

Volume 16, Jul – Dec 2021

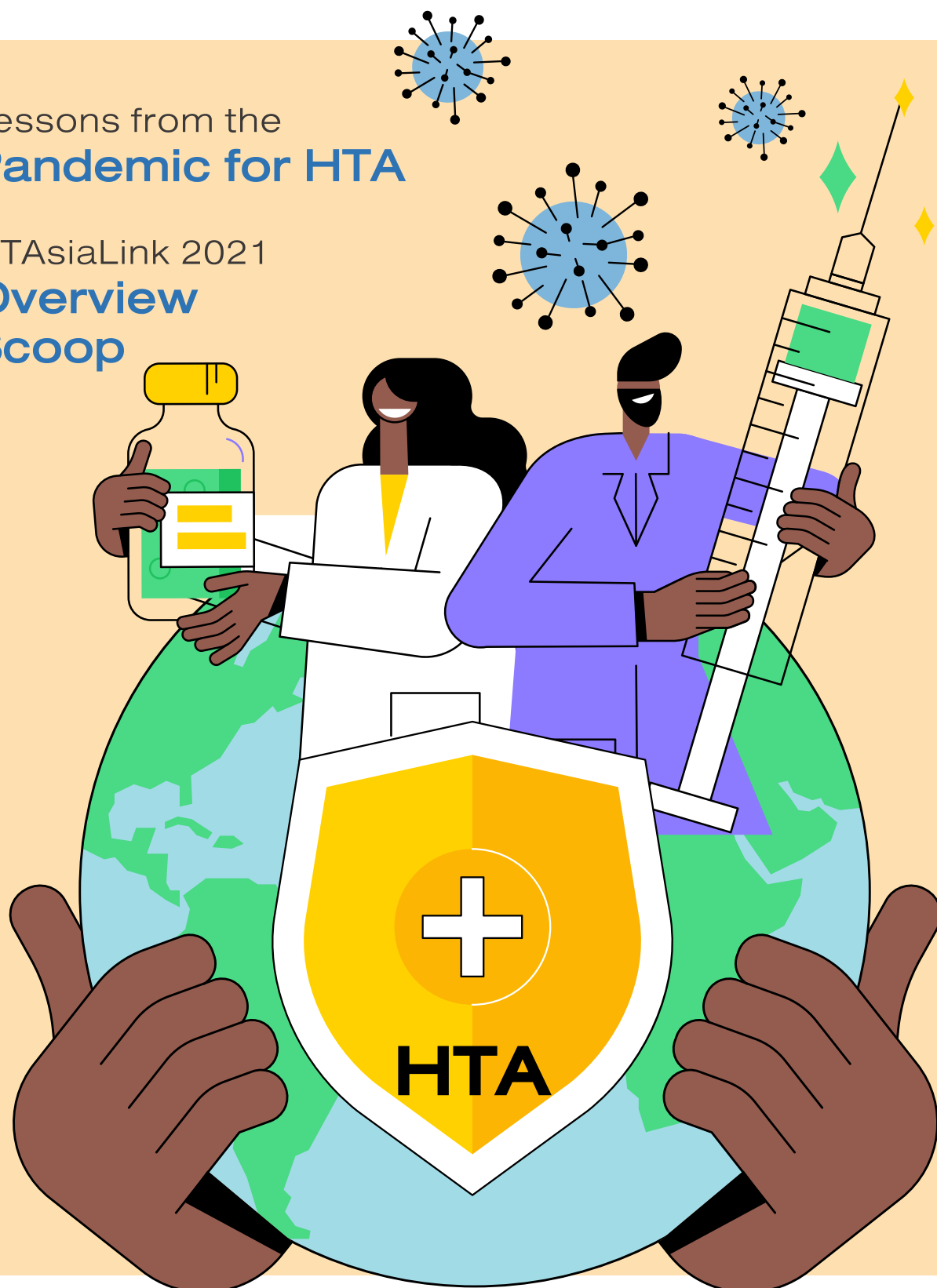


HTAsiaLink

NEWSLETTER TO STRENGTHEN COLLABORATION AMONG HTA AGENCIES IN ASIA

Lessons from the Pandemic for HTA

HTAsiaLink 2021
Overview
Scoop



▶ Editor's Talk

The past 9th HTAsiaLink Annual Conference has been a big success, initiating the first hybrid conference in our HTAsiaLink history. However, unpredictable challenges still await, both existing and new coming issues. Omicron is one of them, provoking us to strive for more knowledge and evidence. As far as we have learned from the conference, we would like to summarise them for those who may have missed the past event. Moreover, we have been honoured by Professor Guy Maddern, Current Chair of Asia Policy Forum HTAi, with extended contents from his session "After COVID: the path forward for HTA in the post-pandemic era". Wish you all a good healthy happy new year.

