

Erasmus School of
Health Policy
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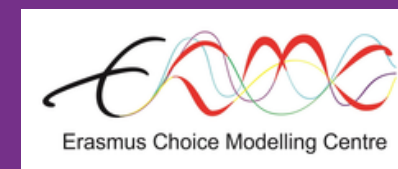
How patient preferences can contribute to development and regulation of medicines

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Erasmus University Rotterdam



The Erasmus University logo, featuring the word 'Erasmus' in a white, elegant, cursive script font.

Involving patients versus patients' preferences

- Every patient has wishes, needs, values and preferences
- Involving 1-2 or small group of patients versus perspective of representative sample?

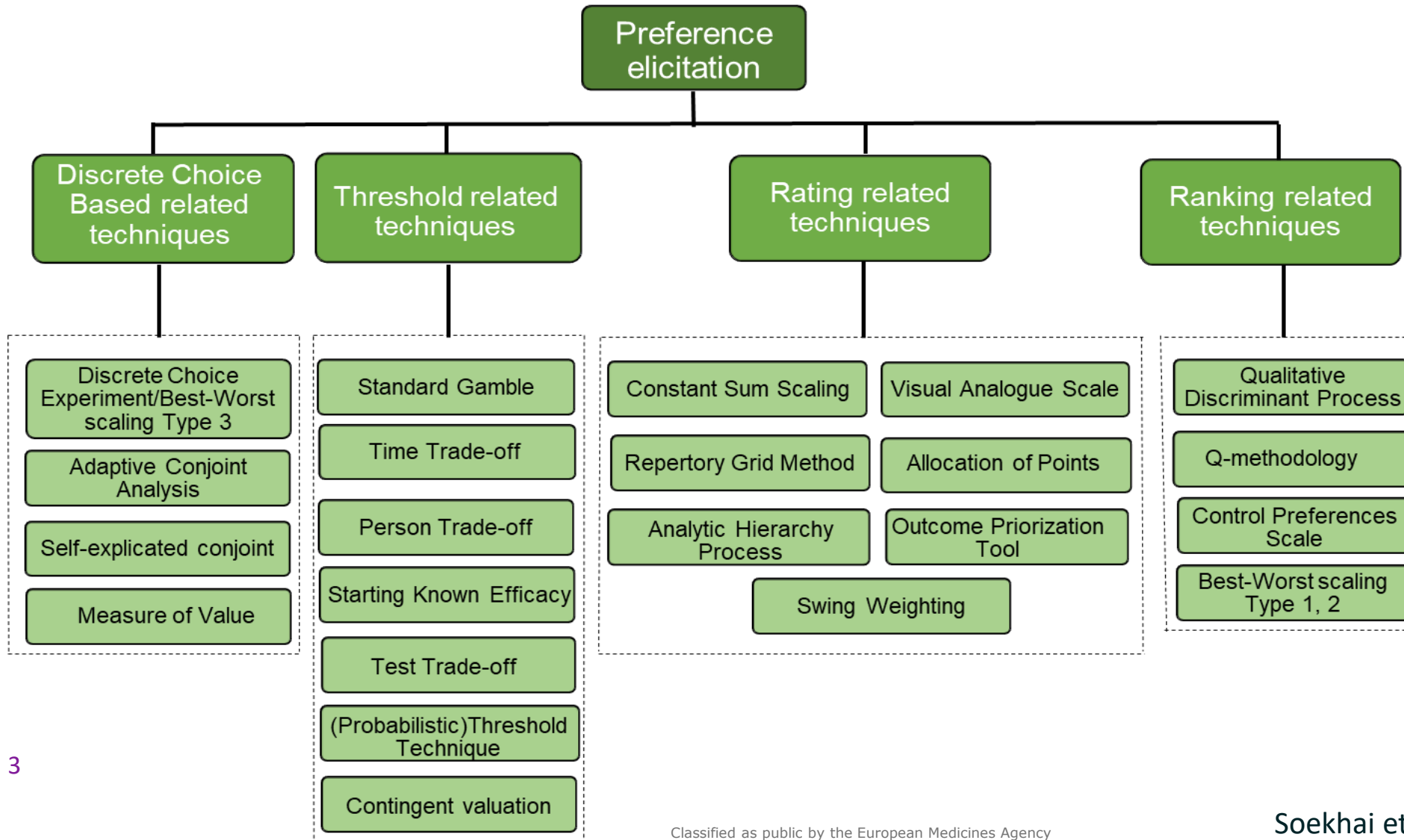
- Likert-scale survey?

