

Role Of Cochrane Systematic Reviews In Health Technology Assessment In Argentina



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Background

- Health Technology Assessment (HTA) is 'a multidisciplinary field of policy analysis that studies the medical, social, ethical, and economic implications of the development, diffusion and use of a health technology' (INAHTA, 2000)
- HTA has been increasingly considered for decisions in health care policy in developed countries.
- Little is known about its use in Latin America.
- Organisations undertaking HTAs: NHS QIS, NICE, INAHTA

Latin-american sites:

Evidence-based Medicine Unit of the Pontificia Universidad Católica de Chile

EBM Colombia

ASCOFAME (Colombian Associaton of Medical Faculties)

Institute for Clinical Effectiveness and Health Policy



Background UTO DE EFECTIVIDAD CLÍNICA Y SANITARIA

- The Institute for Clinical Effectiveness and Health Policy (IECS) is an independent, non-profit organization devoted to education and research which acts as an HTA Agency since 2000 and holds the Master of Clinical Effectiveness (University of Buenos Aires).
- It provides HTA reports to the Ministry of Health and public institutions as well as the social security and the private system, which cover 60% of the Argentinean population.
- *The IECS evaluated 193 technologies from the mandatory package of services (PMO) of the social security. This led to the inclusion of 89, exclusion of 11, and to a coverage limitation of 67 technologies.



Objective

*To describe the utility of Cochrane Systematic Reviews (SR) in the production of HTA documents by a weighty HTA agency in Argentina.

Methods:

❖ All HTA documents produced since 2003 were assessed and its authors surveyed.



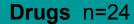
Results: IECS reports 2003-2005

From the 67 HTA reports undertaken,

- 59% were Rapid Response Documents (descriptive literature reviews mainly based on secondary sources);
- 36% were Brief Technical Documents (more comprehensive reports based on a literature search and a critical review of the evidence); and
- 5% were complete HTA documents that included analysis of local data with cost-effectiveness evaluation.



Results: IECS reports 2003-2005



Ximelagatran

Immunoglobulin in Recurrent

Abortion

Drotrecogin Alfa

LMW Heparins

Growth Hormones

Imatinib

Glargine Insulin

Interferon

Naltrexone

Caspofungina

Botulinic Toxine

Bevacizumab

Capecitabina

Intervention Procedures n=32

Radiofrequency ablation of arrhythmias Insulin bomb

Braquitherapy / Cerebral Stimulation

IAC y IVC closing by Amplatzer

Laparoscopic surgery/ Vertebroplasty

Epilepsy and obesity surgeries

Implantable Cardio Defibrillators

Coclear Implant / Shock wave

Preservation of cord cells

Endovascular prosthesis / Cardiac

Resynchronisation

Antiretroviral resistance tests

Radiotherapy 3D

Carotid Stents

Photodynamic Therapy & Transpupilar Thermal

67
HTA
documents

Intervent
ion; 48%

Dx Technologies n=11

Prenatal Dx

Confocal Oftalmoscopy

PET

Drugs;

