HEHTA Newsletter
June 2015

Welcome to the first HEHTA Newsletter

With the appointment of Professor Andy Briggs to the William R Lindsay Chair in Health Economics at Glasgow University in 2005, Health Economics and Health Technology Assessment (HEHTA) was formed. HEHTA covers a broad set of activities relating to the appraisal of health service interventions including policies, procedures, devices, drugs and diagnostics. HEHTA’s research is divided into seven programmatic research themes, each led by a senior member of the team. HEHTA currently comprises 18 researchers, 3 administrative staff and a number of honorary and affiliate staff.

The aim of our quarterly newsletter is to keep researchers, collaborators, policy makers, funding bodies, students and colleagues informed about recent developments including publications, grants, presentations, teaching and other interesting news. In this edition we report on a range of recent exciting developments within HEHTA including the launch of our new online MSc in HTA, news that HEHTA is leading the new NIHR Complex reviews Support Unit and the launch of HEHTA’s ‘Global HTA’ research programme to complement HEHTA’s existing 6 programme themes.

I hope that you enjoy reading our newsletter. If you would like to join the mailing list please email your details to ihw-hehta@glasgow.ac.uk

Dr Emma McIntosh
Programme lead, Economics of Population health
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New online MSc HTA (Health Technology Assessment)

From September 2015 HEHTA will be offering an online MSc in Health Technology Assessment.

This course will be delivered as a part-time online distance learning programme which will provide the flexibility for students to study whilst in employment, and will also be more accessible to international students.

The programme comprises 3 core courses:
• Statistical methods for HTA and evidence based medicine
• Health Economics for HTA
• HTA: Policy and Principles

Students then select from a range of other taught courses, which will provide a solid grounding in all the major disciplines within the field of HTA. To complete the Masters, students will have the opportunity to collaborate on a research project with a member of academic staff or an external supervisor, culminating in a dissertation. Study support will be provided through web-based communication tools which allow for communication and collaboration with the academic team and other students. It is also possible to study at postgraduate certificate or diploma level.

Scholarships available for first year.
Full details on the website at www.gla.ac.uk/postgraduate/taught/healthtechnologyassessment
Any questions or queries can be directed to the HEHTA administrators at ihw-hehta@glasgow.ac.uk
HEHTA’s new Global HTA programme

Whilst resources are finite in every setting, there is much diversity in the role and application of HTA, reflecting not only differences between health systems and their financing but also how well-developed country-specific HTA agencies and processes are, and other wider contextual issues. Whilst developed countries may have led the way, low and middle income countries (LMICs) are increasingly developing HTA processes to assist in their healthcare decision-making. Since LMICs face particularly limited resources, the value of HTA to help make better resource allocation decisions is being recognised.

In response to the demand for HTA in LMIC, HEHTA is launching a new research theme exploring HTA from a global perspective. Research in this theme will emphasise working with major stakeholders including NICE International and the Gates Foundation as well as utilising staff members’ expertise in delivering training in HTA beyond the UK.

A course on HTA in a Global Context will also be offered as part of the MSc in HTA. Our research-led teaching will equip students with the necessary skills to critique HTA in different contexts, exploring variation between high-income countries, considering the methodological issues related to applying HTA in LMICs and looking in-depth as to how and why decision-making in healthcare may differ amongst LMICs.

Key Global HTA research staff are Prof Andrew Briggs, Ms Eleanor Grieve and Dr Zahidul Quayyum.

Glasgow Health Economics Seminar Series (GhESS)

Run in partnership with Glasgow Caledonian University, this seminar series was established to encourage engagement and collaboration amongst the health economists in Scotland and promote and develop the wide range of Health Economics research.

Over the past two years GhESS has welcomed speakers including Professor Marjon van der Pol, Chair in Health Economics at HERU, Aberdeen; Professor Friedriche Brejer, Chair in Health Economic and Social Policy at Universität Konstanz; Professor Stephen Birch, Chair in Health Economics at the University of Manchester and Professor Julie Ratcliffe, Flinders University. Topics have ranged from the pertinent ‘The Glasgow Effect’ to ‘An Economic Evaluation of Obesity Prevention for UK Adults’.

The next seminar will take place at 1 Lilybank Gardens, University of Glasgow, at 4pm on 10th September when Laura Bojke from the Centre for Health Economics at the University of York will be our speaker.

All welcome!

