

11. Value of information

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STAT0019 - Bayesian Methods in Health Economics, UCL

- What is Value of Information and stupid examples?
- Summarising uncertainty and PSA
- Research priorities

References

- *Bayesian Methods in Health Economics*, chapters 3.5.2, 3.5.3  Library  Book website (CRC)  Book website  Code
- *Evidence Synthesis for Decision Making in Healthcare*, chapter 12  Library  Book website
- *Bayesian Cost-Effectiveness Analysis with the R package BCEA*, chapter 4.3  Book website (Springer)  Book website

(A tale of two stupid examples)

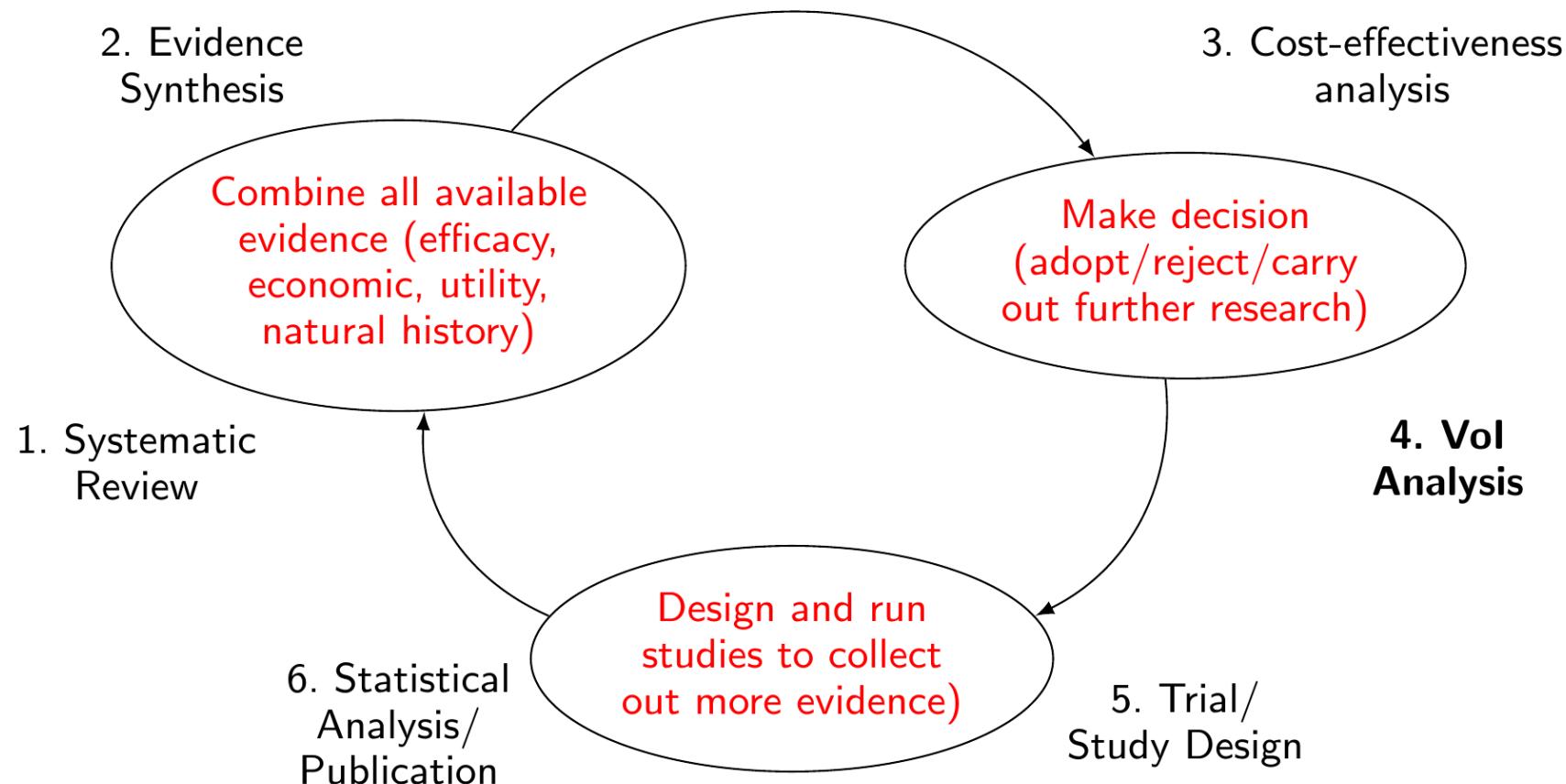


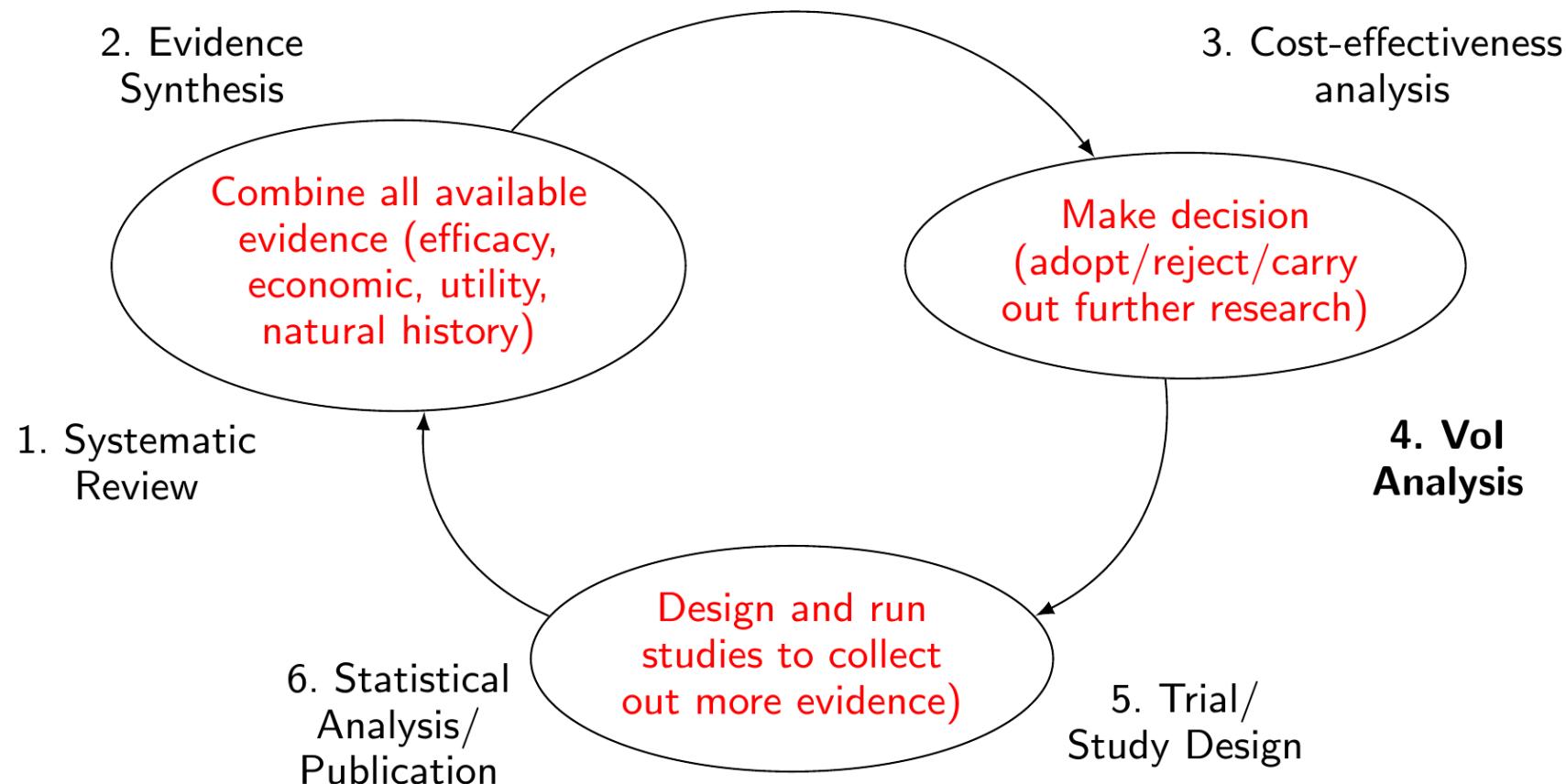
- **Example 1:** Intervention $t = 1$ is more cost-effective, given current evidence
 - $\Pr(t = 1 \text{ is cost-effective}) = 0.51$
 - If we get it wrong:
 - Increase in population average costs = £3
 - Decrease in population average effectiveness = 0.000001 QALYs
 - Large uncertainty/negligible consequences \Rightarrow can afford uncertainty!

(A tale of two stupid examples)



- Example 1: Intervention $t = 1$ is more cost-effective, given current evidence
 - $\Pr(t = 1 \text{ is cost-effective}) = 0.51$
 - If we get it wrong:
 - Increase in population average costs = £3
 - Decrease in population average effectiveness = 0.000001 QALYs
 - Large uncertainty/negligible consequences \Rightarrow can afford uncertainty!
- Example 2: Intervention $t = 1$ is more cost-effective, given current evidence
 - $\Pr(t = 1 \text{ is cost-effective}) = 0.999$
 - If we get it wrong:
 - Increase in population average costs = £1000000000
 - Decrease in population average effectiveness = 999999 QALYs
 - Tiny uncertainty/dire consequences \Rightarrow probably should think about it...!





Process inherently Bayesian!

Slide stolen from Nicky Welton – Summer School *Bayesian methods in health economics*

- A new study will provide more data
 - Reducing (or even eliminating?...) uncertainty in a subset of the model parameters
- Update the cost-effectiveness model
 - If optimal decision changes, gain in monetary **net benefit** (NB = utility) from using new optimal treatment
 - If optimal decision doesn't change, no gain in NB
- **Expected Vol** is the average gain in NB

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I

Expected value of Perfect Information (EVPI)

- Value of completely resolving uncertainty in all input parameters to decision model
- Infinite-sized, long-term follow up trial measuring everything!...
- Gives an upper bound on the value of the new study – low EVPI suggests we can make our decision based on existing information

