



Chris Sampson

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Conflicts of interest

- I declare that I have no known conflicts of interest, financial or otherwise.
- I am an employee of the Office of Health Economics, a registered charity, which receives funding from a variety of sources including the EuroQol Research Foundation and the Association of the British Pharmaceutical Industry.
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Dead plays an important role • Anchoring is necessary to identify the relative value of different health states A defining feature of TTO HRQoL→ • An awkward reality for DCE • QALYs • Facilitates trade-offs between length and quality of B life • Forms the basis for interpersonal comparisons Time 0 Time \rightarrow • Being dead constitutes lost time

1 = full health* 0 = dead*

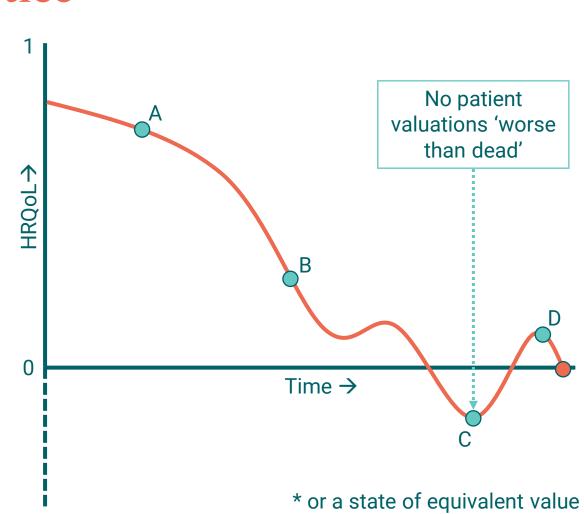
* or a state of equivalent value



 $0 = dead^*$

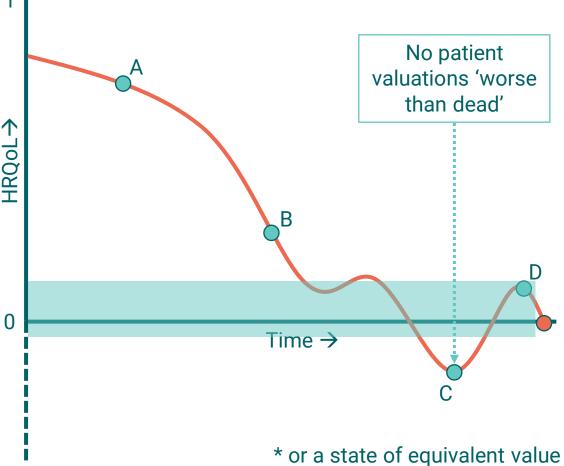
Dead is problematic in practice

- Experience-based valuation is problematic
 - No states worse than dead (Bernfort et al, 2018)



Dead is problematic in practice • Experience-based valuation is problematic • No states worse than dead (Bernfort et al, 2018) • Gap effect (Stalmeier et al, 2005) HRQoL→ Few states valued close to 'dead' 0

