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What Are the Main Drivers for Decision-Making Regarding the Incorporation of a Healthcare Technology By CONITEC in Brazil? A Study in the Cardiovascular, Oncology, and Respiratory Fields

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Introduction

- The 2023 Sustainable Development Agenda, endorsed by 193 UN member states, comprises 17 goals and 169 targets to be achieved by 2030, encompassing environmental, economic, and social dimensions.
- A key objective focuses on Health and Well-being, aiming for universal health coverage, including access to quality healthcare services and affordable essential medications and vaccines for all. In Brazil, the incorporation process of essential medications follows Health Technology Assessment (HTA) criteria, considering safety, efficacy, effectiveness, efficiency, budget impact, as well as ethical, social, and environmental aspects.
- This study aims to examine CONITEC's decision criteria for incorporating interventions in the cardiovascular, respiratory, and oncology fields, which are leading causes of mortality in Brazil

Methods

- A search was conducted in the HTA Accelerator database, an IQVIA-developed tool that compiles and analyzes publications from 41 countries and over 100 HTA agencies and regulatory bodies.
- The data included technology assessment reports, horizon scanning, clinical guidelines, and literature reviews.
- Information provided by CONITEC between 2011 and 2023 was selected, focusing on cardiovascular, respiratory, and oncology areas due to their impact on mortality rates in Brazil.

Results

- Among the 25 identified decisions, cardiovascular and oncology domains accounted for the majority, with considerations of both clinical and economic criteria
- In the cardiovascular field, favorable recommendations are associated with non-inferiority outcomes of the intervention in comparison to the comparator and cost-effectiveness results (Fig 2)
- In oncology, notable aspects include the intervention's superiority in both primary and secondary endpoints, along with cost-effectiveness results (Figure 3).
- In the respiratory field, prominent features include non-inferiority results compared to available treatments and the intervention's superiority in primary endpoints (Figure 4)