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2 Expected value of Partial Perfect Information (EVSSI)

- Value of eliminating uncertainty in subset of input parameters to decision model
- e.g.: Infinite-sized trial measuring relative effects on 1-year survival
- Useful to identify which parameters are responsible for decision uncertainty

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2 Expected value of Partial Perfect Information (EVSSI)

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- e.g.: Infinite-sized trial measuring relative effects on 1-year survival
- Useful to identify which parameters are responsible for decision uncertainty

3 Expected value of Sample Information (EVSI)

- Value of reducing uncertainty by conducting a specific study of a given design
- Can compare the benefits and costs of a study with given design
- Is the proposed study likely to be a good use of resource? What is the optimal design?

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Vol measure = **Some idealised decision-making process** – **current decision-making process**

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Complexity

- There's no natural upper bound
 - Voi measures are positive, but *how low is low?*...
- Need to account for other factors
 - How much would it cost to get to the point when we can make the idealised decision-making process?
 - Who would that affect?
 - For how long?
 - ...
- Computational & modelling issues
 - You need to know what you're doing (again, modelling **fundamentally** Bayesian)
 - And use suitable tools (basically, never use spreadsheets...)

Expected Value of Perfect Information

Iteration	Parameter simulations			
	π_0	ρ	...	γ
1	0.585	0.3814	...	0.4194
2	0.515	0.0166	...	0.0768
3	0.611	0.1373	...	0.0592
4	0.195	0.7282	...	0.7314
...
1000	0.0305	0.204	...	0.558

- Characterise uncertainty in the model parameters
 - In a full Bayesian setting, these are drawings from the posterior distribution of θ
 - In a frequentist setting, these are typically bootstrap draws from a set of univariate distributions that describe some level of uncertainty around the MLEs

Expected Value of Perfect Information

Iteration	Parameter simulations				Expected utility	
	π_0	ρ	...	γ	$NB_0(\theta)$	$NB_1(\theta)$
1	0.585	0.3814	...	0.4194	77480.00	67795.00
2	0.515	0.0166	...	0.0768	87165.00	106535.00
3	0.611	0.1373	...	0.0592	58110.00	38740.00
4	0.195	0.7282	...	0.7314	77480.00	87165.00
...
1000	0.0305	0.204	...	0.558	48425.00	87165.00
				Average	72365.35	77403.49

