

How to assess the value of innovative medical technologies?

- Experiences with MAST from P@H

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MAST – Model for Assessment of Telemedicine

STEP 1:

Preceding assessment:

- Is the technology and the organization matured?

STEP 2:

Multidisciplinary assessment (domains):

1. Health problem and characteristics of the application
2. Safety
3. Clinical effectiveness
4. Patient perspectives
5. Economic aspects
6. Organisational aspects
7. Socio-cultural, ethical and legal aspects

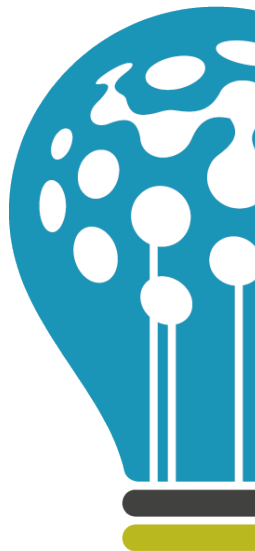
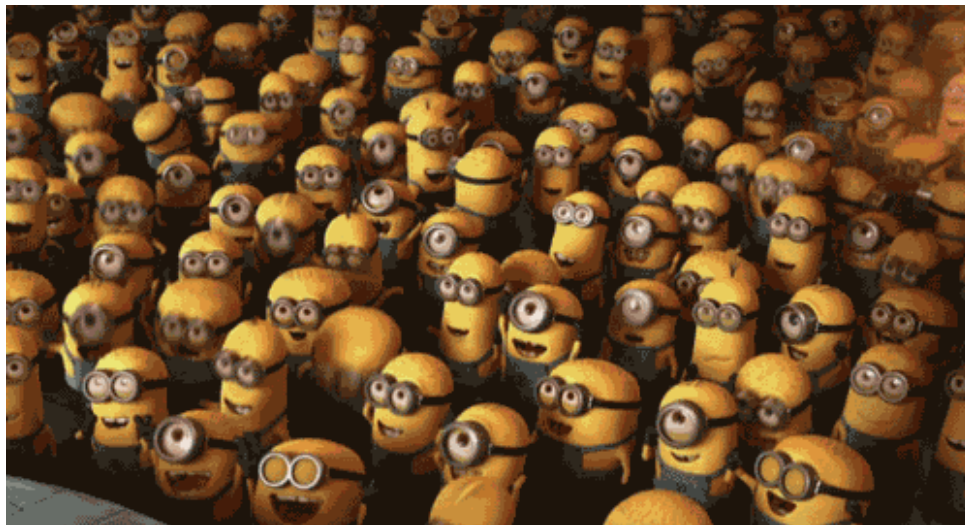
STEP 3:

Transferability assessment

2

What has been our experiences?

1. Several usable methods in the preceding assessment!
2. Be aware of the costs of the intervention!
3. Be aware of pro and cons of your design when assessing effects!
4. MAST is usable and has face validity!



1. Usable methods in the preceding assessment!

Involvement of patients and professions is needed to ensure maturity

Methods:

Clemensen et al. (2017)
Participatory design methods in telemedicine research.

1. Participatory design - participation of users in the design process

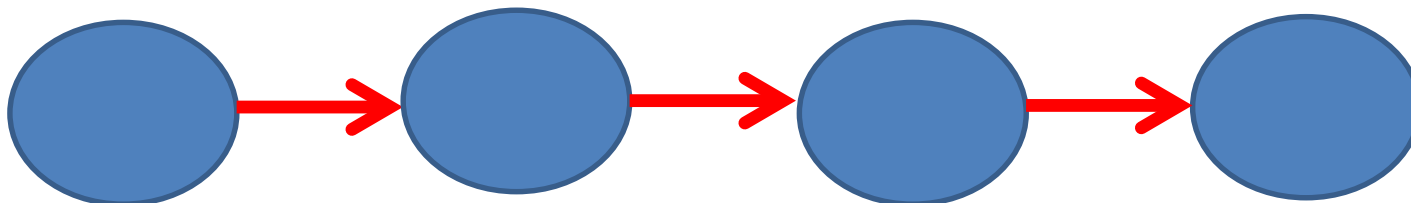
- Patient interviews, observation studies, fokus groups interviews.....

