



Patient Involvement in HTA in China

Shanlian Hu. MD. MSc. Professor
School of Public Health, Fudan Univ.
Shanghai Health Development Research Center
Patient Involvement in Health Technology Assessment in Asia
ISPOR 22nd Annual International Meeting 23 May 2017

Objectives

- This presentation introduces the present situation of patient groups (associations) and general organizational structure in China, their function on HTA, health promotion and lobbying with third party payer
- The patient's empowerment will be strengthening in the future.

Methods

- A systematic review is made on the charters of different patient groups from the Chinese website. The authors discuss with key informants, including doctors, pharmaceutical companies and head of patient groups

3

Research Findings

- According to the unofficial data source, more than 70 different kinds of disease patient groups have been established in China yet
- Some are registered by Ministry of Civil Affairs at national level; some are organized by hospitals at local level
- The patient groups or associations are self-organized by patients and their family members

4

Role of Patient Involvement

- Their characteristics are voluntary basis, non-profit and mutual help
- The patient association plays a role as a communication platform to help patients each other
 - Conducting health education
 - Exchanging their treatment experience and psychological comfort
 - Calling on government to focus on their diseases
 - Improving the reimbursement and payment from third-party payer and PAP program
 - Paying attention on the shortage of drugs, etc.

5

Two Case Studies

1. The importance of selection on treatment therapy strategy for hemophilia A, on-demand treatment vs. prophylaxis treatment through the Hemophilia Home of China
2. Familial hypercholesterolemia is a severe dominant hereditary disorder of metabolism, now it has established a HoFH Chinese Care Center, more than 60 HoFH probands and their families have been awareness and followed-up

6

Hemophilia Home of China



7

Hemophilia Home of China



8

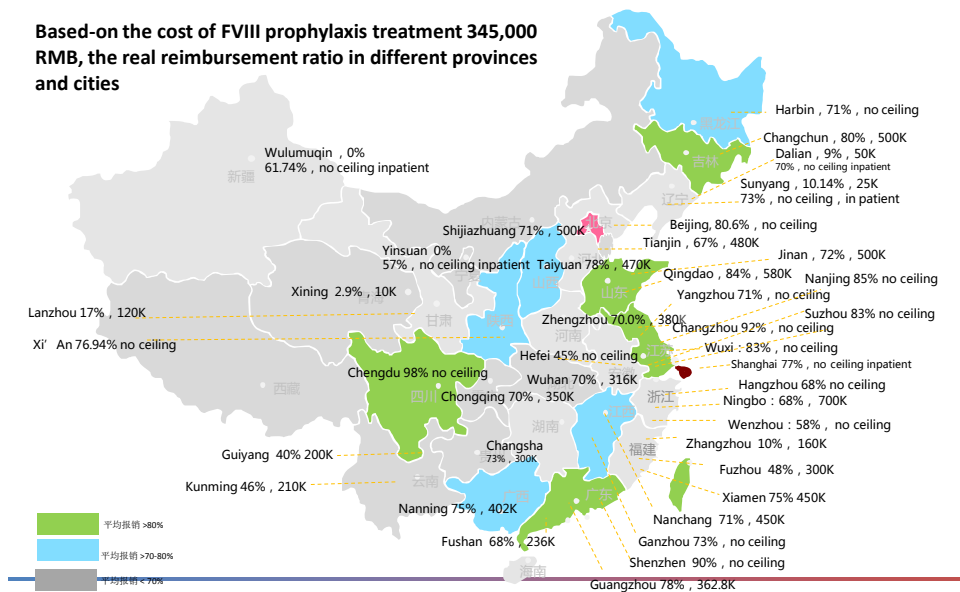
Current Situations of Hemophilia in China

- Main problems that haemophilia has:
 - Lifelong high costs of treatments
 - Insufficient reimbursement of the costs
 - Shortage of medicine supply
 - Discriminating education policies
 - Family members or society do not understand or accept hemophilia A

9

Reimbursement Map of FVIII Prophylaxis Treatment in China

Based-on the cost of FVIII prophylaxis treatment 345,000 RMB, the real reimbursement ratio in different provinces and cities



(Bayer Co. 2016)

The Contribution from Hemophilia Home of China

- 4665 hemophilia cases and family members have registered at Hemophilia Home of China
- Hemophilia Home has provided direct assistance nationwide (including medical aid, poverty relief, drug donations) for poverty stricken and severe hemophilia cases in 21 provinces and has helped 249 hemophilia cases
- In 2014 China Hemophilia Home won the World Federation of Hemophilia Outstanding Contribution Award



13

Chinese Familial Hypercholesterolaemia Care Center



14

Clinical Profile of FH

- FH is a rare disease and a severe dominant hereditary disorder of metabolism, China may have 5,000 – 8,000 HoFH patients, but less than 100 index probands were found
- FH is the most important risk factor for CAD, early diagnosis and reduce LDL-C, can prevent it
- Tendon xanthoma and corneal arcus (due to cholesterol deposits)



(Luya Wang 2016)

15

Treatment Costs of Homozygous Familial Hypercholesterolemia in China

Drugs	Rosuvastatin	Atorvastatin	Probucol	Zetia	Day (RMB)	Year (RMB)
mg/Tab	10	20	0.5	10		
Price per Tab	8.87	10.10	1.71	9.35		
Age ≥ 10	√		√	√	25.1	9147
Age < 10	8.87 x 0.5		1.71 x 0.5	9.35 x 0.5	12.5	4574
Age ≥ 10		√	√	√	26.3	9596
Age < 10		10.1 x 0.5	1.71 x 0.5	9.35 x 0.5	13.2	4798