Best wishes and take extra good care,
The Editorial Team

▶ HTAsiaLink Newsletter Editorial Team

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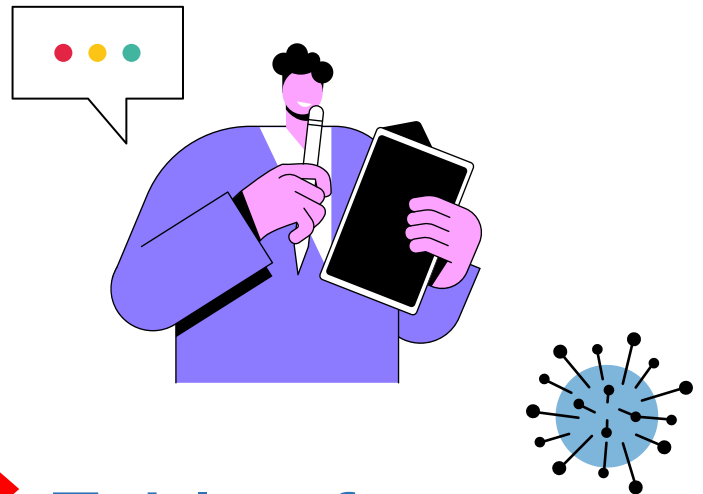
Graphic designer: Chalita Buppasiri

HTAsiaLink is a network to support collaboration between Asia-Pacific health technology assessment (HTA) agencies. It focuses on facilitating HTA research by accelerating information and resources sharing and developing an efficient methodology for HTA in the region.

Become an HTAsiaLink member

Contact: HTAsiaLink secretariat (NECA)

E-mail: htasialink.sec@yahoo.com



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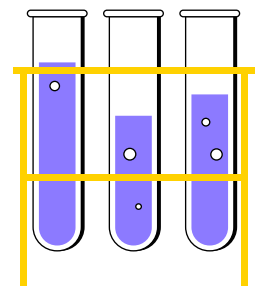
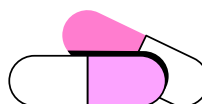
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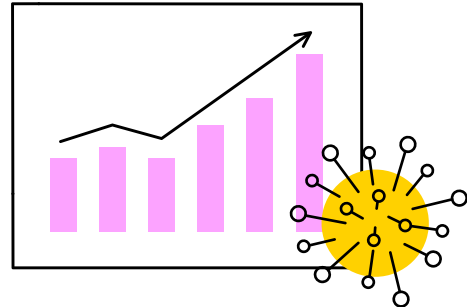
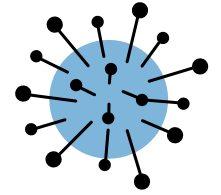
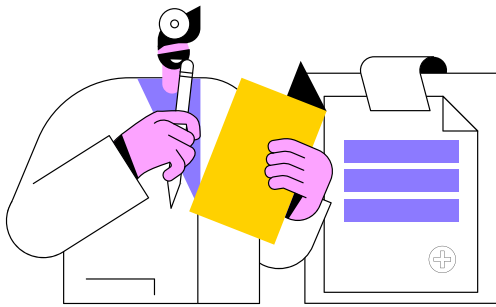
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“Lessons from the Pandemic for HTA”

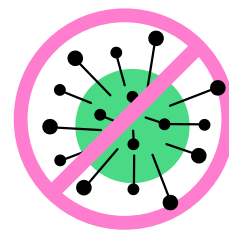


The current crisis engulfing the world with the pandemic of COVID-19 is well understood by all countries and their citizens. It is a global problem, but its solutions and its challenges are unique for each region and country involved.

