HEOR NEWS

Remdesivir Helps Coronavirus Patients—But at What Cost? (Politico)

Experts believe that how Gilead navigates financial pressures from investors and political pressures from Washington may very well determine the mass production and availability of one of the most promising coronavirus drugs on the market. Read more.

ICER Sets Terms of Debate on Pricing Gilead's COVID-19 **Drug** (Biopharma Dive)

Gilead's antiviral drug remdesivir, newly shown to help speed recovery in patients hospitalized with COVID-19, would be costeffective at a price as high as \$4460, according to a new analysis from the Institute for Clinical and Economic Review (ICER).

The Equitable Distribution of COVID-19 Therapeutics and Vaccines (IAMA)

An editorial from Thomas J. Bollyky, Lawrence O. Gostin, and Margaret A. Hamburg in the May 7 issue says now is the time to plan for manufacturing capacity, financing, and the distribution infrastructure necessary to produce sufficient quantities of COVID-19 therapeutics and vaccines to meet global needs in a fair, public health-driven manner.

Read more.

Read more.

How COVID-19 Has Reshaped Healthcare Delivery So Far (Health Populi)

The Health Populi blog from IOVIA shares facts about healthcare delivery during the age of COVID-19: patients have been visiting physicians' offices or healthcare clinics 70% to 80% less than pre-COVID-19 times; the use of acute therapies have declined while chronic therapies have been stockpiled.

Read more.

Utilizing Real-World Data to Inform Healthcare Decision Making During the COVID-19 Pandemic: An Interview with Daniel Prieto-Alhambra (The Evidence Base)

Daniel Prieto-Alhambra (University of Oxford; United Kingdom) discusses his involvement in the recent virtual study-a-thon hosted by the Observational Health Data Sciences and Informatics community, as well as the relevance of real-world evidence to the fight against COVID-19.

Read more.

Coronavirus Kills People an Average of a Decade Before Their Time, Studies Find (Wall Street Journal)

People dying of COVID-19 could have expected to live for at least another decade, according to 2 studies that help fill in the developing picture of the human cost of the coronavirus pandemic.

Read more.

Putting a Dollar Value on Life? Governments Already Do (The Incidental Economist)

The Incidental Economist's Austin Frakt picks up his article from The New York Times, in which he outlines how deliberations about the trade-offs between saving lives and saving the economy have been taking place in government policy for decades.

Read more.

Women and Black Patients Are Poorly Represented in Clinical Trials. Analysis Finds (Pharmalot)

According to an analysis by the Tufts Center for the Study of Drug Development, researchers examined trials conducted over a recent 10-year period and found that only 37% of 775 pivotal trials (which are the late-stage studies used to win regulatory approvals) provided data on ethnicity, and only 73% of the studies broke out participation by race.

Read more.

Using OALYs Versus DALYs to Measure Cost-Effectiveness: How Much Does It Matter?

(International Journal of Technology Assessment in Health Care)

The results of an analysis conducted by the Center for the Evaluation of Value and Risk in Health suggest that although QALY (quality-adjusted life year)- and DALY (disability-adjusted life year)-based ratios for the same intervention can differ. differences tend to be modest and do not materially affect comparisons to common cost-effectiveness thresholds. Read more.

EMA Preparing Big Data Q&A Guidance (Regulatory Focus)

The European Medicines Agency (EMA) says it is preparing a question and answer guidance on the application of EU data protection rules to the secondary use of health data in medicines development, evaluation, and supervision.

Read more.

Growth and Capacity for Cost-Effectiveness Analysis in Africa (Health Economics Letter)

According to an analysis by Ari D. Panzer, et al, although economic evidence in Africa has grown substantially, the capacity for generating such evidence remains limited. The authors say increasing the ability of regional institutions to produce high-quality evidence and facilitate knowledge transfer among African institutions has the potential to inform prioritization decisions for designing universal healthcare coverage.

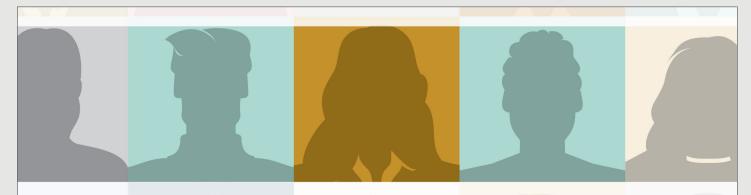
Read more.

Balancing Value with Affordability: Cell Immunotherapy for Cancer Treatment in the US

(The Oncologist)

Surveying CAR-T centers in the United States, the authors of this paper found from respondents that the financial viability rating across centers (median: 62; interquartile range: 48-69; scale 1-100) signals that economic sustainability of institutional programs for adult lymphoma is a concern, and that these dynamics may limit access to CAR-T for Medicare beneficiaries and lead to greater outpatient use of the therapy, which may limit access for medically complex patients.

Read more.



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