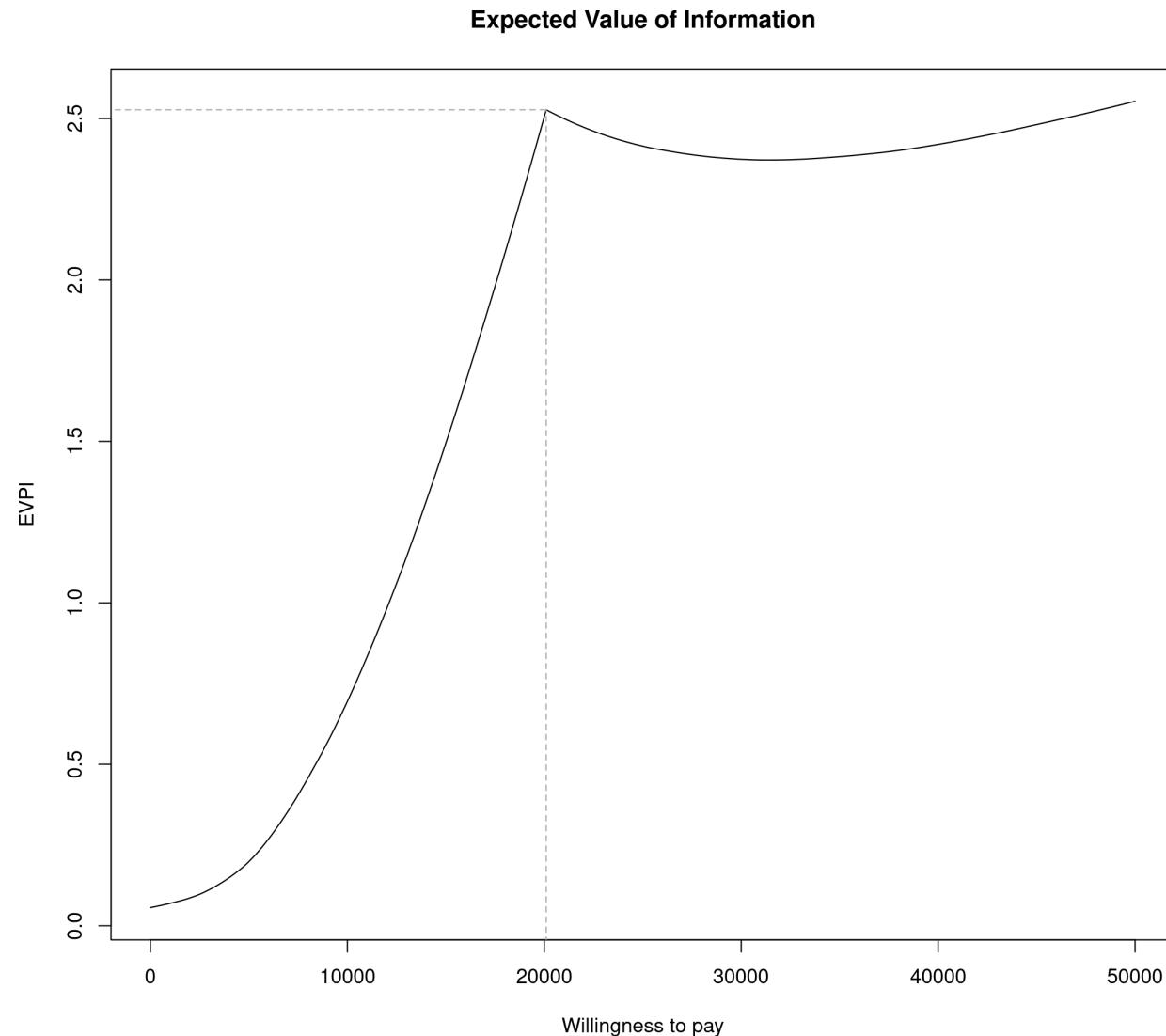
- Uncertainty in the parameters induces a distribution of decisions
 - Typically based on the **net benefits**: $NB_t(\theta) = k\mu_{et} - \mu_{ct}$
 - In each parameter configuration can identify the *optimal strategy*
- Averaging over the uncertainty in θ provides t^* , the overall optimal decision *given current uncertainty* (= choose the intervention associated with **highest expected utility**)

Expected Value of Perfect Information

Iteration	Parameter simulations				Expected utility		Maximum net benefit	Opportunity loss
	π_0	ρ	...	γ	$NB_0(\theta)$	$NB_1(\theta)$		
1	0.585	0.3814	...	0.4194	77480.00	67795.00	77480.00	9685.00
2	0.515	0.0166	...	0.0768	87165.00	106535.00	106535.00	0.00
3	0.611	0.1373	...	0.0592	58110.00	38740.00	58110.00	19370.00
4	0.195	0.7282	...	0.7314	77480.00	87165.00	87165.00	0.00
...
1000	0.0305	0.204	...	0.558	48425.00	87165.00	87165.00	0.00
Average				72365.35	77403.49	91192.02	13788.53	

- Expected value of "Perfect" Information (EVPI) summarises uncertainty in the decision
 - Defined as the average Opportunity Loss, or average maximum expected utility under "perfect" information – maximum expected utility overall:

$$EVPI = E_{\theta} \left[\max_t NB_t(\theta) \right] - \max_t E_{\theta} [NB_t(\theta)]$$



Expected Value of Partial Perfect Information

- θ = all the model parameters; can be split into two subsets
 - The "parameters of interest", ϕ , e.g. prevalence of a disease, HRQL measures, length of stay in hospital, ...
 - The "remaining parameters", ψ , e.g. cost of treatment with other established medications, ...
- We are interested in quantifying the value of gaining more information on ϕ , while leaving current level of uncertainty on ψ unchanged

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$$E_{\psi|\phi}[\text{NB}_t(\theta)]$$

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- Of course, we cannot know ϕ perfectly, so take the expected value

$$E_{\phi} \left[\max_t E_{\psi|\phi} [\text{NB}_t(\theta)] \right]$$

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- And compare this with the **maximum expected utility overall**

$$E_{\phi} \left[\max_t E_{\psi|\phi} [\text{NB}_t(\theta)] \right] - \max_t E_{\theta} [\text{NB}_t(\theta)]$$

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- And compare this with the **maximum expected utility overall**
- This is the EVPPI

$$\text{EVPPI} = E_{\phi} \left[\max_t E_{\psi|\phi} [\text{NB}_t(\theta)] \right] - \max_t E_{\theta} [\text{NB}_t(\theta)]$$