- The economic burden of every HoFH family on treatment costs is nearly **20,000 RMB (\$ 2,900 USD)** per year

(Source: Luya Wang et al, 2016)

16

The Establishment of Chinese FH Care Center



17

China FH campaign



16 疾病防治·心脑血管 福建·福州

眼睛的弯月 是心脏的求救信号

【本报福州讯】眼睛是心灵的窗户，也是身体的晴雨表。最近，福州一位中年男子因眼睛出现弯月形阴影，经医生诊断，竟是心脏病的征兆。医生提醒，眼睛出现弯月形阴影，可能是心脏病的求救信号，需要及时就医。

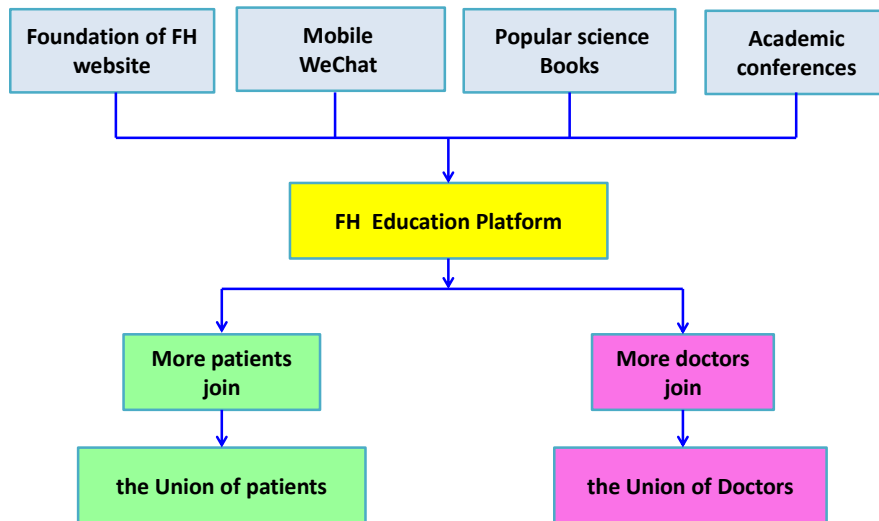
这位男子名叫张先生，今年45岁，从事销售工作。最近，他发现自己的眼睛周围出现了弯月形的阴影，起初以为是疲劳所致，但症状持续加重，遂前往医院就诊。经眼科医生检查，发现其眼底血管出现异常，提示可能存在心血管疾病。进一步的心脏检查也证实了这一点。

医生表示，眼睛周围的弯月形阴影，医学上称为“弯月征”，通常是由于眼底血管硬化、狭窄，导致视网膜缺血所致。这是动脉粥样硬化的表现，也是冠心病、心肌梗死等严重心血管疾病的预警信号。张先生因及时发现并就医，避免了严重后果。

医生提醒，中老年人应定期进行眼科检查，特别是眼底血管的检查。如果出现眼睛周围出现弯月形阴影、视力模糊、眼痛等症状，应立即就医，排查心血管疾病风险。同时，保持健康的生活方式，如戒烟、限酒、合理饮食和适量运动，对于预防心血管疾病至关重要。



The Establishment of Chinese FH Education Platform



19

Research Findings in HoFH Proband

HoFH probands	Index	HoFH probands
General characteristics	Number of cases	66
	Age (Years)	13.8±9.6
	Male (n, %)	30 (45.5%)
	Xanthoma(n, %)	66 (100%)
	Corneal arcus (n, %)	29 (43.9%)
History	Smoking (n, %)	8 (12%)
	CAD (n, %)	11(16.7%)
	DM (n, %)	0(0%)
Ultrasound	MR (n, %)	22 (33.3%)
	AR (n,%)	25 (37.9%)
	AC (n,%)	26 (39.4%)
	IMT (cm)	0.18±0.06
	CVFR	1.78±0.56↓
Lipids before treatment	TC (mmol/L)	17.4±3.9 ↑
	LDL-C (mmol/L)	14.3±3.2 ↑
	TG (mmol/L)	1.4±0.6
	HDL-C (mmol/L)	1.5±0.9
Initial treatment	Statin	31 (47%)
	Statin + Zetia +Probucol	18 (30.3%)
	Other lipid-lowing drugs	15 (22.7%)

(Luya Wang et al: 2016)

20

China has begun to pay attention to HoFH

- 2016.5 : Chinese Medical Association and Cardiovascular Health Research Institute launched the FH outpatient screening program ;
- 2016.7 : The Chinese Ministry of science and technology approval rare disease precision medicine project (included FH) ;
- 2016.8 : The establishment of a Chinese FH Care Center
- 2017.2 : The health economics research program of HoFH has begun ;
- 2017.3 : The establishment of WeChat public number of FH.

The near future: the establishment of China's FH site, to join the global FH organization, to promote the government's reimbursement for patients, etc..

Conclusions

- The concept of people-oriented and patient-centered in China's health system reform promotes the development of HTA and Pharmacoeconomics
- Patient involvement will be a critical issue when making policy in health insurance and value-based service delivery. Patient participation on making clinical decision needs to be awarded
- Finally, it will improve the relationship between doctors and patients



Thank You !