# HEALTH ECONOMICS WORKSHOP Le Caire 21 Mai 2010

# Health Economics: a Field Between Clinical Research and Marketing Studies

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#### The Economic Evaluation

Provides Enlightenment for

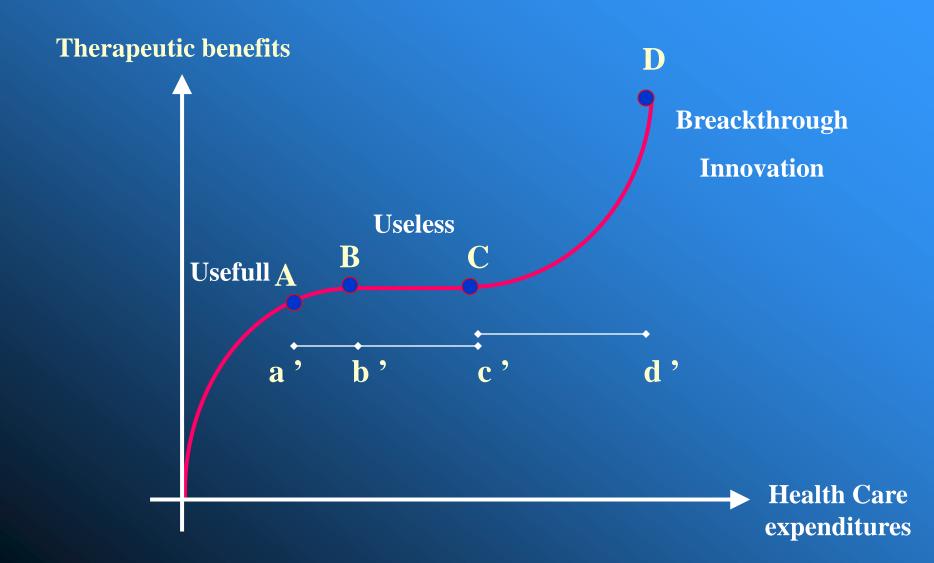
the *clinician* and for the *decision-maker* 

# WHEN NOT EVERYTHING CAN BE REIMBURSED TO EVERYONE

allowing them to study

the economic repercussions of their choices

### **Choices Have To Be Made**



# Ranking of Treatements Based on Their Incremental Cost-Effectiveness Ratio

 $\Delta C$ 

#### The Nightmare

(More expensive and less effective)

#### The Dilemma

(More expensive and more effective)

 $\mathbf{O}$ 

ΔE

#### The Dilemma

(Less expensive and less effective)

#### The Dream

(Less expensive and more effective)

### The End of a Paradigm:

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#### Who we Should Take Care of?

**■** The Patient ?

■ The Disease ?

■ The Insured ?

### **Experimental Models and Real Life**

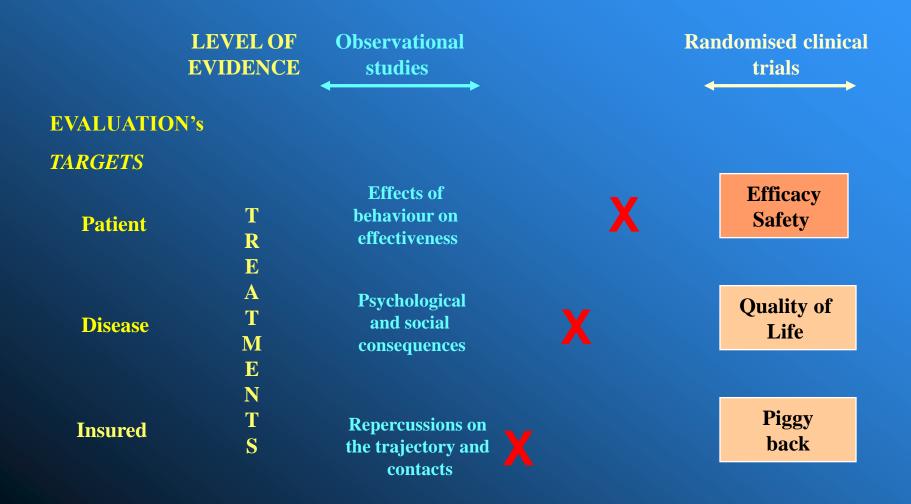
- RCT are viewed as the gold standard for making comparisons between treatments.
- The question of interest in controlled clinical trials is efficacy « can the drug work in patient to whom it is given ? »
- In clinical practice the question is **effectiveness** « does the drug work in patient to whom it is offered? »

# The Results of The RCT's are Limited in their Generalizibility

RCT are conducted under strict protocol-driven conditions with:

- Well-defined homogeneous patient populations
- Restriction in co-morbid conditions and concomitant
- Short follow up
- Limited sample size

# How to Bridge the Gap Beetween Experimental Models and Real Life?



# Disease Management Studies

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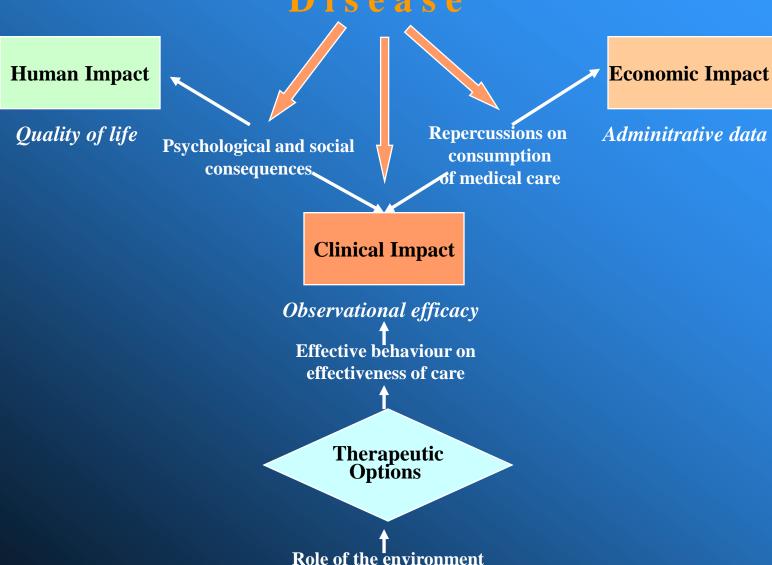
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#### The Search for Effectiveness