Expected Value of Partial Perfect Information

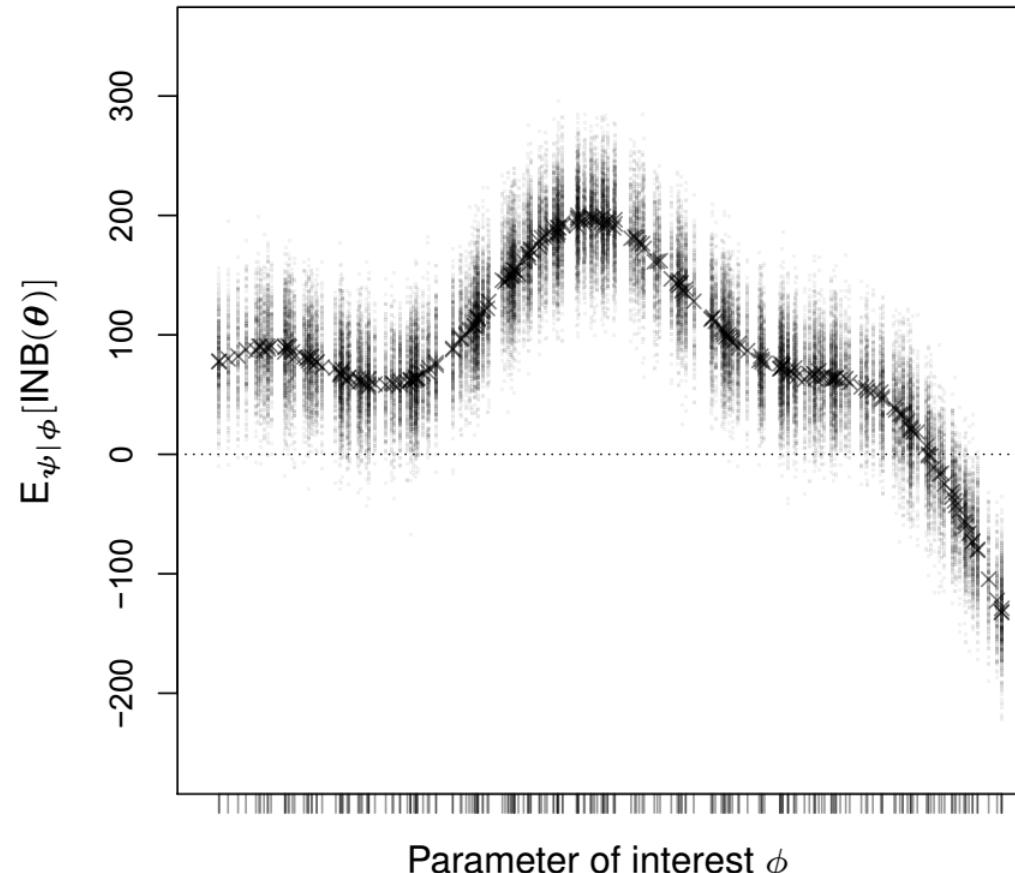
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$$\text{EVPPI} = E_{\phi} \left[\max_t E_{\psi|\phi} [\text{NB}_t(\theta)] \right] - \max_t E_{\theta} [\text{NB}_t(\theta)]$$

- That is the difficult part!
 - Can do nested Monte Carlo, but takes for ever to get accurate results
 - Recent methods based on GAMs/Gaussian Process regression/spatial modelling very efficient and quick!

Assuming there are only two interventions, can consider $\text{IB}(\theta) = \text{NB}_1(\theta) - \text{NB}_0(\theta)$

Nested Monte Carlo ($S_\phi = 250$, $S_\psi = 200$)

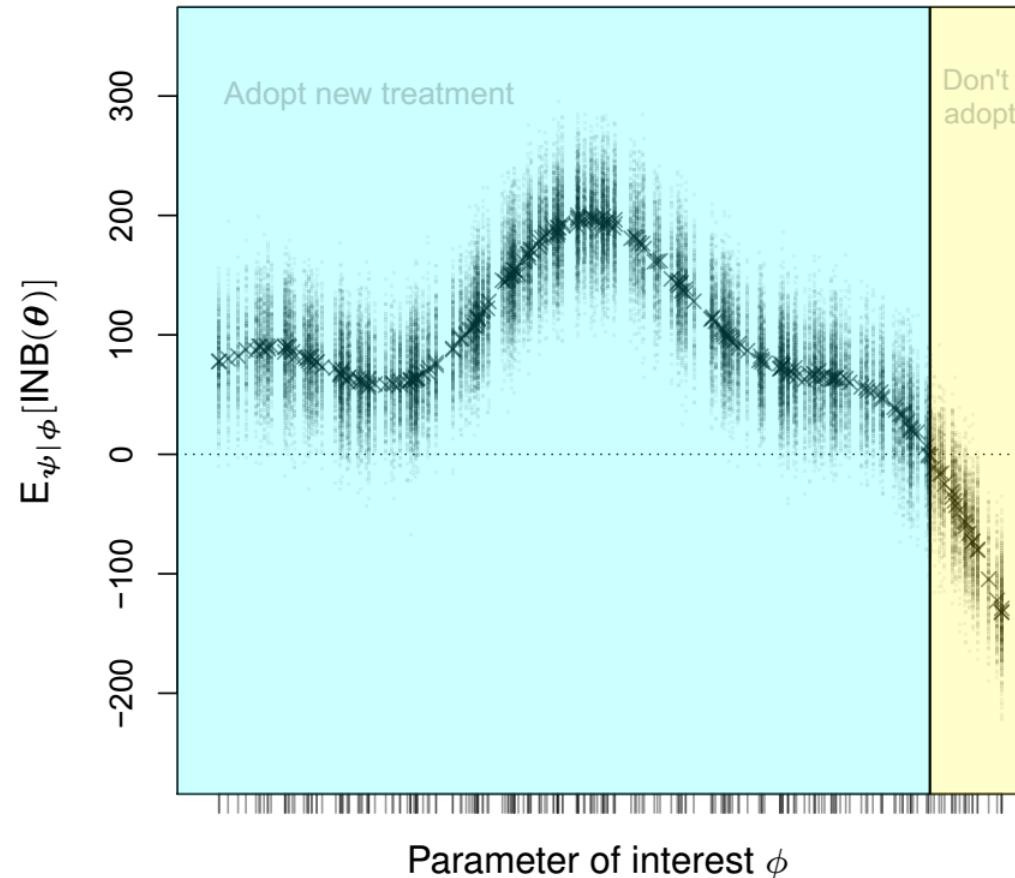


Slide stolen from [Mark Strong – Summer School Bayesian methods in health economics](#)

EVPPI – Brute force/nested MC

Assuming there are only two interventions, can consider $\text{IB}(\theta) = \text{NB}_1(\theta) - \text{NB}_0(\theta)$

Nested Monte Carlo ($S_\phi = 250$, $S_\psi = 200$)



EVPPI – model as a regression problem...

