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Improving Access to Innovative Health Technologies

Panel Discussion
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Improving Access to Innovative Health Technologies



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Improving Access to Innovative Health Technologies



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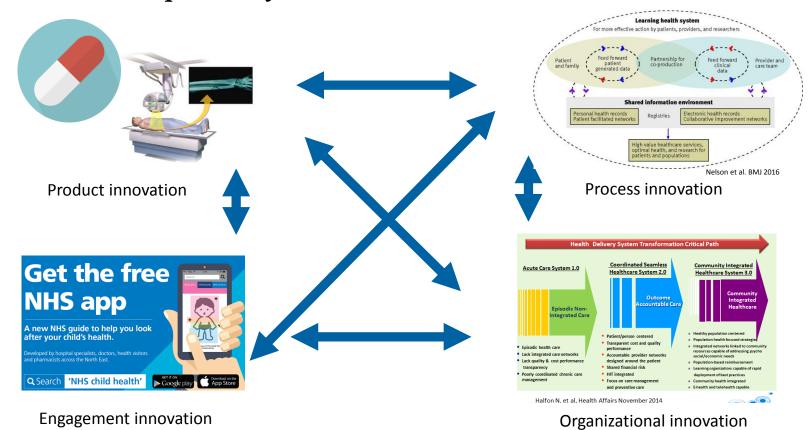
Maha Rabbat, MSc, PhD MENA Health Policy Forum Egypt

Improving Access to Innovative Health Technologies ISPOR Panel Session

Dubai, 20 September 2019

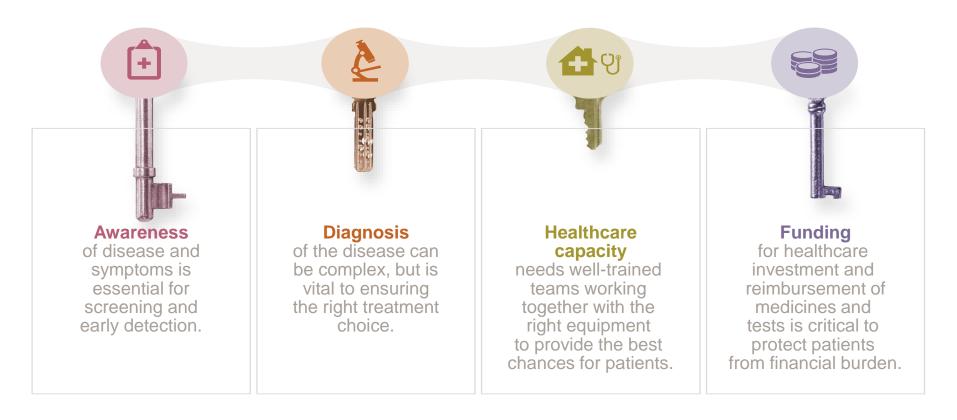


The many faces of innovative health technology and their interdependency





Access to healthcare technologies is a multidimensional challenge Key factors that need to be in place for patients to be treated successfully



Aligning financial opportunity and growing expectations towards the coverage of innovative health technologies