Fig 1 – Overview by decision year

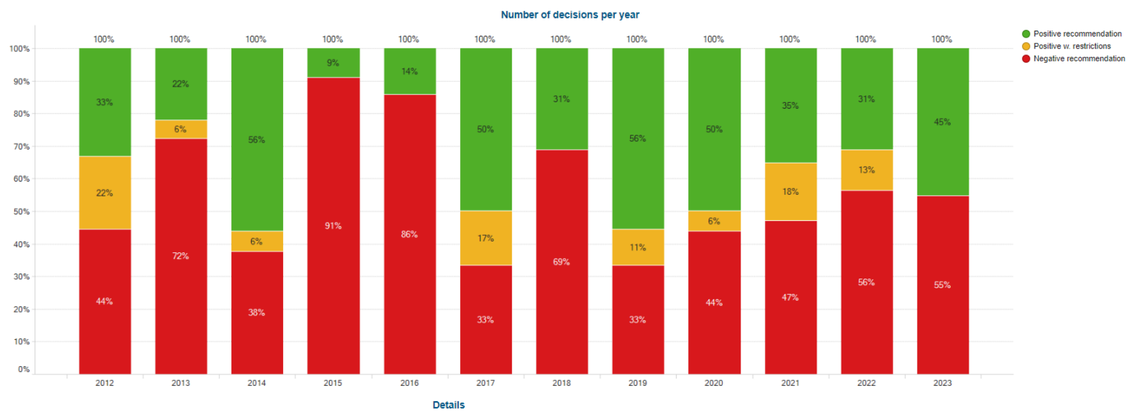


Fig 2 – Top clinical and economic positives – cardiovascular area

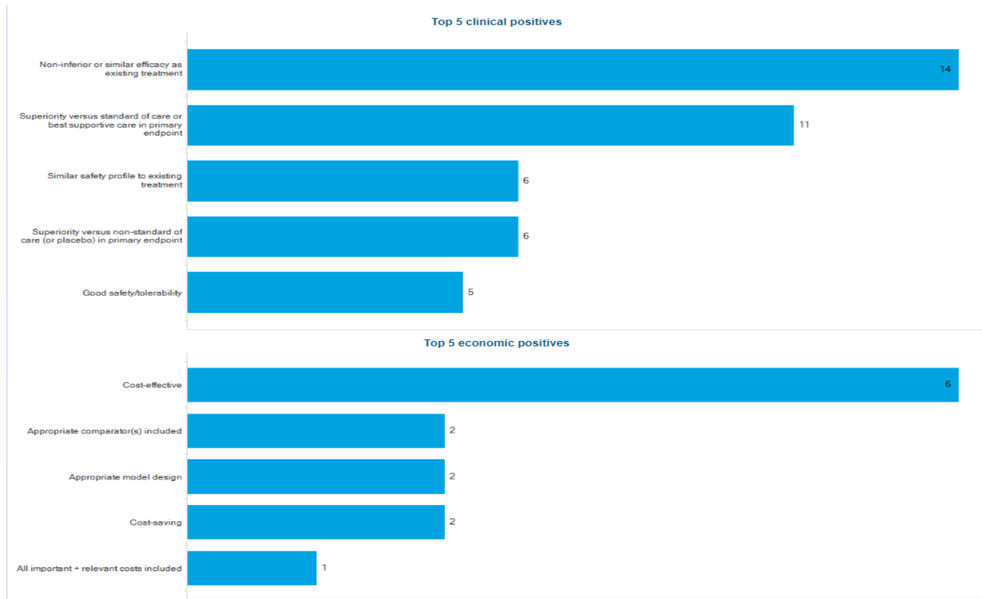


Fig 3 – Top clinical and economic positives – oncology area

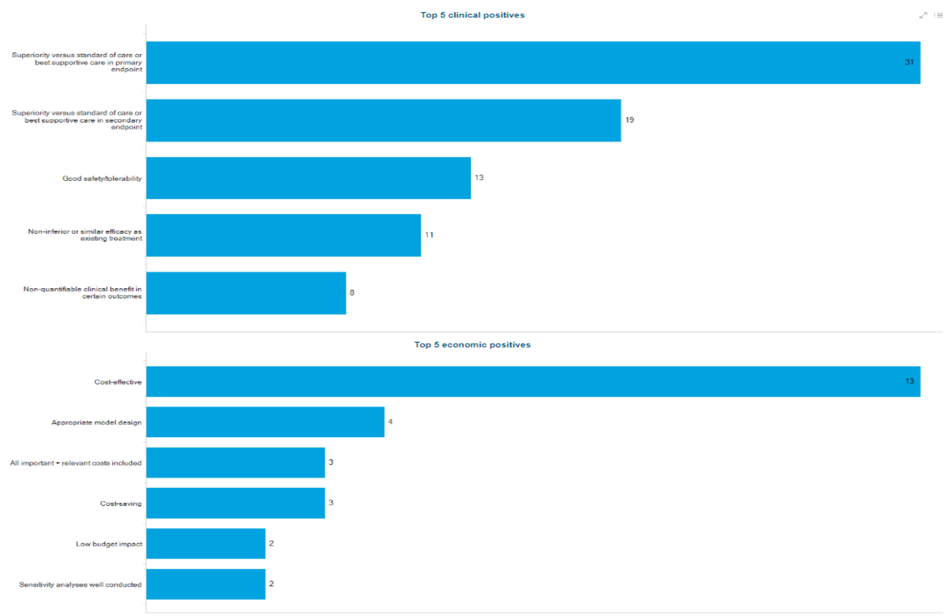
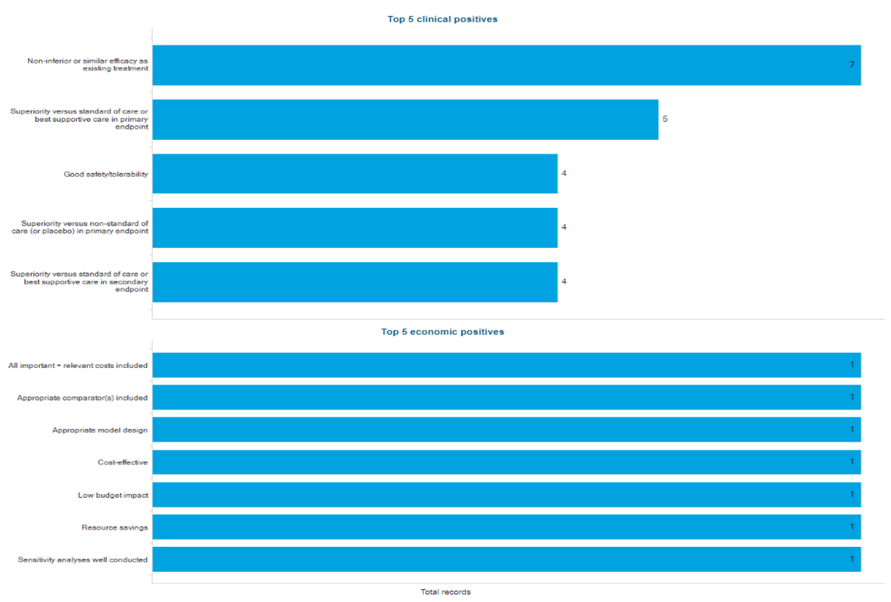


Fig 4 – Top clinical and economic positives – respiratory area



Conclusions

Intervention superiority in primary disease endpoints and cost-effectiveness results were the main economic drivers for positive incorporations in CONITEC within cardiovascular and oncology therapeutic areas

In the respiratory domain, non-inferiority results compared to available treatments and the intervention's superiority in primary endpoints

REFERENCES

1. Cruz, D. K. A. et al. (2022) ‘Os Objetivos de Desenvolvimento Sustentável e as fontes de dados para o monitoramento das metas no Brasil’, Epidemiologia e servicos de saude : revista do Sistema Unico de Saude do Brasil, 31(spe1), p. e20211047. doi: 10.1590/SS2237-9622202200010.especial
2. Figueiredo, T. A., Schramm, J. M. de A. and Pepe, V. L. E. (2014) ‘Seleção de medicamentos essenciais e a carga de doença no Brasil’, Cadernos de Saúde Pública, 30(11), pp. 2344–2356. doi: 10.1590/0102-311x00165113.
3. Campolina, A. G., Yuba, T. Y. and Soárez, P. C. de (2022) ‘Critérios de decisão para a alocação de recursos: uma análise de relatórios da CONITEC na área de oncologia’, Ciência & Saúde Coletiva, 27(7), pp. 2563–2572. doi: 10.1590/1413-81232022277.14242021.

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