Can model as a **regression** problem

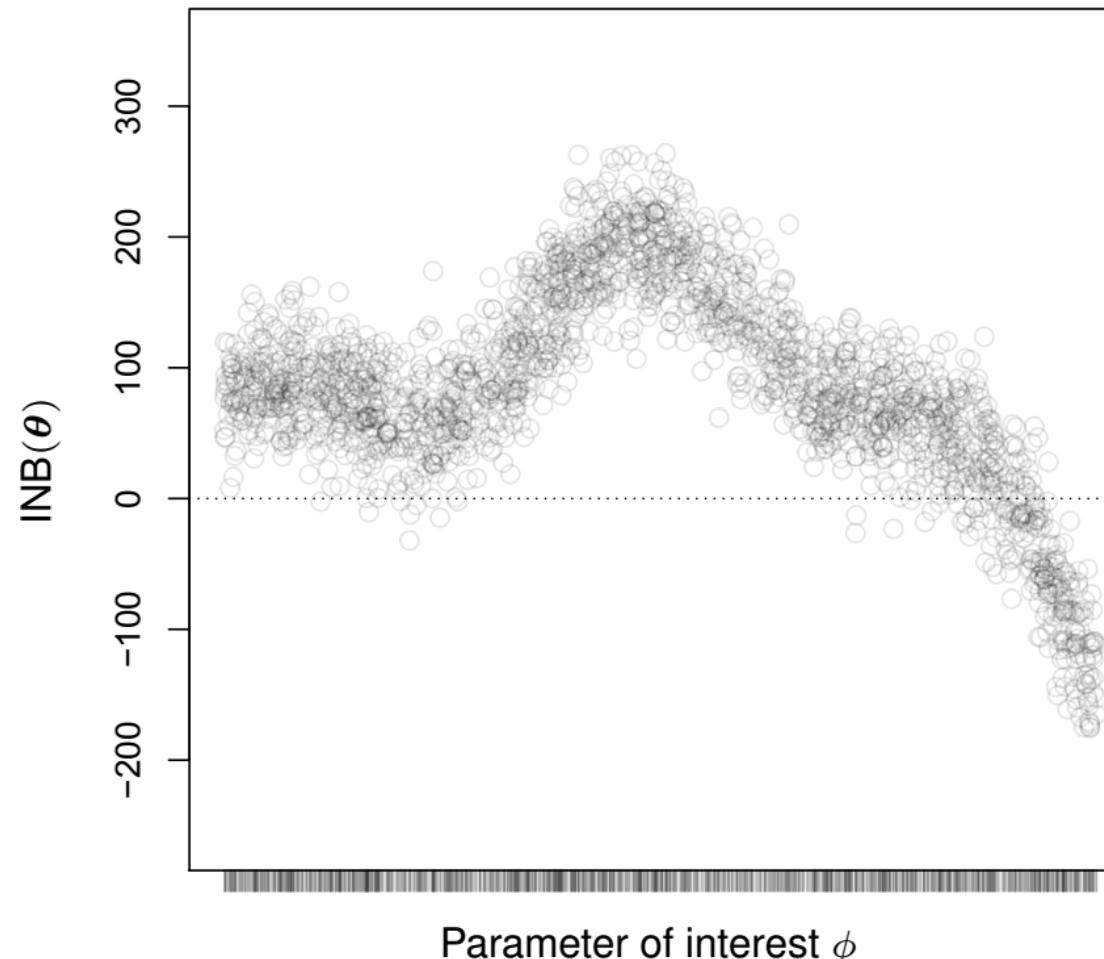
$$\begin{aligned}\text{NB}_t(\boldsymbol{\theta}) &= \mathbb{E}_{\psi|\boldsymbol{\theta}}[\text{NB}_t(\boldsymbol{\theta})] + \varepsilon, \quad \text{with } \varepsilon \sim \text{Normal}(0, \sigma_\varepsilon^2) \\ &= g(\boldsymbol{\phi}) + \varepsilon\end{aligned}$$

"Data"

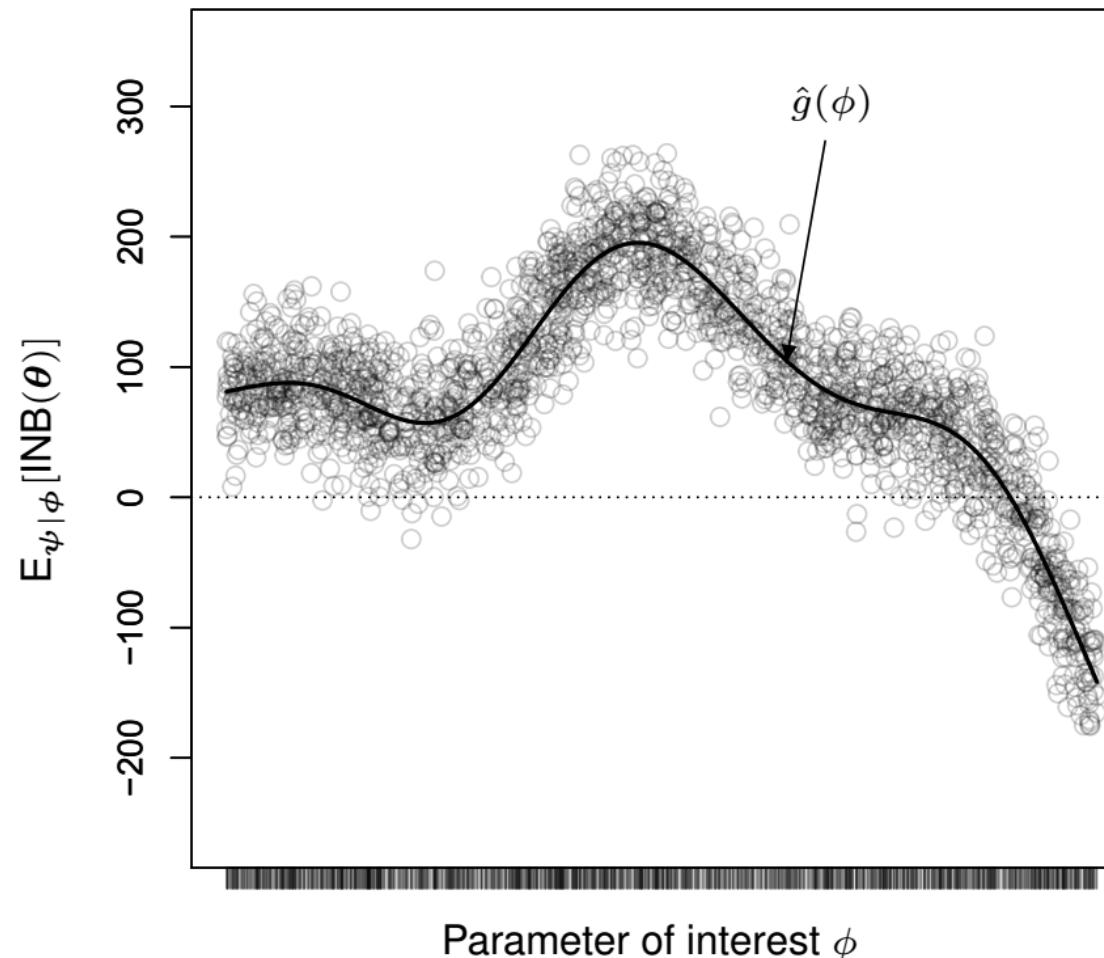
- **Simulations for $\text{NB}_t(\boldsymbol{\theta})$** as "response"
- **Simulations for $\boldsymbol{\phi}$** as "covariates"
- **NB:** Only need S data points (=PSA simulations), instead of $S_{\boldsymbol{\phi}} \times S_{\psi}$!