36%

Cerebral Mapping

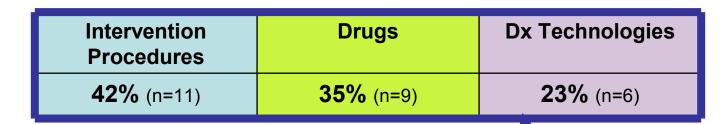
Angioresonance

Acoustics otoemissions

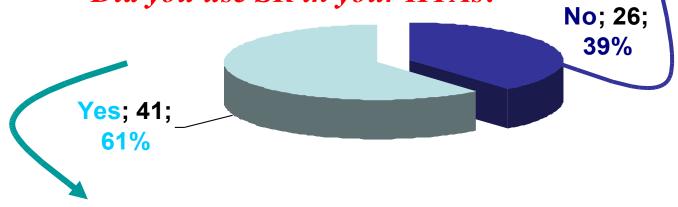


Dx Tech

Utilisation of SR in HTAs





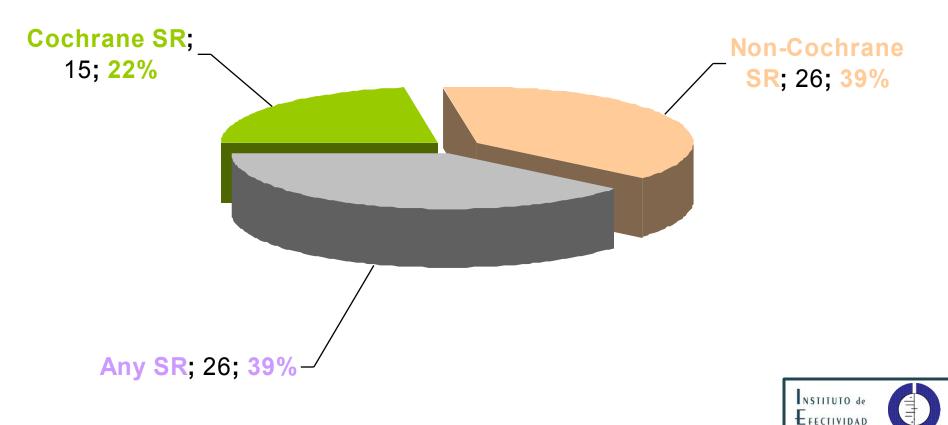


Intervention Procedures	Drugs	Dx Technologies
51% (n=21) ↑	37% (n=15)	12% (n=5) ↓↓



Utilisation of Cochrane SR [CSR], in HTAs

Did you use CSR in your HTAs?



Cochrane vs non-Cochrane SR (by type)

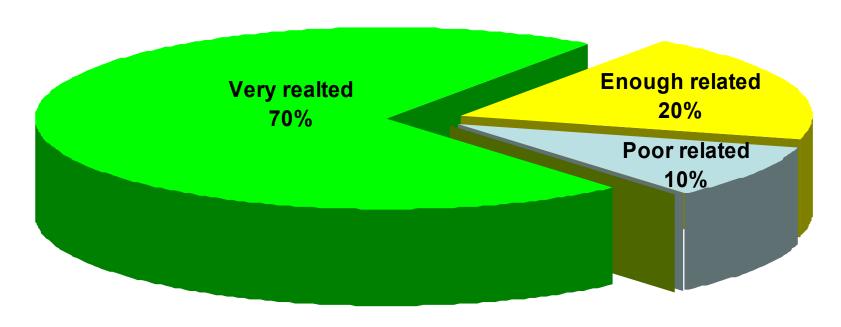
Did you use SR in your HTAs?

	Interventions (n=32)	Drugs (n=24)	Dx (n=11)
Total	66 % (n=21)	63 % (n=15)	45 % (n=5)
Non-Cochrane SR	44 % (n=14)	38% (n=9)	27% (n=3)
Cochrane SR	22 % (n=7)	25% (n=6)	18% (n=2)
Non-Cochrane SR Cochrane SR	2	1.5	1.5



Relationship between the question of the HTA and the SR

How much related was the the question of the HTA and the SR used?



Not related at all 0%



Relationship between the question of the HTA and the SR: Cochrane vs non-Cochrane SR

How much related was the the question of the HTA and the SR used?

	Very related	Enough related	Poor related	р
TOTAL	71%	19%	10%	-
Cochrane	80%	20%	0%	0.072
Non Cochrane	65%	19%	16%	0.273

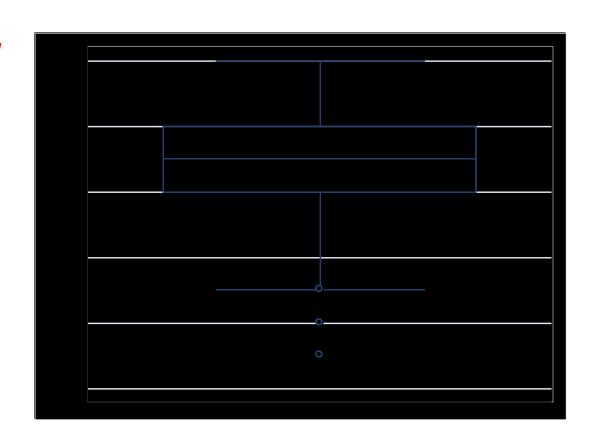


Contribution to answer the HTA's question

How much contributed the SR to answer the HTA's question?