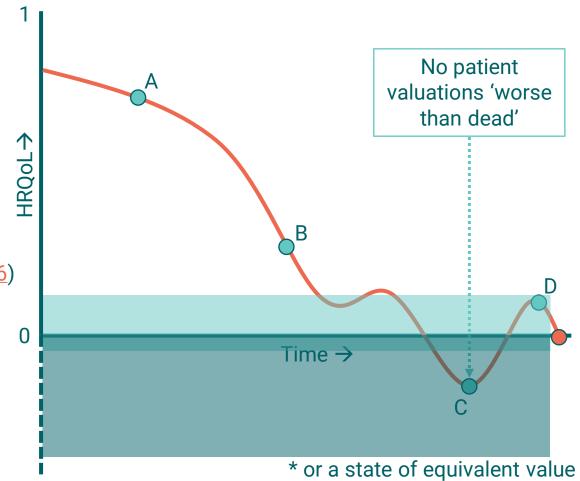
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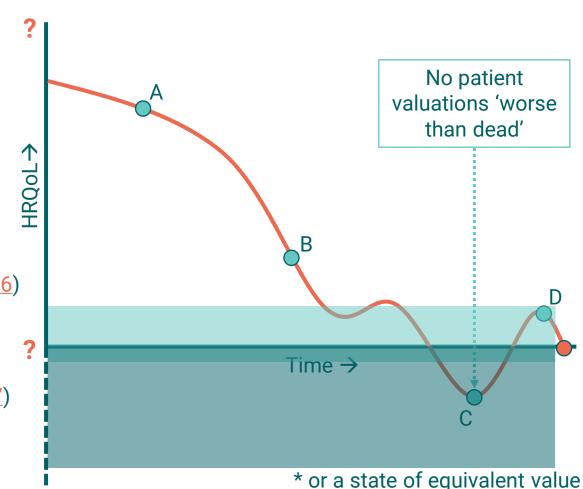
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 - No states worse than dead (Bernfort et al, 2018)
- Gap effect (Stalmeier et al, 2005)
 - Few states valued close to 'dead'
- States 'worse than dead' are not meaningful
 - Not associated with severity (Gandhi et al, 2019)
 - Confusion about what they mean (<u>Al Sayah et al, 2016</u>)



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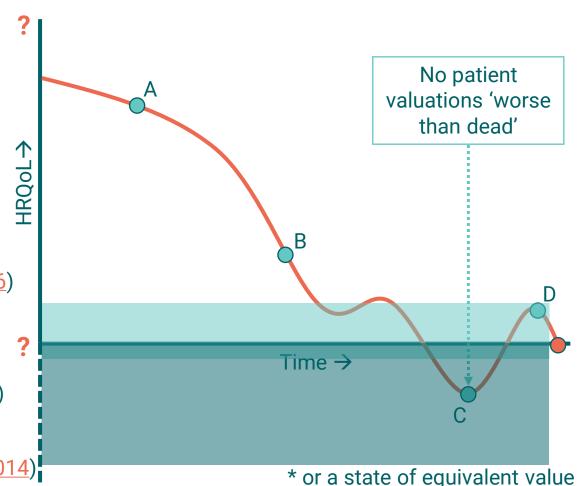
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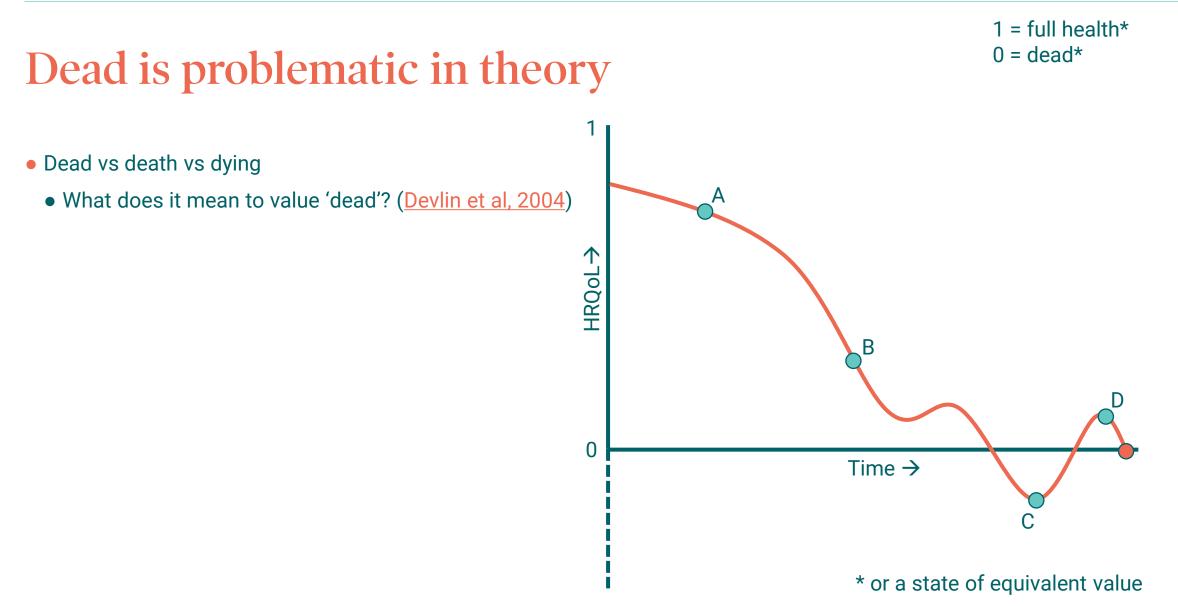
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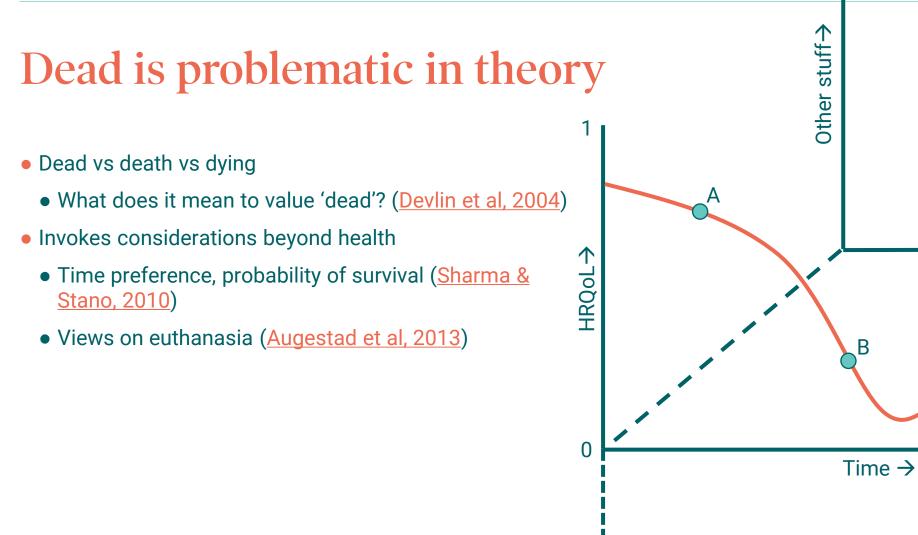
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 - Lexicographic (Flynn et al, 2008)
 - Infinite willingness to pay to avoid (Becker et al, 2007)
- Results in questionable data
 - People don't acknowledge 'dead' (van Nooten et al, 2014)
 - Observations often dropped from studies (Engel et al, 2016)



