
Foreword

Health Economics Unit thriving!

Welcome to our latest newsletter. We are incredibly proud of the Health Economics Unit team and all that they are achieving under difficult circumstances, whilst surviving another COVID19 lockdown, and continuing to work largely from home. The team are making an impact on policy and practice and substantial research contributions nationally and internationally. The Unit will be stepping up their involvement in health technology assessment with state and federal governments which will be another opportunity for our team to directly input into policy decisions. Our teaching efforts remain substantial with our team leading 4 subjects into the Masters' of Public Health and many of our researchers are supervising students with a full year Masters research project in Health Economics. We are currently recruiting and soon to be advertising a further position we so look forward to welcoming more members to the team soon. Please reach out if you or someone you know is interested in studying or researching with us.

We hope you enjoy the articles we have put together showcasing our activities.

Associate Professor Kim Dalziel

Head of the Health Economics Unit



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Upcoming Health Economics Short Courses

The University of Melbourne is hosting its last two Health Economics short courses of 2021, which are designed to assist policymakers, clinicians, researchers, managers and others working in the health sector to understanding of health economic issues, and how these can aid decision making. Please click [here](#) for more course information.

Introduction to cost-effectiveness analysis in health | 8 October 2021 | In-person

A one-day introductory course that provides participants with a better understanding of health priority setting and the application of cost-effectiveness analysis. This introductory course has no assumed knowledge. It represents a good foundation for other courses offered in the series.

Practical Methods for Health Economic Evaluation | 27-29 October 2021 | In-person

A three-day intensive computer-based course in methods for health economic evaluation. The course covers study design principles, techniques for analysing costs and outcomes and an introduction to decision models.

Significant discounts available for students, professionals from low- and middle-income countries, MSPGH staff, and alumni. Please [contact us](#).

Featured News

Health Economics Unit EuroQoL grant success

Health Economics Unit has been recently successful in four EuroQoL grants on valuation of EQ-5D, using EQ-5D in younger populations, using EQ-5D in population and health system, respectively.



(L-R: Prof Nancy Devlin, A/Prof Kim Dalziel, Dr Tessa Peasgood, Dr Tianxin Pan)

Randomised equivalence study to compare online interviews versus face-to-face interviews to value the EQ-5D-5L

[Dr Tessa Peasgood](#), together with [A/Professor Kim Dalziel](#), [Professor Nancy Devlin](#) and [Dr Tianxin Pan](#) from the [Health Economics Unit](#), in collaboration with colleagues from University of Sheffield and University of Oxford, have been awarded an EuroQoL grant to examine the equivalence of face-to-face (F2F) and online interviews for generating time trade-off (TTO) utilities in Australia. The findings from this study will be used to inform the selection of mode(s) for future EQ-5D valuation studies, including the full UK EQ-5D-5L valuation. [Read more.](#)

Conceptual and empirical challenges for Using EQ-5D-Y values in economic evaluation

[Professor Nancy Devlin](#) and [Dr Tianxin Pan](#), in collaboration with A/Prof Richard Norman (Curtin University) have been awarded an EuroQoL grant to explore issues and challenges around use of EQ-5D-Y values in cost-effectiveness analysis (CEA). Led by Prof Devlin, this project aims to provide a systematic way of understanding these issues, identify a range of innovative and practical potential solutions, and provide guidance for researchers and decision makers. [Read more.](#)

Exploring the use of EQ-5D-3L in measuring population health in China

[Professor Nancy Devlin](#) and [Dr Tianxin Pan](#) from Health Economics Unit, in collaboration with Prof Jiaying Chen (Nanjing Medical University) were successful in an EuroQoL grant to explore the use of EQ-5D-3L in measuring population health and health inequalities in China. Led by Prof Devlin, this project aims to draw existing national representative data of EQ-5D-3L to generate EQ-5D-3L population norms for China; to investigate inequalities in health across social determinants of health; and to describe changes in population health between 2008 and 2018. [Read more.](#)

