Economic evaluation methods such as cost-effectiveness analyses are occasionally added to clinical trials

- The purpose is to offer evidence on whether a new intervention is likely to offer an efficient use of resources relative to existing treatments

Such evaluations fit into concern with a larger economic question

- Would introducing a particular intervention into practice result in an improved use of resources?
Cost Effectiveness and Clinical Trials

Tell us the potential a particular intervention offers for efficient use of resources if used by the types of people in the trial and administered according to protocol.

In practice, a range of patients receive specific treatments and they can differ from those observed in trials.

Interventions in trials are commonly administered according to very detailed protocols at high levels of fidelity.
When new interventions are introduced into practice they frequently produce disappointing results with regard to cost-effectiveness.

Challenge in stepping beyond narrower conceptions of CEA in clinical trials is to design a trial that can provide information that will inform the design of common practice.
What types of information is important for efficiency in practice?

- The segments of the patient population that are willing to engage in treatment
- Understanding heterogeneity of impacts for the population of potential patients
- Identifying the active ingredients of an intervention and which ones add costs, complexity and few gains in outcome
- The extent that designs aimed at multiple chronic conditions must step away from cost-effectiveness results on individual illness components (heart disease and depression)
Trials may be have broader inclusion criteria
Trials may be larger
Trial may have more arms (based on detailed stratification hypotheses)
Pre-randomization data collection may be more extensive