A very warm welcome to HEHTA’s summer 2021 newsletter. In this edition, we showcase a number of developments in HEHTA, including Director Olivia Wu’s recent appointment as Chair of the NIHR Health Technology Assessment Clinical Evaluation and Trials Committee. PhD student Catherine Hanna was recently awarded her PhD under the supervision of HEHTA’s Kathleen Boyd. Following a successful inaugural course in 2020, HEHTA’s new online course ‘Maximising the Value of Clinical Trial Data’, will run again in November. It is such a pleasure to see previous HEHTA trainees Dikshyanta Rana and Robert Heggie experiencing well deserved publication success. Dikshyanta, with Olivia Wu, published the results of their economic evaluation of the NIHR-funded FEMME trial. Robert, with Kathleen Boyd, published their risk model to predict premature birth. HEHTA members have also had promotion success, with Eleanor Grieve being promoted to Lecturer and Nicola McMeekin to Research Associate. We were also delighted to welcome Keila Meginnis as our new One Health Lecturer. Keila is an Economist with expertise in discrete choice modelling. Finally, HEHTA’s Manuela Deidda and Giorgio Ciminata were thrilled to welcome their (HEHTA’s!) beautiful baby girl Caterina to the world in July.

VIVA SUCCESS

In July, we were delighted that PhD student Catherine Hanna successfully defended her thesis, carrying on HEHTA’s run of successful vivas this year! Her PhD ‘Clinical trial outcomes in oncology: Measuring impact and investigating the translation of trial results into clinical practice’ focused on evaluating the wider impacts from cancer research, with a focus on cancer clinical trials. She was supervised by Kathleen Boyd, Professors Robert Jones and Thomas Evans, and James Paul. Catherine is also a Clinical Oncology trainee in Glasgow and is a Clinical Trials Fellow in the CRUK Glasgow Clinical Trials Unit based at the Beatson West of Scotland Cancer Centre. Well done, Catherine! You can find out more about doing a PhD at HEHTA here University of Glasgow - Research Institutes - Institute of Health & Wellbeing - Research - Health Economics and Health Technology Assessment - Postgraduate research opportunities.

DIRECTOR ANNOUNCED AS NEW NIHR HTA CHAIR

In August, it was announced that Olivia would take up the prestigious role of Chair of the NIHR Health Technology Assessment (HTA) Clinical Evaluation and Trials (CET) Committee. Olivia said: “I am excited to take up this new role. NIHR-funded HTA has been instrumental in the timely adoption of effective interventions that leads to health and wider societal benefits. I look forward to working with colleagues to support high-quality HTA that are inclusive, and relevant to patients and the public.”

The HTA Programme is funded by the NIHR, in collaboration with the Chief Scientist Office (CSO) in Scotland, Health and Care Research Wales, and the Health and Social Care (HSC) Research and Development Division, Public Health Agency in Northern Ireland.

Contact us

More information about HEHTA, all our CPD courses and our online MSc is available by contacting our administrators at ihw-hehta@glasgow.ac.uk or on our website.
Maximising the Value of Clinical Trial Data: [Advanced] Analysis for Economic Evaluation and Modelling

We are delighted to announce that our live, online course will run across the following dates as live, online half-day sessions:

Week 1: 3rd - 5th November 2021
Week 2: 10th - 12th November 2021
Week 3: 17th & 18th November 2021

This course is a natural follow-on from advanced modelling courses and covers the fundamental concepts and practice of the key advanced analytic techniques that are required when determining appropriate approaches and estimating parameter values for cost-effectiveness models. It is also highly relevant to those seeking to improve the relevance of trial-based cost-effectiveness.

Some feedback from last year included: ‘Extremely responsive lecturers, tutors and coordinators. Very open to questions and prompt in answering questions/doubts.’ ‘The course material provided a good summary of methods, and the online format worked well.’

If you wish to register your interest in this course, please email ihw-hehta@glasgow.ac.uk or book here.

Introduction to Health Economics and Health Technology Assessment

Last summer, we ran a 10-week microcredential course ‘Introduction to Health Economics and Health Technology Assessment’ (in collaboration with FutureLearn) and are pleased to announce that we will be running this course as part of our online CPD programme in the next academic year.

