

Ethical issues in health resource allocation

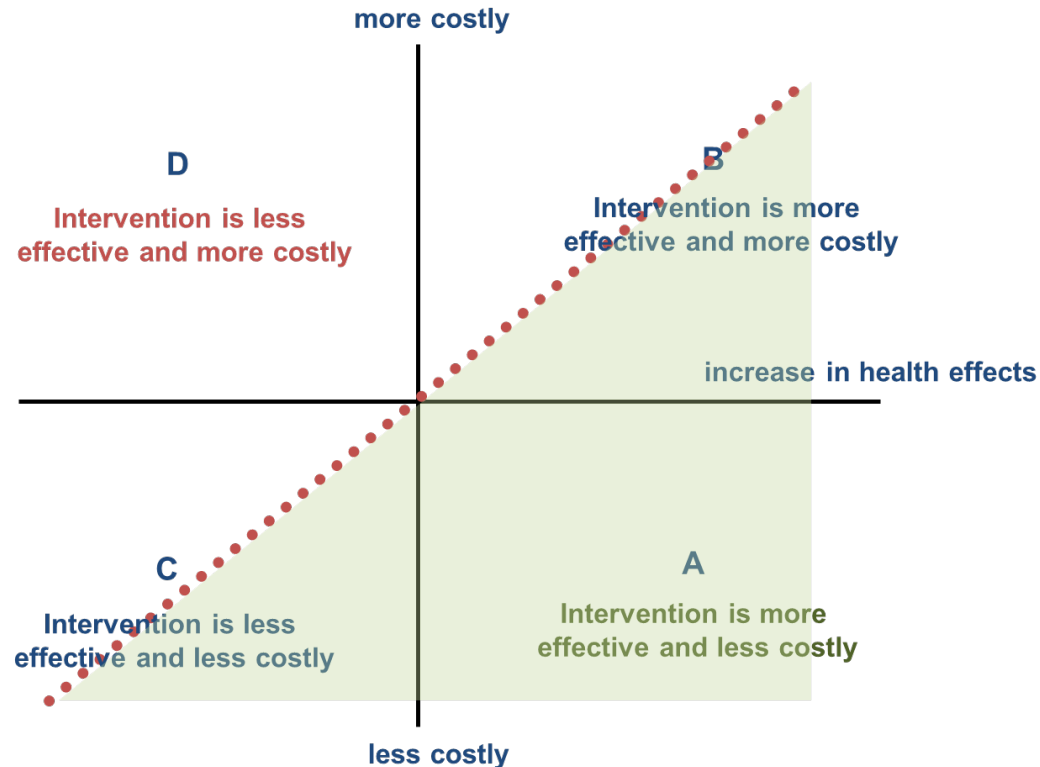
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21 September 2018

Some slides are from the presentation of Prof. Mark Sculpher, University of York

In the last seminar, we learned....

- the CE threshold and how to identify the threshold
- Challenges in using the CE threshold in health resource allocation

Cost-effectiveness plane

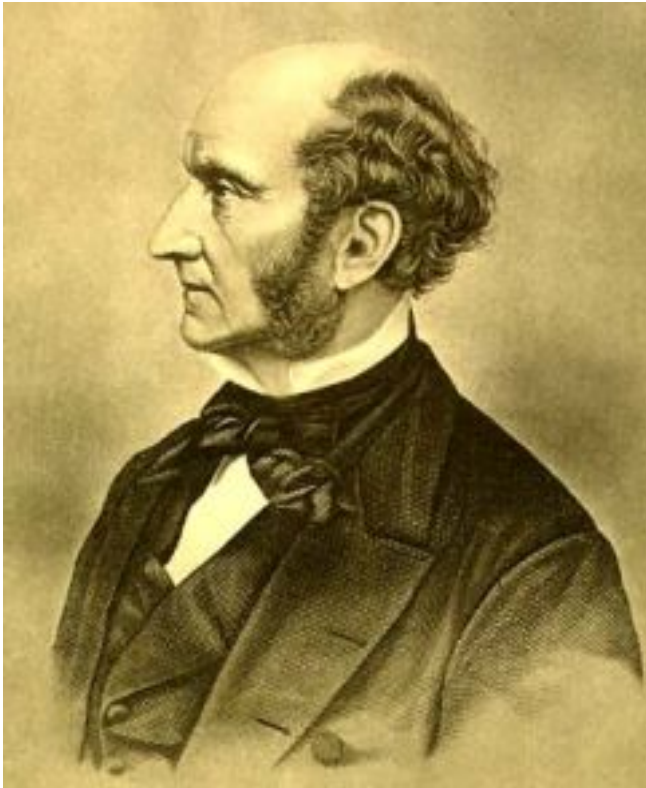


In this seminar, we will learn....



