and 1-month (OR=1.16, 95% CI 1.02-1.32), but not 6-month (OR=1.03, 95% CI 0.87-1.21). When stratified by 3 age groups (0-5, 5-14, >14 years), no statistically significant differences were found in 6-month in smokers aged 45-54 years (p=0.03, 95% CI 0.2-1.5). In addition, no significant differences were found in 1-month in smokers aged 45-54 years (p=0.03, 95% CI 0.2-1.5). The prevalence of persistent opioid users was higher in the non-cancer group (13.5%) compared to the cancer group (9.3%). The prevalence of intermediate- and low-dose use was 23% and 15%, respectively.

HEALTH TECHNOLOGY ASSESSMENT STUDIES

H1

WHAT DO WE LOOK LIKE AROUND THE WORLD? A COMPARISON OF SOUTH KOREAN AND BRITISH HTA AGENCIES

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OBJECTIVES: To compare the methods and processes used in the reimbursement decisions of two health technology assessment (HTA) agencies: the United Kingdom's National Institute for Health and Care Excellence (NICE) and South Korea's Health Insurance Review Agency (HIRA). We compared the pricing of seven cancer drugs across both agencies. HTA is a process that assesses the clinical and economic evidence submitted by manufacturers.

RESULTS: There were significant differences between the agencies. HIRA priced the cancer drug at a lower cost than NICE. This is likely due to the lower cost of healthcare in South Korea compared to the United Kingdom. In addition, the procedure for reimbursement is different between the two agencies. HIRA uses a more rigorous process for evaluating drugs.

H2

A HEALTH TECHNOLOGY ASSESSMENT OF HOME-BASED HAEMODIALYSIS IN ESRD PATIENTS

C. S. Sharma, M. Sharma, and R. K. Sharma

OBJECTIVES: In this study, we aimed to assess the safety, efficacy, and cost-effectiveness of home-based haemodialysis (HBHD) compared to hospital-based haemodialysis (HBHD) in patients with end-stage renal disease (ESRD).

RESULTS: The study was conducted in 30 centres across India. The results showed that home-based haemodialysis was associated with a lower incidence of infections and a higher quality of life compared to hospital-based haemodialysis.

H3

DIFFERENTIAL PATTERNS OF PERSISTENT OPIOID USE IN PATIENTS WITH CANCER AND NON-CANCER PAIN


OBJECTIVES: The primary objective of this study was to determine the prevalence of persistent opioid use in patients with cancer and non-cancer pain.

RESULTS: The prevalence of persistent opioid use in patients with cancer was significantly higher than in patients with non-cancer pain. The most frequently prescribed opioids were oxycodone, hydrocodone, and morphine.

H4

HUMANISTIC AND ECONOMIC OUTCOMES OF PHARMACY-PROVIDED MEDICATION REVIEWS IN THE ELDERLY: A SYSTEMATIC REVIEW AND META-ANALYSIS

S. Phan, S. Chum, J. H. H. Y. Vark, and S. E. H. Y. Vark

OBJECTIVES: The aim of this study was to systematically review and meta-analyse the evidence on the effectiveness and economic outcomes of pharmacy-provided medication reviews in the elderly.

RESULTS: A total of 10 studies were included in the review. The results showed that pharmacy-provided medication reviews were associated with a significant reduction in medication errors and an improvement in patient outcomes. The economic analysis indicated that the cost-effectiveness of these interventions was favourable compared to usual care.