



Assessing Public-Health-Interventions: The INTEGRATE-HTA approach

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HTAi, Rome, 19.6.2017

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Aim of INTEGRATE-HTA

To develop concepts and methods for a **comprehensive, patient-centred, and integrated** (as opposed to side-by-side) **assessment of complex technologies** that includes and considers

- effectiveness and economic, sociocultural, ethical, and legal issues
- patient preferences and patient-specific moderators of treatment
- context and implementation issues

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Starting point: Traditional HTA on e.g. an antihypertensive drug

Patient characteristics & preferences	Increased blood pressure (other conditions „ideally“ excluded)
Comparator	Another antihypertensive drug
Topics for assessment	(Cost-)effectiveness
Outcome	Well-defined, quantifiable primary outcome, e.g. reduction of strokes
Implementation	Of marginal relevance
Context	Of marginal relevance

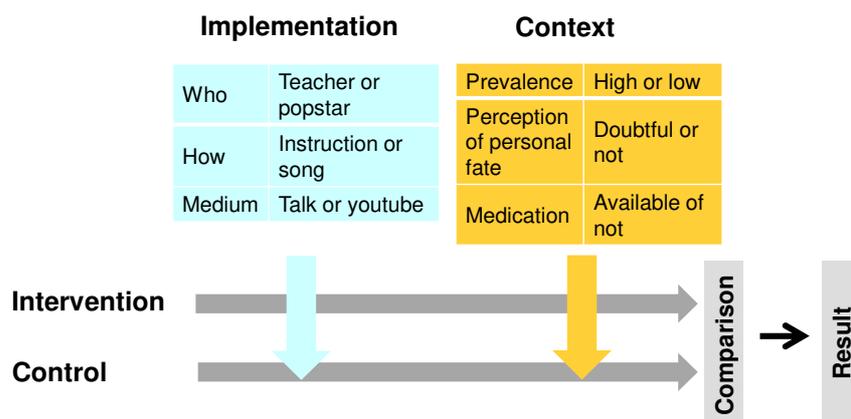


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A complex model for prevention of HIV/AIDS



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An example for complex health technologies: Palliative care

Patient characteristics & preferences	Early or late stage? In pain? In despair? Family around?
Comparator	Another complex technology?
Topics for assessment	(Cost-)effectiveness, social, cultural, legal impact? Impact on relatives?
Outcome	> 500 outcome parameter, e.g. quality of life, spiritual improvement, etc.
Implementation	By a nurse? A doctor? A relative? At home? In a hospice?
Context	Rural area? Degree of professionalization of services?

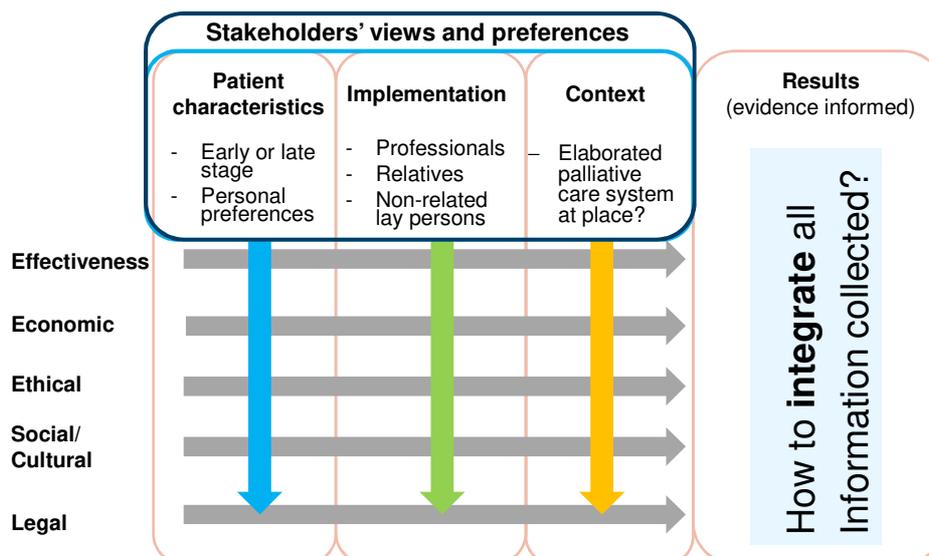


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Addressing modifying factors in assessment & appraisal



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The case: “Reinforced model of home based palliative care”

Includes an additional caregiver intervention within an existing home care system



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Step 1: Involve stakeholders to elicit needs, topics, outcomes and likely scenarios



Input through Stakeholder Advisory Panels (SAPs) on: topics, objectives, patients, context and implementation

135 individuals (professionals, voluntary workers, patients, and relatives) from 7 European countries

Original Article

Lay and professional stakeholder involvement in scoping palliative care issues: Methods used in seven European countries

