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Meeting Highlight

First European Conference on the Economics of Cancer

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THE FIRST European Conference on the Economics of Cancer, arranged by the EORTC Health Economics Unit, took place in Brussels in November 1997. Two hundred and eighty participants from Europe, North America and Asia participated in the 2-day conference. The time of the conference was evenly split between invited lectures and submitted abstracts.

The invited lectures of the conference covered methodological issues, state-of-the-art assessments and several position papers from various cancer organisations, including the Federation of European Cancer Societies and the Cancer Research Campaign (U.K.).

One of the main issues addressed was the collection of cost data. Linda Davies from the University of York discussed the advantages and disadvantages of integrating clinical and economical evaluations in the form of randomised clinical trials with collection of resource utilisation data. She concluded that such integrated evaluations could be useful as an indication of the potential cost-effectiveness of a new intervention. Before embarking on any such combined study, however, it is essential to ensure that an economic evaluation of the clinical issue is indeed necessary in order to improve allocation efficiency and that the study will give 'value for money', i.e. that the expected benefits of the information gained is higher than the cost of obtaining it. Further, the feasibility of the study (cost, sample size, length of follow-up) and its design (ability to secure valid and credible data) should also be critically examined.

Some of the statistical problems raised by the collection of cost data in prospective clinical trials were discussed (Ben van Hout, iMTA, Rotterdam, The Netherlands). For the analysis of stochastic cost-effectiveness data, simple techniques of analysis used in standard sensitivity analyses will no longer do. For many of the issues raised, for example, finding confidence intervals for cost-effectiveness ratios, satisfactory solutions have now been found. For many other questions, for example, inclusion or exclusion of outliers, the decision is essentially arbitrary. In these cases, decisions should be made before data analysis or should be based on blind data. It should also be emphasised that clinical trials deal with uncertainties and there may be much to gain by combining trial data with modelling techniques and using Bayesian analysis techniques. Advances in this area are in progress.

It was stressed that even when using prospective data collection in clinical trials, an element of modelling will be necessary in most economic evaluations of cancer therapies, at least to estimate cost data with multivariate statistical models (Kit Simpson, Chiron Diagnostics, California, U.S.A.). Indeed, clinical trials may be conceived as models, as simplifications used to investigate a restricted part of reality. The modelling process in itself is extremely useful, as it provides a vehicle for structured communication, for making clear where the most important gaps in knowledge are. As such, modelling may also be a very useful tool for the planning and design of future clinical trials.

Current research by Marie-Odile Carrère (Centre Léon Bérard, Lyon, France) aims to assess the transferability of the results of published economic evaluations to other settings. She described a methodological approach to screening and examination of the existing literature and a case study concerning adjuvant therapy for women with breast cancer. Based on the finding that none of the studies identified and scrutinised were judged to be entirely relevant for the French situation, she made a plea for international standardisation of the reporting format for economic evaluations and also for carrying out more multinational clinical trials with integrated economic assessments.

Many other issues were discussed, including the economic implications of palliative care (S. Ahmedzai, University of Sheffield, U.K.), cancer screening programmes (M. Brown, National Cancer Institute, Maryland, U.S.A.), and specific diseases and treatments (e.g. lung cancer, P. Goodwin, University of Toronto, Canada; haematological growth factors, T. Smith, Massey Cancer Center, Virginia, U.S.A.). The meeting was of great interest in addressing the important issue of the economics of cancer. This issue will become even more important in the future, as each new therapeutic progress must be expected to be limited (e.g. in terms of survival gain), but costly.

The accepted abstracts from the conference were published in Volume 33, Supplement 9 (1997) of the *European Journal of Cancer*.