Extending the QUOKKA Multi-instrument comparison study for health-related quality of life of children

[Professor Nancy Devlin](#) and [A/Professor Kim Dalziel](#) in collaboration with Associate Professor Brendan Mulhern (University of Technology Sydney) have been awarded an EuroQoL large scale grant to extend the QUOKKA multi-instrument comparison study (MIC) for health-related quality (HRQoL) of life of children. They will be working with co-investigators Mike Herdman (Office of Health Economics, UK), Dr Janine Verstraete (University of Cape Town, South Africa), Professor Harriet Hiscock (Murdoch Children's Research Institute, MCRI) and in close collaboration with EuroQoL working groups including the Young Persons Working Group and with QUOKKA co-investigators.

This study proposes to leverage and extend the QUOKKA-MIC study already funded by the Australian Government to compare a suite of paediatric generic and condition specific instruments in a sample of 4000 children and their carers with 1000 recruited through a tertiary Children's Hospital. The QUOKKA-MIC will assess the acceptability, validity and responsiveness of measures but without a specific focus on EuroQoL measures. This EuroQoL research funding will allow the following additions to the QUOKKA-MIC study: further samples of children, a focus on EuroQoL instruments, work on international psychometric testing protocols and a protocol for an international MIC study for children. [Read more.](#)

Improving the way child health is measured and valued in HTA: an update on QUOKKA

MRFF-funded project MRFF1200816, "[Quality of Life in Kids: Key evidence for decision makers in Australia](#)" (QUOKKA) is a collaboration between HEU and researchers at the Royal Children's Hospital, Murdoch Children's Research Institute and Monash, Flinders, UTS and Curtin University. Led by HEU's [Professor Nancy Devlin](#), QUOKKA comprises a suite of six inter-linked projects which will strengthen the way child health is measured and valued, and to improve the evidence being considered in health technology appraisal of childhood interventions. Visit & connect to QUOKKA's website [here](#).



Project 1 is a large-scale multi-instrument comparison study, designed in collaboration with clinical partners to test the psychometric properties of a range of instruments in paediatric populations spanning a wide range of conditions and health problems. The data produced from this research will yield a unique and enduring resource for future researchers both in Australia and worldwide. Ethics consent has been obtained and data collection is underway.

Project 2 investigates the way children and their proxies report health on these instruments – an initial study using eye-tracking technology has completed data collection. In our next phase of work, we are exploring new ways of strengthening children's self-reporting of their health problems, using graphics and animations.

Projects 3-5 are exploring various methodological questions about how best to assign values to paediatric health states, using both qualitative and quantitative methods. In addition to methodological advances, this project will culminate in producing an Australian value set for at least one paediatric HRQoL instrument.

Project 6 investigates whether the general public support for prioritising health improvements in children, using both qualitative and quantitative methods.

QUOKKA's work is informed by a Decision Maker's Panel, a Consumer Advisory Group, and regular engagements with the Department of Health. We are also working closely with the TORCH research programme led by ANU to undertake a series of systematic reviews on paediatric health. [Read more.](#)

Preferences and values for rapid genomic testing in critically ill infants and children: a discrete choice experiment



A [new study](#) led by [A/Prof Ilias Goranitis](#) and colleagues from [Australian Genomics](#) was published in the *European Journal of Human Genetics*. The authors surveyed members of the Australian public and parents recruited within the [Acute Care Genomics study](#) to elicit preferences and values for rapid genomic testing in critically ill infants and children with a suspected genetic condition. With rapid genomic testing, results are returned, on average, in 2-3 days, a process that used to take 3-6 months.