Iteration	Parameter simulations ('covariates')					'Responses'	
	π_0	ρ	...	γ		$\text{NB}_0(\boldsymbol{\theta})$	$\text{NB}_1(\boldsymbol{\theta})$
1	0.585	0.3814	...	0.4194	77480	67795	
2	0.515	0.0166	...	0.0768	87165	106535	
3	0.611	0.1373	...	0.0592	58110	38740	
4	0.195	0.7282	...	0.7314	77480	87165	
...
S	0.0305	0.204	...	0.558	48425	87165	

Regression approach $S = 2000$

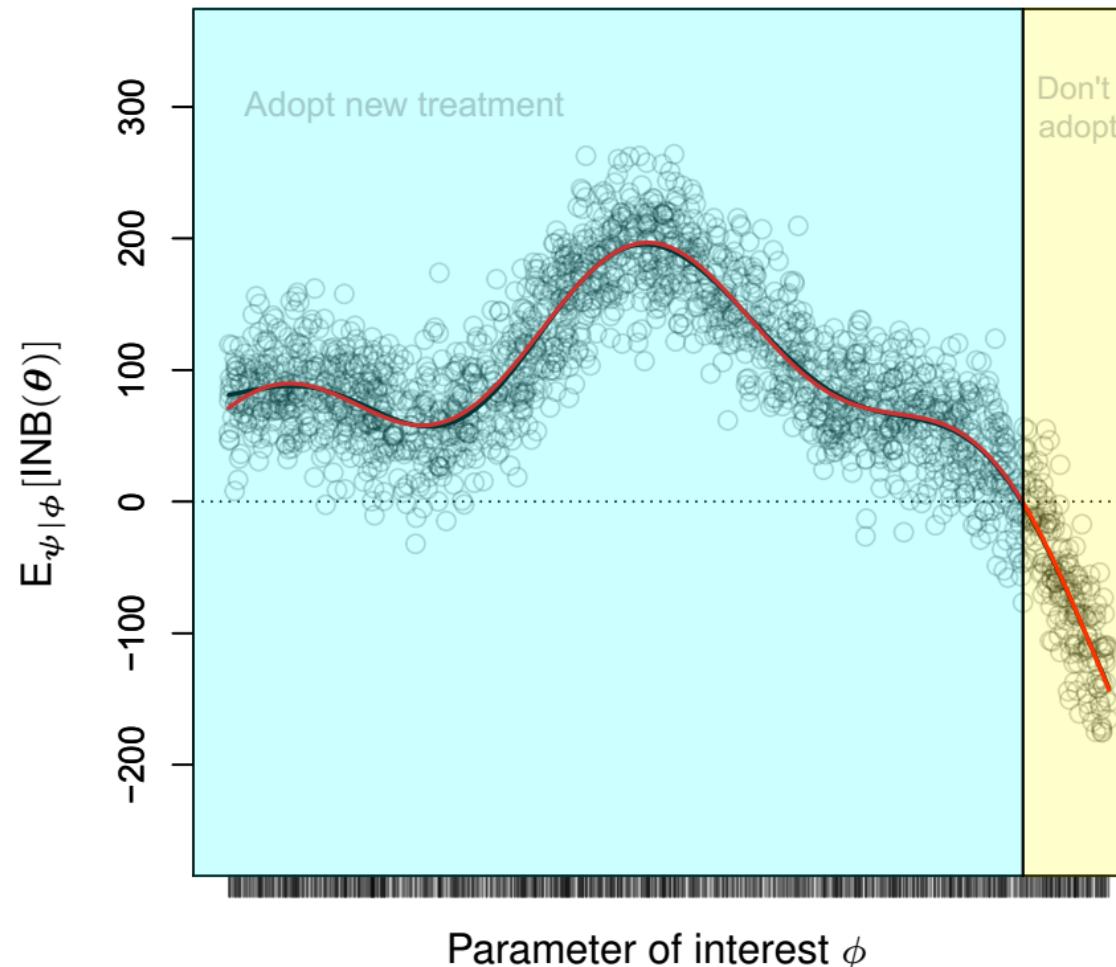


Regression approach $S = 2000$



EVPPI – model as a regression problem...

Regression approach $S = 2000$ (True relationship in red)



- Once the functions $g_t(\phi)$ are estimated, can approximate

$$\begin{aligned}\text{EVPPI} &= E_{\phi} \left[\max_t E_{\psi|\phi} [\text{NB}_t(\theta)] \right] - \max_t E_{\theta} [\text{NB}_t(\theta)] \\ &\approx \frac{1}{S} \sum_{s=1}^S \max_t \hat{g}_t(\phi_s) - \max_t \frac{1}{S} \sum_{s=1}^S \hat{g}_t(\phi_s)\end{aligned}$$

- Once the functions $g_t(\phi)$ are estimated, can approximate

$$\begin{aligned} \text{EVPPI} &= E_{\phi} \left[\max_t E_{\psi|\phi} [\text{NB}_t(\theta)] \right] - \max_t E_{\theta} [\text{NB}_t(\theta)] \\ &\approx \frac{1}{S} \sum_{s=1}^S \max_t \hat{g}_t(\phi_s) - \max_t \frac{1}{S} \sum_{s=1}^S \hat{g}_t(\phi_s) \end{aligned}$$

- NB:** $g_t(\phi)$ can be complex, so need to use **flexible** regression methods

