

Creating a needs-driven healthcare ecosystem, episode 1

Steering R&D through the identification of
patient and societal needs

Disclaimer

The views expressed in this presentation are my personal views and do not necessarily represent the perspective of the KCE, nor our partners in the unmet needs working group for the EU Presidency (FAMHP, NIHDI, SHC, Sciensano, FPS Public Health)

Outline

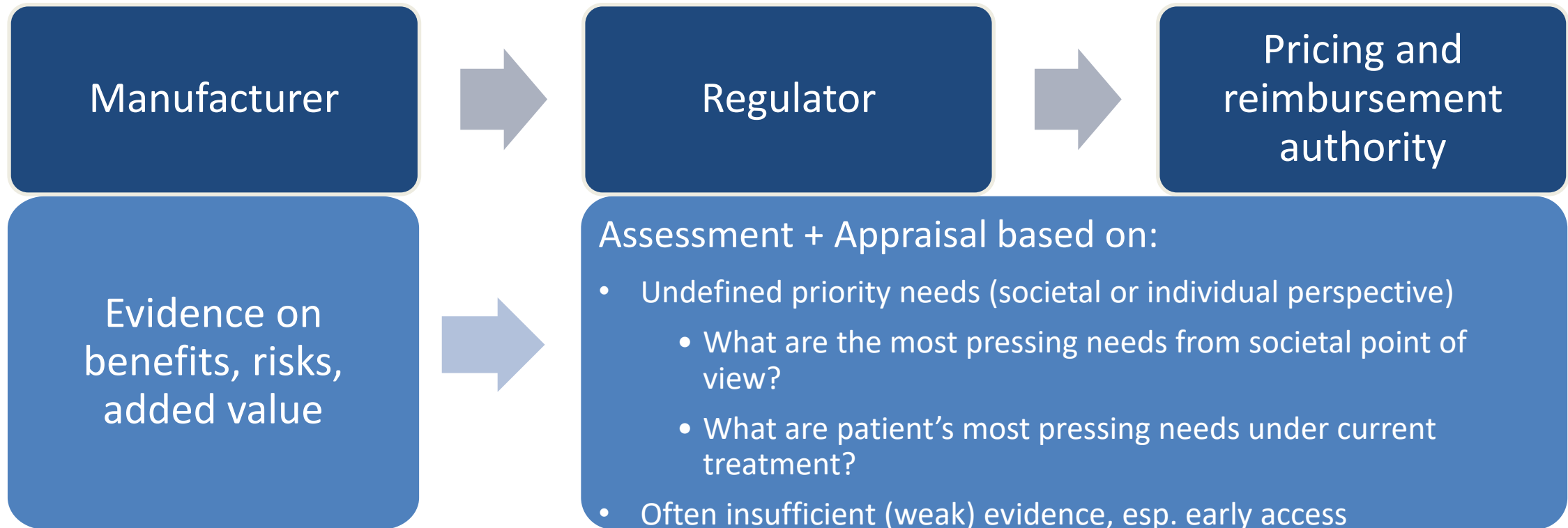
- **What is the issue?**
- **Why should we bother?**
- **How to solve it?**
- **Research activities @KCE**
 - **Past**
 - **Current**
- **Looking ahead ... a few more steps to go**

What is the issue?

Current approach: supply-driven



Action - Reaction



→ How can we assess the value of a product, if we don't know the baseline needs that matter most?

Why is this problematic?

- **Sub-optimal allocation of health resources**

- KCE report 343 on innovative oncology medicines (2021):
 - (Very) slight improvement in survival in 6 out of 12 cancers studied, no improvement for the other 6 cancers.
 - Yet, huge expenditures on these 'innovative' products
- 2020: <10% of medicinal products that received MA had an added therapeutic value (*Prescrire*)
- *“Certain medicinal products with relatively little utility and 'innovations' that are not really worthy of the name constitute a major cost for payers. This cost could be limited to the benefit of other activities that contribute more to public health.” (Garattini et al., 2021)*

