

Characterising and appraising patient preference exploration and elicitation methods in the medical product lifecycle

Whichello C¹, Levitan B², Juhaeri J³, Patadia V³, DiSantostefano R², de Bekker-Grob EW¹

Challenge

- Incorporating **patient preferences** into decision-making has become increasingly important to different stakeholders.
- There is currently no comprehensive overview describing which patient preference methods are most suitable for different stages in the medical product lifecycle (MPLC), or allows decision-makers to **compare methods** based on their needs.
- This study aims to
 1. identify **important criteria and weights** by which to characterise and appraise 33 patient preference elicitation and exploration methods;
 2. identify the methods that are **most suitable** to meet decision-makers' needs in the MPLC.

Approach & Methodology

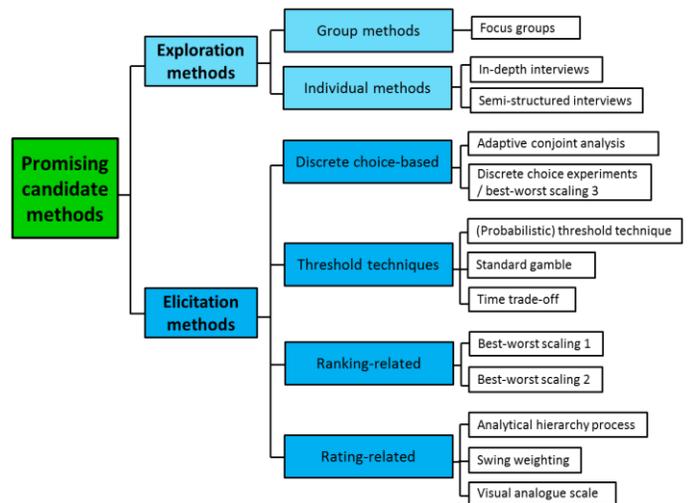
A four-step approach was taken:

1. Criteria to appraise the methods were identified through a **Q-methodology exercise** (n=54 respondents involved in health preference research (HPR)), examining four hypothetical scenarios in the MPLC;
2. Numerical weights to ascertain the relative importance for each criterion were determined through an **analytical hierarchy process (AHP)** (n=122 HPR respondents);
3. The **performance** of 33 methods was determined by applying the weights, and by consulting (n=17) HPR experts and relevant literature;
4. The methods were **compared** to each other in taxonomy groups reflecting their similar techniques.

Results

- **13 promising preference exploration and elicitation methods** were identified across the taxonomy groups as likely to meet decision-makers' needs.
- Additionally, **9 other methods were identified that could have potential**, although only for some stages or have a low publication frequency that decision-makers must consider.

Figure 1: Twelve most promising candidate PP methods



Value of IMI collaboration

- This Joint Undertaking receives support from the European Union's Horizon 2020 research and innovation programme and EFPIA.
- PREFER **brings together experts** from academic research institutions, pharmaceutical companies, patient organisations, a health technology assessment body, and small and medium-sized enterprises.
- The consortium has set up **stakeholder advisory groups** to work closely with patients, regulators, health technology assessment (HTA) bodies and payers, to ensure that recommendations are evidence based, relevant and useful.

Impact & take home message

- The selection of an exploration or elicitation method ultimately depends on the research question, objectives, and feasibility of the patient preference study.
- Our **transparent, weighted approach** to the comparison of methods provides valuable support to decision-makers.

Facts & Figures

Start date:	01/10/2016
End date:	30/09/2021
Contributions	
IMI funding:	6 000 000 €
EFPIA in kind:	6 000 000 €
Other:	1 €
Total cost:	12 000 001 €
Website:	www.imi-prefer.eu
Twitter:	@IMI_PREFER

¹Erasmus School of Health Policy and Management & Erasmus Choice Modelling Centre, Erasmus University Rotterdam, the Netherlands, ²Janssen R&D, United States of America, ³Sanofi, United States of America