67±22%

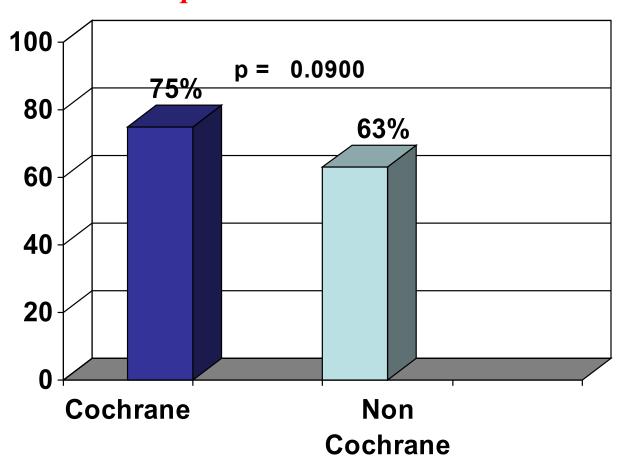
Range 10% - 100% Median 70%





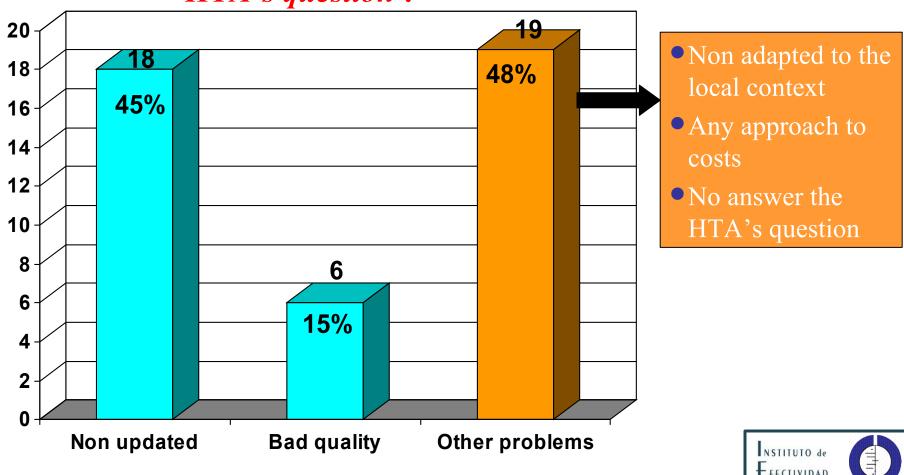
Contribution to answer the HTA's question: Cochrane vs non-Cochrane SR

How much contributed the SR to answer the HTA's question?



Problems of the SR to answer the HTA's question

Which problems of the SR did you find to answer the HTA's question?



CLÍNICA Y SANITARIA

Problems of the SR to answer the HTA's question: Cochrane vs non-Cochrane SR

Which problems of the SR did you find to answer the HTA's question?

Non updated

Bad Quality

Other problems

	Cochrane	non-Cochrane	р
I	50%	42%	0.64
,	7%	19%	0.30
;	28%	58%	0.08



Main results summary

Variables	All SR (n=41)	CSR (n=15)	NCSR (n=26)
Utilisation of SR in HTA (n=67)	61%	22%	39%
Question of the HTA much related to SR	71 %	80%	65%

45%

15%

Mean contribution to $67 \pm 22\%$ answer the HTA's question

42%

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 $63 \pm 22\%$

19%

 $75 \pm 21\%$

50%

7%



Considered Non-updated

Considered of bad quality

SR

SR

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Conclusions

- Cochrane Systematic Reviews are used in a low proportion of emerging HTA in Argentina.
- Other sources provide more timely answers.
- Cochrane Reviews more frequently contributed to answering questions, and were considered of better quality than non-Cochrane Reviews, but cover a smaller proportion HTAs.







Tank you very much H



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