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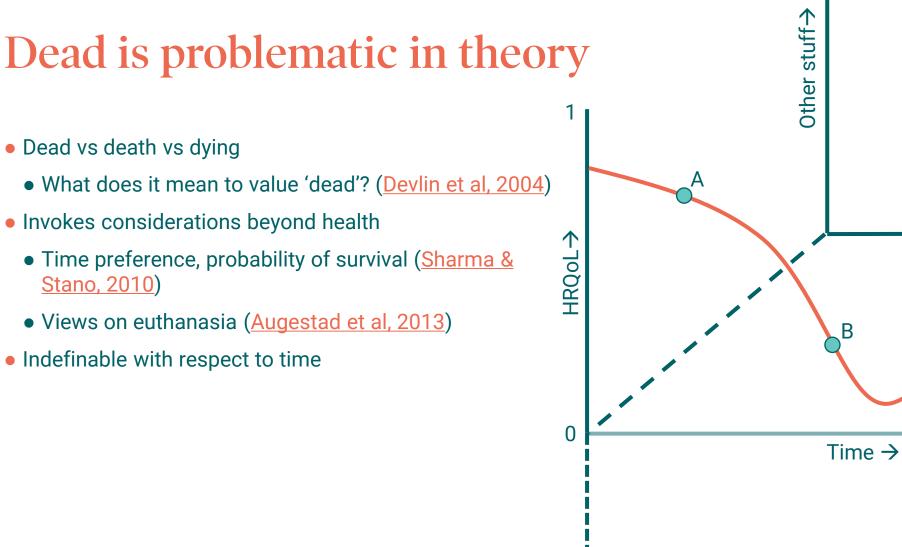




