health, and address the issues of stimulating health promotion interventions and investment.

Further information:<http://www.conferences.ee/iuheli2012>

What:The 9th World Congress on Health Economics: "Celebrating Health Economics"

When-Where: July 07, 2013. Sydney, Australia

Further information:<http://www.healthconomics.org/conferences/2013/07/07/the-9th-world-congress.html>

What to read?

Title:Can NHS hospitals do more with less? Research report.Nuffield Trust, Jan 2012.

Abstract: the report looks at hospital efficiency in the U.K. National Health Service (NHS) and proposes sustainable improvements to support ongoing health care reform. An accompanying policy analysis reviews the evidence on methods used internationally by hospitals to increase efficiency. Besides, it shows that good leadership, and effective general and clinical management, are both crucial for making productivity gains. So it must be a worry that the current major reform and reorganisation of the NHS risk distracting managers and clinical leaders from this important and pressing agenda.

Available at: <http://www.rightcare.nhs.uk/index.php/2012/01/can-nhs-hospitals-do-more-with-less/>

Title:How can the health equity impact of universal policies be evaluated? Insights into approaches and next steps. WHO Collaborating Centre for Policy Research on Social Determinants of Health, University of Liverpool- WHO Regional Office for Europe – 2011.

Abstract:an important barrier to action is the perceived lack of evidence about what works to reduce health inequities. This is particularly evident in relation to universal welfare policies, which can have profound effects on health inequities, both positive and negative in nature.

Because universal policies are usually applied to whole populations, and are often complex in nature with long causal chains, this precludes a true experimental design, and other approaches to evaluation are required. This report presents arguments and case studies from an expert group meeting convened to clarify the importance and challenges of evaluating universal policies, and to outline potential approaches to assessing the impact of universal policies on health inequities. The report also identifies key research and policy questions that need evaluating as a matter of priority, and sets the agenda for partnership working to develop these methods further.

Available at:<http://bit.ly/slZJz1>

Title: Measuring Quality of Life in Patients with Schizophrenia: An Update. George Awad, et al.2012.

Abstract:It is an update of a previous article published in 1997 in *PharmacoEconomics* about quality of life (QOL) measurement in patients with schizophrenia. New scales with better psychometrics have been introduced, but most are without theoretical or conceptual foundation. On the other hand, the field of scaling in general has been changing over the past few years and is moving towards a new approach for scale development, based on item response theory, item banks and computer adaptive testing. Unfortunately, this has not extended to QOL in schizophrenia. There continues to be a dearth of theoretical and conceptual models for QOL in schizophrenia, which seems to

create the perception that the construct lacks a good theoretical and scientific foundation.

One of the major gaps identified in this review is the recognized lack of impact of QOL measurements on clinical management or policy decision making. The majority of publications continue to focus on measurement rather than what to do with the data. The lack of strategies to integrate QOL data in clinical care, as well as the failure to contribute to policy decisions, particularly in cost analysis or resource allocations, has created the perception that the construct of QOL in schizophrenia is not that useful. It is evident that, for QOL in schizophrenia to regain its promise, researchers must take the ultimate next step beyond measurement: to develop credible strategies for integrating QOL data in clinical practice. Additionally, more focused research is needed to demonstrate the role of QOL, not only as an outcome in itself but also as a contributor to other outcomes, such as adherence to medications, more satisfaction, less resource utilization and so on.

Available at:

http://adisonline.com/pharmacoeconomics/Abstract/2012/30030/Measuring_Quality_of_Life_in_Patients_with.2.aspx

What: Contribution of Pharmaceutical Innovation to Longevity Growth in Germany and France, 2001–7. Frank Lichtenberg. 2012

Abstract: This paper investigates the contribution of pharmaceutical innovation to recent longevity growth in Germany and France. The effect of the vintage of prescription drugs (and other variables) on the life expectancy and age-adjusted mortality rates of residents of Germany is examined, using longitudinal, annual, state-level data during the period 2001–7. The estimates imply that about one-third of the 1.4-year increase in German life expectancy during the period 2001–7 was due to the replacement of older drugs by newer drugs. The effect of the vintage of chemotherapy treatments on age-adjusted cancer mortality rates of residents of France is also investigated, using longitudinal, annual, cancer-site-level data during the period 2002–6. The estimates imply that chemotherapy

innovation accounted for at least one-sixth of the decline in French cancer mortality rates, and may have accounted for as much as half of the decline

Available at:

http://adisonline.com/pharmacoeconomics/Abstract/2012/30030/Contribution_of_Pharmaceutical_Innovation_to.3.aspx

What: Methodological Quality of Economic Evaluations of New Pharmaceuticals in the Netherlands. Ties Hoomans et al. 2012.