- Ethical principles related to health resource allocation
 - Utilitarianism
 - Utilitarianism
 - Kant's moral theory
 - Theory of justices
 - Rule of rescue
- Real-world example of ethical challenges in health policy in Singapore
- Proposed solution to deal with ethical challenges in public/health policy

Utilitarianism



John Stuart Mills

1. Happiness was the greatest goods
2. Happiness and unhappiness can be measured in discrete units and calculated mathematically e.g. sum of happiness, subtracting the pain
3. The goal is the production of maximal happiness, or utility

Utilitarianism

- Looking at consequence of action
- Maximizing (health) benefit given the limited budget
- Economic evaluation: cost-effectiveness analysis



Kant's moral theory

“The will to do the right thing only for the sake of doing the right thing regardless of its consequences”

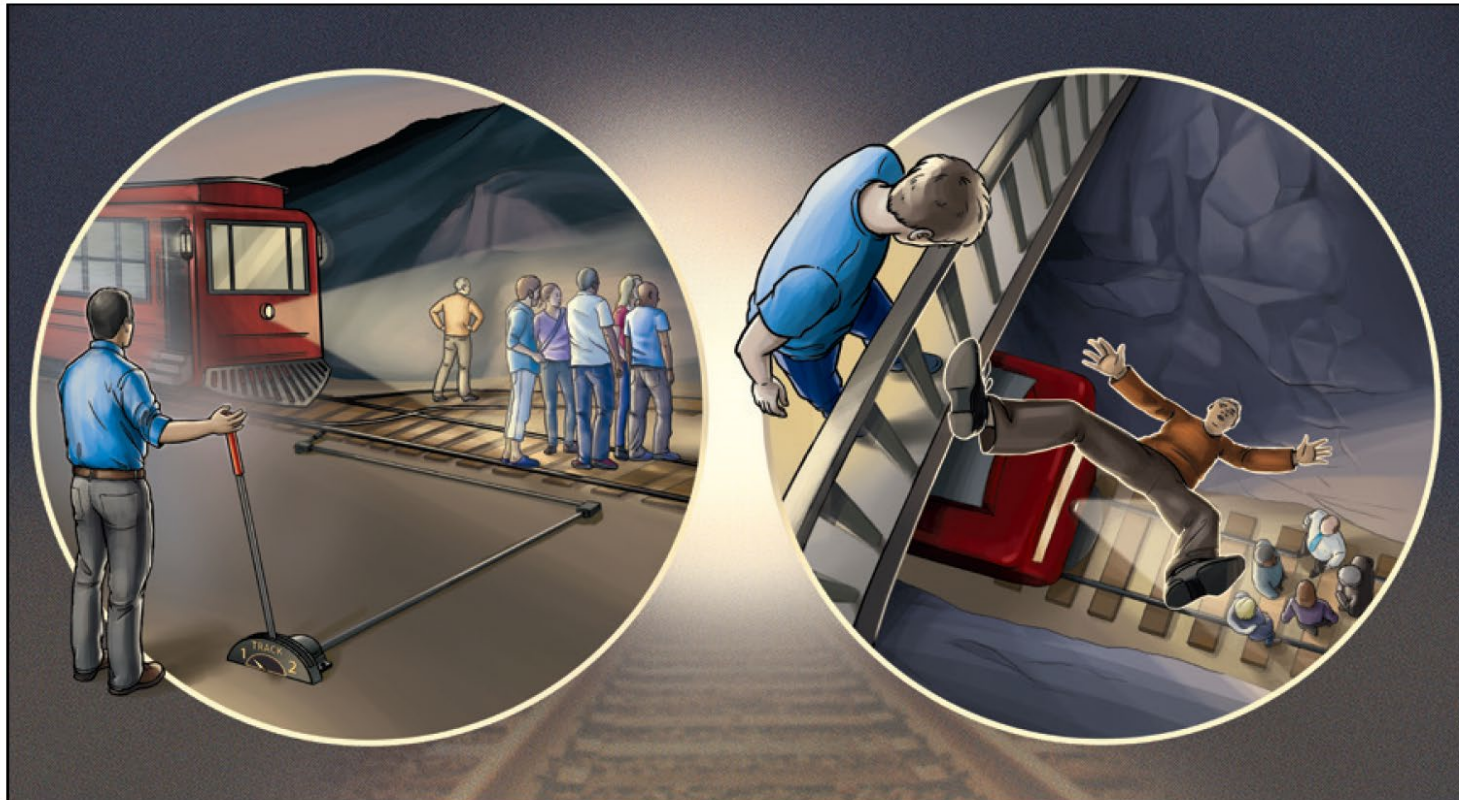


Action can be justified itself regardless of its consequence



PERSPECTIVE

TROLLEYOLOGY AND THE DENGUE VACCINE DILEMMA

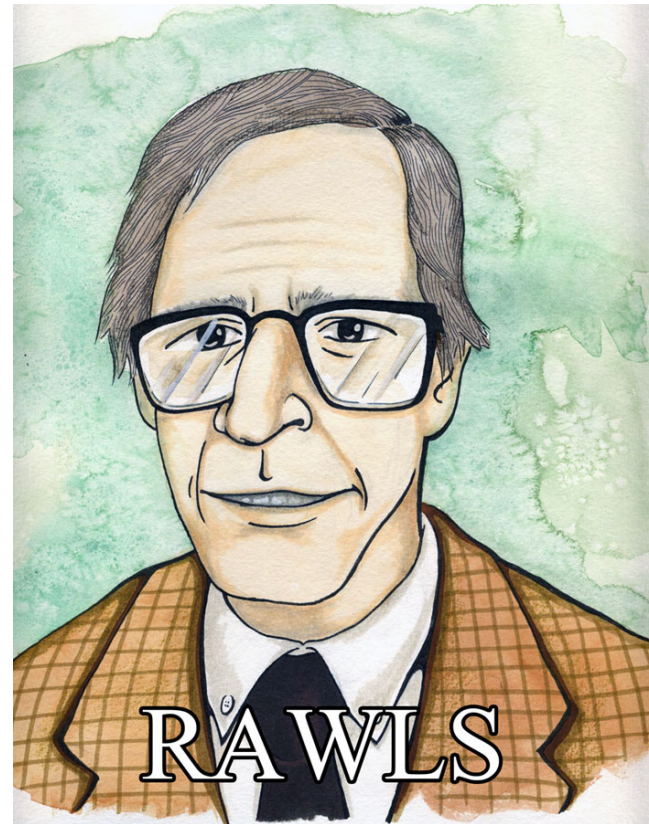


Source of the figure: Rosenbaum 2018

Theory of justice

by John Rawls (1921-2002)

a just system of distribution of 'goods' within a society is one in which those members of society who are worst off will be better off under this system than any other



UTILITY: focuses on all affected by a potential action