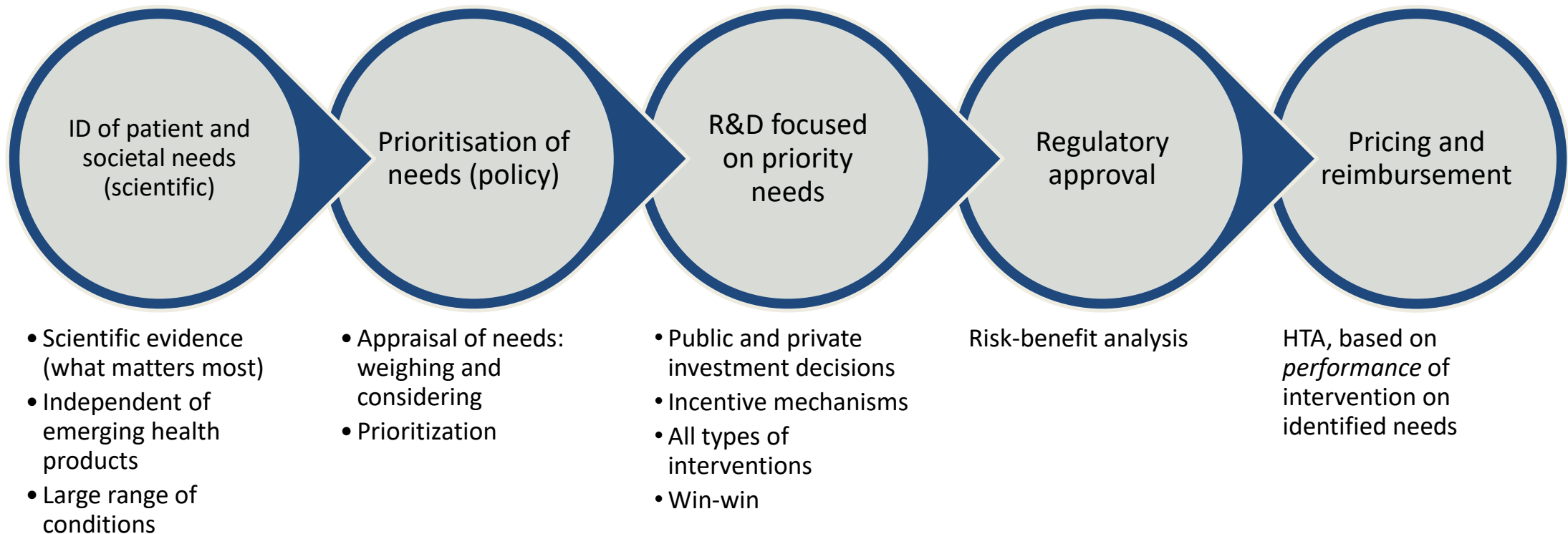
Also problematic because ...

- **Many people remain excluded from R&D**
 - ➔ limits the impact of health innovations
 - ➔ inequities
- **Public health threats, e.g. AMR**
- **Narrow focus of action:** pharma and technical interventions
 - E.g. preventive measure, behavioural treatment



How to solve it?

