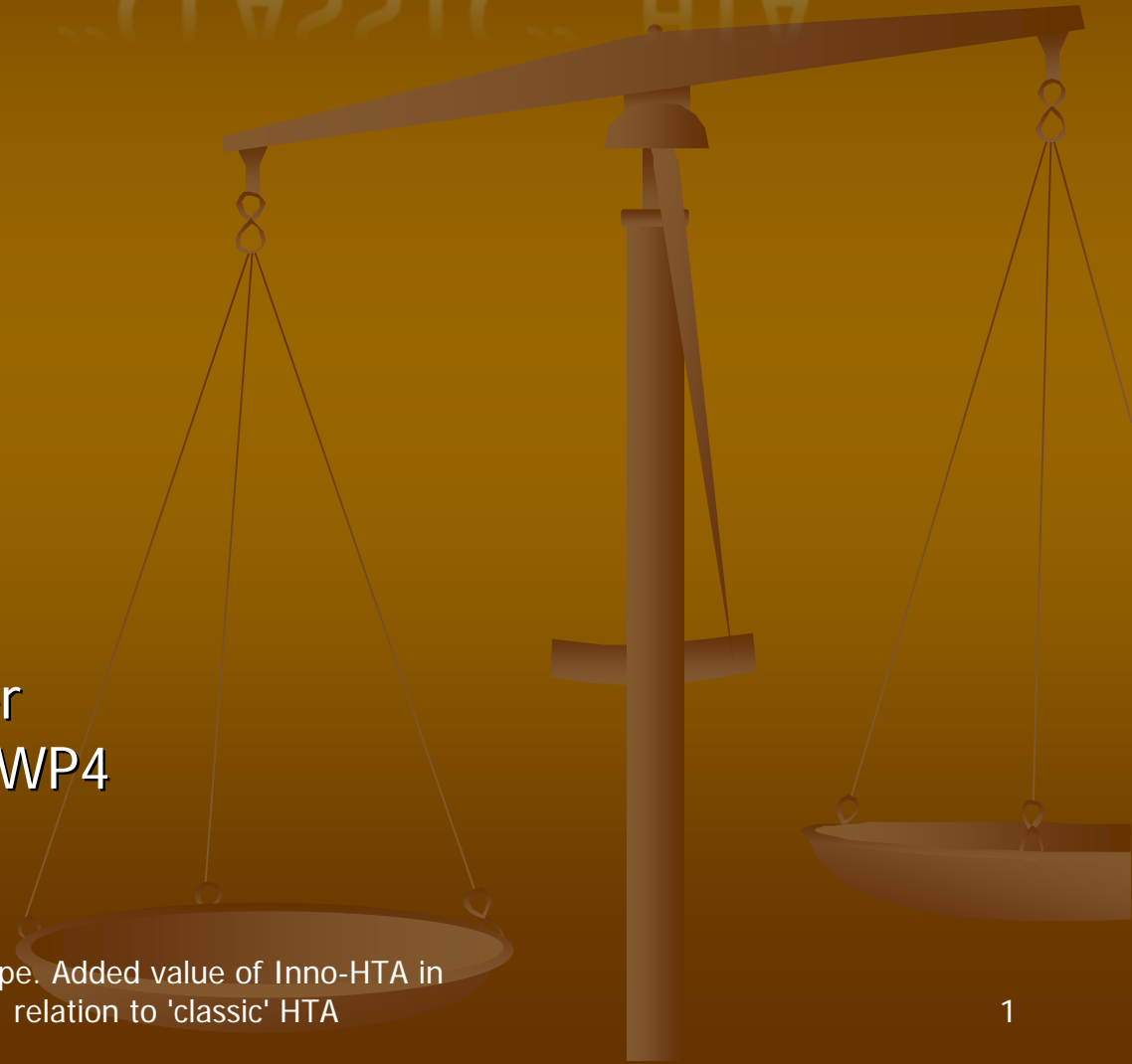


ADDED VALUE OF INNO-HTA IN RELATION TO "CLASSIC" HTA

Kristian Lampe
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FINOHTA and EUnetHTA WP4

K Lampe. Added value of Inno-HTA in
relation to 'classic' HTA



Is there "classic HTA" today?

- What do we know about the contents of current HTA reports?
- Draborg et al. International comparison of the definition and the practical application of health technology assessment. *International Journal of Technology Assessment in Health Care*, 2005.
- 433 reports published in 1989-2002 by 11 agencies

Table 2. Main Aspects and Dimensions Assessed in the Sample (n = 433)

Main aspect	Dimensions assessed	Frequency	% of total sample
Clinical	Efficacy	259	59.8
	Safety	304	70.2
	Effectiveness	325	75.1
	Other outcomes	136	31.4
	Indications	409	94.5
	Population affected	323	74.6
Economic	Efficiency	57	13.2
	Costs	231	53.3
	Cost-effectiveness	158	36.5
	Cost utility	81	18.7
	Cost benefit	19	4.4
Patient-related	Social Impact	86	19.9
	Ethics	52	12.0
	Acceptability	106	24.5
	Psychological reactions	115	26.6
	Other patient parameters	89	20.6
	Organizational	Diffusion	77
Centralization/decent.		94	21.7
Utilization		49	11.3
Accessibility		63	14.5
Skills—routines		118	27.3
Education—training		118	27.3
Other organizations parameters		14	3.2

K Lampe. Added relation to 'classic' HTA

"Classic HTA", origins

- Technology Assessment Act, USA 1972:

The Congress hereby finds and declares that:

(a) As technology continues to change and expand rapidly, its applications are -

1. large and growing in scale; and
2. increasingly extensive, pervasive, and critical in their impact, beneficial and adverse, on the natural and social environment.