Survey participants showed preference for more children being diagnosed and for higher chance of improving the process of the child's medical care and health outcomes. They also showed preference for faster return of genomic results. The study concluded that the average monetary value of the benefits of genomic testing relative to standard

diagnostic care of critically ill children is AU\$9510 for rapid (2 weeks results turnaround time) and AU\$11,000 for ultra-rapid (2 days results turnaround time) genomic testing. [Read more.](#)

Genomic sequencing for the diagnosis of childhood mitochondrial disorders: a health economic evaluation

A recent [article](#) by [You Wu](#), [A/Prof Ilias Goranitis](#) and colleagues from [Australian Genomics](#) was published in the *European Journal of Human Genetics*. The study assessed the cost-effectiveness and cost-benefit of genomic sequencing for diagnosing paediatric-onset mitochondrial disorders compared with conventional care. Two modelling approaches were used, including a decision tree to model the diagnostic and long-term clinical management costs and diagnostic outcomes, and a discrete event simulation to incorporate heterogeneity in the condition and clinical practice. Both approaches were informed with primary clinical and economic data collected prospectively as part of the [Australian Genomics Mitochondrial Disease clinical project](#) and retrospectively through the Sydney Children's Hospitals Network registry



The study found that genomic sequencing was less costly and more effective compared with conventional diagnostic approaches involving biopsy and enzymology, saving AU\$2000 to AU\$9000 per child tested, while leading to an additional 11 to 14 diagnoses for every 100 children tested. Implementation of genomic sequencing for mitochondrial disorders in Australia could translate to an annual cost-saving of up to AU\$0.7 million. [Read more.](#)

Modelling the Cost-Effectiveness of Latent Tuberculosis Screening and Treatment Strategies in Recent Migrants to a Low Incidence Setting

A recent [article](#) led by [Dr Natalie Carvalho](#) from the [Health Economics Unit](#) and colleagues at the Peter Doherty Institute, Royal Melbourne Hospital, Monash University, James Cook University, has been published in the *American Journal of Epidemiology*.

This paper assesses the cost-effectiveness of community-based latent tuberculosis infection (LTBI) screening and treatment strategies in recent migrants to a low-incidence setting (Australia). A decision-analytic Markov model was developed that cycled one migrant cohort annually over a lifetime from 2020. Post-migration/onshore and offshore strategies were compared to existing policy. Outcomes are presented as TB cases averted and discounted cost per quality-adjusted life year (QALY) gained. Findings were most sensitive to the LTBI treatment quality-of-life decrement (in addition to severe adverse events). Even with a minimal quality of life decrement, all strategies caused more ill-health than they prevented. Additional LTBI screening and treatment strategies in migrants are unlikely to be cost-effective unless screening costs are borne by migrants and potential LTBI treatment quality-of-life decrements are ignored. [Read more.](#)



Global economic costs due to vivax malaria and the potential impact of its radical cure: A modelling study.

A [recent article](#) by [Dr Angela Devine](#) from [Health Economics Unit](#), has been published in *Plos Medicine*. This article estimated the global economic costs due to *Plasmodium vivax* malaria, which is endemic throughout Asia, South America, and the Horn of Africa. This is the first time that country-level data on epidemiology, treatment seeking, and costs were brought together to estimate global costs with a total estimate of US\$359 million for 2017.



The authors then used a model to investigate how these estimates might change with global access to screening for glucose-6-phosphate-dehydrogenase (G6PD) deficiency before prescribing radical cure to clear the dormant liver parasites that cause future episodes of malaria. Alongside an investment to ensure perfect adherence to radical cure, an estimated 6 million cases could be prevented in one year, reducing overall costs by US\$93 million. [Read more.](#)

Cost-Effectiveness of Combination Therapy for Patients With Systemic Sclerosis–Related Pulmonary Arterial Hypertension



A new [modelling study](#), led by [Dr An Duy Tran](#) at the Health Economics Unit, assessed the cost-effectiveness of combination therapy compared with monotherapy for treatment of systemic sclerosis (SSc)-related pulmonary arterial hypertension (PAH). A patient-level simulation model, developed in C++ using linked data from the Australian Scleroderma Cohort Study, the Medicare claims and hospital admissions, were used for the analysis. This economic evaluation took into account a range of drugs used for the treatment in clinical practice and the variation in their prices in anticipation of the imminent expiry of drug patents.

