

Oxford Outcomes opens Toronto Office

We are pleased to announce that we have opened a new Oxford Outcomes office in Toronto, Canada. The consultancy team is led by recent appointments: Robert Bick, Senior Manager for Market Access and Reimbursement and Nancy Risebrough, Senior Health Economist. The new office contact details are:

Oxford Outcomes Ltd.
235 Yorkland Boulevard, Suite 402
Toronto, Ontario
Canada, M3A 2R7
email: robert.bick@oxfordoutcomes.com
nancy.risebrough@oxfordoutcomes.com

ISPOR Orlando 2009

Oxford Outcomes participated in a wide range of activities during ISPOR Orlando which included:

A symposium on Assessing comparative effectiveness and comparative value in the US and other countries.

Two short courses on: Utility measures and Advanced decision modelling for health economic evaluations.

A podium presentation on: The use of pharmacogenetic

testing to determine adjuvant hormonal therapy choice in early stage breast cancer patients: a value of information analysis.

The presentation of eight posters covering *research in Patient Reported Outcomes, Health Economics and Translation and Linguistic Validation.*

We are also pleased to announce that Beth Woods, Senior Health Economist, received a “Best New Investigator Podium Presentation” award at ISPOR.

Early Stage Modelling

Modelling of the potential cost-effectiveness of products early in the development cycle has a number of potential benefits, including providing insight into the potential pricing strategy for a product prior to the final price being set, the potential for the model to be used to assist with the prioritisation and design of future research studies, and increasing preparedness for reimbursement submissions. Input into the pricing negotiations within a company are important to manage expectations about the potential consequences of different pricing strategies for the value messages demanded in different jurisdictions. Using early models to help prioritise and design future research studies, for example by collecting appropriate endpoints to support value messages and reimbursement, is important to achieve the full value from limited research budgets. Preparedness for reimbursement is helped by starting modelling early and

developing models iteratively, and this will become increasingly important as the time between regulatory and reimbursement submission decreases. Finally, perhaps the most important role of early modelling is about improving communications both internally within a company, between the outcome research and other departments, and externally with reimbursement authorities and other payers. Good models tell a ‘cost-effectiveness story’ and explain how the value messages contained within a company’s aspirations for a product translate through the clinical measures typically used in early phase development to the final health outcomes and costs usually of interest to payers.

Disease Transmission Modelling

Oxford Outcomes has expertise in infectious disease transmission modelling, in addition to those of traditional epidemiology, health economics and patient reported outcomes. These areas perfectly complement each other and are supported by a thorough understanding of the underlying biological principles involved with infectious disease transmission. The orchestration of these skills is one factor that sets us apart from other consultancies, and our willingness to innovate, while maintaining rigorous standards of quality. Such standards are required for submission of single or multiple technology assessments

to the UK National Institute for Health and Clinical Excellence (NICE), the UK Joint Committee on Vaccination and Immunisation (JCVI), the European Medicines Agency (EMA), the US Food and Drug Administration or Health Canada. We have experience in evaluating a range of technologies, including vaccines, antibiotics, anti-virals and anti-infectives, using a diverse range of analyses, including cost-effectiveness analyses (together with probabilistic sensitivity analyses), budget impact, pricing and the production of core value documents; with specific

New Staff

Oxford

Scott Doyle - *Outcomes Researcher*

Scott is an experienced researcher in patient reported outcomes, having designed and managed a large number of projects including utility collection; willingness-to-pay/discrete choice; systematic literature reviews; conceptual frameworks and endpoint models; instrument selection, design and validation; qualitative research (one-on-one; focus groups); medical chart reviews; translation and cultural adaptations; label claim language; evidence dossiers, and multinational ethics and regulatory submissions. Scott has worked across a number of therapeutic areas including endocrinology, cardio-respiratory, dermatology, psychiatry, oncology, neurology, and sexual health.

Beenish Nafees – *Senior Outcomes Researcher*

Beenish has over four years of experience in health outcomes research, including designing and managing studies of varying designs in patient-reported outcomes such as utility studies, willingness-to-pay/discrete choice; literature reviews; instrument selection, design and validation; qualitative research; with patients and general public. Beenish has worked across a wide range of therapeutic areas such as mental health, respiratory diseases, endocrinology, oncology, ophthalmology and sexual health and has experience of carrying out research in various major countries, eg UK, US, Canada and Australia. Laura Clough – Project Co-ordinator Laura is in her first year at Oxford Outcomes, and gained her BA in Classics and English from

adaptations to account for scenarios involving the transmission process. This entails working with systems that are non-linear and which therefore require expertise in numerical analysis in order to properly analyse them. While these techniques may be unfamiliar to many clients, we are able to present them in an easy to use format, typically using Excel as a front end, or hosting the model on our own high performance servers. Backends may be written in VBA, Fortran or C, depending on the requirements of the model, and are always fully documented.

the University of Oxford in 2007. Before joining Oxford Outcomes, she gained experience in editing and project management with a digital publications company. She has worked on a range of translation projects and has experience of all stages of the translation and linguistic validation process, including cognitive debriefing.

Bethesda

Medha Sasane - *Senior Outcomes Researcher*

Medha is a pharmacist and health care researcher by training. She recently graduated from the University of Wisconsin-Madison with a PhD. in Social and Administrative Sciences in pharmacy. For her doctoral dissertation, which was in the area of HIV/AIDS, Medha developed and validated survey instruments, and collected data from 3,000 college students in India to evaluate their attitudes, beliefs, and behaviors towards HIV testing. Prior to her Ph.D., Medha worked as a health economics and outcomes researcher for 7 years, developing survey instruments, economic models, and evaluating patient outcomes using large databases (eg Medicaid or managed care databases). Some of the studies she has worked on involved conducting focus groups and item generation for quality of life instrument development, evaluating psychometric properties, and using QOL data collected in clinical trials to build economic models. She has also managed projects identifying appropriate treatment patterns, assessing patient adherence to treatments, conducting literature reviews, developing health economic models, and evaluating health outcomes using large databases.

Upcoming Presentations and Courses

Over the next few months the Directors of Oxford Outcomes are involved in the following presentations and courses:

27th - 29th July 2009, University of Glasgow

Systematic Review and Meta-analysis of Direct, Indirect and Mixed Treatment Evidence,
www.gla.ac.uk/departments/healtheconomicappraisalsteam
Neil Hawkins, Olivia Wu

23rd August 2009 – 30th International Conference on Biostatistics, Prague, Czech Republic

Opening Plenary Session: You can run, but you cannot hide: decision-making and indirect comparisons in a resource limited healthcare system
Neil Hawkins

7-11th September 2009 – Royal Statistical Society (RSS) Conference, Edinburgh, UK

Oral Presentation: You can run but you cannot hide: data analysis and decision-making in a resource limited healthcare system.
Neil Hawkins, Alex Sutton

**24-27th October 2009
ISPOR 12th Annual European Meeting, Paris, France**

- Introduction to Patient-Reported Outcomes Assessment: Instrument Development & Evaluation
Saturday 24th October 2009 9:00am-1pm
Andrew Lloyd, Diane Wild.
- Introduction to Systematic Reviews and Meta-Analysis
Saturday 24th October 2009 2-6pm – Pre-Conference Short Course: Neil Hawkins, Olivia Wu
- Pre-Conference Short Course: Introduction to Statistical Theory
Date & time TBC
Andrew Briggs, Neil Hawkins