2. Optimization studies – isolate effective elements in complex interventions

- Questionnaire or interview studies

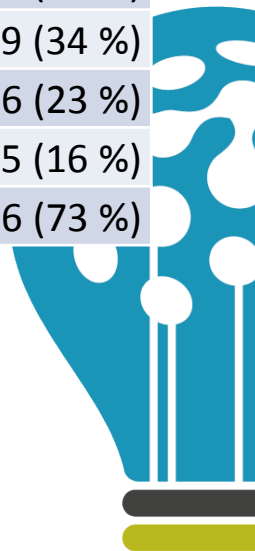
Schmidt et al. (2017)
ACQUIRE-HF feasibility study

3. Pilot studies – test of the study procedures



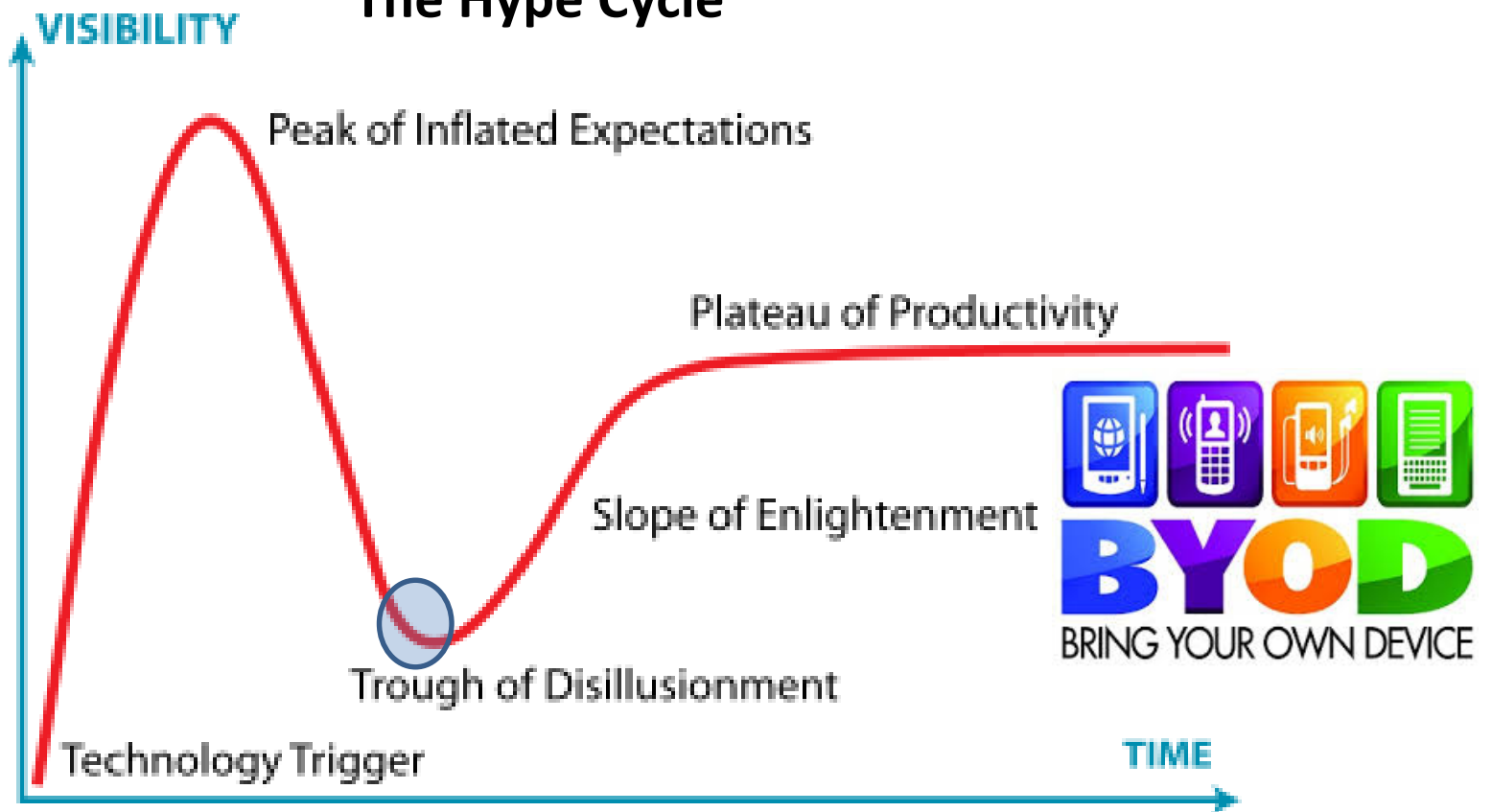
2. Be aware of the costs of the intervention!