Perhaps the biggest challenge facing the policy makers is that well-constructed trials and studies are difficult to mount, particularly as the landscape rapidly changes and the best available real-world evidence is more likely to be the guiding information dataset that will dictate the actions to be taken.

An issue that many governments might have faced in common is the difficulty of misinformation being provided through any number of mediums, including Facebook and social influencers who have propagated either vaccine hesitancy or outright vaccine resistance. This phenomenon, although not unique to the COVID-19 situation, has been brought into much sharper focus on this occasion due to the seriousness of the global problem and the instantaneous worldwide prominence possible through social media. **The ability to provide authoritative, interpretable, and actionable information is perhaps a relatively new challenge for health technology assessment agencies and governments as they struggle to not only provide best possible information available at any point in time but also understand themselves precisely what the current evidence means.**

The data that is being presented has a significant degree of ambiguity associated with it. This ambiguity is something that health workers have had to deal with on a daily basis with every patient they are treating, in that they need to place the patient into the social context in which they find them, their co-morbidities and the likely success of interventions that are available.



The recent example of the new strain, Omicron, being now discussed, debated, and analysed, illustrates the difficulties facing health technology assessment as the landscape rapidly changes. With this new variant, the issues of its infection rate, its virulence, and the ability for existing vaccines to provide protection and at what rate are all unknown variables. The way governments should react to it is severely challenged by the lack of clear and precise information. These new threats as they emerge will continue to challenge health technology assessment and its ability to provide authoritative advice.



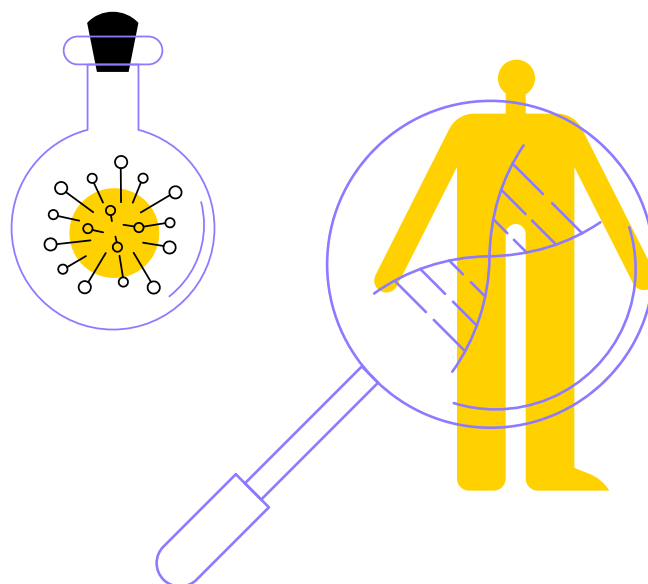
This dilemma is now having to be understood by health planners as well as government and politicians and that the advice they are receiving is the best available information at that time, but as subsequent studies, real-world data and alternative strategies become available, so too will their advice on the optimal way forward. Of course, with COVID-19 many of the old strategies that have been used for hundreds of years, such as social isolation and quarantining of infected individuals, has again come into play. The substantial difference, of course, has been the rapidity with which vaccines have been developed, however their success is not as absolute as perhaps many in the population would wish and as mutations develop so too the vaccines will need to be altered and that brings with it both opportunities and risks.

The answers that will be appropriate for a well-funded, well-educated, well-connected population will be different from those that can be made available to poorly funded healthcare systems in populations where the educational standards may not be at the level that leads to an easy understanding of the risks and benefits of various interventions. Furthermore, the geography of individual countries will have a significant impact on the success of interventions. Solutions for a geographically isolated island nation will be very different from those in landlocked countries with borders that are not well controlled and health systems that are quite different from one region to the other.



The world will continue to have pandemics, what is required is a health technology assessment environment that is able to be nimble, appropriate, and provide the best possible advice with often poor or evolving evidence.

This current challenge is now in front of us, perhaps for the first time with well-developed HTA infrastructure in place. As individuals who are interested in health technology assessment, we must rise to the challenge and educate not only our populations but also our politicians. This will be a test of our abilities to communicate clearly and explain the uncertainties and ambiguities with which we work.

