We read with great pleasure ISPOR’s new journal, Value in Health Regional Issues, which had been devoted to the regions of Central and Eastern Europe, Western Asia, and Africa (CEEWAA) [1]. We do believe that ISPOR’s strategic decision on releasing this journal and providing space for scholars from less developed regions of the world for publishing their findings in the field of health economics and outcomes research is an excellent way for disseminating scientific outputs throughout these regions.

The introduction of health economics and HTA into decision making started in Hungary in 2001 when a nationwide public health program was developed. An important part of that complex public health initiative was the introduction of organized, nationwide cancer-screening programs for breast and cervical cancer. To explore the cost and benefits of such programs, a primary health economics analysis was performed by the working group of the National Health Insurance Fund Administration (OEP), the only health care financing agency in Hungary [11,12]. The cost-effectiveness analysis of breast cancer [13] and cervical cancer [14] found that both programs are cost-effective in Hungary from a purchaser’s point of view. After the evaluation of medical and economic considerations, an organized, nationwide breast and cervical cancer screening program was introduced in Hungary in 2002 and 2003, respectively [15,16].

These screening programs represent the first case in Hungary when the health care financing authority (OEP) performed a formal health-economics analysis for the assessment of costs and benefits of a new medical technology and the results of cost-effectiveness analysis were considered during the decision-making process. After the introduction of the screening program, a monitoring process has been developed for continuous evaluation of the implementation of the program. The results of the monitoring process have also been published in international scientific literature and presented at ISPOR congresses [17–20].

The cost-effectiveness of colorectal cancer screening was also evaluated by the National Health Insurance Fund Administration (OEP): simultaneous application of both the guaiac-based test and the immunochemical fecal occult blood test detecting hemoglobin and albumin was compared with the no-screening strategy [21]. Colorectal cancer screening proved to be cost-effective in the Hungarian setting [22]. A small area pilot colorectal cancer screening project was introduced in the town of Ajka and surroundings in 2003 to 2004, and further monitoring was also conducted, but a nationwide colorectal screening program was still not introduced in Hungary [23–25].

Another important research topic of the Hungarian OEP is the analysis of hip fractures, including its epidemiology [26–28], burden of disease [29–32], outcomes research [33,34], and evaluation of biological therapies [35].

The OEP significantly contributed to the adoption of the directive 89/105/EEC of the Council of the European Communities on transparency in Hungary [36]. The OEP was also a facilitator for the development of guidelines for conducting economic evaluation of health care interventions in Hungary [37]. Two former board members of the National Health Insurance Fund Administration (OEP) played an important role in the development of health economics in Hungary: Csaba Dózsa, former deputy director general, and Imre Boncz, former department head. Both were the presidents of ISPOR Hungary Chapter. Andor Sebestyén, regional director of OEP, and his colleagues won the best poster presentation award at ISPOR’s Berlin congress in 2012 [38].

Hungarian researchers at universities and research institutes also prefer to conduct a detailed analysis of the nationwide data set of the National Health Insurance Fund Administration. Their research area covers pharmaceutical market analysis [39,40], cost-of-illness studies [41,42], and epidemiology [43,44].

In conclusion, we can emphasize that Hungarian National Health Insurance Fund Administration (OEP) had a significant contribution to the development of health economics and HTA in Hungary through the commitment of its staff members and leaders, by performing the first governmental health-economics evaluations in Hungary, to incorporate cost-effectiveness results into the decision-making process of new medical technologies.

I am convinced that ISPOR’s new journal, Value in Health Regional Issues, will serve as a special forum for researchers from the CEEWAA region to increase their activity in scientific publications.

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Dr. Ferenc Oberfrank was a former secretary of state (1999–2000) at the Ministry of Health and director general (2001–2002) of the National Health Insurance Fund Administration (OEI) in Hungary.

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