| First author | Mean cost per telemedicine patient, € | Mean cost per control patient, € | Difference | Home monitoring programme costs per patient | Home monitoring equipment costs |
|---------------|---------------------------------------|----------------------------------|------------|---|---------------------------------|
| De San Miguel | 12,706 | 15,471 | -2,765 | 3,323 | 1,277 (38 %) |
| Jódar-Sánchez | 2,304 | 1,105 | 1,199 | 237 | 104 (44 %) |
| Stoddart | 14,486 | 11,768 | 2,718 | 570 | 365 (64 %) |
| Udsen | 8,793 | 7,251 | 1,542 | 705 | 335 (48 %) |
| Henderson* | 8,037 | 7,015 | 1,042 | 1,852 | 848 (46 %) |
| Fasterholdt | 12,641 | 14,724 | -2,086 | 586 | 199 (34 %) |
| Stoddart* | 363 | 225 | *138 | 71 | 16 (23 %) |
| Cui | 5,062 | 5,735 | -681 | 1,686 | 275 (16 %) |
| Ryan * | 441 | 344 | *98 | 131 | 96 (73 %) |





The Hype Cycle



3. Be aware of pro and cons of your design!

Cohort study

Patients after implementation

Observational study

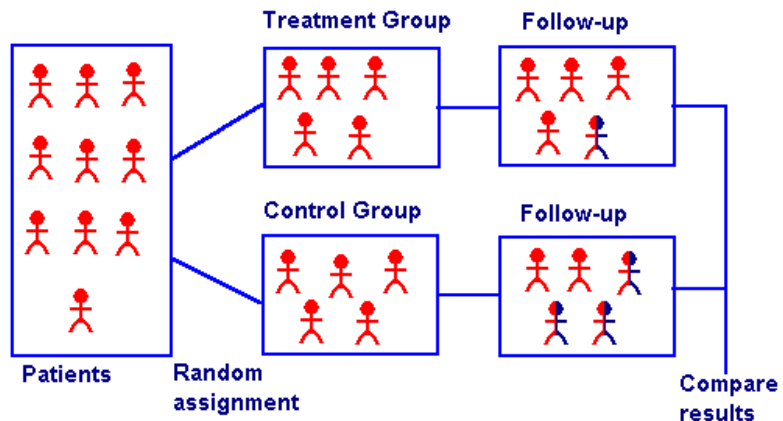
Patients before implementation

Patients after implementation