The course, which ran for 10 weeks from 27th July, proved popular in 2020, with a substantial number of students taking part. We are excited for this HTA taster microcredential to become one of our flagship courses, held annually to showcase the team’s diverse work and world-class academics.

To register your interest for this course for the 2021/2022 academic year, please email ihw-hehta@glasgow.ac.uk

Term 2 CPD Courses

The following courses are offered as flexible, online distance learning (ODL) programmes. They are non-accredited and can be taken in your own time, at your own pace. You can access world-class learning with support from our expert faculty from wherever you are in the world, whatever your schedule.

Survival Analysis for HTA

21st February - 26th March 2021

Aim: To demonstrate how survival/time to event data is used to inform health economic analyses within health technology assessments.

Statistical Methods for HTA and Evidence-Based Medicine

10th January - 25th March 2021

Aim: To deliver the fundamentals of statistical methodology that underpin health technology assessment and evidence-based medicine.

HTA in a Global Context

10th January - 25th March 2021

Aim: To examine HTA in different contexts, exploring geographical variation between high-income countries as well as looking more in-depth about how and why decision-making in healthcare may differ in low- and middle-income countries.

To find out about all our courses, please visit our CPD page on our website.
NEW TRIAL EXPLORES OPTIONS FOR WOMEN WITH FIBROIDS

Results of the economic evaluation of the NIHR-funded FEMME trial, involving Dikshyanta Rana and jointly led by Olivia Wu, were published in June.

The trial-based cost-utility analysis compared uterine artery embolization (UAE) and myomectomy for women with symptomatic uterine fibroids wishing to avoid hysterectomy.

Unlike hysterectomy, both procedures conserve the uterus and differ from each other in terms of their invasiveness, suitability, or preference to the women. Myomectomy is a conventional, surgical procedure where fibroids are removed from the womb. Whereas UAE is a non-surgical procedure that involves blocking the blood supply to the fibroids. Therefore, it is important to establish which procedure improves the women’s health-related quality of life and provides the best value for money to the NHS.

Findings from the economic evaluation show that myomectomy is a cost-effective option for treating fibroids. However, as the differences in costs and quality of life between the two procedures are small, all women should be fully informed and have the option to choose between UAE and myomectomy.

Other trial collaborators included Honorary Professor Jonathan Moss and Professor Mary Ann Lumsden from the University of Glasgow, along with colleagues from the University of Birmingham, Exeter, Salford and York and Trinity College, Dublin.

Professors Rod Taylor, Frances Mair, and Sharon Simpson and Drs Bhautesh Jani and Tracy Ibbotson from the University of Glasgow are also involved in the project. The team will work with people living with multiple long-term health conditions, current rehabilitation service users, and healthcare workers to design the new programme. It will then be tested in clinical trials across the UK to assess the benefit to patients.

£2.9m NIHR Grant for PERFORM Study

Emma McIntosh and University of Glasgow colleagues are part of a £2.9m grant to develop a rehabilitation programme for people with multiple long-term conditions.

The PERFORM study (Personalised Exercise-Rehabilitation for people with Multiple long-term conditions) is 4.5-year NIHR-funded research programme led by Universities of Glasgow and Leicester University Hospitals of Leicester NHS Trust alongside experts from the Universities of Birmingham, Exeter, Salford and York and Trinity College, Dublin.

Professors Rod Taylor, Frances Mair, and Sharon Simpson and Drs Bhautesh Jani and Tracy Ibbotson from the University of Glasgow are also involved in the project. The team will work with people living with multiple long-term health conditions, current rehabilitation service users, and healthcare workers to design the new programme. It will then be tested in clinical trials across the UK to assess the benefit to patients.

QUIDS Study

Research on a new testing method which could more accurately identify women at risk of preterm birth and potentially improve healthcare outcomes for mums and babies in the future was published in PLOS Medicine this summer.

Kathleen Body and Robert Heggie were co-authors on the study, leading the economic analysis. The study found that carrying vaginal fluid foetal fibronectin (fFN) concentration testing in conjunction with assessing clinical risk factors was more effective at predicting birth before 37 weeks than testing alone. The economic analysis found the prognostic model was cost effective, compared to using qualitative IFN, at a threshold for hospital admission and treatment of ≥2% risk of preterm birth within 7 days.

