OBJECTIVES: The National Committee for Technology Incorporation (CONITEC) aims to suggest price criteria for recommending technologies in the Egyptian Healthcare System (SUS). For this, it produces reports with recommendations with different characteristics. To analyze the CONITEC reports on incorporation, exclusion or modification of technologies in the SUS, the study analyzed the CONITEC reports from January 2012 to December 2014. Reports were classified according to type of technology, type of applicant, type of report, presence of Health Economic Evaluation (HEE), and the type of HEE. The majority of reports were classified as: Description of Technology (46%), Mini Health Technology Assessment (33%), Rapid Review (23%) and only 4% of the reports were Full Health Technology Assessment. One hundred and one reports studies included some economic evaluations. Among them, 53 (52%) were classified as HEE and the other 46 were Full HEE. Among the analyzed reports (n = 132), only 25% (n = 33) performed a complete HEE with ICER. CONCLUSIONS: The type of technologies most frequently evaluated were drugs (62.5%), procedures (19.7%) and materials (9.1%). The two major applicants were: Public Health System (51.5%) and pharmaceutical industry (37.1%). The majority of reports were classified as: Description of Technology (46%), Mini Health Technology Assessment (33%), Rapid Review (23%) and only 4% of the reports were Full Health Technology Assessment. One hundred and one reports studies included some economic evaluations. Among them, 53 (52%) were classified as HEE and the other 46 were Full HEE. Among the analyzed reports (n = 132), only 25% (n = 33) performed a complete HEE with ICER.

Methodology:

1. Use of Incremental Cost-Effectiveness Ratio (ICER) in Technology Incorporation in the Egyptian Health System.

1.1. Data source and study design:

- The study included all CONITEC reports on incorporation, exclusion or modification of technologies in the SUS from January 2012 to December 2014.
- Reports were classified according to type of technology, type of applicant, type of report, presence of Health Economic Evaluation (HEE), and the type of HEE.

1.2. Data extraction:

- The data was extracted from the CONITEC website and the reports themselves.
- The following variables were extracted: type of technology, type of applicant, type of report, presence of HEE, and the type of HEE.

1.3. Data analysis:

- The data was analyzed using descriptive statistics.
- The results were presented in tables and graphs.

2. Results:

- The most frequently evaluated technologies were drugs (62.5%), procedures (19.7%) and materials (9.1%).
- The two major applicants were: Public Health System (51.5%) and pharmaceutical industry (37.1%).
- The majority of reports were classified as: Description of Technology (46%), Mini Health Technology Assessment (33%), Rapid Review (23%) and only 4% of the reports were Full Health Technology Assessment.

3. Discussion:

- The results showed that HEE is not routinely conducted in the SUS.
- The lack of HEE in the SUS may have implications for the equitable distribution of healthcare resources.

4. Conclusion:

- The results highlight the need for improvements in HEE in the SUS to ensure equitable distribution of healthcare resources.

5. Recommendation:

- The SUS should consider implementing measures to promote the routine conduct of HEE in the SUS.

6. Concluding remarks:

- The results of the study provide valuable insights into the conduct of HEE in the SUS.

7. Future research:

- Further research is needed to explore the barriers to the routine conduct of HEE in the SUS.