

International cooperation in enhancing EBHC

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The Context

- ◉ Quality and cost of prescribing a concern throughout Europe
- ◉ European countries have undertaken a variety of supply and demand side reforms
- ◉ Important in the future that European countries learn from each other what works and what doesn't work, and why!

Challenges and Opportunities

- Continued launch of new expensive drugs costing \$50,000 to \$100,000/ patient/ year
- Over \$100bn of existing patent drugs will lose their patents within four years
- Price of generics can vary up to 36 fold across Europe and considerable variation in the prescribing of generics

The importance of collaboration

- The pressures have led to extensive formal and informal networks across Europe for collaboration at international, national and regional levels
- Euroscan, MEDEV, EURODURG, PPRI project and PIPERSKA group

Regional collaborations

- Local evaluation and dialogue between medical specialists and other health professionals
- Development of structured introduction programmes and targeting programmes for drugs
- Resource allocation and quality assessment
- Financial incentives for optimising drug use
- Forecasting of utilization and expenditure
- Local monitoring of drug utilisation and outcomes in practice

National collaborations

- Structured introduction programmes for specialist drugs
- Financing and monitoring of orphan drugs
- National Health Technology Assessment
- Development of national guidelines/guidance for use
- Forecasting of utilization and expenditures
- Pricing and reimbursement
- Development of healthcare quality registers
- Risk sharing/rebate arrangements to limit budget impact

International collaborations

- Horizon scanning
- Minimum criteria for innovation and standards for critical drug evaluation (clinical and economic)
- Development of Pan-EU guidance on new drug use for national adaptation
- Financing, co-ordination and development of independent clinical research
- Evaluation and monitoring drug utilization of orphan drugs for rare diseases, as well as outcomes
- Development of Pan-EU registries and databases to evaluate side-effects and outcomes of new drugs in practice

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An example of international collaboration – The Piperska Alliance

- PIPERSKA Alliance formed in January 2008. An informal alliance currently involving 33 leading healthcare professionals and academics across 9 EU countries
- Mission: to develop a range of collaborative programmes to enhance the rational use of new and expensive medicines

Activities to date

- Publication, submission and ongoing development of publications – rational use of medicines, models for introducing new medicines and risk sharing arrangements
- Co-ordinating horizon scanning activities
- Courses on managing new medicines. First one July 2009 in Scotland allied to EACPT
- A range of other educational initiatives

Example 1 – Scottish course (July 2009)

- HTA and managed entry practices
- Horizon scanning activities
- Local formulary development
- Workshops around SMC submission
- Influencing behaviour
- Independent studies
- Monitoring new drugs in practice
- Development of risk sharing arrangements



PIPERSKA GROUP
Rational Prescribing

A Highly interactive 3 day workshop on the Managed Introduction of New Medicines Glasgow, UK, 2009 9 – 11 July

What the course is about.

The course is primarily intended for healthcare professionals involved with decision making for funding of new drugs and/or managing their introduction in Europe. Course presenters will be available during the three days for formal and informal discussions. There will also be a limited number of places for pharmaceutical company personnel (limited initially to one person per Company). It is being held prior to the EACPT meeting in Edinburgh for those wishing to attend both

Topics covered include:

- Principles of Pharmacovigilance, clinical pharmacology and pharmacoepidemiology
- HTA and managed entry practices in Europe
- Horizon scanning activities including forecasting and critical drug evaluation
- Local formulary and guideline development
- Overview of health economic principles and concepts
- How health economic evaluations are used by SMC (Scotland) and examples
- Selection of new expensive drugs for funding – the Polish experience
- Changing or influencing prescribing behaviour in primary and secondary care
- Prescribing and outcome monitoring
- Independent studies – initiation, funding and prioritisation
- Risk sharing arrangements



World renowned experts in their field will be conducting the course. These include:

- Professor Silvio Garattini, Dr Vittorio Bertele', Dr Roberta Joppi and Brian Godman, Milan and Verona, Italy
- Professor Lars Gustafsson and Dr Björn Wettermark, Stockholm, Sweden
- Dr Ken Paterson, Dr Andrew Walker, Dr Ailsa Brown, Dr Anne Lee, Dr Richard Clark and Dr Peter Donnan, Scottish Medicines Consortium, Scotland
- Dr Alan Haycox, Liverpool, UK
- Dr Eduardo Diogene, Barcelona, Spain
- Dr Eric van Ganse, Lyon, France
- Dr Rafal Zysk, National Health Fund, Poland
- Professor Øyvind Melien, Oslo, Norway

Course fees:

- GB£310 – people from health authorities, universities and health services
- GB£800 – people from industry

Course fees cover all lectures and workshop activities, all subsistence during the day, and a Gala Dinner at the Royal College of Physicians and Surgeons in Glasgow. The fees do not cover hotel, travel, or evening subsistence costs apart from the Gala Dinner. The venue is close to the railway station for rapid travel to Edinburgh.'

To register your interest please email godman@marionegri.it
Application forms will be sent out from January 09 onwards.

Example 1 – Scottish course (July 2009)

- Local course Director – Dr Ken Paterson
- Course fees:
 - > GB£310 – 340 for health authority personnel and academics
 - > GB£800 – 830 for industry personnel
- 55 delegates (initially 40 HA and 15 industry – one per company)
- Course Language – English. No translation
- Registration from January 09 onwards

Example 2 – Horizon Scanning

- Recent one day workshop to share knowledge of activities and experiences across Europe including problems and successes
- Developing future collaborative practices including prioritisation criteria for drug selection, critical drug evaluation and forecasting
- Enhance activities in Regions and countries where interested
- Apply for EU funding to further develop and refine models and activities

Conclusion

- ⦿ We are all facing similar problems
- ⦿ We all share similar aims and objectives
- ⦿ Sharing our expertise and experience is the best way of overcoming our problems and achieving our aims