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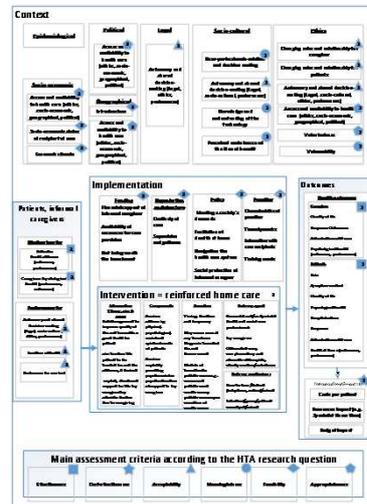
Abstract

Background: Stakeholders are people with an interest in a topic. Internationally, stakeholder involvement in palliative care research and health technology assessment requires development. Stakeholder involvement adds value throughout research (from prioritising

Step 2: Identify patient characteristics, context, implementation to create a logic model

Identify patient-related moderators and preferences, context and implementation issues

- Examples
 - **Patients** and relatives with or without social support
 - **Implemented** by a relative or by a professional caregiver
 - Professional caregiving already established or not (**context**)
- Create a **logic model** covering patient characteristics, context and implementation issues



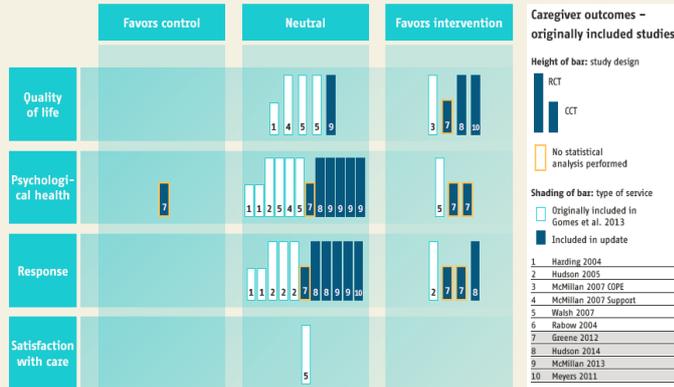
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Step 3: Assess the available information/ evidence

	Patient characteristics	Implementation	Context	Findings/ Outcomes
	<ul style="list-style-type: none"> - Cancer or other disease - Preference for place of death 	<ul style="list-style-type: none"> - Professionals - Relatives - Non-related lay persons 	<ul style="list-style-type: none"> - Elaborated palliative care system at place vs. not at place 	
Medical	↓	↓	↓	}
Social/Cultural				
Economic				
Ethical				
Legal				

E.g. Effectiveness regarding lay caregivers

Figure 3: Harvest plot showing technology effects for lay caregiver outcomes, in review of reinforced home-based palliative care.



Trend:
Increased QoL

No difference regarding psychological health



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E.g. Socio-cultural effects regarding lay caregivers

- Relevant issues:
 - Lay caregivers might be overloaded with responsibility
 - Providing training to lay caregivers is partly perceived as to save money for professional caregiving

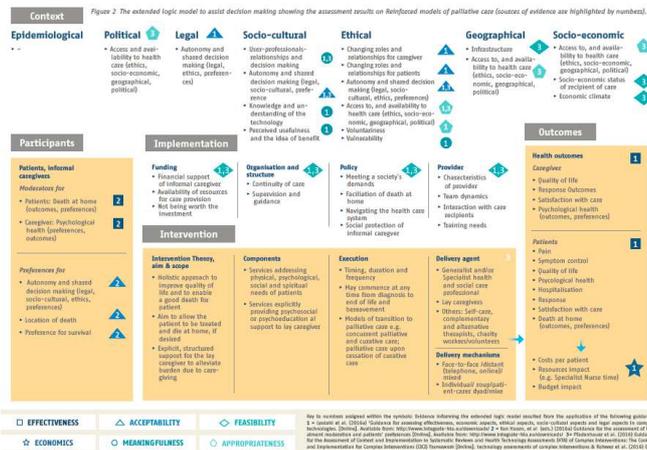


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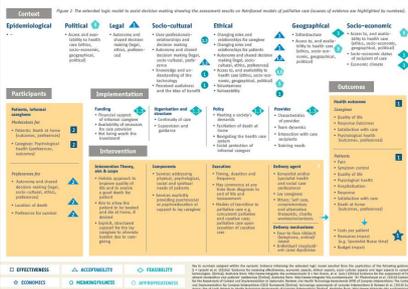


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Step 4: Insert the evidence into the logic model



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- Example - Patient characteristic as a modifier for the socio-cultural analysis:

Socio-economic status is a **moderator** on the ability of relatives to take over home-based care

Step 5: Structured deliberative decision-making

Structured process of decision-making taking uncertainty, unanswered questions, and limitations into account



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Lessons learnt

- Make **stakeholders** part of the assessment – a **defined perspective** is necessary for an integrated assessment
- **Identify and model relationships** between the intervention, patient characteristics, implementation issues, and context
- Offer an **integrated assessment** to decision-makers - **integration needs to start from the beginning**



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All reports are available from the project website:

<http://www.integrate-hta.eu/downloads/>

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Downloads

On this page you can find the five editions of our newsletters, (international) conferences and project flyer.

Results of the project

DATE	DOCUMENT
15 February 2016	Integrated health technologies (INI) 2016
15 February 2016	Guidance on the technologies – T1
15 February	Guidance for ass aspects, socio-

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