- Bentham -- Weighs the social costs and benefits, looking for the action that provides the “greatest net benefits”

RIGHTS: focuses on the freedom & equality of individuals

- Kant -- Decides on the basis of rights that a person has that are necessary to provide freedom and equality for that person.

JUSTICE: focuses on the distribution of goods

- Rawls -- Looks for a fair distribution of benefits and burdens. The question is which moral principles will ensure that.

Rule of Rescue

- There is an **identified person** whose life is at risk
- There exists an intervention which has a good change of saving the person's life
- It is justified to save this person's life rather than **others who cannot be identified**



Real-world example of ethical challenges in health policy in Singapore

Pwee Keng Ho

'Accountability for reasonableness'



- ❖ **Relevance:** based on *reasons* upon which stakeholders can agree in the *circumstances*
- ❖ **Publicity:** *reasons* publicly accessible
- ❖ **Revision / Appeals:** mechanism for challenging/revising *reasons*
- ❖ **Enforcement:** to ensure 3 conditions met

Daniels & Sabin, 1997



The Need for Global Application of the Accountability for Reasonableness Approach to Support Sustainable Outcomes

Comment on “Expanded HTA: Enhancing Fairness and Legitimacy”

Jens Byskov^{1,2*}, Stephen Oswald Maluka³, Bruno Marchal⁴, Elizabeth H. Shayo⁵, Salome Bukachi⁶, Joseph M. Zulu⁷, Erik Blas⁸, Charles Michelo⁹, Benedict Ndawi⁹, Anna-Karin Hurtig¹⁰