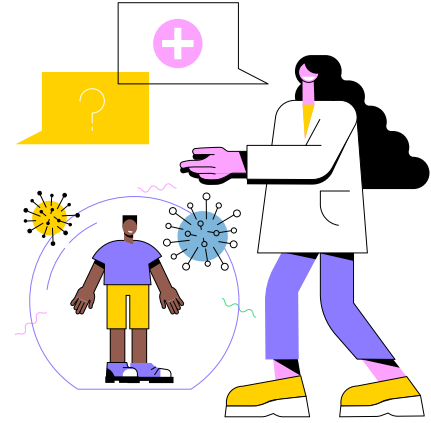


Professor Guy Maddern
Past President HTAi and Past Chair INAHTA
Current Chair, Asia Policy Forum HTAi





HTAsiaLink 2021 Overview Scoop



Throughout almost two years of global pandemic, the world has been inevitably facing dramatic changes in all aspects such as social change, economic downturn, difficulty in education access, tourist industry crisis, and the most important part is catastrophic public health. During this crucial and challenging time, the pandemic has taught us that it is better to act early and offer support to each other to keep the world safer for everyone.

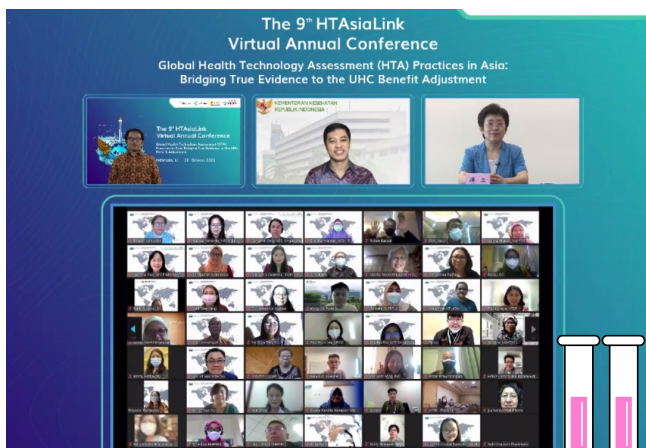
Nevertheless, it was a privilege for all of us international partners and organisations from all over Asia- Pacific and the world to be able to hold and virtually take part in another regional conference called the 9th HTAsiaLink Virtual Annual Conference in Indonesia, on October 11st – 13rd 2021, originally planned for 2020.

In this conference that was held in a virtual concept, three plenary sessions and various parallel sessions were presented and discussed to support the meeting’s overarching theme of “Global Health Technology Assessment (HTA) Practices in Asia: Bridging True Evidence-to-the UHC Benefits Adjustments”.



Through the development process of HTA, what can be done to strengthen and accelerate the HTA evidence-to-policy action in shaping the UHC benefit basket? To give an answer to this question, we got to hear it in a fruitful discussions throughout this conference about current HTA development and its application in generating vigorous evidence for informing policymakers across Asia, together with the adaptation of HTA in its approach to synthesising and presenting evidence amidst the swiftly changing world.

On October 11st 2021, the event started with excellent and informative pre-conference workshop sessions that covered several essential topics about public health issues such as “Health Technology Assessment pathways in LMICs: Scaling up for sustainability of UHC in Asia”, a session on how countries have leveraged HTA to improve equitable service delivery while increasing the technical and allocative efficiency of their health systems. It is followed by “The Use of Big Data and Real-World Evidence (RWE) in Current HTA Decision Making Process”, a workshop that explained about the use of RWE during COVID-19 pandemic, including giving the introduction to HTA model for COVID-19 vaccines and advancing the real-world data and real-world evidence to support drug reimbursement decisions in Asia.

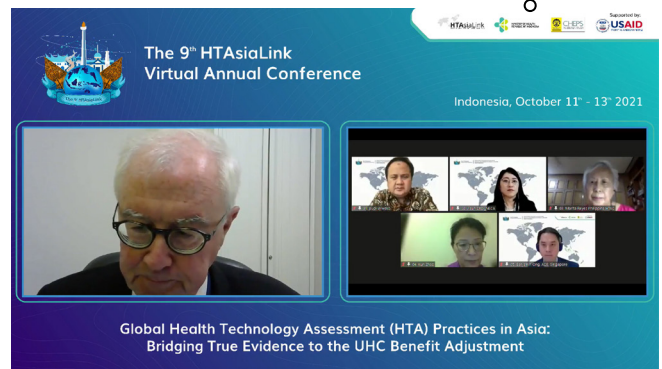
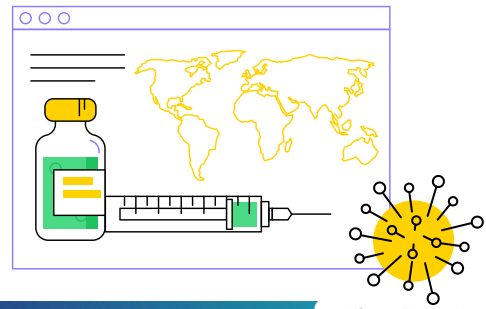