Desired approach: needs-driven life-cycle approach



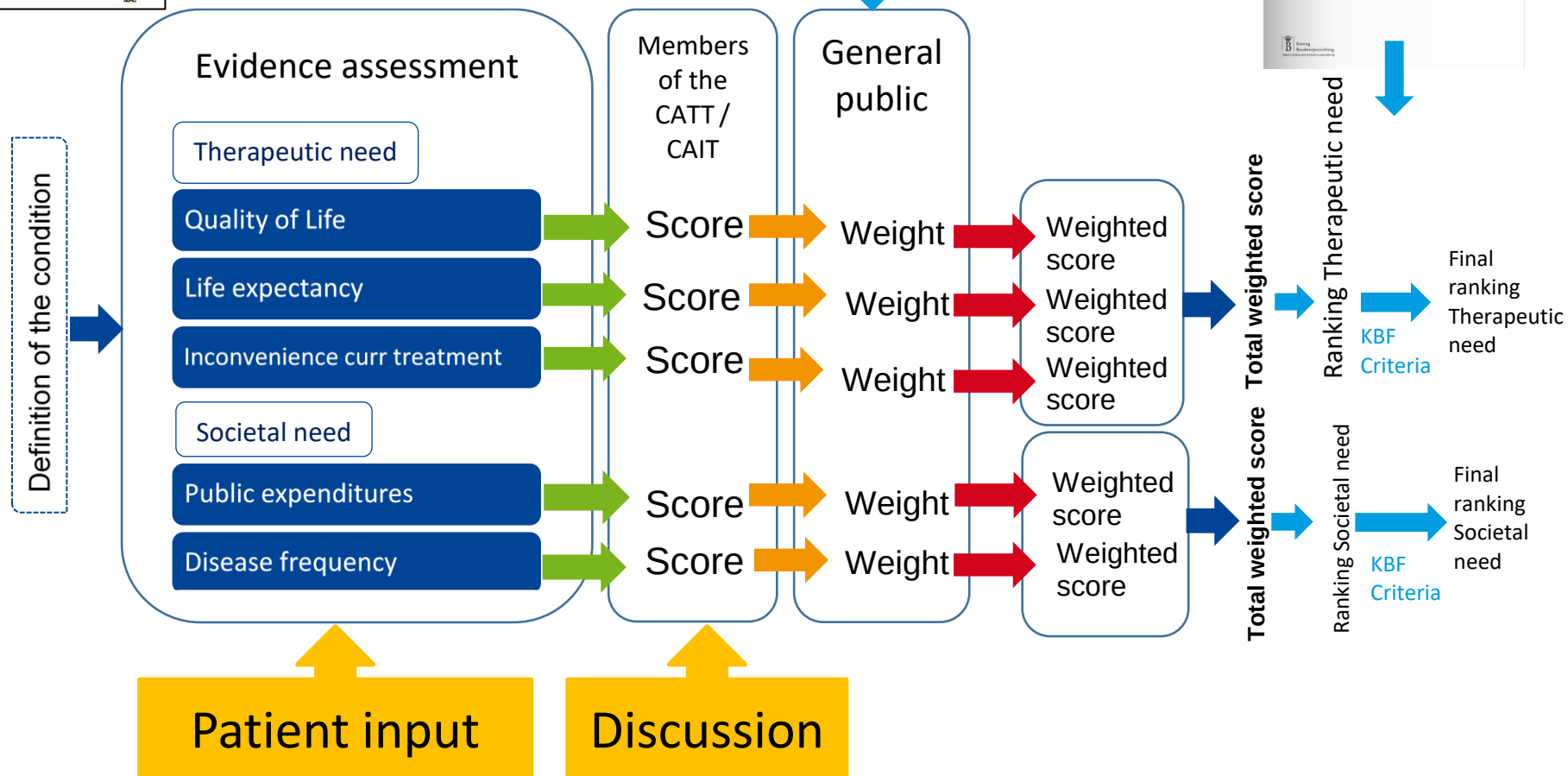
Previous KCE research



2022: Patient needs ID



2016: A MCDA for the appraisal of medical needs





Patient needs criteria

Common dimensions in quantitative and qualitative tools

Psychological
dimension

Autonomy
dimension

Social
dimension

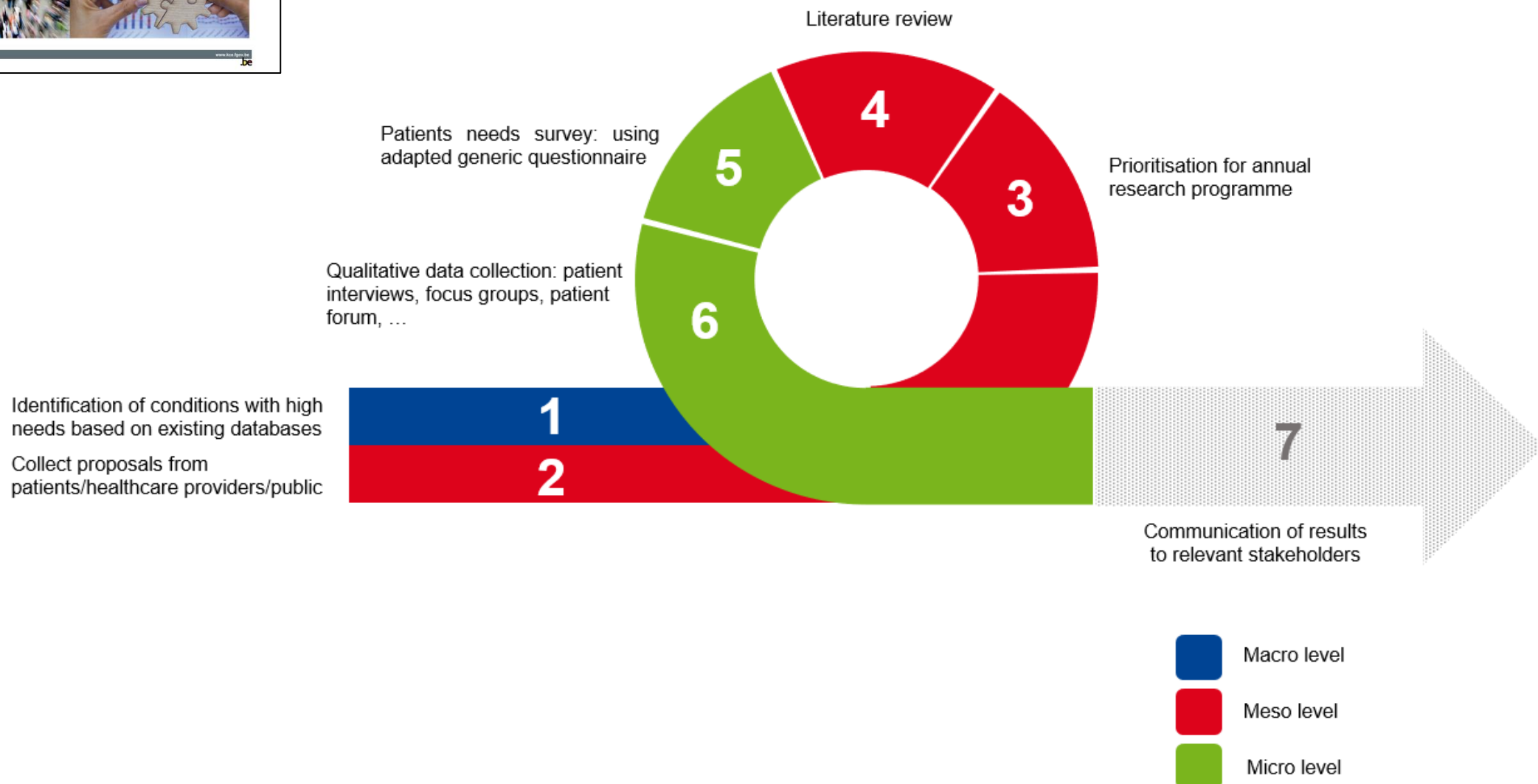
Spiritual
dimension

Accessibility
dimension

Physical
dimension



Patient needs identification methodology & implementation model





Federaal Kenniscentrum voor de Gezondheidszorg
Centre Fédéral d'Expertise des Soins de Santé
Belgian Health Care Knowledge Centre

Ongoing research: NEED

Needs **E**xamination, **E**valuation and **D**issemination: identifying unmet patient and societal needs for a more needs-driven health policy and product development