Byskov et al. *Health Research Policy and Systems* 2014, **12**:49
<http://www.health-policy-systems.com/content/12/1/49>



RESEARCH

Open Access

The accountability for reasonableness approach to guide priority setting in health systems within limited resources – findings from action research at district level in Kenya, Tanzania, and Zambia

Jens Byskov^{1*}, Bruno Marchal², Stephen Maluka³, Joseph M Zulu⁴, Salome A Bukachi⁵, Anna-Karin Hurtig⁶, Astrid Blystad⁷, Peter Kamuzora³, Charles Michelo⁴, Lillian N Nyandieka⁸, Benedict Ndawi⁹, Paul Bloch¹⁰, Øystein E Olsen¹¹ and the REACT Consortium

International Journal of Technology Assessment in Health Care, 32:1/2 (2016), 10–15.

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HEALTH TECHNOLOGY ASSESSMENT, DELIBERATIVE PROCESS, AND ETHICALLY CONTESTED ISSUES

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NICE
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HITAP
Health Intervention and Technology Assessment Program



ACE
agency for
care effectiveness

The next seminar: Future of health economic evaluation (wrapping up the series)



Health Technology Assessment: selecting the highest value care

Training and symposium

8-10 Jan 2019 National University of Singapore

Who will you learn with?

Teaching Faculty for the course will be from the Saw Swee Hock School of Public Health (SSHSPH) and the Health Intervention and Technology Assessment Program (HITAP), Thailand, and include:

- Dr. Yot Teerawattananon
- Assoc. Prof. Luo Nan
- Asst. Prof. Wee Hwee Lin
- Assoc. Prof. Joanne Young
- Waranya Rattanavapong
- Dr. Ritika Kapoor

Key persons from HTA agencies in India, Indonesia, Singapore and Thailand will also join in as guest speakers:

- **Prof. Sudigdo Sastroasmoro** Chair of the HTA Committee, Indonesia
- **Prof. Kriang Tungsanga** The Chair of National List of Essential Medicine Subcommittee, Thailand
- **Dr. Kelvin Bryan Tan** Director, Policy Research and Evaluation Division, MOH, Singapore
- **Prof. Mardiaty Nadjib** University of Indonesia, Indonesia
- **Dr. Daphne Khoo** Executive Director, Agency for Care Effectiveness, MOH, Singapore
- **Prof. Shankar Prinja** Post Graduate Institute of Medical Education and Research (PGIMER), India
- **Prof. Budi Hidayat** University of Indonesia, Indonesia
- **Prof. Teo Yik Ying** Dean, SSHSPH, NUS, Singapore
- **Prof. Eric Finkelstein** Duke-NUS Medical School, Singapore



Prof. Sudigdo Sastroasmoro
The Chair of the HTA Committee
Indonesia



Prof. Kriang Tungsanga
The Chair of National List of
Essential Medicine Subcommittee
Thailand



Dr. Daphne Khoo
Executive Director, ACE,
MOH, Singapore



Dr. Yot Teerawattananon
HITAP, Thailand
and SSHSPH, NUS, Singapore

How is the course organised?

Training		Policy Symposium
Tuesday, 8 January	Wednesday, 9 January	Thursday, 10 January
<ul style="list-style-type: none"> • Introduction to HTA • Identifying topics for HTA • Selecting the right approach to address policy questions in HTA • HTA case studies across settings • Evidence synthesis • Costing intervention • Outcome measures • QALY estimation (group exercise) 	<ul style="list-style-type: none"> • Summary and review of Day 1 • Health economic evaluation and its decision rule • Model-based health economic evaluation • Modelling exercise (follow UK English) • Budget impact analysis • Social and ethical considerations in HTA • HTA for public health interventions • HTA systems and policy in Asia 	<ul style="list-style-type: none"> • Welcome and introduction to symposium • Introduction to HTA agencies in Asia • HTA processes and methods across settings: do more with less? • HTA and its stakeholders: perspectives from professionals, politicians, patients and industry • How to enhance the impact of HTA: changing the plan but never the goal

Registration and fees

	Early registration (on or before 30 Sep 2018)		Late registration (after 30 Sep 2018)	
	Training	Symposium	Training	Symposium
Public sector participants	S\$1,000	S\$600	S\$1,200	S\$800
Private sector participants	\$1,700	\$800	\$2,000	\$1,000
NUHS/NUS staff and students	S\$500	Free	S\$800	Free