The study, published in [Journal of the American Heart Association](#), showed that mean simulated costs per patient per year in monotherapy and combination therapy groups were A\$23,411 and A\$29,129, respectively. Mean life years and quality-adjusted life years from PAH diagnosis to death of patients receiving monotherapy were 7.1 and 3.0, respectively, and of those receiving combination therapy were 9.2 and 3.9, respectively. Given the fatal prognosis of PAH and the incremental cost per life year gained of AU\$47,989, combination therapy could be considered cost-effective in SSc-PAH. [Read more.](#)

Survival, Dependency, and Health-Related Quality of Life in Patients With Ruptured Intracranial Aneurysm: 10-Year Follow-up of the United Kingdom Cohort of the International Subarachnoid Aneurysm Trial

A recent [article](#) led by [Dr Xinyang Hua](#) and colleagues from the University of Oxford has been published in *Neurosurgery*. Based on a large multicentre randomized controlled trial ([the ISAT](#)), the study investigated the trends of survival, dependency, and health-related quality of life (HRQoL) over 10 years in patients with ruptured intracranial aneurysms who were treated with either endovascular coiling or neurosurgery clipping.

The authors find that the survival and independence status as well as overall HRQoL was better in the endovascular coiling group throughout the period of follow-up. Patients in the endovascular coiling group were estimated to have improvement in life years and quality-adjusted life years (QALYs) in both short and long term, with a third of the 10-year QALYs difference coming from differences in HRQoL alone. The study also provides insight into the long-term outcomes for subarachnoid hemorrhage survivors- the authors report that in both treatment groups, dependency and quality of life do not reach a steady state until 4 years post-treatment. [Read more.](#)

Economic evaluation methods used in home-visiting interventions: A systematic search and review

A review article by [Dr Cate Bailey](#) from the [Health Economics Unit](#) has been published in the Journal of Health and Social Care in the Community, in conjunction with colleagues at the [Health and Social Care Unit](#), Monash University.

In this paper we aimed to explore methods used in economic analyses of home visiting interventions where the population was children, young people and families. We were specifically interested in study design and economic methods where randomised controlled trials are not feasible as well as the types of costs collected. Given that economic analysis in the social care sector uses methods developed in healthcare, we were interested in how these were adapted and whether there were any novel economic methods used. We conducted a systematic review, and found that of the 21 included papers, most used cost-effectiveness, cost-benefit, cost-comparison and cost-consequence analysis. Where individual randomisation was not feasible, cluster randomised trials and pre-post intervention study designs were used. The outcomes of this review were subsequently used to inform a cost-effectiveness analysis of a family preservation program. [Read more.](#)

Evidence on the relationship between PROMIS-29 and EQ-5D: a literature review

A recent [literature review](#) by [Dr Tianxin Pan](#), [Professor Nancy Devlin](#) and [Dr An Duy Tran](#) from Health Economics Unit and colleagues from University of Technology Sydney (UTS), Curtin University and University of Pittsburgh, has been published in the Quality of Life Research. This literature review synthesised existing evidence on the relationship between two generic measures of patient-reported outcomes accompanied by preference weights : PROMIS-29 and EQ-5D. It found only nine studies that investigated the relationship between these instruments, and highlighted that more research comparing PROMIS-29 and EQ-5D-5L is needed, including a comparison of the two instruments as descriptive systems, comparing the characteristics of the value set, and validation of the EQ-5D-5L mapping algorithm from PROMIS-29 domains particularly in patient groups. In their ongoing work, the team compares the characteristics of all the theoretical values from both value sets, and assess the impact of differences in value sets using patient data. These two studies have been presented at the 2020 EuroQol Group Scientific Plenary Meeting and 2021 EuroQol Academy meeting, respectively. [Read more.](#)

What is the best approach to adopt for identifying the domains for a new measure of health, social care and carer-related quality of life to measure quality-adjusted life years? Application to the development of the EQ-HWB?

