

Erasmus School of  
Health Policy  
& Management

# Implications of ICH E20 for health technology assessment

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# HTA bodies and regulators...

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...make different decisions

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...have different preferences  
about clinical trial design

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...use evidence from clinical trials  
in different ways

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# HTA bodies and regulators make different decisions and have different evidence needs

## **HTA bodies ask:**

- What is the additional benefit of the new technology compared to the local standard of care on patient centered outcomes among patients eligible for treatment in routine care?
- Some ask: Do the additional benefits justify the additional cost (ie cost effectiveness)

## **They need evidence on:**

- Size of treatment effect
- Against local standard of care
- In decision relevant population
- Patient centered outcomes (survival, QoL, clinical events)
- Long-term outcomes (ideally patient lifetime for CEA)

A stylized, handwritten-style logo for Erasmus, featuring a large, flowing 'E' followed by the word 'Erasmus' in a cursive script.

# HTA bodies and regulators have different preferences about clinical trial design

Component	HTA preference	Adaptive trial impacts
Outcomes	Clinical events, overall survival, quality of life, (resource use/costs)	Lower quality evidence – role of secondary outcomes in adaptive trial design?
Outcome (effect)	Size of treatment effect for added benefit analysis; mean effect has dominant role in CEA	Potentially increase uncertainty.
Follow-up	Long-enough to observe all differences or reliable extrapolate	Potentially shorter follow-up; more extrapolation
Population, Intervention, Comparator (PIC)	PIC elements known in advance and relevant to local setting: eligible population, local standard of care	Changes to PIC elements during trial; challenges to relevance and process

A handwritten signature in black ink, appearing to read 'T. Zafar'.

HTA bodies and regulators use evidence from clinical trials in different ways

Evidence  
synthesis

Economic  
modelling

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# Evidence synthesis

## HTA principles

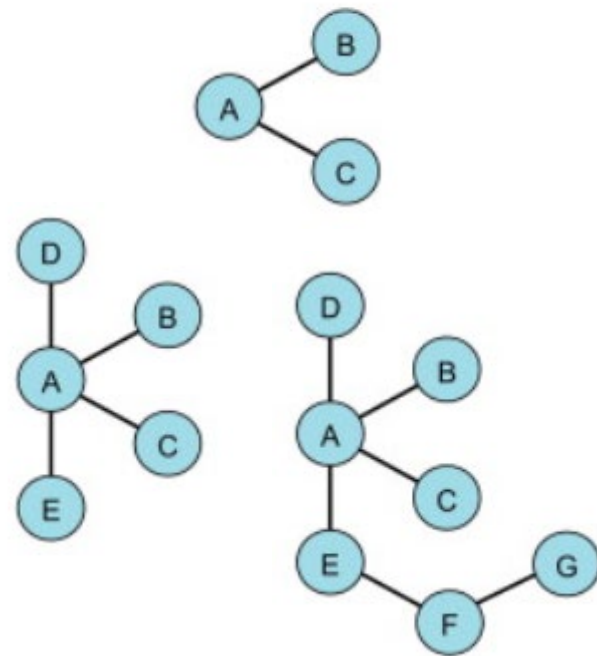
- Compare the new technology against local standard of care or best practice
- Consider all available evidence

## Methods

- Use (network) meta-analysis and indirect treatment comparisons
- Relies on assumptions about similarity of trials

## Potential impacts of adaptive trials

- Different populations
- Differences in interventions
- Varying data maturity levels (follow-up duration, events)



Jansen et al. 2011

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# Economic modelling

## HTA principles

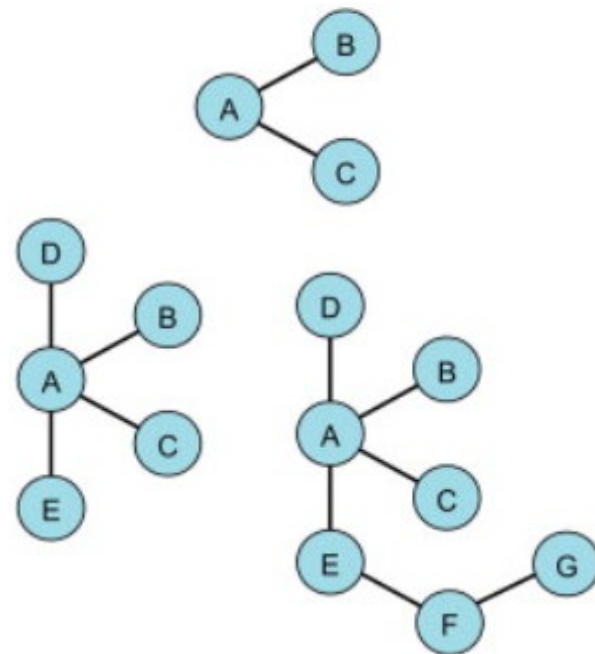
- Compare all differences in costs and effects during period in which incurred, usually over the patient lifetime

## Methods

- Parametric time-to-event modelling
- Modelling surrogacy relationships

## Potential impacts of adaptive trials

- Less mature data on relevant modelling endpoints
- Shorter follow-up -> greater need for extrapolation beyond trial -> major driver of uncertainty in health economic models
- Less precise estimates of treatment effects -> risks due to emphasis on mean cost-effectiveness



Jansen et al. 2011

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