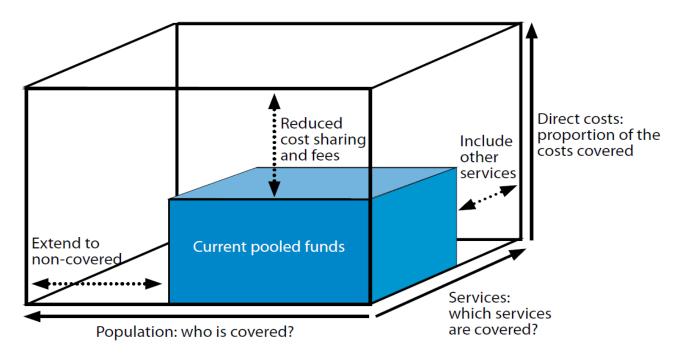


Figure adapted from the World Health Report 2010⁴



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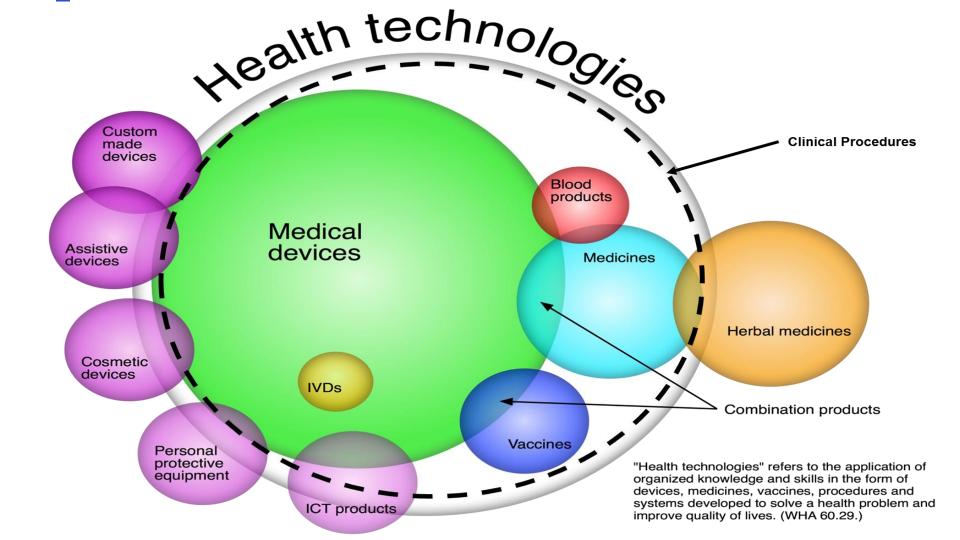
Improving access to Innovative Health Technologies: WHO Perspective

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HT Policies

Health technology Innovation

Medical Processes (R&D)

Business Processes (Marketing, Financing, IT &/or Operating)

Health technology regulation

Safety
Performance
(devices)
Efficacy (drugs)

Health technology assessment

Clinical effectiveness
Ethics
Social issues
Organizational

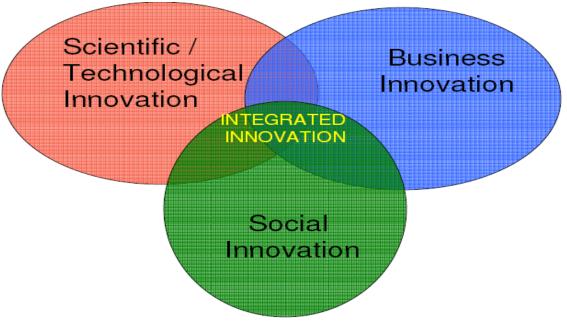
Health technology management

Procurement
Selection
Training
Use

Valley of Death



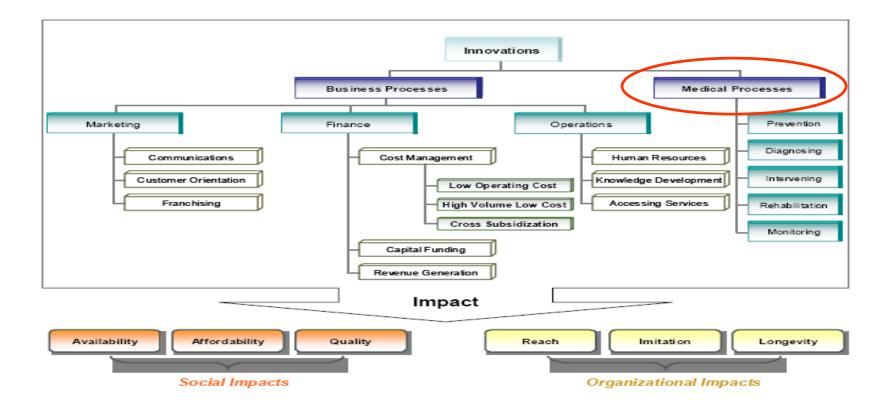
WHO defines HC innovation as an integration of...