A recent paper exploring approaches for choosing domains within preference-based measures of health and quality of life has been published by [Dr Tessa Peasgood](#) and [Professor Nancy Devlin](#) from the [Health Economics Unit](#), in collaboration with researchers from Sheffield and Kent Universities and the National Institute of Health and Care Excellence in the UK has been published in the [European Journal of Health Economics](#). This paper explores different methods that can be used to identify the content of a new generic instrument to measure Quality Adjusted Life Years (QALYs). It covers how to identify domains and who should provide information on the domains. The paper sets out the case for an approach that relies on the voice of patients, social care users and informal carers as the main source of information and describes how this approach was operationalised in the 'Extending the QALY' project which developed the new measure, the [EQ-HWB](#) (EQ Health and Wellbeing instrument). [Read more.](#)

The role of response domain and scale label in the quantitative interpretation of patient-reported outcome measure response options

A recent article on response options used in Patient Reported Outcome Measures by [Dr Tessa Peasgood](#) from [Health Economics Unit](#), Centre for Health Policy and colleagues at Sheffield University in the UK has been published in [Quality of Life Research](#). This paper reports on a study in which members of the UK public were asked to give a numerical interpretation of terms like these when used in questions about happiness, loneliness, and ability to do activities. The study concluded that members of the public quantify common response options in a similar way, but their quantification is not equivalent across domains or every type of respondent. Recommendations for preferred response labels are provided. [Read more.](#)

Association between 24-hour movement behaviors and health-related quality of life in children

A recent article on Association between 24-hour movement behaviours and health-related quality of life in children by HEU PhD candidate, Xiuqin Xiong, together with [A/Prof Kim Dalziel](#), [Dr Natalie Carvalho](#), [Dr Li Huang](#) and colleague from Monash University has been published in [Quality of Life Research](#).

The researchers explored the relationship between meeting the integrated 24-hour movement guidelines including recreational screen use, physical activity and sleep, and health-related quality of life (HRQOL) by age group and socio-economic status. They found a positive association between adherence to 24-hour movement guidelines and HRQOL using a nationally represented sample of nearly 9,000 children aged 2-15 years in Australia. Meeting physical activity guidelines alone contributed more to HRQOL than meeting sleep and recreational screen time guidelines alone respectively. [Read more.](#)

The association between mental-physical multimorbidity and disability, work productivity, and social participation in China: a panel data analysis

A recent [article](#) by [Dr Tianxin Pan](#) and Emily Hulse from [Health Economics Unit](#), together with [Prof Barbara McPake](#), [Dr John Lee](#) from The Nossal Institute for Global Health, and colleagues from University of Edinburgh and Harvard University, has been published in BMC Public Health. This study investigated the independent and combined effects of mental and physical chronic conditions on disability, work productivity, and social participation in China using two waves of the China Health and Retirement Longitudinal Study (2011, 2015).



This study found that the prevalence of multimorbidity was 76% among Chinese aged over 45 years in 2015. Among them, 43% had both mental and physical chronic conditions. The study concluded that mental-physical multimorbidity poses substantial negative health and economic effects on individuals, health systems, and societies. [Read more.](#)

Allocating Public Spending Efficiently: Is There a Need for a Better Mechanism to Inform Decisions in the UK and Elsewhere?

[Professor Nancy Devlin](#), with colleagues from the Office of Health Economics in London and Brunel University London, published a [new paper](#) that explores the evidence currently being used to allocate budgets between public sector activities in the UK and its limitations. In the paper, the authors argue that there is much that can and should be done to improve the evidence base to inform the allocation of public sector budgets across portfolios. The authors propose a pragmatic approach to measure and value disparate public sector outputs in a commensurate manner. [Read more.](#)

New Funding and Awards

Australian Genomics Grant Success



[Australian Genomics](#) has secured a three-year Australian Government grant for the period 2021-23, administered by the NHMRC, to support genomic research and its translation into clinical practice. Health economics, led by [A/Prof Ilias Goranitis](#), is an integral component of Australian Genomics. The team will provide health economic support to government-funded genomic research and will facilitate the communication of health economic findings to State and Federal Governments, while tackling key applied and methodological issues in the economics of genomic medicine nationally and internationally.