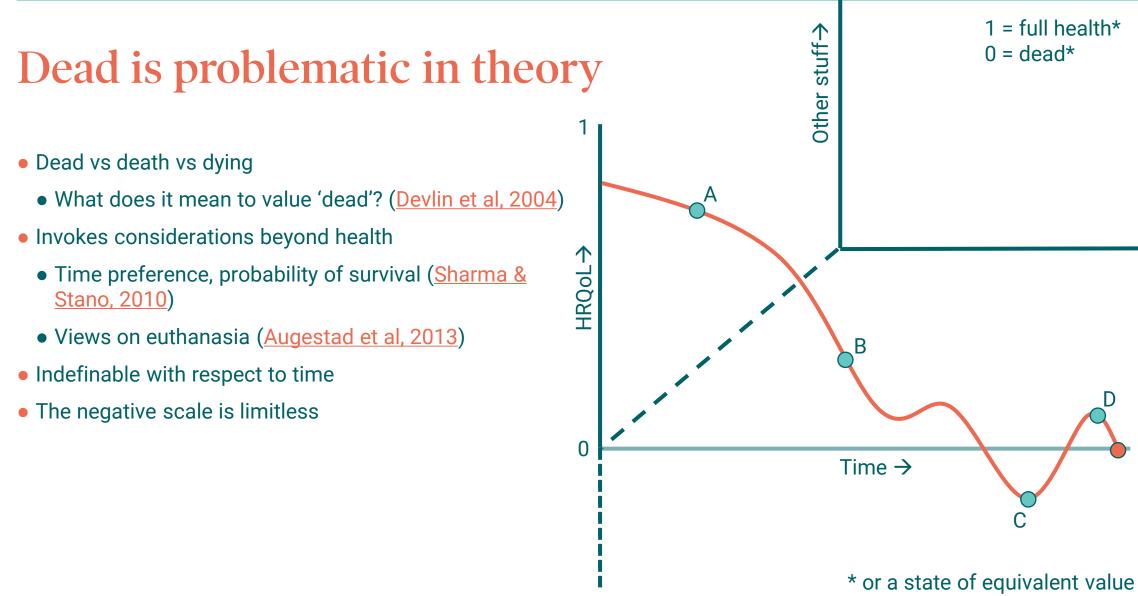


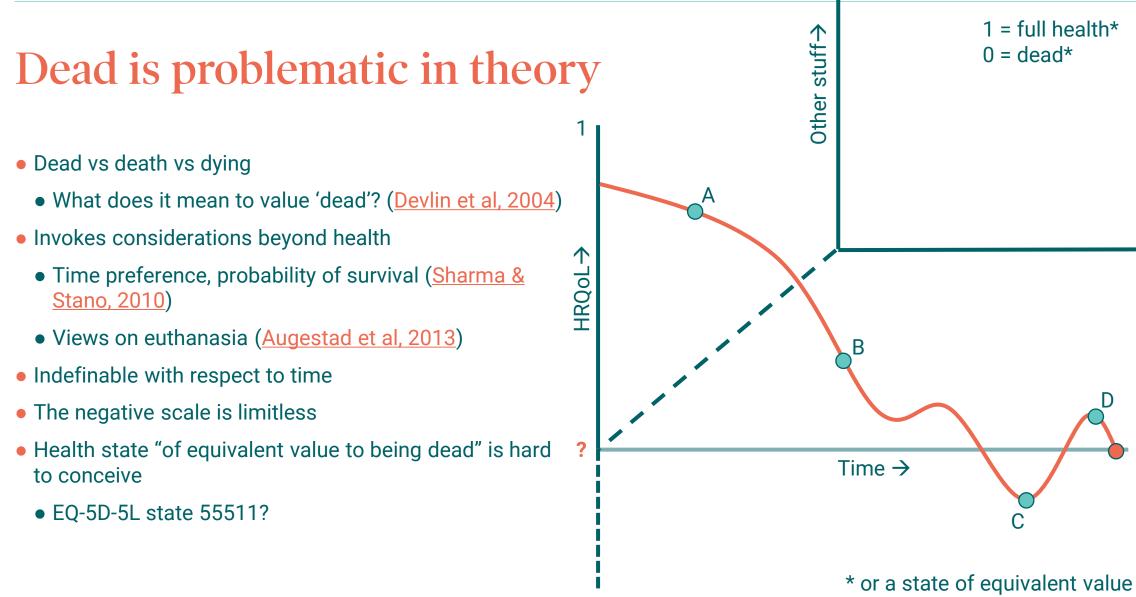
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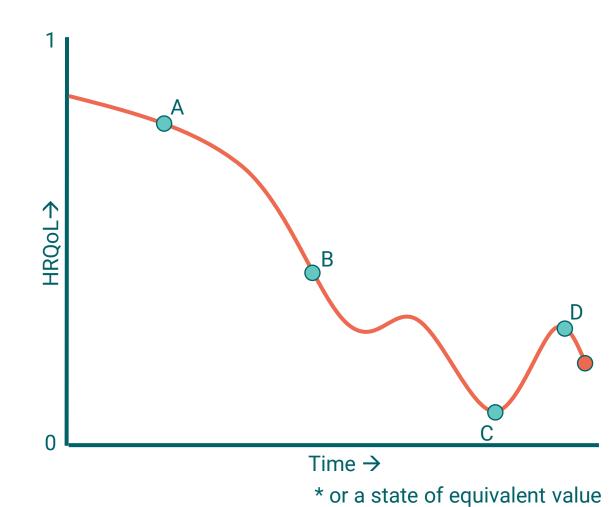