Integrated Innovation Framework

(Bhattacharyya et al., University of Toronto, 2008)



Innovation in Medical Processes

- They are changes in the way a given service is provided, either through a new protocol or use of a new technology or treatment methodology.
- Innovation can be made at any HCD level; namely: Prevention, Diagnosis, Treatment, and Rehabilitation.
- Innovation in medical processes can be
 - A Win-Win situation for enterprises and public health (e.g. HT addressing unmet PH needs).
 - Of no value to PH but of great gains to innovators (e.g. sophisticated features added to diagnostic machines)
 - Of great PH value but of limited gains to innovators (e.g. orphan drugs)



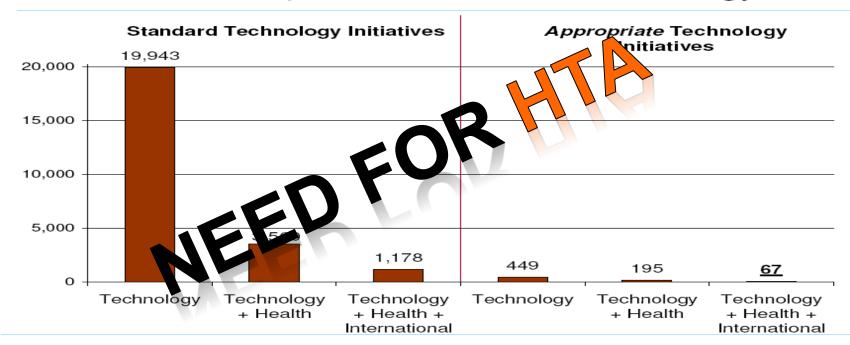
To adopt or not to adopt?

- People often decide whether or not to adopt an innovation based on:
 - Appropriateness and Added Value
 - Utility of invention
 - Disruptive effects on existing habits
 - Personal values
 - Social status



Appropriateness is a real factor...

Landscape of Health and Technology



Source: Guidestar & Innovations in International Health at MIT



Willingness to adopt new HT

- Within any population, people have different abilities & willingness to adopt new HT.
- They can be categorized as:
 - "Innovators" constituting 2.5% of pop;
 - "Early adopters" constituting 13.5% of pop;
 - "Early majority" and "Late majority", respectively constituting 34% each of pop;
 - "Laggards" constituting 16% of the pop.
- When considering barriers to innovation, it is important to differentiate between obstacles to innovative ideas and obstacles to the uptake of medical innovation.

Barriers to uptake of innovative HT

- Reluctance to alter existing practices or be trained to develop new skills
- Resistance can be based on reluctance of the medical community to adopt new technologies.
- Rejection by traditional communities proud of their culture <u>or</u> of local brands in favor of international brands.
- Inappropriate Design: An ex. of inappropriate design could be the failure of affordable wooden-seat wheelchairs to achieve widespread use among users in Nicaragua (out-of-context situations)
- Cost of innovative product:
 - Innovations lead to escalation in HC expenditures.
 - Costs can cause some innovations to diffuse, while others may not
- **Regulations** ensure safety but can also be a financial burden on designers and manufacturers, especially in low-resource settings.



Overcoming barriers to effective uptake

Lowering costs through creative financing mechanisms:

- Reimbursement at a greater level than cost (e.g. led to adoption of coronary angioplasty and resistance to adopt cochlear hearing implants)
- Creation of <u>locally-owned companies</u> to manufacture for local markets.
- Subsidize R&D for domestic products to be used in rural areas.

Lowering costs through negotiations:

- Pool Purchasing: Build market power by aggregating purchases to gain negotiating leverage over companies (e.g. GCC council).
- HTA: Use an authoritative group of experts to systematically assess the value of individual HT, using the best available information on benefits & expenses
- Public Trust: Enter a negotiation with suppliers backed up by public trust to reach an agreement on a price on their behalf.

Overcoming barriers to effective uptake

Identifying local design priorities

- Overcoming out of context products
- R&D on appropriate local context is needed (e.g. Jaipur foot)

Networking for innovation

- Free exchange of knowledge and experience of imaginative ideas.
- Institutions to bridge the gap between research & commercial applications
- WHO call for innovative HT (launched in 2009)

Partnership with

- Manufacturers in industrialized countries to strengthen local capacities to design and produce HT.
- Private sector for public benefit to lower risk/return ratio in poor settings

"We will not be able to enjoy relative health security unless we continue to innovate and to bring on new technologies to improve health outcomes"

Francis Gurry, WIPO Director General

During 2018 1-day meeting on innovation, health and the Sustainable Development Goals

Also attended by

Tedros Adhanom Ghebreyesus, WHO Director General Roberto Azevêdo, WTO Director General







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