More new funding

A/Prof Jason Ong, honorary staff member at Health Economics Unit, along with colleagues at the Melbourne Sexual Health Centre, Alfred Health, Monash University and the University of Melbourne were successful in an NHMRC Partnership Project (\$1.25 million) focused on improving the control of syphilis. This grant is led by Prof. Marcus Chen from Monash University. The grant will investigate novel methods for improving syphilis testing including methods for improving syphilis testing in antenatal services and general practice. Improved screening in antenatal services is needed to combat the rise in syphilis among pregnant women and congenital infections. The grant will also investigate the use of genomics to improve tracking and targeting of syphilis outbreaks. Jason will lead the economic evaluation of these novel methods in controlling syphilis.

Research Engagement

Stay tuned! Health Economics Unit is presenting at the International Health Economics Association Congress 2021

The Health Economics Unit (HEU) will have a strong presence at the International Health Economics Association (iHEA) Congress 2021. We will have the following oral presentations (HEU researchers in bold):

- **Ilias Goranitis, Tianxin Pan, Yan Meng, You Wu.** Welfarism and extra-welfarism in rare genetic diseases: who QALYfies?
- **Cate Bailey, Nancy Devlin, Kim Dalziel,** Rosalie Viney. The use of child-specific utility instruments in decision-making in Australia; a study of Pharmaceutical Benefits Advisory Committee (PBAC) Public Summary Documents. (Within organised session: Issues and Directions in the Measurement and Valuation of Health of Children)
- Sonia Singh, Stephen Hearps, **Kim Dalziel,** John Cheek, Vicki Anderson, Jeffrey Hoch, Franz Babl. Acute Care Costs of Pediatric Sports-Related Head Injuries in Australia: The Australasian Paediatric Head Injury Study (APHIRST)
- **Xiong X, Dalziel K, Huang L,** Rivero-Arias O. Test-retest reliability of 'best' and 'worst' scaling choices for the EQ-5D-Y: comparison of adult and adolescent preferences
- **Kim Dalziel,** Anthea Sijan, **Natalie Carvalho.** Systematic review of published economic evaluations in very young children: implications for decision making focusing on use of outcome measures and QALYs (Within organised session: Issues and Directions in the Measurement and Valuation of Health of Children)
- **Li Huang, Nancy Devlin, Kim Dalziel.** A Happiness Approach to Health State Values for Children
- **Jemimah Ride,** Claire de Oliveira, Nicole Black, Rowena Jacobs. Is subjective unmet need for mental health care a valid measure compared to a more 'objective' metric?
- Nienke Neppelenbroek, Ardine de Wit, **Kim Dalziel, Natalie Carvalho.** Use of Utility and Disability Weights in Economic Evaluation of Pediatric Vaccines: A Systematic Review
- **Xinyang Hua,** Claire Carson, Maria Quigley, Jenny Kurinczuk, Oliver Rivero Arias. Long-term health service utilisation and cost after assisted reproductive technologies: a record linkage study for England

And poster presentations:

- **Ilias Goranitis.** Preferences and values for rapid genomic testing in critically ill infants and children: a discrete choice experiment
- **Natalie Carvalho,** Emma Watts, Rita Reyburn, **Patrick Abraham,** Eric Rafai, Aalisha Sahukhan, Andrew Clark, Fiona Russell. Economic Evaluation of Meningococcal C Vaccination in Fiji Following the 2016-2018 Meningococcal Disease Outbreak
- Jarir At Thobari, Sutarman, Asal Wahyuni Erlin Mulyadi, Emma Watts, **Natalie Carvalho,** Frédéric Debellut, Andrew Clark, Yati Soenarto, Julie Bines. Direct and Indirect Costs of Acute Diarrhea in Children Under-Five Years Old in Indonesia
- Susanna Lake, Daniel Engelman, Oliver Sokana, Titus Nasi, Dickson Boara, Michael Marks, Margot Whitfield, Lucia Romani, John Kaldor, Andrew Steer, **Natalie Carvalho.** Quantifying the Health-Related Quality of Life Burden of Scabies
- **An Tran-Duy,** Adrian Barnett, Jay Stiles, Laurence Roope, **Philip Clarke.** Evolution of health inequalities between privileged and general populations: The comparative life expectancies of 57,561 politicians with 2.6 million years of follow-up

For program and more information about iHEA 2021 Congress, please visit [here](#).