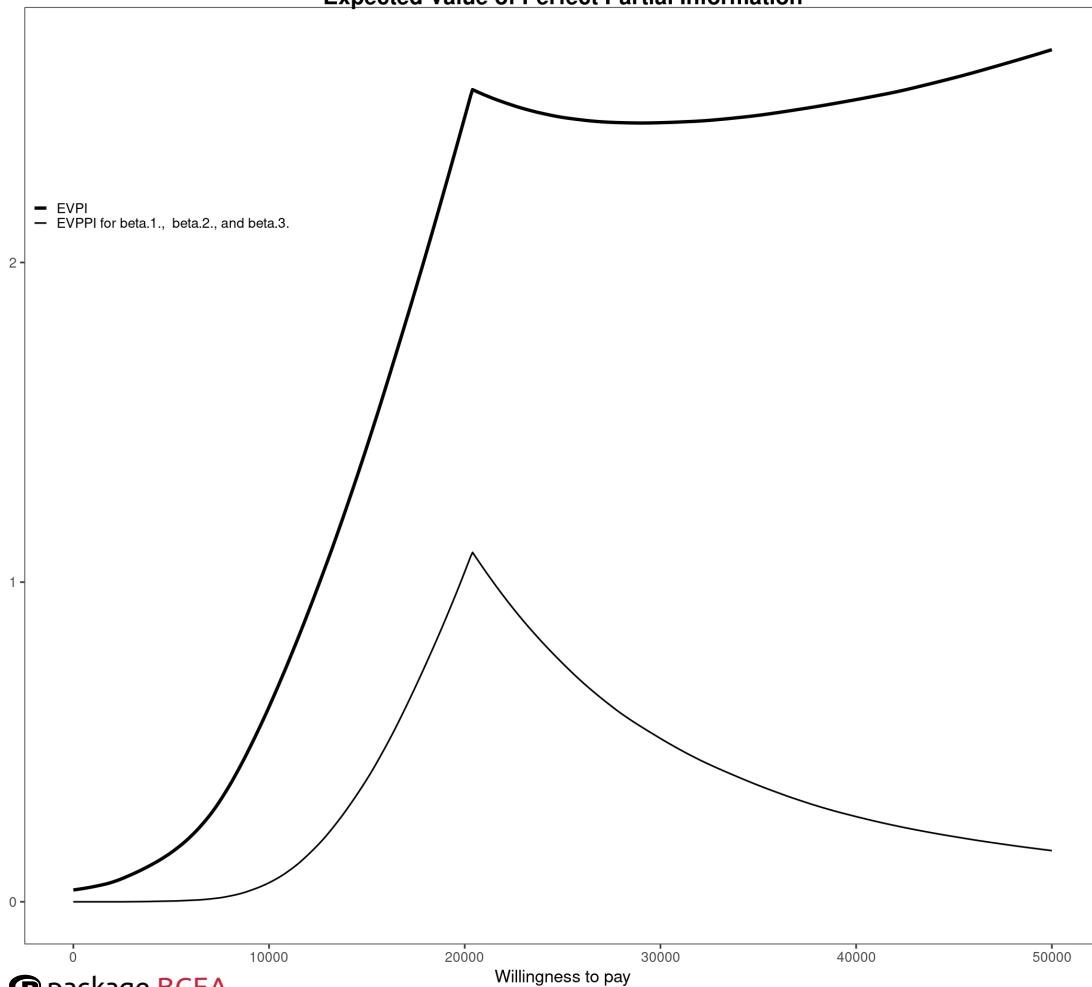
- **GAMs:** $g_t(\phi) = \sum_{q=1}^{Q_\phi} h_t(\phi_{sq})$ with $h_t(\cdot)$ = smooth functions (cubic polynomials)
 - very fast, but only if number of important parameters $Q_\phi \leq 5$ (interactions increase model size exponentially)
- If $Q_\phi > 5$ then use **Gaussian Process** regression (GPR)
 - **Strong et al**: original GPR method
 - **Heath et al**: based on spatial modelling; can be more computationally efficient

- Other methods based on alternative approaches

- Most are implemented in the  package **BCEA** (see also:  <https://github.com/giabaio/BCEA>)