In addition, we got to explore the profound impact the COVID-19 pandemic has had on processes globally and how HTA will be fundamentally transformed in the post-pandemic era from “After COVID: The path forward for HTA in the post-pandemic era” session. Achieving comprehensive healthcare coverage is on the policy agenda for governments around the world.

To realise this vision, the panel “Making Value Based Decisions towards Comprehensive Healthcare Coverage” brought together renowned policy experts to further advance the dialogue and showcase best-practice case studies from all over the world. The pre-conference session was excellently wrapped with “Horizon Scanning of Health Technologies: the Early awareness and alert (EAA) of innovations” to help us to understand better about the lifecycle and the terms used to evaluate technologies and their impact during the decision processes.

On the second day of the event (October 12nd 2021), wonderful opening remark was given by Prof. Budi Hidayat, SKM, MPPM, PhD, President of HTAsiaLink, to address how important this event is and announced that the main conference has officially begun.

The first session started off with “Appraising the UHC Benefits Baskets in Indonesia and Selected Asia Countries: from topic selections into final decisions”, a session on how to define the health benefits basket for ensuring the financial sustainability to achieve universal health coverage (UHC), followed by “The Journey of Real-World Data (RWD) to Universal Health Coverage: Increasing Access and Reducing Waste” where we learned more about how RWD can support HTA, specifically to aid regulatory and reimbursement decision making as well as helping policymakers fulfill the goal of UHC of access to quality care by refining diffusion of technologies and removing wasteful interventions.



Additionally, it is a known fact that having assessment result of certain intervention might not merely end the decision-making process, and sometimes the decision was made by political lobbying or negotiation. The third session about “Political Economy of the HTA Decision Making Process: from Assessment to Appraisal and Impact to the Covid-19” showed us that standardised understanding and transparent procedure are needed in order to align the assessment result with the appraisal and policy making process, particularly in consideration of political economy aspects.

Moreover, aside from remarkable several sessions about HTA, a freeware named Plant-A-Tree, an add-in in Microsoft Excel, was also launched and demonstrated to showcase its ability to create unlimited decision tree branches, including a function to copy and paste branches of the decision tree which can be worked on multiple sessions for economic evaluation. This freeware is developed by the National University of Singapore (NUS) with the support of the International Decision Support Initiative (iDSI). All in all, though it has been tough and challenging years for everyone worldwide, we would like to express our sincere gratitude towards the amazing contribution from those who work restlessly to provide countless number of public health strategies as well as making advanced improvements to benefit the community and society.

We look forward to the 10th HTAsiaLink Annual Conference that will be taking place in Beijing, People’s Republic of China, and more details will be updated soon.





Congratulations all



9th HTAsiaLink Winners on Best Presentation!



Best Poster Presentation

1st WINNER Euis Ratna Sari, Center for Health Economics and Policy Studies Universitas Indonesia

Title: Economic Evaluation and Budget Impact Analysis of Adding Rituximab to Chemotherapy for Diffuse Large B- Cell Lymphoma Patients in Indonesia



2nd WINNER Siobhan Botwright, Health Intervention and Technology Assessment Program (HITAP)

Title: A Systematic Review of Methodological Approaches for Evaluating Real-World Effectiveness of COVID-19 Vaccines: Advising Resource-Constrained Settings



Best Oral Presentation Health System Strengthening track

3rd WINNER Lara Alyssa B. Liban, Department of Health - Health Technology Assessment Unit

Title: Economic Evaluation and Budget Impact Analysis of Adding Rituximab to Chemotherapy for Diffuse Large B- Cell Lymphoma Patients in Indonesia