A new media article published in *The Conversation*: “Yes, lockdowns are costly. But the alternatives are worse”

Mr Patrick Abraham and Dr Natalie Carvalho from Health Economics Unit, with colleagues Dr Laxman Bablani and Professor Tony Blakely from the Population Interventions Unit, recently published an online article in *The Conversation*. The article discusses how the costs of policy responses to the COVID-19 pandemic should be framed and considers alternative costs from both health economics and epidemiological perspectives. The article builds on a recent publication (in press) in JAMA Health Forum, and the team’s Pandemic Trade-off Model which is available online. “To put it simply, the costs of lockdowns can’t be calculated in isolation from their role in the strategy chosen to control COVID-19... elimination requires fewer lockdowns with better health and economic outcomes.” [Read more.](#)



ISPOR VIC-TAS Student Chapter recognised with prestigious ISPOR awards and welcomes new executive committee members

The Victorian and Tasmanian student chapter of the Professional Society of Health Economics and Outcomes Research (ISPOR) Student Network has been awarded with the “Outstanding New Student Chapter Award” and the “Best Student Chapter Collaboration Award” by the ISPOR Student Network. The forming of the student chapter is initiated by Health Economics Unit Professor Nancy Devlin and supported by Dr Koen Degeling (University of Melbourne Cancer Health Services Research group), supported by and a team of faculty advisors across four collaborating universities. Dr Cate Bailey (Health Economics Unit) and Martin Vu (University of Melbourne Cancer Health Services Research group) together with colleagues from Monash University, Deakin University and the University of Tasmania were recognised for their dedication and commitment to students in their inaugural year. [Read more.](#)

Prof Philip Clarke talk at Centre for Health Policy Series



On June 16th Professor Philip Clarke (Director of the [Health Economics Research Centre](#) at the Nuffield Department of Population Health, University of Oxford UK, and Professor of Health Economics at the [Health Economics Unit](#) in the Melbourne School of Population and Global Health) presented a seminar titled “How does the public think COVID-19 vaccines should be allocated?: Insights from the COVID-19 Vaccine Preference and Opinion Survey (CANDOUR) study”. The rapid development of COVID-19 vaccines has provided a way to end the pandemic if the vaccines can be successfully rolled out globally. Different countries have adopted a broad range of roll-out strategies. This seminar provided an overview of the CANDOUR study, a global internet-based survey involving around 16500 members of the public from 14 countries (Australia, Brazil, Canada, Chile, China, Colombia, France, India, Italy, Russia, Spain, Uganda, United Kingdom and the United States). It provided an overview of key findings on public preferences and attitudes on a range of issues including: who should be prioritized to receive a COVID-19 vaccine; whether COVID vaccination should be made mandatory; the level of support for donating vaccines to other countries in greater need; attitudes towards the use of lotteries as a rationing mechanism. It concluded with an overview of plans for the CANDOUR study to continue collecting follow-up data to evaluate key aspects of the global roll-out of COVID-19 vaccines. [Read more.](#)

Dr Natalie Carvalho invited talk at University of Sydney Clinical Trials Centre’s Health Economics seminar

Natalie Carvalho was an invited speaker at the University of Sydney Clinical Trials Centre’s Health Economics seminar series on 19 May 2021, on the topic of Equity Considerations in Cost-Effectiveness Analysis. More information [here](#).

