Cross-border Shopping for Innovation: The EPC Model

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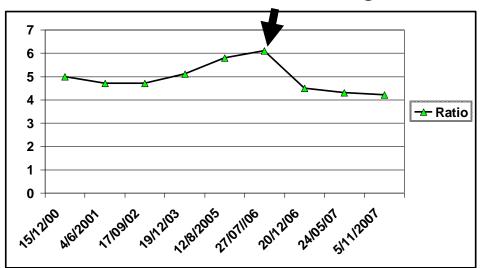






Total cholesterol/HDL Ratio

Running







Evidence and Decision Making

Reduced disability and mortality among aging runners (Arch Intern Med 2008;168:1638-1646)





How to take American health care from worst to first

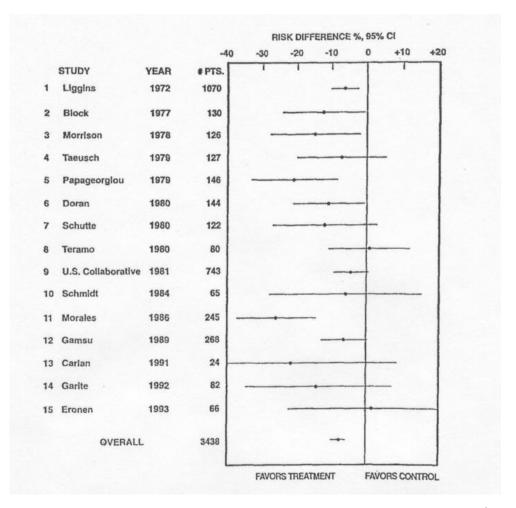
- Billy Beane, Newt Gingrich and John Kerry
- New York Yankees, Detroit Tigers and New York Mets (494 million payroll)
- Tampa Bay Rays, second lowest payroll in baseball (44 million)

New York Times, Oct. 24, 2008





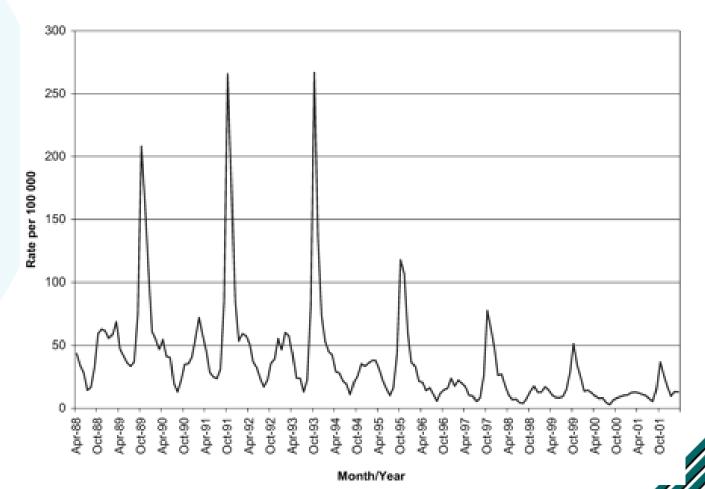








Croup Hospitalizations, Ontario 1988-2001





ARCHE

- Initiated in 2000 by an establishment grant AHFMR
- Cochrane Collaboration
- University of Alberta/Capital Health Evidence-based Practice Center -→UA/AHS EPC





Scope

- CADTH Emergency overcrowding
- Health Canada Volume-outcome relationships in pediatric care
- ACCFCR Crystal Meth and Behavioral interventions for autism
- CIHR Evidence synthesis and practice guidelines for bronchiolitis





Center benefits

- Generated \$8 million in funding
- Employs Albertans and generates intellectual capital here in the province





The Evidence-based Practice Center Program

- U.S. Agency for Healthcare Research and Quality
- Mandate:
 - review all relevant scientific literature on clinical, behavioral, and organization and financing topics to produce evidence reports and technology assessments;
 - reports are used for informing and developing coverage decisions, quality measures, educational materials and tools, guidelines, and research agendas;
 - conduct research on methodology of systematic reviews.





The Evidence-based Practice Center Program

- 5 year contracts
- 14 centers in North America
- Arms-length, objective entities
- Conflicts of interest declared





The Evidence-based Practice Center Program

- Formal topic nomination process
 - External organizations and partners
 - E.g., Medicare/Medicaid Services, Office of Medical Applications of Research, US Preventive Services Task Force, professional organizations
 - Transparent
 - Opportunity for external input, including public comment
 - EPCs involved in refining key questions



University of Alberta Evidencebased Practice Center

- Inception in 2002
- 20 staff with multidisciplinary expertise:
 - Epidemiology, statistics, information sciences, basic and medical sciences
- Collaborators and partners across U of A and beyond



Examples from the U of A EPC





Diagnosis and Management of Occupational Asthma

Key questions:

- Optimal diagnostic approach
- Effectiveness of alternative management and therapeutic options





Diagnosis and Management of Occupational Asthma

Topic nominator:

American College of Chest Physicians

Funding:

- US\$288,204

■ Impact:

 American College of Chest Physicians Consensus Statement: Chest. 2008 Sep;134(3 Suppl):1S-41S.





Secondary Prevention Programs for Patients with Coronary Artery Disease

Key questions:

- Do secondary prevention programs for patients with CAD improve health outcomes?
- What program-related factors influence effectiveness?





Secondary Prevention Programs for Patients with Coronary Artery Disease

■ Topic nominator:

Centers for Medicare and Medicaid Services

Funding:

- US\$70,000

■ Impact:

- Report to guide CMS in coverage decisions





Secondary Prevention Programs for Patients with Coronary Artery Disease

■ Impact:

- Jan 2005: meeting of the Medicare
 Coverage Advisory Committee
- The Centers for Medicare and Medicaid Services (CMS) determines that cardiac rehabilitation is reasonable and necessary for specific indications.





Positron Emission Tomography for Nine Cancers

Key questions:

- 18FDG-PET and 18FDG-PET/CT
 - diagnostic test performance
 - diagnostic thinking impact
 - as part of a management strategy
 - Cost-effectiveness





Positron Emission Tomography for Nine Cancers

■ Topic nominators:

Centers for Medicare and Medicaid Services

Funding:

- US\$226,590

■ Impact:

 Report used to guide decisions regarding reimbursement for 18FDG-PET scans





Positron Emission Tomography for Nine Cancers

Excerpts from news release (Aug 20, 2008): US panel questions wider use of PET scans in cancer

- -Medicare recently commissioned a separate analysis that found the quality of available studies on PET's use in cancer patients was poor to moderate.
- -Some panelists said it was hard to reconcile that finding with the industry's conclusion from the registry data.
- -"I don't see how you make the leap," said panel member and consumer representative Linda Bergthold "The quality of the data ... was really stunningly poor."
- -Medicare is expected to make a draft decision in January before making its final ruling in April.





Summary

- From evidence to decision-making:
 - Clinical practice guidelines
 - Network analysis
 - Identification of uncertainties
 - Directions for future research
 - Coverage decisions