That study concluded: “The risk prediction model showed promising performance in the prediction of spontaneous preterm birth within seven days of testing and can be used as part of a decision support tool to help guide management decisions for women at risk of preterm labour. It is readily implementable, with potential for immediate benefit to women and babies and health services, through avoidance of unnecessary admission and treatment”.

The study was led by Sarah Jane Stock at the University of Edinburgh and was funded by the NIHR HTA programme.

Study: Development and validation of a risk prediction model of preterm birth for women with preterm labour symptoms (the QUIDS study): A prospective cohort study and individual participant data meta-analysis

BHF Charity Cycle

Congrats to Nicola McMeekin, Emma McIntosh, Janet Bouttell and IHW director Jill Pell for getting on their bikes for charity and raising money for the British Heart Foundation by cycling 60 miles in 60 days! Well done all!
TIMELINE OF EVENTS

18 August
Olivia Wu is announced as the new Chair of the HTA Clinical Evaluation and Trials (CET) Committee.

29 July
The NIHR report on the CAVA trial is released.

28 July
Nicola McMeekin cycles 60 miles in one day for the British Heart Foundation.

23 July
The team gathers at Kelvingrove Park for a socially distanced picnic.

22 July
The teams say goodbye to Research Associate Jose.

21 July
Results of the CAVA are published in The Lancet.

14 July
Eleanor Grieve presents ‘Bridging the Perceived Disconnect between HTA & Delivery Systems’ at iHEA.

13 July
NIHR announces £2.9 million funding for the PERFORM study.

7 July
Eleanor Grieve and Nicola McMeekin are promoted to and Lecturer and Research Associate, respectively.

6 July
QUIDS study appears in PLOS Medicine.

1 July
Eleanor Grieve presents ‘Bridging the Perceived Disconnect between Health Technology Assessment and Delivery Systems’ at HSRN UK.

24 June
PhD student Yuejiao Duan from China joins the team.

21 June
FEMME trial results poster is showcased at HTAi 2021.

Shawn presents results of the SERA study at HTAi 2021.


Major study on the effect of alcohol on ambulance callouts appears in the International Journal of Environmental Research and Public Health.

4 June
A cost-utility analysis of the FEMME trial is published in the BJOG.

3 June
Giorgio Ciminata presents ‘Augmenting risk prediction tools to compare utilities of CHA₂DS₂-VASc and HAS-BLED’ at this year’s International Conference of the ESC Council on Stroke.

BIG BIRTHDAYS!

During the summer we celebrated lots of big birthdays! Emma and Eleanor turned 50 within weeks of one another and Francesco celebrated his 30th birthday before Giorgio and Kathleen turned 40 at the end of the summer.

PICNIC IN THE PARK

In June, the team took advantage of the good weather and easing restrictions by having a socially distanced picnic in Kelvingrove Park. It was great to finally see everyone in person and to meet new additions to the team. The next generation of health economists was also in attendance, with the HEHTA kids’ crew representing on the day!
HELLO

In June, we were thrilled to welcome new PhD student Yuejiao Duan from China. No stranger to Lilybank Gardens, Yuejiao completed her Masters in Public Health at the University of Glasgow, before being accepted as a PhD student under the supervision of Kathleen Boyd and Kathryn Skivington (SPHSU). Her PhD title is: ‘Economic evaluation of preventive treatments for drug-related harms in people who injecting drugs (PWID)’.

In August we welcomed Sahar Sharif as our new research associate. She has over four years’ experience working in this field, with a focus on statistical analysis, including individual participant data network meta-analysis.

Sahar has a BSc in mathematics and statistics from Newcastle University and a MSc in Public Health Nutrition from Glasgow University. Prior to taking this role, Sahar worked as a Research Fellow at the Centre for Reviews and Dissemination at the University of York.

