

Multiple Criteria Decision Analysis for Health Care Decision Making: An Interview with Praveen Thokala, PhD

on behalf of the ISPOR Multiple Criteria Decision Analysis Task Force



Value & Outcomes Spotlight spoke with lead author, Praveen Thokala, PhD, to discuss the implications and application of ISPOR's new task force report on MCDA which appears in the January/February 2016 issue of *Value in Health*. We present highlights from our conversation with Dr. Thokala in this brief Q&A.

Thokala P, Devlin N, Marsh K, et al. Multiple Criteria Decision Analysis for Health Care Decision Making—An Introduction: Report 1 of the ISPOR MCDA Emerging Good Practices Task Force. Value Health 2016;19:1-13.

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Value & Outcomes Spotlight: Why is MCDA important to the scientific community and decision makers?



Praveen Thokala: Health care decisions are complex and involve confronting trade-offs between multiple, often conflicting, objectives. Decision makers, whether they are individuals or committees, have difficulty processing and systematically evaluating relevant information. MCDA techniques provide clarity on which criteria are relevant, the importance attached to each, and how to use this information in a framework for assessing the available alternatives. MCDA can help improve transparency and consistency in decisions—and potentially, the accountability of public sector decision makers.

VOS: What kinds of problems will researchers and decision makers be able to answer?

Thokala: MCDA can support a diverse range of decision problems and similarly diverse decision makers/organisations. Examples of the types of health care decisions that can be supported include benefit-risk assessment, health technology assessment, portfolio decision analysis, commissioning decisions/priority-setting frameworks, shared decisionmaking, prioritising patients' access to health care, developing disease classifications, and hospital purchasing.

VOS: Why was this task force a priority for ISPOR to undertake?

Thokala: Recently, there has been a sharp increase in the use of MCDA in health care, however, there is a dearth of practical guidance. The challenge is that there are many different MCDA methods available. They differ not just in how MCDA is put into practice, but also in terms of the fundamental theories and beliefs underpinning them. Thus, in 2014, ISPOR established the Task Force charged with the objectives of establishing a common definition for MCDA in health care decision making and developing good practice guidelines for conducting MCDA to aid health care decision making.

VOS: How is this report valuable to researchers and decision makers?

Thokala: This initial ISPOR MCDA Task Force Report provides an introduction to MCDA. It defines MCDA; provides examples of its use in different kinds of decision making in health care; provides an overview of the principal methods of MCDA; and describes the key steps involved. On reviewing this report, the readers should be able to acquire an overview of the MCDA methods and their potential for supporting health care decision making.

The second ISPOR MCDA Task Force Report will build on the first report by providing emerging good practice guidelines, including how to select the 'right' approach to MCDA in each type of decision and how to implement these approaches. It will also provide a checklist for those conducting MCDA. ■

Full Article:

"Multiple Criteria Decision Analysis for Health Care Decision Making—An Introduction: Report 1 of the ISPOR MCDA Emerging Good Practices Task Force," and other articles in this issue of *Value in Health* at: http://www.ispor.org/valueinhealth_index.asp.

For a summary of the report, see page 25.