



**Chinese Medical Doctor Association  
Pharmacoeconomics Chapter Annual Report 2012**

TO:

Board of Directors

International Society for Pharmacoeconomics and Outcomes Research

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**Background:**

Chinese Medical Doctor Association Pharmacoeconomics Committee was approved by ISPOR in January 2006.

The Chapter now has 510 members and the committee consists of well-known professionals on Pharmacoeconomics, Clinical Medicine as well as Pharmacy. Current President is Dr. Shanlian Hu, MD, MSc, Professor, School of Public Health, Fudan University, Shanghai, P. R. China, and Director-General of Chinese Medical Doctor Association Pharmacoeconomics Professional Committee.

The Chapter has always been devoted to disseminating the knowledge and skills of Pharmacoeconomics and Outcomes Research. Much progress has been made in promoting Pharmacoeconomics application in health system reform through embranchments of CDMA.

For more information, please visit [http://www.ispor.org/regional\\_chapters/China/index.asp](http://www.ispor.org/regional_chapters/China/index.asp).

Enclosure: Chinese MDA-PE Chapter Annual Report 2012

## Chinese MDA-PE Chapter Annual Report 2012

(Chinese Medical Doctor Association Pharmacoeconomics Committee)

### Accomplishments Made in 2012

Accomplishments	Major Aspects
<b>Mission</b>	Promote the development and application of Pharmacoeconomics in China , and provide evidence and suggestion to pharmaceutical business and health departments by applying Pharmacoeconomics and Clinical Practice Economic Evaluation methodology to appraise the innovation of technology, organization and policy in the health sector.
<b>Membership development</b>	Significant development has been made in membership recruitment from 341 in 2011 to 510 in 2012. Members recruited include professionals and young researchers from universities and research institutes, clinicians in general hospitals, community service centers, and hospitals in rural areas, as well as those working in pharmaceutical business.
<b>Studies &amp; Projects</b>	We devoted major efforts to advance the project <i>Innovation of Disease Management System in Rural China</i> which was initialed by the Ministry of Health and the World Bank this year. We also have started research on <i>Application of Clinical Practice Economic Evaluation in Health Insurance Management</i> . Additional studies of Pharmacoeconomic evaluation have been accomplished this year, such as chronic obstructive pulmonary disease, HBV.
<b>Education &amp; Training</b>	The chapter also made some significant steps forward in education and training in 2012. We held 6 useful courses in Beijing, Qinghai, Shaanxi, etc., such as the training course of <i>Application of Economic Evaluation in Essential Drug System and Health Insurance System</i> to provide opportunities for them to get continuing education credits that are accredited on a national scale and help capacity building. Those courses

also can train doctors and other relevant personnel in different clinical disciplines to disseminate the knowledge and skills of Pharmacoeconomics and Outcomes Research. About 400 people attended courses mainly including clinicians, pharmaceutical business workers and relative administrators.

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The chapter has always been working hard to provide evidence and suggestion in essential drug policy, the third party payment model of health insurance, in order to help forward the establishment of national essential drug system, by conducting pharmaceutical evaluation research.

**Contribution to  
health reform in  
China**

The *Health XI Project* which was initialed by the Ministry of Health and the World Bank in 2009, is designed to meet the challenges in health reform in rural China, such as establishing a health insurance system for rural residents, improving health service system, providing critical public health service, stimulating project cooperation and policy making. Thus, the project *Innovation of Disease Management System in Rural China* was initialed by CMDA-PE chapter to be an important part of the *Health XI Project* in 2011.

We contributed our major efforts in this project in 2012. Important data has been collected in Qinghai and analyzed by researchers of our project team. The disease management innovative solutions in rural China we proposed would contribute to the establishment of health insurance system for rural residents, improvement of health service system, and exploration of health system reform in rural areas of different development levels.

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**Domestic  
&  
International  
Collaboration**

We have established a good cooperative relationship with the government, several organizations and companies in the health sector. In 2012, we have furthered our collaborative relationship with them by advancing the important part of the *Health XI Project* directed by MOH, continuing projects with China-Europe International Business School,

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doing Pharmacoeconomics evaluation with Analysis Group in USA ,China Pharmaceutical University, and Peking University Health Science Center as well.

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## The Plan of 2013

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### Further development of membership

We expect to expand membership by 200 people in 2013, mainly planning to recruit clinicians, by holding training courses providing opportunities for them to get continuing education credits and conferences where they could share their experience with other professionals. Training courses and conferences will be held at Beijing, Shanghai and Guangzhou, especially for senior leaders and community clinicians.

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### Developing international exchange program

We plan to continue international exchange programs to widen the view of Pharmacoeconomics research and learn advanced application of Pharmacoeconomics from developed countries by inviting some foreign professionals to join in our research and give lectures about their achievements in Pharmacoeconomics.

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### Research prospect

We will follow our routing research plan of researching on drug utilization and pharmacoeconomics evaluation and accomplish the project of *Innovation of Disease Management System in Rural China* in 2013, while keeping a watchful eye on the switching of prescription drugs to OTC drugs. Moreover, we will go on exploring an optimal integration research pattern in Pharmacoeconomics and clinical protocols.

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### About funding

We would like to make an application of \$20,000 to ISPOR. The fund would be used to finance young scholars to do research, which could greatly help us fulfill our mission of disseminating the knowledge and skills of Pharmacoeconomics and Outcomes Research and promoting the development and application of Pharmacoeconomics in China.

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