



Centre For Health Economics

# Health Economics News

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www.york.ac.uk/che

## Welcome to the CHE Newsletter

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THE QUEEN'S  
ANNIVERSARY PRIZES  
FOR HIGHER AND FURTHER EDUCATION

2007



## Schooling and later life health

By Andrew Jones, Nigel Rice & Pedro Rosa Dias

The major comprehensive education reform implemented in England and Wales from the mid-1960s was aimed at reducing inequality of opportunity in outcomes. By exploiting variation in the timing of implementation of the reform across the country, this research evaluates the impact of educational attainment and type of schooling on health and health-related behaviours later in life.

Overall our findings corroborate the positive association between educational attainment and beneficial health-related behaviours (eg. not smoking, not smoking in pregnancy, and the consumption of healthy foods)

and a negative relationship to mental ill-health in adulthood but no association to physical health. There appears, however, to be important differences in these effects across individuals who attended different types of schools.

The results suggest that at higher levels of education the benefits of positive health-related behaviours on later life health outcomes are less than those observed at lower levels of education. Further, quality of schooling appears to play an important role in the relationship between educational attainment and health outcomes in later life. [www](#)

## Financial integration across health and social care: evidence review



By Helen Weatherly, Anne Mason, Kath Wright (CRD) & Maria Goddard

Scotland has developed an Integrated Resource Framework (IRF) to shift the investment away from the acute sector and towards health improvement and prevention. IRFs are to be piloted at five sites in Scotland. To inform the evaluation of these pilots, the Scottish Government commissioned CHE to review the international literature on integrated resource mechanisms (IRMs).

IRMs vary enormously in both their scope and structure. Evidence for an impact on health outcomes is sparse, provides mixed messages and its validity is often questionable. Evidence that IRMs can deliver cost savings is weak.

Key challenges to evaluating the Scottish IRF pilots include the problem of attribution, determining adequate timescales to measure longer term impacts, and appropriately assessing effects, costs and unintended consequences across the different IRF models.

Summary Report [www](#) Full Report [www](#)

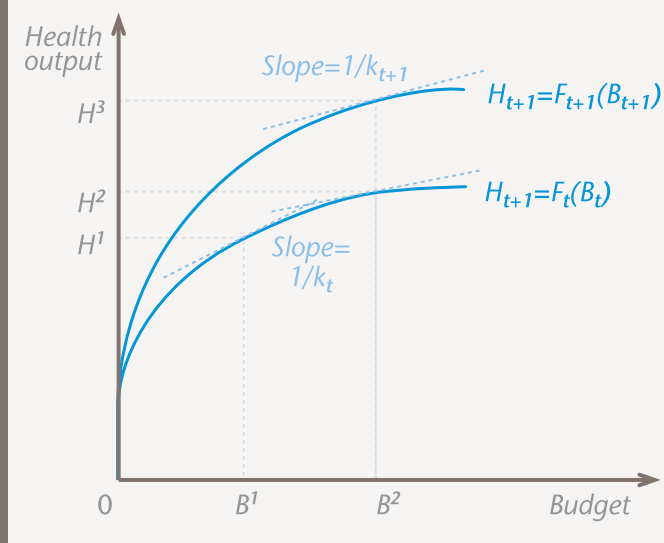
# Improving the empirical basis for the NICE cost-effectiveness threshold

Mark Sculpher

Cost-effectiveness analysis used by NICE is essentially an assessment of whether the health expected to be gained from the use of a new medical technology exceeds the health likely to be forgone as other NHS activities are displaced to accommodate the additional costs of the new technology.

The cost-effectiveness threshold represents an estimate of the health forgone as services are displaced. Currently the threshold used by NICE has little empirical basis. The aim of this new research project is to develop and to demonstrate methods for threshold estimation which make best use of routinely available NHS data, allowing scrutiny by a range of stakeholders, improving accountability and predictability. This research will focus on complementary methods which can make best use of those data that are already available, where there are already plans to make data available or where additional data could feasibly be made available at reasonable cost.

Figure 1. Health production and the threshold



See 'New projects' on page three for further project details.

## Health Economists' Study Group (HESG) 2011 Winter Conference

Hosted by the Centre for Health Economics

CHE is pleased to announce registration for the 2011 HESG winter conference is now open. The conference will be held at the Best Western Monkbar Hotel in York from 5-7 January 2011.

There are two HESG meetings per year attracting 100-125 participants with approximately 36 papers presented and discussed over the 3 days of the conference. The format of the conference is that accepted papers are made available on-line pre-conference for discussion in hour-long sessions, which consist of a 20 minute presentation from an independent discussant and an opportunity for the authors to clarify any points before the discussion is open to the audience. The range of papers selected reflects the current balance of work, the largest categories typically being economic evaluation, health outcome measurement and the finance and organisation of health care.

Important deadline dates:

Submission of abstracts: 8 October 2010

Early registration: 12 November 2010

Submission of (selected) conference papers:

19 November 2010

For full details go to [www](http://www.chec.ac.uk)



## Terminology matters

Mike Drummond

That was the conclusion reached by an International Working Group for Health Technology Assessment Advancement which included Michael Drummond from CHE.