1 = full health* 0 = a very bad state Why we don't need 'dead' 1 • Zero can be anything HRQoL→ В 0 Time \rightarrow С

0 = a very bad state

Why we don't need 'dead'

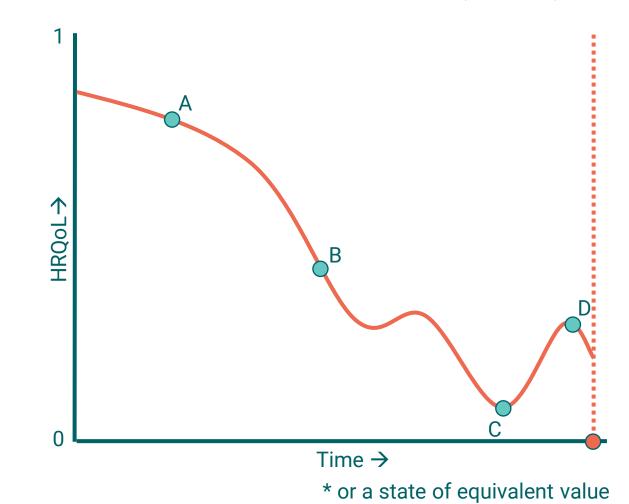
- Zero can be anything
- Ratio scale > interval scale
 - Requires an absolute zero



1 = full health* 0 = a very bad state (and dead)

Why we don't need 'dead'

- Zero can be anything
- Ratio scale > interval scale
 - Requires an absolute zero
- 'Dead' can still be zero
 - And it must (Roudijk et al, 2018)

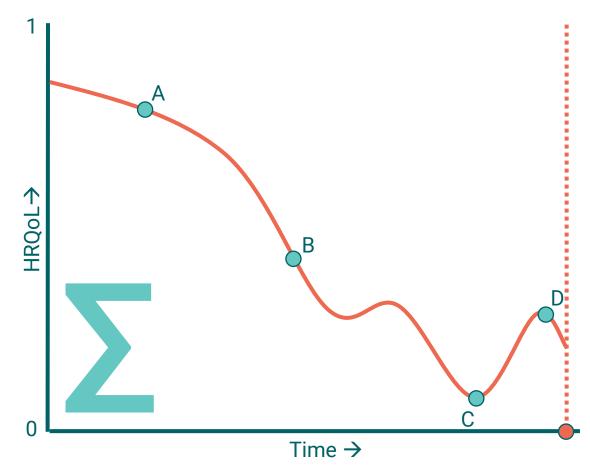


(and dead)

