WHERE IS THE VALUE IN VALUE-BASED HEALTH CARE?

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ESMO, chair of the Patient Advocates Working group
ISPOR 2017
disclosure

• MPNE (Melanoma Patient Network Europe) is a volunteer-based network whose activities are funded by balanced support by the following pharmaceutical companies: Amgen, BMS, Delcath, Incyte, MSD, Novartis, Roche and currently one Horizon2020 project (UMCURE). Support never includes editorial rights, influence on MPNE’s program nor activities. **MPNE is strongly interested in further diversifying its funding, in particularly seeking support from regulatory and HTA bodies.**

• In the last 3 years, BR received personal consultancy fees for work in patient affairs from- Amgen, Bayer, Novartis, Merck Serono, MSD.

• BR’s work for MPNE and the ESMO-PAWG is non-remunerated

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\text{value} = \frac{\text{outcome}}{\text{cost}}
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VALUE
the beauty lies in the eye of the beholder
Value does not always look valuable.

false precision
When exact numbers are used for notions that cannot be expressed in exact terms. Madsen Pirie
https://www.youtube.com/watch?v=Hj5VcIASCDO

Outcome
a comment on
‘good’ outcomes, trade-offs and the devil in the detail

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Improved survival with MEK inhibition in BRAF-mutated melanoma.

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Over half of new cancer drugs 'show no benefits' for survival or wellbeing

Of 48 cancer drugs approved between 2009-2013, 57% of uses showed benefits and some were 'clinically meaningless', says BMJ study

http://www.bmj.com/content/bmj/359/bmj.j4530.full.pdf
Patient involvement
No patients were involved in setting the research question or the outcome measures, nor were they involved in developing plans for design or implementation of the study. No patients were asked to advise on interpretation or writing up of results. There are no plans to disseminate the results of the research to study participants or the relevant patient community.

http://www.bmj.com/content/bmj/359/bmj.j4530.full.pdf

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Cost
the sour grape discussion

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Cost

- money clouds judgement - just because we can’t afford it doesn’t mean it has no value
- universal healthcare systems operate under a societal contract and patients are - tax-paying - citizen
- price is not cost
- health is a societal asset, so has an investment component
- cost to the patient and family usually unaccounted for - neither short-nor long-term
- one person’s costs are another person’s profit – and sometimes it’s just two different pockets of the same person
- we have created the boundaries of our systems - from fixed healthcare budgets to incentives for innovation - it is up to us to change them

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focus

‘realise best outcomes for all’ not ‘how to ration care’.

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'The limits of my thinking are the limits of my world.'

_free after L. Wittgenstein_

Thank you

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