TIME

Randomised controlled trial



3. Be aware of pro and cons of your design!

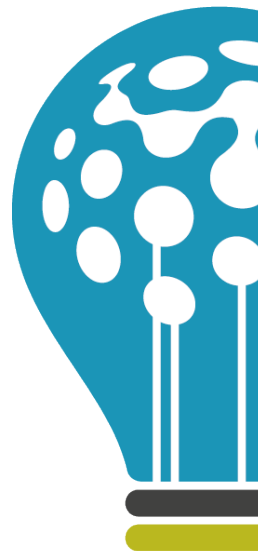
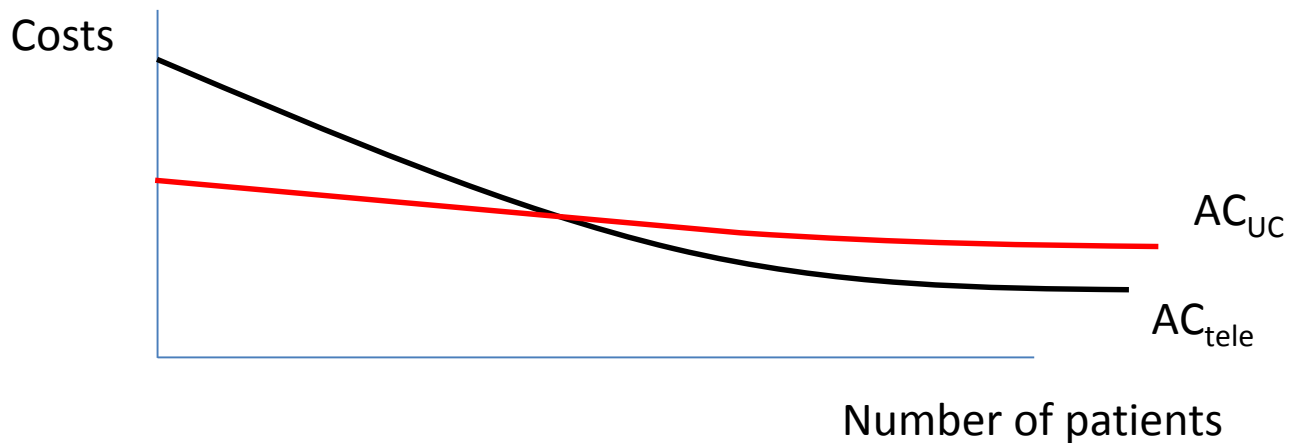
Special features of eHealth interventions:

1. Learning curve

If adoption, user education, experience is expected to change over time.
Methods: Long term studies, modelling, observational studies

2. Organisational change

If substantial reorganisation of healthcare is needed.
Methods: Identify need for change, cluster Randomisation



4. MAST is usable and has face validity!

Published studies using MAST: 21
Publications referring to MAST: 158

- Delphi process, March 2016
- 19 European health care managers

Result:

- +80% consider the seven domains moderately or highly important

Rojahn et (2016):

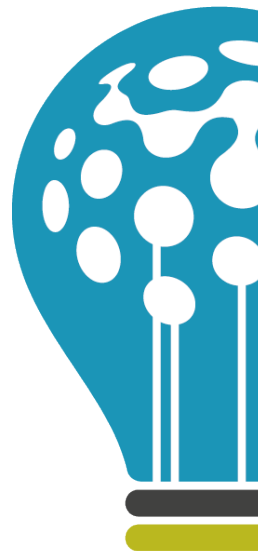
- Clinical criteria:
 - Clinical effectiveness
 - Safety
 - Patient compliance
- Health economic criteria
- Evidence on patient satisfaction

Table 2. Response to questions about importance of domains and topics in the Delphi process.