0 = a very bad state

Why we don't need 'dead'

- Zero can be anything
- Ratio scale > interval scale
 - Requires an absolute zero
- 'Dead' can still be zero
 - And it must (Roudijk et al, 2018)
- Resource allocation trade-offs are not health vs death
 - They are QALYs vs QALYs



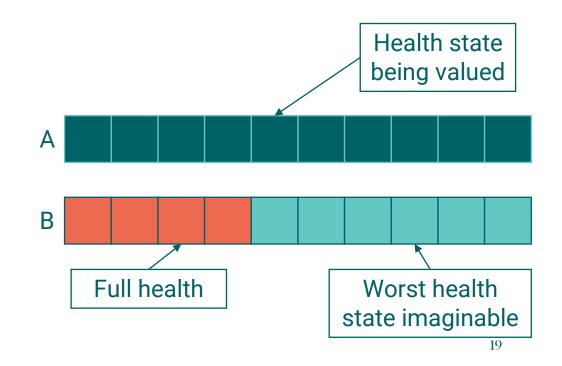
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Dropping dead makes a big difference (<u>Sutherland et al</u>, <u>1983</u>; <u>Nord, 1991</u>)

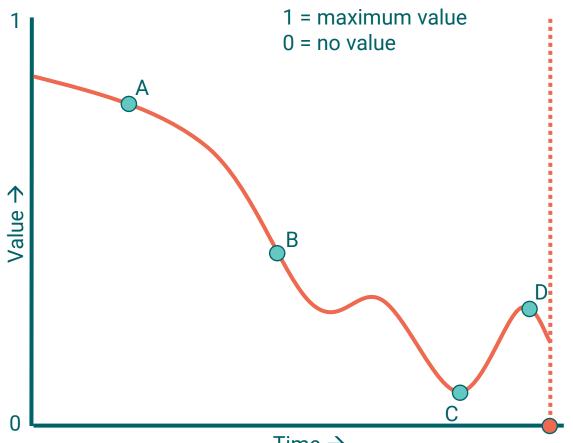


- Dropping dead makes a big difference (<u>Sutherland et al,</u> <u>1983</u>; <u>Nord, 1991</u>)
- 1. Adopt an alternative anchor as an absolute zero
 - a) Worst health state imaginable
 - b) Worst health state defined by the measure (e.g. EQ-5D)
 - c) A minimum endurable health state



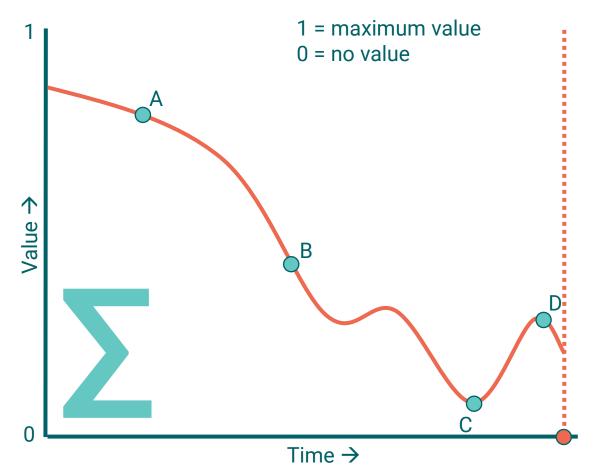


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- 2. Redefine QALYs as a decision-making tool
 - a) Zero is a point where no value is generated over time
 - b) QALYs can be rescaled





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- 2. Redefine QALYs as a decision-making tool
 - a) Zero is a point where no value is created
 - b) QALYs can be rescaled
- 3. Keep calm and carry on estimating QALYs





To enquire about additional information and analyses, please contact:

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Polling

- Should we drop dead from health state valuation?
 - Yes
 - No
- Which of the following concerns do you have about 'dropping dead'
 - It is important to know the value of death
 - It is important to know which states are worse than dead
 - There isn't a meaningful alternative to 'dead' for anchoring
 - I have no concerns! Drop dead!

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