The group considered terms commonly used by health care and policy experts across the world – in particular, 'Evidence Based Medicine', 'Health Technology Assessment' and 'Comparative Effectiveness Research' – and concluded that despite important differences they are often used interchangeably, causing miscommunication, confusion and poor decision-making. This is important from the perspective of those involved in producing key policies such as clinical guidelines and reimbursement decisions. The authors used three key questions to disentangle terminology: "Can it work?" (efficacy), "Does it work?" (effectiveness), and "Is it worth it?" (economic value) and they provide their preferred definitions for future use.

For more details go to [www](http://www.who.int)

# Analysing patient data using hospital episode statistics

Workshop 2-3 November 2010

This intensive workshop introduces participants to Hospital Episode Statistics (HES) data and how to handle and

manipulate these very large data sets using STATA computer software. Participants will engage in problem-solving exercises, analysing the information in highly interactive sessions.

This workshop is only offered to people working in the public sector or academia and is suitable for analysts working in NHS hospitals, commissioning organisations and the Department of Health, and for health care researchers and PhD students.

For full details on the course objectives, prerequisites, fees and registration see the website: [www.che.ac.uk](http://www.che.ac.uk)

## Staff news

**Mark Sculpher** has been elected President of the International Society of Pharmaco-economics and Outcomes Research (ISPOR). ISPOR is a non-profit, international, educational and scientific organization promoting the science of pharmacoeco-nomics and health outcomes research. The Society has over 5000 members and is organized to act as a scientific leader relevant to research in pharmacoecconomics, health outcomes assessment, and related issues of public policy.



Above left: Mark Sculpher  
Above right: Bernard van den Berg

## New staff

**Bernard van den Berg** took up his appointment as Reader in June. Bernard joins us from the VU University

Amsterdam. Further details on his research interests can be found at [www.che.ac.uk](http://www.che.ac.uk)

## New projects

**Karl Claxton** with University of Bristol. Expected value of information and synthesis methods for research prioritisation and study design. Sponsored by the MRC.

**Mark Sculpher, Nigel Rice and Karl Claxton** with Steve Martin, Peter Smith and Nancy Devlin. Methods to estimate the NICE cost-effectiveness threshold. Sponsored by the MRC.

## Conference, seminar and workshop presentations

**Maria Goddard** participated in the European Working Conference on Health Services Research in Europe held in The Hague, The Netherlands in April, contributing on the challenges of policy evaluation.

**Andrew Street** gave a presentation to the British Medical Association about NHS Productivity.

**Michael Drummond** gave a Keynote Presentation at the 5th International Conference of the Royal Jordanian Medical Service.

**Mark Sculpher** presented a paper entitled 'Age Weighting and the QALY' at a conference at University College London on NICE, Age Discrimination, and Life Saving Treatments.

**Michael Drummond and Andrea Manca** each gave a talk in an organised workshop entitled 'Challenges in designing, conducting and analysing multinational economic clinical trials' at the 15th Annual International Meeting of the International Society for Pharmacoecconomics and Outcomes Research in Atlanta, USA.

## Forthcoming seminars

Anne Ludbrook, Katherine Payne and Stavros Petrou will be giving seminars at CHE. For further details see [www.che.ac.uk](http://www.che.ac.uk)

## CHE Publications January – June 2010

**Bojke L, Claxton K, Sculpher M, Abrams K, Palmer S.** Eliciting distributions to populate decision analytic models. *Value in Health* 2010;10.1111/j.1524-4733.2010.00709.earlyview.

**Bojke C, Philips Z, Sculpher M, Campion P, Chrystyn H, Coulton S, Cross B, Morton V, Richmond S, Farrin AJ, Hill G, Hilton A, Miles J, Russell I, Chi Kei Wong I.** Cost-effectiveness of shared pharmaceutical care for older patients: RESPECT trial findings. *British Journal of General Practice*. 2010;60(570):21-27.

**Campbell JD, Spackman DE.** The costs and consequences of Omalizumab in uncontrolled Asthma from a USA payer perspective. *Allergy* 2010;DOI: 10.1111/j.1398-9995.2010.02336.x.

**Claxton K, Paulden M, Gravelle H, Brouwer W, Culyer AJ.** Discounting and decision rules in the economic evaluation of health care technologies. *Health Economics* 2010;DOI:10.1002/hec.1612.

**Cookson R, Culyer AJ.** Measuring overall population health - the use and abuse of QALYs. In: Killoran A, Kelly M, editors. *Evidence based public health: effectiveness and efficiency*. Oxford: Oxford University Press; 2010. p. 148-68.

**Elliot RA, Weatherly HLA, Hawkins NS, Cranny G, Chambers D, Myers L, Eastwood A, Sculpher MJ.** An economic model for the prevention of MRSA infections after surgery: non-glycopeptide or glycopeptide antibiotic prophylaxis? *European Journal of Health Economics* 2010;11(1):57-66.

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