Professor Nancy Devlin presented at ISPOR

Nancy Devlin presented on “Utilities for pediatric HRQoL: challenges for HTA” as part of an issues panel on “Are child QALYs equivalent to adult QALYs?” at ISPOR May 2021. At the ISPOR US value assessment Summit June 2021, Nancy presented on “Expanding patient and societal considerations in value assessment – the case of pediatric interventions.”

Professor Nancy Devlin at the international workshop for the EuroQol Group on the valuation protocol for the EQ-5D-Y

Nancy Devlin chaired a 3-day international workshop for the EuroQol Group on the valuation protocol for the EQ-5D-Y, June 22nd, 24th and 25th 2021. The purpose of the workshop was to review the results from value set studies completed, underway and planned for the EQ-5D-Y using the existing protocol. As part of this workshop, Nancy presented the following paper: Devlin N, Pan T, Sculpher M, Jit M, Stolk E, Rowen D, van Hout B, Norman R. (2021) Using utilities for pediatric HRQoL in cost effectiveness analysis – challenges and potential solutions. The paper will also be presented at the 2021 EuroQol scientific plenary meeting.

Staff and Student News



Congratulations to A/Prof Ilias Goranitis

We were delighted to celebrate the promotion of Ilias Goranitis to Associate Professor. Ilias is successfully leading the health economics of [Australian Genomics](#) and has established a continuously growing program of research in the area of Genomic Medicine. We were delighted that his successes with grants and papers and his leadership within HEU and the University were recognised. Onwards and upwards!



Congratulations to Michelle Tew on her PhD completion

Congratulations to HEU's PhD candidate, [Michelle Tew](#), on completing her PhD thesis titled "Advancing economic evaluation methods for better medical decision making through real-world, longitudinal data" under the supervision of Associate Professor [Kim Dalziel](#) (primary supervisor), Professor [Philip Clarke](#), Associate Professor Michelle Dowsey and Professor Karin Thursky.

Michelle's thesis aims to demonstrate the usefulness and practicality of applying real-world, longitudinal data in health economics research and evaluations. It features six individual health economics studies which explore longitudinal data and show their value and contribution towards advancing economic evaluation methodologies and better decision making. Further details and access to the thesis can be found [here](#).

Selected Publications in 2021

Eva, G., Gold, J., Makins, A., Bright, S., Dean, K., Tunnacliffe, E., ... **Dalziel, K.** (2021). [Economic Evaluation of Provision of Postpartum Intrauterine Device Services in Bangladesh and Tanzania](#). *Global Health Science and Practice*, 9(1), pp. 107-122.

Fanning, L., Woods, E., Hornung, C., Perrett, K., Tang, M. & **Dalziel, K.** (2021). [Cost-Effectiveness of Food Allergy Interventions in Children: A Systematic Review of Economic Evaluations](#). *Value in Health*, doi:10.1016/j.jval.2021.02.010

Anderson, V., Rausa, V. C., Anderson, N., Parkin, G.,..., **Dalziel, K.**,... Babl, F. E. (2021). [Protocol for a randomised clinical trial of multimodal postconcussion symptom treatment and recovery: the Concussion Essentials study](#). *BMJ Open*, 11(2), pp. 11-. doi:10.1136/bmjopen-2020-041458

Xiong, X., Dalziel, K., Carvalho, N., Xu, R. & Huang, L. (2021). [Association between 24-hour movement behaviors and health-related quality of life in children](#). *Quality of Life Research*, pp. 10-. doi:10.1007/s11136-021-02901-6

Cubi-Molla, P., Buxton, M. & **Devlin, N.** (2021). [Allocating Public Spending Efficiently: Is There a Need for a Better Mechanism to Inform Decisions in the UK and Elsewhere?](#) *Applied Health Economics and Health Policy*, pp. 10-. doi:10.1007/s40258-021-00648-2

Palmer, A. J., Campbell, J. A., de Graaff, B., Devlin, N., Ahmad, H., Clarke, P. M., ... Si, L. (2021). [Population norms for quality adjusted life years for the United States of America, China, the United Kingdom and Australia](#). *Health Economics*, pp. 28-. doi:10.1002/hec.428

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