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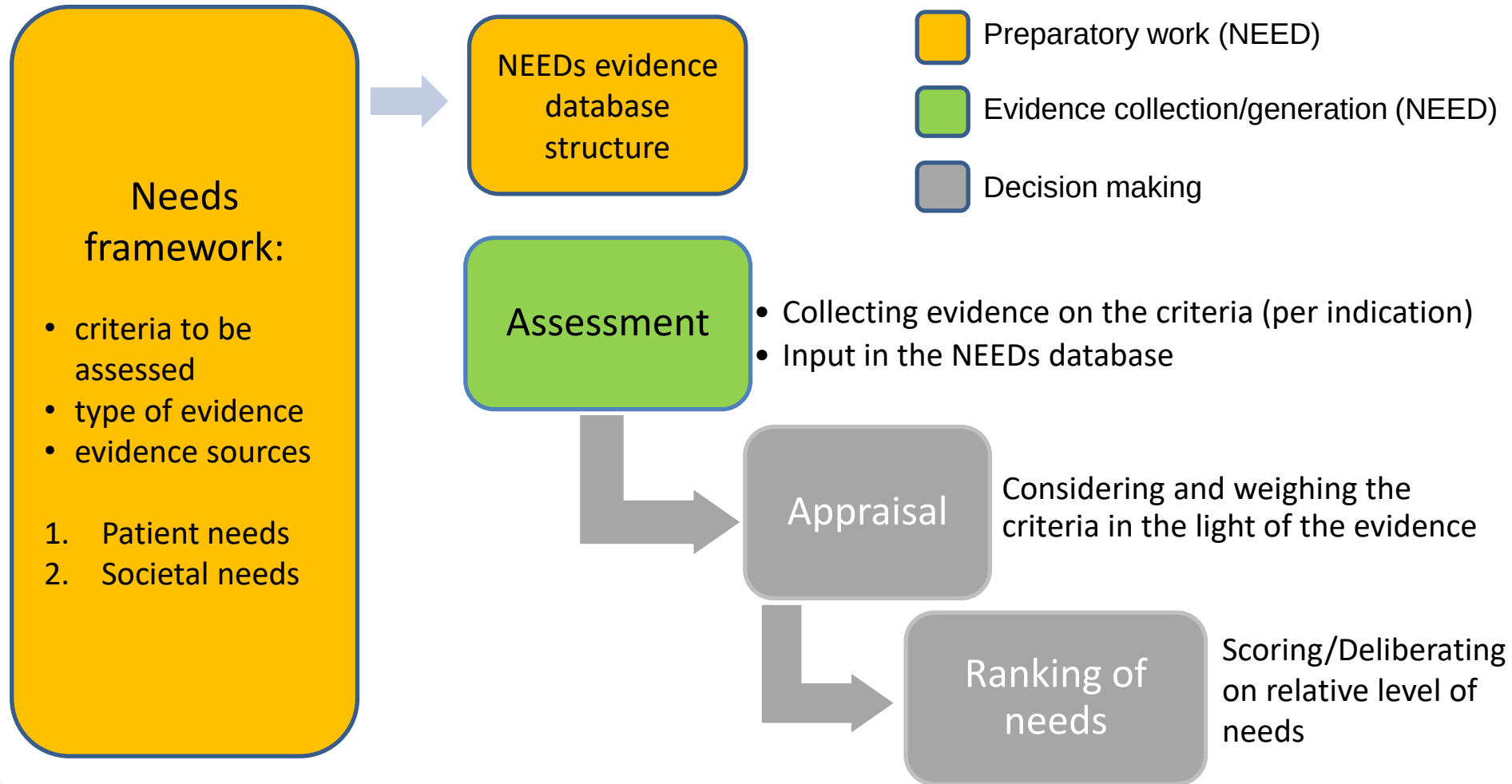
Belgian EU Presidency: 1-6/2024

- **“Unmet medical needs” focal topic**
 - Supply driven → needs driven healthcare policy
 - How to stimulate R&D in areas of high unmet medical needs
- **Along the lifecycle there are remits of the EU**
 - Incentives for R&D
 - Marketing approval

Objectives of NEED

- **To develop, host and maintain an evidence database on patient and societal needs** in different disease areas
- **To coordinate patient and societal needs research**
 - Prioritisation of topics
 - Standardisation of methods and procedures
 - High quality standards
 - Dissemination

Research Activities within NEED



Ongoing and future activities

- **Frameworks**
- **Pilot case studies**
 - Crohn's disease
 - Melanoma
 - and more in 2024-2026 ...
- **Applicability of frameworks and implementation model of NEED to rare diseases**



Looking ahead ... further steps

- **Step 1: Identification of patient and societal needs**
 - Scientific endeavour
 - Coordination of needs research – creation of an evidence database
- **Step 2: Developing an approach to appraise needs**
 - Prioritising needs: societal + patient perspective
 - How? Ranking / categorisation / ...
 - Who?
- **Step 3: Define applications**
 - How to relate priority areas to incentives for R&D?
 - Define willingness to pay?