	Very important	Important	Neutral	Unimportant	Very unimportant
Price	X	0	0	0	0
Waiting time	X	0	0	0	0
Side-effects	X	0	0	0	0
Effectiveness	X	0	0	0	0

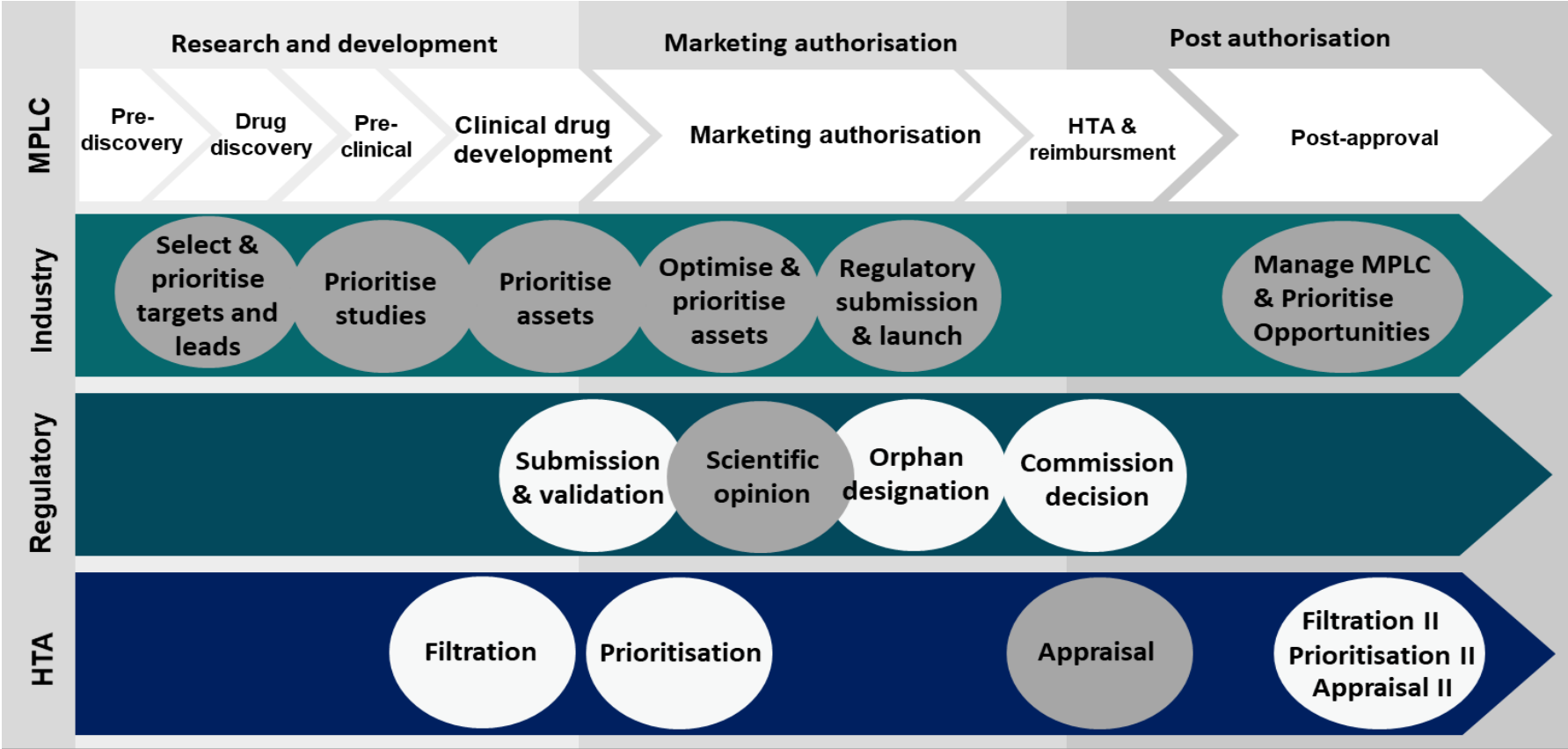
- Pairwise comparisons!
 - Quantifying the relative importance of different aspects of a good or service



Methods for measuring patient preferences



The medical product lifecycle: when and how patient preferences can inform decisions



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Guidance needed on how to elicit preferences

- ISPOR task forces and special interest groups
- Erasmus Choice Modelling Centre
- Smarter Choice Better Health
- International Academy for Health Preference Research
- **PREFER project: 5-year project focusing aiming to**
 - A five-year project that has received funding from the **Innovative Medicines Initiative 2** Joint Undertaking which received support from the European Union's **Horizon 2020** research and innovation programme and the European Federation of Pharmaceutical Industries and Associations (**EFPIA**). A total of 31 partners from academia and industry working together.