Laura Bojke
NICE International has launched the Gates Reference Case, a principle-based standardised methodology for good practice in the planning, conduct and reporting of economic evaluation for informing priority setting in health. HEHTA’s Professor Andy Briggs was a co-author to the reference case report and chaired the workshop in Seattle last year that facilitated the discussion that led to the report, Methods for Economic Evaluation Project (MEEP).

Spotlight on BeST

Dr Emma McIntosh and Dr Kathleen Boyd are part of a group, led by Professor Helen Minnis (child and Adolescent Mental Health) and colleagues from Kings College London and the University of Aberdeen, to be awarded a £3.4 Million NIHR Public Health Research Programme grant entitled ‘The Best Services Trial (BeST): Effectiveness and cost-effectiveness of the New Orleans Intervention Model for Infant Mental Health’.

Early childhood adversity and associated disorders impose a massive financial burden on individuals, families and society. Yet these maltreatment-associated mental health problems are treatable, especially if addressed early enough in life. One of the most robust predictors of poor outcome for maltreated children is placement instability. In the UK, adoption does not take place on average until 4 years of age, despite the presence of adversity in most cases since birth. It is well known that “drift” in care – where children oscillate between temporary foster care and maltreating birth families – is associated with infant/child mental health problems, yet there is much current debate about the ethics of permanent care for maltreated children and the timescales involved in making these decisions.

This trial will explore whether the New Orleans Intervention model, a service designed to improve the mental health of maltreated infants and children, is effective at improving relationships between maltreated children and their carers, the mental health of these children, and placement decisions for children in foster care. The economic evaluation component of this grant will explore the cost-effectiveness of this intervention both alongside the trial and in the long term through the development of a multi-sector lifetime decision model.

Key research staff:
Dr Emma McIntosh and Dr Kathleen Boyd

• Zahidul Quayyum joined us as a Research Associate
• Ciaran Kohli-Lynch and Giorgio Ciminata are undertaking their PhD with HEHTA; Ciaran’s work is titled ‘Primary prevention of cardiovascular disease in disadvantaged populations: a comparison of modelling methods in the UK and the US’; Giorgio is working on ‘Cost-effectiveness of new anticoagulant drugs using real world data within the Scottish population’.
• Miranda Trevor and Robert Heggie joined us as trainee researchers.
• Haixiang Xiao was with HEHTA from November 2013 until November 2014 as a visiting researcher from Hunan University, China. During her time in Glasgow she worked with Jim Lewsey and Claudia Geue on assessing the one-child policy in China and in particular the association between the number of children/living arrangements and elderly health and wellbeing.
• Javier Mar Medina from Gipuzkoa Hospital in San Sebastian, Spain visited HEHTA for two months. Javier’s work is based around economic evaluation of population health interventions.
• Mohsen Rezaeihemami arrived at HEHTA in March 2015 as a Research Associate.
• Hannah Hesselgreaves has recently joined us as the new lead on our Incorporating Perspectives and Experiences theme.


Gates Reference Case launched

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Lost in translation? Health Economics in Public Health Policy and Practice: ‘Case Study 1 – Economic evaluation of Childsmile’ Dr E McIntosh, HENS conference 2.12.14

Valuing the health and wellbeing aspects of Community Empowerment (CE) in Urban Regeneration programmes using economic evaluation techniques; a discrete choice experiment (DCE) Camilla Baba, HESG winter conference, Leeds 7.1.15

Impact of the Alcohol Act on off-trade alcohol sales in Scotland’ Dr C Geue, Dental School, UoG 2.2.15

A review of the economic evidence of asset based approaches for health improvement’ Dr E McIntosh, ‘Asset-based approaches and health economics: what do we value and how can we capture it?’ The Lighthouse, Glasgow. 12.2.15

Case management for complete cure of Plasmodium vivax malaria: a Markov cost-effectiveness model.’ Minnie Parmiter, Plasmodium vivax malaria: a Markov model of cure rates for case management for complete cure of Plasmodium vivax malaria: a Markov model of cure rates for case management. Edinburgh, School of Medicine, University of Edinburgh 14.5.15

Economic Modelling in Randomized Controlled Trial (RCT)-based economic evaluations: empirical examples of its effect on the precision of economic and decision outcomes’ Professor A Briggs, ISPOR 20th Annual International Meeting, Philadelphia, USA. 18.5.15.