1st WINNER Chanida Ekakkararungroj, Health Intervention and Technology Assessment Program (HITAP), Ministry of Public Health, Thailand

Title: The Policy Recommendations of Using Extracorporeal Membrane Oxygenation (ECMO) in Thailand's Universal Coverage Scheme

2nd WINNER Sheena Jasley G Samonte, Department of Health (Philippines)

Title: Institutionalization of Health Technology Assessment in The Philippines: Milestones and Ways Forward





Best Oral Presentation Health Technology Assessment track

1st WINNER Nan Luo, National University of Singapore, Singapore

Title: A Systematic Review of the Reporting and Characteristics of Health-State Utility in Cost-Effectiveness Analyses in Asia.

2nd WINNER Lydia Ooi Jin Ming, Ministry of Health, Singapore

Title: Cost-effectiveness analysis of transcatheter mitral valve leaflet repair compared with guideline-directed medical therapy for mitral regurgitation contraindicated for open surgery in Singapore

3rd WINNER Yashika Chugh, Department of Community Medicine and School of Public Health. Post-graduate Institute of Medical Education and Research, Chandigarh, India

Title: National Methodological Guidelines to Conduct Budget Impact Analysis for Health Technology Assessment in India

3rd WINNER Nuttakarn Budtarad, Health Intervention and Technology Assessment Program (HITAP), Thailand

Title: Biologic Disease-Modifying Antirheumatic Drugs (bDMARDs) targeted synthetic DMARDs (tsDMARDs) or biosimilar DMARDs (bsDMARDs) combined with Methotrexate for high disease activity rheumatoid arthritis: A Systematic Review and Network Meta-Analysis





Member and partner activity

First HTA on COVID-19 diagnostic innovation from the Centre for Health Policy, Planning and Management (CHPPM), SHSS, TISS, India



Health Policy and Technology
Volume 10, Issue 1, March 2021, Pages 16-20



Commentary
Integrating technology, innovation and policy: COVID-19 and HTA
Kanchan Mukherjee 

Centre for Health Policy, Planning and Management, School of Health Systems Studies, Tata Institute of Social Sciences, India

Available online 4 February 2021, Version of Record 11 March 2021.

Dr. Kanchan Mukherjee, Professor at CHPPM, School of Health Systems Studies (SHSS), TISS, Mumbai has reported the first HTA on a COVID-19 diagnostic innovation from India. HTA was conducted on the FELUDA rapid diagnostic test (which uses CRISPR technology) to provide evidence on efficiency, equity and quality of the innovation for the Indian healthcare system.



Details available at:
<https://doi.org/10.1016/j.hlpt.2021.01.003>

MaHTAS collabs in 2 international projects!



MaHTAS Malaysian Health Technology Assessment Section
4.5K followers • 8 following

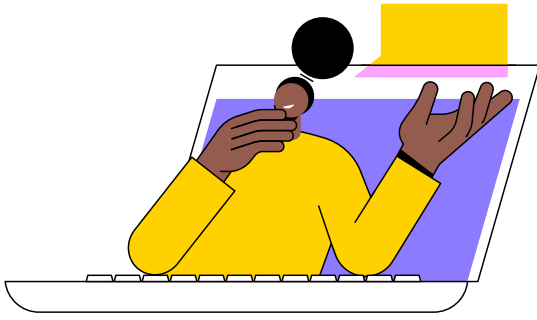
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MaHTAS has been involved in two international collaboration projects including modelling the dynamic of Covid-19 with Monash University Australia, WHO WPRO and WHO Representative Office for Malaysia, Brunei Darussalam and Singapore, and technical evaluation of 22 innovative medical technologies for low-and-middle income countries with i-HTS and WHO.