The Practice of a More Holistic Medicine
Requires the development of databases
recording Clinical, Human based, Economic
and Social Informations in Health
in the context of every day medical practice

# Analysis of the process

Disease



in access to care

#### With New Evaluation Criteria

- Clinical Impact: observational effectiveness
  - Variability of practices
  - Quality of compliance
  - Control and non-control of the disease
  - Effects of education and training
- Human Impact: benefits obtained in life
  - Reduction in symptoms
  - Reduction of functional disability
  - Improvement in quality of life and satisfaction
- Economic Impact: changes in cost

# Clinical Impact: Comparative Effectiveness Research

#### Measures of Clinical Outcomes

- Absolute Risk Reduction
  - The difference in risk of a disease or event between a treatment group and a control group
  - ARR = (events in treatment group) (events in control group)
- Relative Risk Reduction
  - RRR = 1-[events in treatment group / events in control group]
- Number Needed to Treat (NNT)
  - The number of patients who would need to receive a treatment in order to prevent or avoid one clinical event A smaller NNT corresponds to higher effectiveness for a therapy
  - NNT = 1/ARR

# Human Impact : Quality of Life Scales

# Human Impact: Benefits Obtained in Life

Health Related Quality of Life: A Buzz Word?

- The field is limited to the repercussions of the disease and its treatment. The concept has two fundamental components:
- Subjectivity: quality of life supposes an ability to describe the hardship experienced. Only the patient can perform this task.
- Multidimensionality: life cannot be evaluated in general; its various dimensions have to be investigated.

### HRQL Measures - Instruments

- General or generic instruments
  - Health Profiles
    - SF-36
    - SIP (Sickness Impact Profile)
    - NHP (Nottingham Health Profile)
  - Preference-based Measures
    - QWB (Quality of Well-being)
    - HUI (Health Utility Index)
    - EQ-5D (EuroQol)
- Specific instruments
  - Disease specific
  - Condition/problem specific

# **Economic Impact:**Cost Effectiveness Studies

### The Economic Question

Where should we put our money to lighten the burden of illness?

Conventional treatment or innovative treatment?

#### The Answer

Choose the treatment which has the highest rate of return on the therapeutic, humanistic and financial aspects of the patient's life, per invested monetary unit.

# Clinical Parameters are Individual and Uncertain Data

#### **CLINICAL PROCESSES** RESULTS CONTEXT > Performance Biologic >Survival status assessment > Relapse **Comorbidities** Cardiologic tests Serious adverse > Severity of illness **Concomitant** effects treatments > Hospitalization Stadification of Management **Clinical benefits** of the patient illness

# Comparing Clinical Research and Health Outcomes Research

#### Clinical Research

- Objective
  - Evaluates safety and efficacy of an intervention
- Methods
  - RCTs with well-defined control group. Can use surrogate markers as a proxy for efficacy.
     Limited external validity, as entry criteria are tightly controlled, patient population is homogeneous, and strict protocols are used
- Study time frame
  - Short (several months)

#### Health Outcomes Research

- Objective
  - Evaluates *effectiveness* and *efficiency* of an intervention
- Methods
  - Retrospective analyses or prospective studies, including clinical trials, observational, or naturalistic studies. Broader generalizability, since patient population is heterogeneous; no strict protocol; reflects typical clinical practice
- Study time frame
  - Long (can include years of f/u)

# Health Economics: The Bridge Between Science and Decision

**Economics** 

**Health Economics** 

Health Technology Assesment

Cost/Effectivenes
Analysis

**Statistics** 

# When Can We Really Refer to An Economic Evaluation?

## Formulating The Assesment

Are both costs and consequences of the alternatives studied?				
	NO			YES
		Consequences only	<b>Costs only</b>	Both
_		Partial Evaluation		<b>Partial Evaluation</b>
Are two or more alternative s compared?	N O	Outcome description	Cost description	Cost consequences
	Y	Partial Evaluation		Full
	E S	Comparative effectiveness research	Comparative Cost analysis	<b>Economic Evaluation</b>

### Types of analysis

- Cost-of-Illness Analysis (COI)
- Comparative Cost analysis (CCA)
- Cost Minimization Analysis (CMA)
- Budget Impact Analysis (BIA)
- Cost Effectiveness Analysis (CEA)
- Cost Utility Analysis (CUA)
- Cost Benefit Analysis (CBA)

## A Context Sensitive Plan required

### Markets And Product Characteristics To Determine Market Access Strategies

Differentiated / High Need

PRODUCT & INDICATION

Standard Need

- Moderate Pricing
- Fews Stakeholders
- Product aligned Messaging
- Pull Model
- Low Pricing
- Few Stakeholders
- Mass Messaging
- Push Model

- Premium Pricing
- Selected Stakeholders
- Diversified Messaging
- Selected Channel Model
- Innovative Pricing
- Multiple Stakeholders
- Superior Messaging
- Key Account Model

**Emerging** 

**MARKET** 

Advanced

# Access Strategies and Marketing Process

Market and Product
Strategies

Market
Access
Strategies

Corporate

Marketing
and Sells
Strategies

Regional

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