## OP25 Evidence Gathering Across Key Stakeholders Involved In Early Health Technology Assessment


### AUTHORS:

Stefania Manetti (stefania.manetti@santannapisa.it), Richéal Burns, Giuseppe Turchetti


### INTRODUCTION:

The adoption and reimbursement of a new or novel medical device frequently occurs after an economic evaluation of the innovation. One important factor for reimbursement rejections by the English National Institute for Health and and Care Excellence (NICE) Medical Technologies Evaluation Programme (MTEP) appears to be the little or no attention to early assessment (1). The aim of this study is to achieve a more in-depth and comprehensive understanding of the value of early Health Technology Assessment (HTA) for new medical devices.

### METHODS:

This study employs a mixed methods research strategy. Our informant interviews involved two types of key stakeholders: health economists in academia and professionals in medical devices firms with a professional role in research and development or market access departments. Our qualitative analysis focused on two samples from six universities (five in the United Kingdom,UK, and one in Italy) and six small to medium-sized enterprises (five in the UK, and one in Italy). Insights from field work interviews helped to design our complementary quantitative analysis.

### RESULTS:

During thematic analysis, barriers to adoption of early HTA emerged across three domains. First, educational barriers (that is, what HTA/early HTA is and how to conduct it) influenced the foundation for the reimbursement strategy. Second, interviewees highlighted the presence of intrinsic barriers (for example, resources for translational and early preclinical research, reliability and reproducibility, evidence, and dissemination of sensitive information) within existing practices and knowledge. Third, several research gaps (that is, medical device classification, standardization of methods, guidelines for developers, and alignment of stakeholders perspectives) were identified. Finally, academics adopted early HTA to assess different aspects of a medical device early in development; however, developers were focused on the assessment of investment and safety/usability factors, especially for in-house evaluations.

### CONCLUSIONS:

If decision makers expect developers to produce better quality evidence and society aims to optimize resources that is, not investing in non-cost-effective technologies, then the incorporation of a more robust analytical framework including a societal perspective is necessary to understand how early HTA can be embedded into all aspects of the development process.

### REFERENCE:


1. Alshreef A, Jenks M, Green W, Dixon S. Review of Economic Submissions to NICE Medical Technologies Evaluation Programme. *Appl Health Econ Health Policy*. 2016;14(6):623-634.


## OP27 Patient-Reported Outcome Measures In Carotid Artery Revascularization


### AUTHORS:

Munira Essat (m.essat@sheffield.ac.uk), Ahmed Aber, Patrick Phillips, Edith Poku, Helen Buckley Wood, Aoife Howard, Simon Palfreyman, Eva Kaltenthaler, Georgina Jones, Jonathan Michaels


### INTRODUCTION:

Patient-reported outcome measures (PROMs) provide a way to measure the impact of a disease and its associated treatments on the quality of life from the patients' perspective. The aim of this review was to identify PROMs that have been developed and/or validated in patients with carotid artery disease (CAD)




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