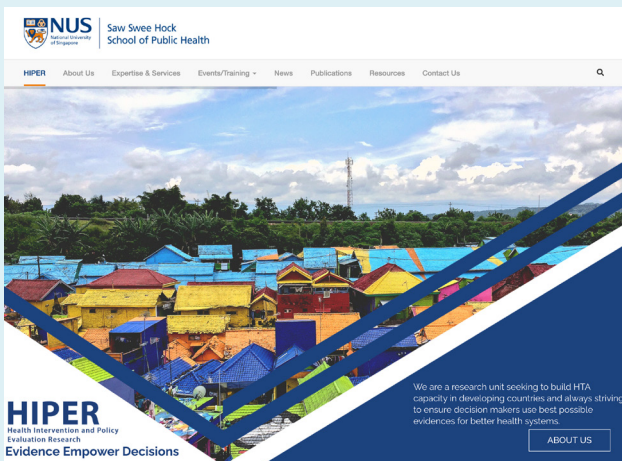


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HIPER's project, Resource Utilisation Study on the use of Next Generation Sequencing Technologies in Precision Medicine for Familial Hypercholesterolemia

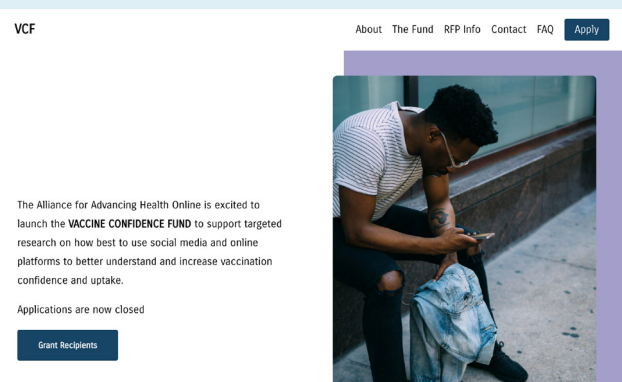


Funded by MOH Singapore, the cost-benefit analysis of several screening protocols identified that screening clinically possible/ probable/ definite FH patients using Next Generation Sequencing (NGS) with multiplex ligation-dependent probe amplification (MLPA) as a complimentary test but without capillary sequencing as a confirmatory test, followed by cascade screening is most cost beneficial.



For more information: <https://hiper.nus.edu.sg/>

Trilateral project on AI information



This project is to develop and evaluate a conversational AI service on communication platforms for users to obtain accurate vaccine information and to assess the veracity of vaccine information in 3 countries, conducted by Hong Kong's HKU, Vaccine Confidence Project (VCP), Singapore's NUS, and the Thailand's MoPH, HITAP.



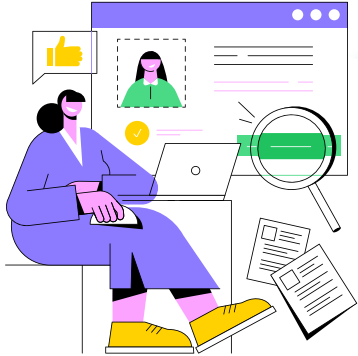
Read more: <https://vaccineconfidencefund.org/vcf-grants-awarded/>





HTAsiaLink member

Organisational members



United Kingdom

Imperial College London Global Health and Development Group, Institute of Global Health Innovation, Imperial College London

NICE The National Institute for Health and Care Excellence (NICE)

China



China National Health Development Research Center (CNHDRC)

 Key Lab of Health Technology Assessment, National Health and Family Planning Commission



Shanghai Health Technology Assessment Research Center, Shanghai Health Development Research Center

Bhutan



Essential Medicines and Technology Division (EMTD), Department of Medical Services, Ministry of Health, Bhutan

Sri Lanka



Health System Research Unit, Department of Community Medicine, Faculty of Medicine, University of Colombo

India



Department of Health Research (DHR), Ministry of Health and Family Welfare, Government of India



Institute of Public Health Kalyani (IPHK)



Centre for Health Policy, Planning and Management (CHPPM), Tata Institute of Social Sciences (TISS)



The Department of Community Medicine and School of Public Health, Post Graduate Institute of Medical Education and Research, Chandigarh

Thailand



Mahidol University
Wisdom of the Land

Health Technology Assessment Program, Mahidol University



Health Intervention and Technology Assessment Program (HITAP)



International Health Policy Program (IHPP)

Malaysia



Malaysia Health Technology Assessment Section (MaHTAS), Ministry of Health Malaysia



Ministry of Health Malaysia

Pharmaceutical Services Program, Ministry of Health, Malaysia



UNIVERSITI SAINS MALAYSIA

School of Pharmaceutical Sciences, Universiti Sains Malaysia (USM)



Vietnam



Health Strategy and Policy Institute (HSPI)