And just as summer was drawing to a close, we welcomed Keila Meginnis as our new One Health Lecturer. Keila is an Economist, originally from California. She did her PhD at the University of Manchester, focusing on environmental and behavioural economics. She then worked at the University of Glasgow researching health interventions in Uganda as part of the Lambert Lab, before moving to the University of Stirling to work on an ESRC project on the Economics of Marine Plastic. She is excited to be back at Glasgow, where she lives with her fiancé and their rescue pup Apollo and is looking forward to pursuing One Health and Environmental Economics research in her new role.

GOODBYE

In August we bid a fond farewell to our colleague Jose Antonio Robles-Zurita, who left HEHTA to start a new life (and job!) in Spain with his family. We wish him all the best!

WELCOME, BABY CATERINA!

In July, we were delighted to welcome Caterina, Giorgio and Manuela’s beautiful baby girl!

Promotion Success

In August, we were delighted that Eleanor Grieve was promoted to Lecturer and Nicola McMeekin to Research Associate.

Eleanor joined HEHTA in 2010, following the completion of the MPH here at Glasgow. Her research has a strong focus in the context of low- and middle-income settings. Alongside an impressive list of research projects and outputs, Eleanor also makes substantial contribution to the HEHTA team, through her leadership of the Global HTA theme and (from Sept) co-leadership of the MSc Programme.

Nicola joined HEHTA in 2016, following her completion of our MSc HTA Programme. Since then, she has been working on several complex and challenging economic evaluations alongside clinical trials. Alongside her research activities, Nicola has also taken on a substantial role in co-leading the health economics module.

Eleanor and Nicola also successfully completed their PhDs this year. Well done, both!

CAVA TRIAL RESULTS

Findings of the CAVA trial published in The Lancet in July have important implications for cancer patients who receive long-term chemotherapy.

Led by Jonathan Moss & Olivia Wu, ‘Central venous access devices for the delivery of systemic anticancer therapy (CAVA): a randomised controlled trial’ aimed to compare central vein delivery systems for chemotherapy, finding that: ‘For most patients receiving SACT, PORTs are more effective and safer than both Hickman and PICCs. Our findings suggest that most patients receiving SACT for solid tumours should receive a PORT within the UK National Health Service’.

Robert Heggie and Evi Germeni were also involved in the NIHR-funded trial, as well as members of the CRUK Glasgow Clinical Trials Unit.

Full Article: Central venous access devices for the delivery of systemic anticancer therapy (CAVA): a randomised controlled trial - The Lancet

NIHR Report: https://www.journalslibrary.nihr.ac.uk/hta/hta25470/#/abstract
Publications

June


Rana D, Wu O, Cheed V, Middleton LJ, Moss J et al. Uterine artery embolisation or myomectomy for women with uterine fibroids wishing to avoid hysterectomy: a cost–utility analysis of the FEMME trial. BJOG.

July


August


Mackenzie R M, Greenlaw N, Abdulmajid A, Duff B, Grieve E et al. SurgiCal Obesity Treatment Study (SCOTS): a prospective, observational cohort study on health and socioeconomic burden in treatment-seeking individuals with severe obesity in Scotland, UK. BMJ.


Posters & Presentations

June


Giorgio Ciminata. Augmenting risk prediction tools to compare utilities of CHA2DS2-VASc and HAS-BLED. International Conference of the ESC Council on Stroke. 2-4 June.

Francesco Manca. Presentation of MUPPEL, results of Minimum unit price for alcohol-on alcohol-dependence prescriptions. KBS Conference. 31 May - 4 June.

Evi Germeni. Integrating qualitative research into clinical trials: Lessons learnt from the CAVA trial. HTAi Virtual Annual Meeting. 19-23 June.

Robert Heggie. A sample size calculation from a NMB perspective: a case study in the management of NSTEMI patients with previous bypass surgery. HTAi Virtual Annual Meeting. 19-23 June.


Eleanor Grieve. Bridging the perceived disconnect between Health Technology Assessment and delivery systems. HTAi Virtual Annual Meeting. 19-23 June.

July

Eleanor Grieve. Bridging the Perceived Disconnect between Health Technology Assessment and Delivery Systems. HSRN UK 2021. 1 July.

Eleanor Grieve. Bridging the Perceived Disconnect between Health Technology Assessment and Delivery Systems. IHEA. 14 July.