prefer.
PATIENT PREFERENCES



innovative
medicines
initiative

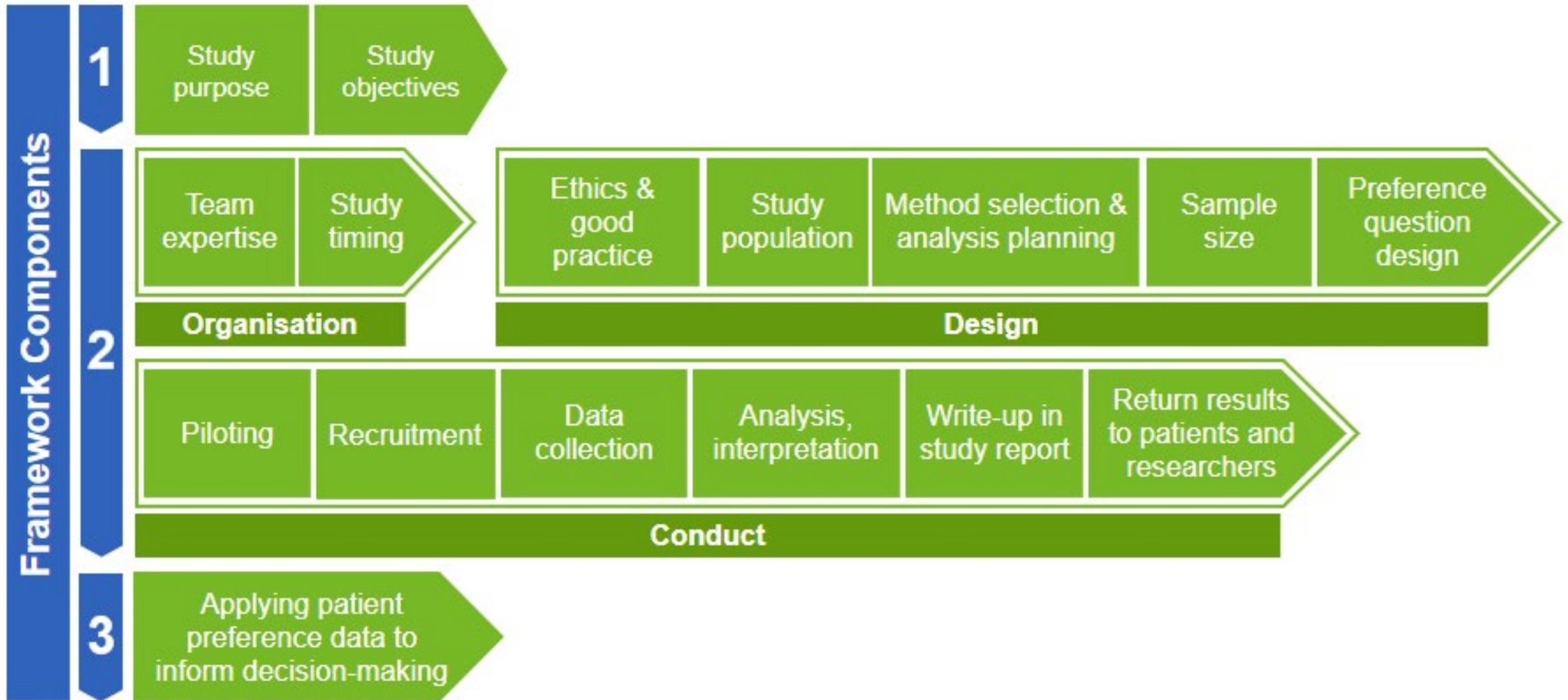


efpia



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PREFER recommendations: framework



PREFER recommendations: key messages

- Involve patients, HTA and regulators in preference studies as early as possible
- Decide on a preference elicitation method based on research question, MPLC stage, population size and resources
- Include evidence-based or theoretically sound psychological characteristics in a preference study (consider at least health literacy or numeracy)
- Select educational materials based on the specific educational needs of the participants and develop this material using a systematic and evidence-based approach

Concluding remarks and future directions

- Methodological development of preference methods
 - Evidence-based guidance
 - External validity
 - Internal validity & data quality
- Continued dialogue with decision makers in MPLC
 - Ongoing assessment of trust in methods and outcomes
 - Moving beyond current decision frameworks
- Building foundation for full integration of patients' preferences in decision-making along the medical product lifecycle

Thank you

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