(b) Therefore, it is essential that, to the fullest extent possible, the consequences of technological applications be anticipated, understood, and considered in determination of public policy on existing and emerging national problems.

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Areas of classic HTA and inno-

HTA

Much scientific evidence and other information available

Contradictory area

Classic HTA

Technologies under development

Existing technologies

Inno-HTA

Classic HTA

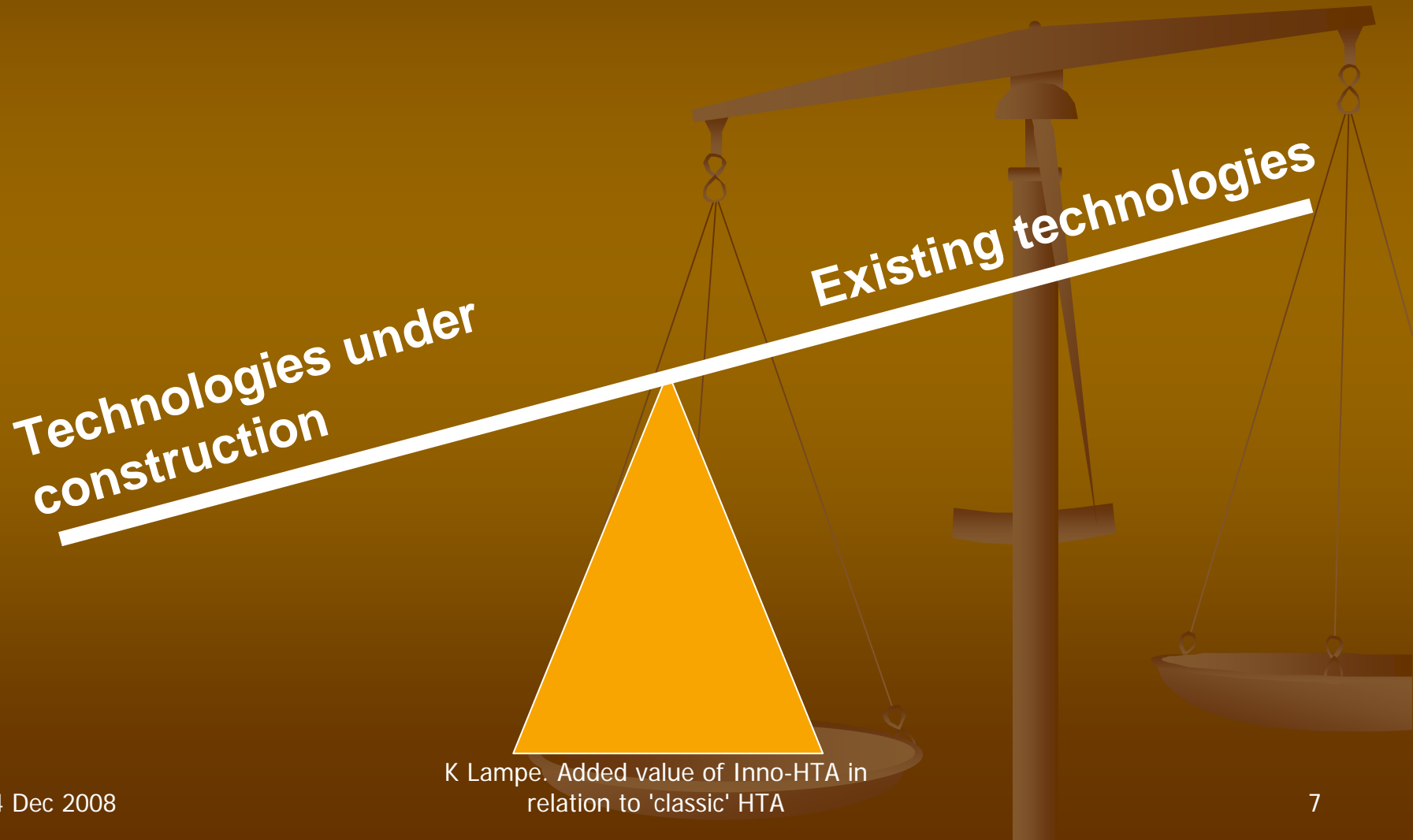
Little or no scientific evidence and other information available

K Lampe. Added value of Inno-HTA in relation to 'classic' HTA

Indicators of inno-HTA

- Approximately the same as assessment elements of HTA Core Model (n= ~160)
- Multidisciplinary approach, similar to EUnetHTA
- Who should conduct research, i.e. make "measurements" using the indicators?
 - Wide scope -> Reliability, relevance
 - Wide scope -> Expensive assessment, how many can be done?

Burden on assessment activities



K Lampe. Added value of Inno-HTA in relation to 'classic' HTA

Indicators of inno-HTA

- "Indicator" implicitly means that it indicates something. But what? Good technology? Bad technology? Promising technology?
- Which indicators have the best "positive predictive value" for the following:
 - Technology is an answer to a real need within health care (whether conscious or not)
 - Technology should not even enter the everyday practice
 - Technology bears a potential, but requires substantial revisions before adoption (constructive assessment)

Who bears the cost of early assessment?

- Innovators, companies?
- HTA agencies, society?
- Who else?

-> Both benefit from optimized set that has a wide scope but does not require too much resources

Indicators of inno-HTA

- Indicators need analysis of potential values and their meaning. What does a value mean?
 - Does it point at further analysis,
 - or use of technology,
 - or rejection of technology?
- Values of indicators
 - Definitive, indicator is enough alone
 - Additive, indicator requires combination with other indicators

Thank you!

...and apologies for not being there.

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K Lampe. Added value of Inno-HTA in
relation to 'classic' HTA