South Korea



National Evidence-based Healthcare Collaborating Agency (NECA)



Department of Health Convergence, Ewha Womans University

Taiwan



Division of Health Technology Assessment, Center for Drug Evaluation (CDE)



Big Data Research Center, Fu Jen Catholic University



National Hepatitis C Program (NHCP) Office, Ministry of Health and Welfare

Philippines



HTA-CPG Unit, Health Policy Development and Planning Bureau, Department of Health



National Center for Pharmaceutical Access and Management Department of Health (NCPAM)

Australia



Health Technology Reference Group (HTRG)



Menzies School of Public, University of Sydney



The George Institute for Global Health



The Australian Safety and Efficacy Register of New Interventional Procedures – Surgical (ASERNIP-S)

Japan



C₂H

CORE2 HEALTH

Center for Outcomes Research and Economic Evaluation for Health (C2H), National Institute of Public Health

HiAS Health, Research Center for Health Policy and Economics, Hitotsubashi Institute for Advanced Study (HIAS), Hitotsubashi University

South Africa



SAMRC/WITS Centre for Health Economics & Decision Science
PRICELESS SA

Priority Cost Effective Lessons for System Strengthening (PRICELESS), Wits School of Public Health

Indonesia



Center for Health Economics and Policy Studies (CHEPS), Universitas Indonesia



InaHTAC (Indonesia Health Technology Assessment Committee), Ministry of Health, Republic of Indonesia

Singapore



Health Services Research Unit, Changi General Hospital, Singapore Health Services (SingHealth)



Health Services Research Institute (HSRI), Duke-NUS Medical School



Saw Swee Hock School of Public Health

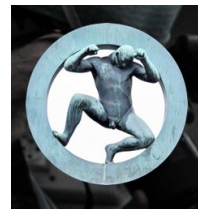


Ministry of Health, Singapore

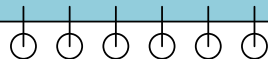


Jul - Dec 2021

HTA calendar



SHORT COURSE MODULE (SPH5422) Applied Health Econometrics for HTA



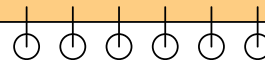
Event date: January 3-7, 2022

Place: Online

Organiser: Health Intervention and Policy Evaluation Research (HIPER)

See more: <https://hiper.nus.edu.sg/course-sph5422/>

13th International Society for Priorities in Health Conference "Fair Priorities in Unjust Circumstances - Emergencies, Universal Health Coverage and High-Cost Interventions"



Event date: April 28-30, 2022

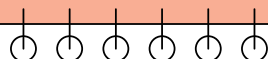
Place: Bergen, Norway or online

Organiser: Bergen Centre for Ethics and Priority Setting (BCEPS), University of Bergen with the following co-sponsors: WHO, Decide, Africa CDC, Norad, Addis Centre for Ethics and Priority Setting, and Haukeland University Hospital

See more: <https://www.isph2020addis.org/>



Africa Women's Health Day 2022 "The role of the private sector in advancing women's health in Africa"



Event date: February 24, 2022

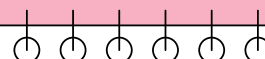
Place: Nairobi, Kenya

Organiser: Africa Health Business Symposium (AHBS)

See more: <https://www.africahealthbusiness.com/ahbs-vii/>



ISPOR 2022



Event date: May 15-18, 2022

Place: Washington, D.C., USA and Online

Organiser: The Professional Society for Health Economics and Outcomes Research (ISPOR)

See more: <https://www.ispor.org/conferences-education/conferences/upcoming-conferences/ispor-2022>



AfHEA 2022 conference



Event date: March 7-11, 2022

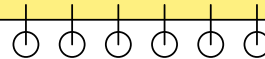
Place: Online

Organiser: African Health Economics and Policy Association (AfHEA)

See more: <https://afhea.org/en/events/news-and-updates/1/1742-afhea-2022-conference-updates>



HTAi 2022 ANNUAL MEETING "Lifecycle Approach: Coming Together to Make it Happen"



Event date: June 25 - 29, 2022

Place: Utrecht, Netherlands

Organiser: Health Technology Assessment international (HTAi)

See more: <https://htai.org/blog/2021/09/17/what-to-expect-from-the-htai-2022-annual-meeting/>