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Healthcare Technology Assessment and Cost-Effective Healthcare

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European countries spend between 5–11 percent of GDP on healthcare. Although these resources have surely improved health and quality of life for many Europeans, it is obvious from research that we do not always use the resources in the most cost-effective way. We spend billions of euros on methods that have been shown to be useless or even harmful. In order to avoid waste of resources, health technology assessment (HTA) is a means to improve decision-making in healthcare and make more efficient use of scarce resources.

To avoid unnecessary duplication Europe needs a common understanding of how these assessments should be carried out and of the methods used. There are still large variations in the quality of HTA reports, regarding domains to include as well as methods used. This is why the Swedish Council on Health Technology Assessment (SBU) decided to contribute to the development of common standards and methods focusing on methodology.

During the Swedish presidency in the EU, SBU hosted a conference in Stockholm together with the European network for HTA (EUnetHTA), a permanent collaboration in Europe for the assessment of health technologies (www.eunethta.net). The aim was to not only create awareness about HTA among policy makers, but also to involve stakeholders. EUnetHTA has also developed practical tools for HTA projects, improved information systems, and managed to get the whole European HTA community to collaborate.

The conference took place in Stockholm on December 3, 2009, with the title “HTA Methodology Conference: How to assess health technologies with high quality, transparency and transferability – towards a common methodology”. More than 130 people from over twenty countries participated. Information about the conference is available on the SBU website: www.sbu.se/HTAconference2009.

As far as we know, the Swedish governmental agency, SBU, is the oldest existing HTA organisation in the world. But, regardless of our age and long experience, we will never be too old to learn more and to further improve our work and our methods. There are several reasons why we should focus on methodology, both in Europe as well as in the rest of the world.

- To share knowledge and information to reduce duplication of efforts, we must trust each others’ work. This will only be accomplished by transparent and high quality data and methods.
- Poor methods and unsystematic work increase the probability that we make wrong decisions and do not use Europe’s healthcare resources in the best way. Inefficient use of resources will cost us billions of euros, and is unethical. Validated and robust scientific methods are required in order to know to what extent we can trust the results generated by medical research.
- The quality of our work can always be improved. In order to do so, we need continuous scientific reviews and critical discussions on best available methods to use.

Reflections on What We Can Learn From the Stockholm Conference on Methods in HTA

EUnetHTA is widely considered to be on the right track. Its core model and adaptation toolkits have improved transferability and transparency.

One topic of interest concerned validity and reliability of various study designs, especially in terms of randomised controlled trials (RCTs) and observational studies. Though RCTs are considered to be a ‘gold standard’ of clinical research, examples were presented of over-confidence in poorly conducted RCTs leading to unnecessary deaths. One conclusion from the conference was that observational studies, especially large longitudinal cohort studies, have been under-utilised in assessment of adverse effects of methods in health care.

A comprehensive assessment of medical, economical, ethical and social consequences of the scrutinised methods should be included in an HTA-report. Methods for applying economic, ethical and patient perspectives in the assessments were also discussed at the Stockholm conference. Some of the questions: Should we have a patient, a societal or a health-service perspective in cost-effectiveness analysis? What about threshold values in economic assessments in different European countries? How can we include ethical and patient perspectives in HTA?

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In what way can qualitative research contribute to HTA and how can we synthesise studies of qualitative methods in the best way?

The conference was highly appreciated by the participants and successfully achieved its key goals. Health care efficiency in all member states will improve by paying attention to higher quality in HTA. The eventual beneficiary will be Europe and its citizens.

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