

VALUE & OUTCOMES SPOTLIGHT

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LETTER FROM THE EDITOR



Is there a place on earth where pharmacoeconomics and outcomes research enjoys greater influence than Europe? Hard to imagine there is. Sure, an argument can be made for Australia, the first country to require and provide guidance for submission of cost-effectiveness data, but the scene in Europe is much bigger and more diverse. There are HTA bodies akin to Australia's PBAC, including NICE in the UK, IQWiG in Germany, CEESP in France, and similar agencies in most other European countries. All have their own twist on what kinds of data should be submitted and because of this there exists a need for EUnetHTA, a unique organization whose mission is to harmonize methodologies and foster collaboration across HTA bodies.

Some of the most well established academic training programs for our science are located in Europe, including the Centre for Health Economics at the University of York, ScHARR at the University of Sheffield, and the Health Economics Programme at Erasmus University in Rotterdam. Given this, it should not be surprising that some of the major methodologic advances in our field—the handling of uncertainty in cost-effectiveness analysis comes to mind as just one example—have been fueled by the work of our colleagues in Europe.

European countries have also been leaders in the design, implementation, and use of disease registries. This is particularly the case for the Nordic countries, where one can find longstanding national registries for a wide range of disease conditions as well as comprehensive health tracking of the general population through nationalized health care systems. As these systems have entered the modern era of electronic data capture and medical record keeping, the ease with which they can be used for research purposes has increased. This has important implications not only for real-world data analytics, but also for patient recruitment and data collection in traditional clinical trials.

This issue of *Value & Outcomes Spotlight* highlights some of these themes, including patient registries, EUnetHTA, and network meta-analysis, the conduct of which is growing in importance not only in Europe but globally. In reviewing these articles, it's impressive how firmly intertwined are the methods, data and analytic findings with the policy context and decisions which they are intended to inform. There is a clear relevance to the work that, sadly, doesn't always exist in other geographies where the science of pharmacoeconomics and outcomes research continues to struggle for recognition and influence.

Also featured in this issue is an overview of the recently released report from the ISPOR Emerging Good Practices Task Force for Multiple Criteria Decision Analysis (MCDA), along with a brief Q&A with one of the Task Force co-Chairs. MCDA is growing in influence in HTA and, again, we can applaud our European colleagues for their leadership on this front.

Finally, our ISPOR News section contains information about the 2016 meetings we can look forward to attending, including the 21st Annual International Meeting in Washington, DC in May (with the first release of the meeting program!), the 7th Asia-Pacific Conference in Singapore in September, and the 19th European Annual Congress in November in Vienna. So mark your calendars and book your travel!

David Thompson, PhD
Editor-in-Chief, *Value & Outcomes Spotlight*

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