| Domains and topics | Results from first round | | | Results from second round | | |
|--|--------------------------|-------|---|---------------------------|-------|---|
| | Median | Range | Proportion answering 'moderately important' or 'highly important' | Median | Range | Proportion answering 'moderately important' or 'highly important' |
| Domain 1: Health problem and description of the application | 3 | 2-3 | 100% | 3 | 2-3 | 100% |
| Health problem of the patients | 3 | 1-3 | 95% | 3 | 2-3 | 100% |
| Description of the application | 3 | 1-3 | 95% | 3 | 2-3 | 100% |
| Technical characteristics | 3 | 0-3 | 84% | 2 | 1-3 | 89% |
| Domain 2: Safety | 3 | 2-3 | 100% | 3 | 2-3 | 100% |
| Clinical safety | 3 | 3-3 | 100% | 3 | 3-3 | 100% |
| Technical safety | 3 | 2-3 | 100% | 3 | 2-3 | 100% |
| Domain 3: Clinical effectiveness | 3 | 1-3 | 95% | 3 | 2-3 | 100% |
| Effects on morbidity | 3 | 2-3 | 100% | 3 | 2-3 | 100% |
| Effects on mortality | 3 | 2-3 | 100% | 3 | 2-3 | 100% |
| Effects on quality of life | 2 | 1-3 | 68% | 2 | 1-3 | 84% |
| Behavioural outcomes | 2 | 1-3 | 84% | 2 | 1-3 | 85% |
| Use of health service | 3 | 2-3 | 100% | 3 | 2-3 | 100% |
| Domain 4: Patient perspectives | 3 | 2-3 | 100% | 3 | 2-3 | 100% |
| Patient satisfaction | 3 | 1-3 | 95% | 3 | 2-3 | 100% |
| Patients understanding of information | 3 | 1-3 | 89% | 3 | 2-3 | 100% |
| Patient acceptance | 3 | 1-3 | 95% | 3 | 2-3 | 100% |
| Patients confidence in the telemedicine treatment | 2 | 1-3 | 84% | 2 | 2-3 | 100% |
| Patients ability to use the application | 3 | 2-3 | 100% | 3 | 2-3 | 100% |
| Patients access and accessibility | 2 | 1-3 | 95% | 3 | 2-3 | 100% |
| Patients empowerment and self-efficacy | 2 | 1-3 | 84% | 2 | 2-3 | 100% |
| Domain 5: Economic aspects | 3 | 2-3 | 100% | 3 | 2-3 | 100% |
| Societal economic evaluation | 2 | 0-3 | 95% | 2 | 2-3 | 100% |
| Business case | 2 | 1-3 | 84% | 2 | 1-3 | 95% |
| Domain 6: Organisational aspects | 2 | 2-3 | 100% | 3 | 2-3 | 100% |
| Consequences for the process | 2 | 2-3 | 100% | 3 | 2-3 | 100% |
| Consequences for the structure | 2 | 1-3 | 84% | 2 | 2-3 | 100% |
| Consequences for the culture | 2 | 1-3 | 89% | 2 | 2-3 | 100% |
| Consequences for the management | 2 | 0-3 | 79% | 2 | 1-3 | 95% |
| Domain 7: Socio-cultural, ethics, legal aspects | 2 | 0-3 | 89% | 3 | 2-3 | 100% |
| Ethical issues | 2 | 0-3 | 84% | 2 | 2-3 | 100% |
| Legal issues | 3 | 0-3 | 84% | 3 | 0-3 | 95% |
| Social issues | 2 | 0-3 | 79% | 2 | 1-3 | 95% |
| Transferability of the described results to your local setting | 3 | 1-3 | 95% | 3 | 2-3 | 100% |
| Transferability of safety | 3 | 1-3 | 95% | 3 | 2-3 | 100% |
| Transferability of clinical effectiveness | 3 | 2-3 | 100% | 3 | 2-3 | 100% |
| Transferability of patient perspectives | 2 | 2-3 | 100% | 3 | 2-3 | 100% |
| Transferability of economic aspects | 3 | 0-3 | 89% | 2 | 1-3 | 95% |
| Transferability of organisational aspects | 2 | 2-3 | 100% | 3 | 2-3 | 100% |
| Transferability of socio-cultural, ethical, legal aspects | 2 | 0-3 | 89% | 2 | 2-3 | 100% |

Conclusion

1. Assessment of value of medical innovative technologies is needed
2. MAST is used as a framework for assessment in P@H
3. Widely used - 158 publications refer to MAST (google scholar)
4. Experiences:
 - PD, optimization studies, pilots are useable to ensure maturity
 - Be aware of high costs of the intervention
 - Use the right design
 - Face validity of MAST has been demonstrated



Questions?

