EMPirical RESEARCH FOR WILLINGNESS TO PAY FOR ONE QALY GAIN
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OBJECTIVE: The monetary evaluation for QALY gain is necessary and important information for decision making about medical or public health policies. Even though there is one empirical research about it, it used direct methods to estimate its WTP and thus it has a lot of problems. This paper aims to study the same purpose but by using Conjoint analysis. METHODS: A survey was conducted in the 2005 fiscal year and questionnaires were distributed and collected from 773 households, of which the return rate was 88%. The subjects are 1297 adults over age 20. In addition to socio-economic characteristics, in this survey respondents were asked a hypothetical question for Conjoint analysis; whether they would agree to the medical care under the hypothetical situation in regards to cost, duration, the number of patients, and health status. We also performed sensitive analysis in regards to explanatory variables in the estimation equation, discount factors, and QOL. evaluation for health status. RESULTS: In all equation, the estimated coefficients of total cost are significantly negative and those of QALY gain are significantly positive. CONCLUSIONS: The potential usefulness of patient-reported side effect scales is broad: from research to clinical monitoring. However, a consensus must be reached on suitable methods for the development of such scales. The complexity of side effect measurement may necessitate the introduction of new approaches for the assessment of the reliability and responsiveness of these scales.

MEASURING PATIENT-REPORTED SIDE EFFECTS OF DRUGS: ITS IMPORTANCE AND METHODOLOGICAL CHALLENGES
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INTRODUCTION: Side effects include drug-induced symptoms which are predominantly communicated by patient self-report. This year, the FDA produced draft recommendations for the validation of patient-reported outcomes, for use in medical product development studies. The growing interest in side effects in medical research and the regulatory environment, presents an urgent need for properly developed patient-reported outcome measures of drug side effects. These measures must be valid, reliable and reproducible. METHODS: To assess the psychometric properties of patient-reported side effect symptom scales, and to describe and evaluate the methodologies used to create them. RESULTS: Fifteen existing scales were identified and reviewed. There was wide variation in the extent to which the psychometric properties of the instruments had been reported or tested. There were disagreements amongst scale developers concerning the appropriateness of use of certain reliability tests which are usually routinely undertaken during questionnaire development. The responsiveness testing of side effect scales may be problematic to carry out and testing was limited amongst reviewed scales. Since any symptom of a drug intervention may be associated with everyday health problems, the disease being treated, the drug treatment or a combination of these causes, measuring drug-related side effects is complicated. This complexity impacts upon all aspects of the psychometric testing of patient–reported scales, creating unique challenges for their developers, who must create tools which appropriately discriminate between side effects and symptoms. CONCLUSION: The potential usefulness of patient-reported side effect scales is broad: from research outcome to clinical monitoring. However, a consensus must be reached on suitable methods for the development of such scales.