Abstract: In the Netherlands, decisions about the reimbursement of new pharmaceuticals are based on cost effectiveness, as well as therapeutic value and budget impact. Since 1 January 2005, drug manufacturers are formally required to substantiate the cost effectiveness of drugs that have therapeutic added value in comparison with existing ones through pharmacoeconomic evaluations. Dutch guidelines for pharmacoeconomic research provide methods guidance, ensuring consistency in both the evidence and the decision-making process about drug reimbursement. This study reviewed the methodological quality of all 21 formally required pharmacoeconomic evaluations of new pharmaceuticals between 1 January 2005 and 1 October 2008, and verified whether these evaluations complied with pharmacoeconomic guidelines. Data on the quality of the pharmacoeconomic evaluations were extracted from the pharmacoeconomic reports published by the Dutch Health Care Insurance Board (CVZ). The Board's newsletters provided information on the advice to, and reimbursement decisions made by, the Dutch Minister of Health. All data extraction was carried out by two independent reviewers, and descriptive analyses were conducted. The results show that the methodological quality was sound in only 8 of the 21 pharmacoeconomic evaluations. In most cases, the perspective of analysis, the comparator drugs, and the reporting of both total and incremental costs and effects were correct. However, drug indication, form (i.e. cost utility/cost effectiveness) and time horizon of the evaluations were frequently flawed. Moreover, the costs and effects of the pharmaceuticals were not always analysed correctly, and modelling studies were often non-

transparent. Twelve drugs were reimbursed, and nine were not. Conclusions: The compliance with pharmacoeconomic guidelines in economic evaluations of new pharmaceuticals can be improved. This would improve the methodological quality of the pharmacoeconomic evaluations and ensure consistency in the evidence and the decision-making process for drug reimbursement in the Netherlands.

Available at:

http://adisonline.com/pharmacoeconomics/Abstract/2012/30030/Methodological_Quality_of_Economic_Evaluations_of.5.aspx

Jobb adds

Title: Faculty position in outcome science: Northwestern University Feinberg school of medicine.

Further information: <http://www.healtheconomics.org/jobs/2012/06/01/faculty-positions-in-outc.html>

Title: Outcome research/systematic review manager. South East, UK.

Further information: <http://www.healtheconomics.org/jobs/2012/04/04/outcome-s-researchsystemat.html>

Title: MATCH research fellow/assistant: Health Economics Research Group ((HERG), Brunel University, UK.

Further information: <https://jobs.brunel.ac.uk/WRL/>

Title: Global head health economics, management consultancy. London UK

Further information: <http://www.healtheconomics.org/jobs/2012/04/03/global-head-health-econom.html>

Title: Chief health services and economics branch, applied research program

Further information:<http://www.healtheconomics.org/jobs/2012/04/03/chief-health-services-and.html>

Title: Research associate

Further information:<http://www.mapi-consultancy.com>

Title: Health economist: school of medicine and health (Queen's campus-Stockton) UK.

Further information:<http://www.dur.ac.uk/jobs/>

Title: Senior health economic outcomes research manager/section head health economics and HTA department. Paris, France.

Further information:<http://www.healtheconomics.org/jobs/2012/03/29/senior-health-economic-ou>.

Colophon

The network objective for the next newsletter is: To collaborate with other sections of EUPHA in the analysis of equity considerations in evaluating public health policies, and prioritization criteria.

We kindly remind you, you are very welcome to send information about research projects, books and jobs adds to be included in the next newsletter to the e-mail address gc.cc@live.dk. The deadline for receiving new input for the next newsletter is 5th may.

Best wishes

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