Summarising PSA + Research priority

Expected Value of Perfect Partial Information

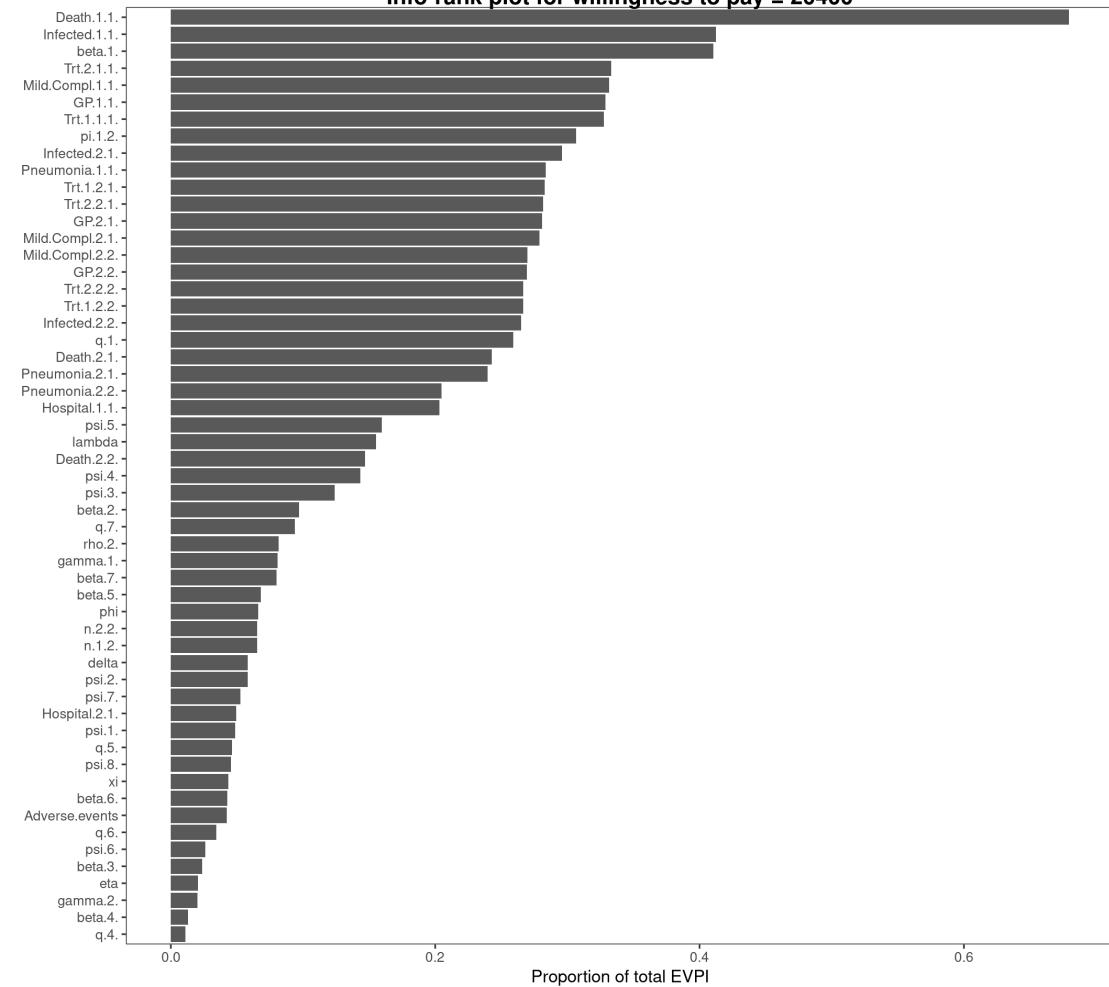


R package BCEA

Github: <https://github.com/giabaio/BCEA>

Web: <https://egon.stats.ucl.ac.uk/projects/BCEAweb>

Info-rank plot for willingness to pay = 20400



<https://savi.shef.ac.uk/SAVI/>



The
University
Of
Sheffield.

(<http://www.sheffield.ac.uk/>) SAVI - Sheffield Accelerated

Value of Information

Release version 2.2.0 (2021-06-04)

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What SAVI does

Using **only** PSA results from your model

In a matter of seconds from the SAVI online application you can generate:

1. Standardised assessment of uncertainty (C-E planes and CEACs)
2. Overall EVPI per patient, per jurisdiction per year and over your decision relevance horizon
3. Expected Value of Perfect Parameter Information (EVPII) for single and groups of parameters

Disclaimer: This application is based on peer-reviewed statistical approximation methods. It comes with no warranty and should be utilised at the user's own risk (see here (<https://raw.githubusercontent.com/Sheffield-Accelerated-Vol/SAVI/master/DISCLAIMER.txt>)). The underlying code (<https://github.com/Sheffield-Accelerated-Vol/SAVI>) is made available under the BSD 3-clause license (<https://raw.githubusercontent.com/Sheffield-Accelerated-Vol/SAVI/master/LICENSE.txt>).

If you use SAVI in your work please cite our paper

Strong M, Oakley JE, Brennan A. Estimating multi-parameter partial Expected Value of Perfect Information from a probabilistic sensitivity analysis sample: a non-parametric regression approach. *Medical Decision Making*. 2014;34(3):311-26. Available open access here.
[\(http://mdm.sagepub.com/content/34/3/311\)](http://mdm.sagepub.com/content/34/3/311)

The SAVI process has 4 steps (using the TABS from left to right)

Contact Us

For any queries or to report a bug please send an email to [\(savi@sheffield.ac.uk\)](mailto:savi@sheffield.ac.uk)

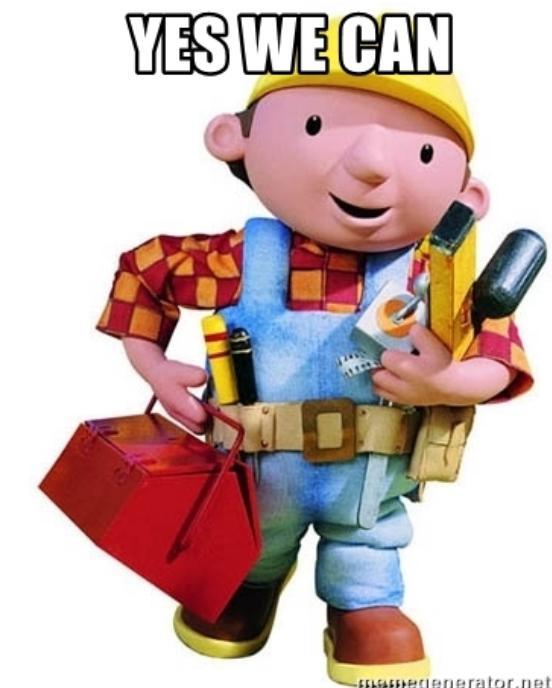
News

SAVI is now available as an R package, allowing you to run SAVI directly on your own machine. You can download instructions here. (https://www.shef.ac.uk/polopoly_fs/1.511325!/file/Instruction_package.txt)

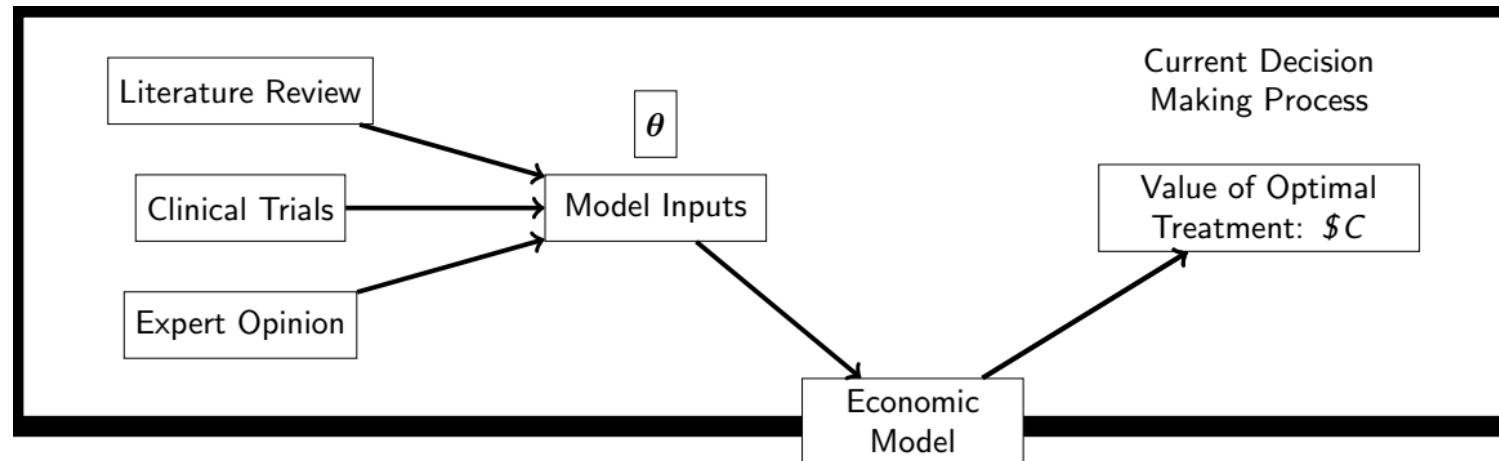
New features and bug fixes

New for version 2.2.0
SAVI now has a new web address
<https://savi.shef.ac.uk/SAVI/>
(<https://savi.shef.ac.uk/SAVI/>)

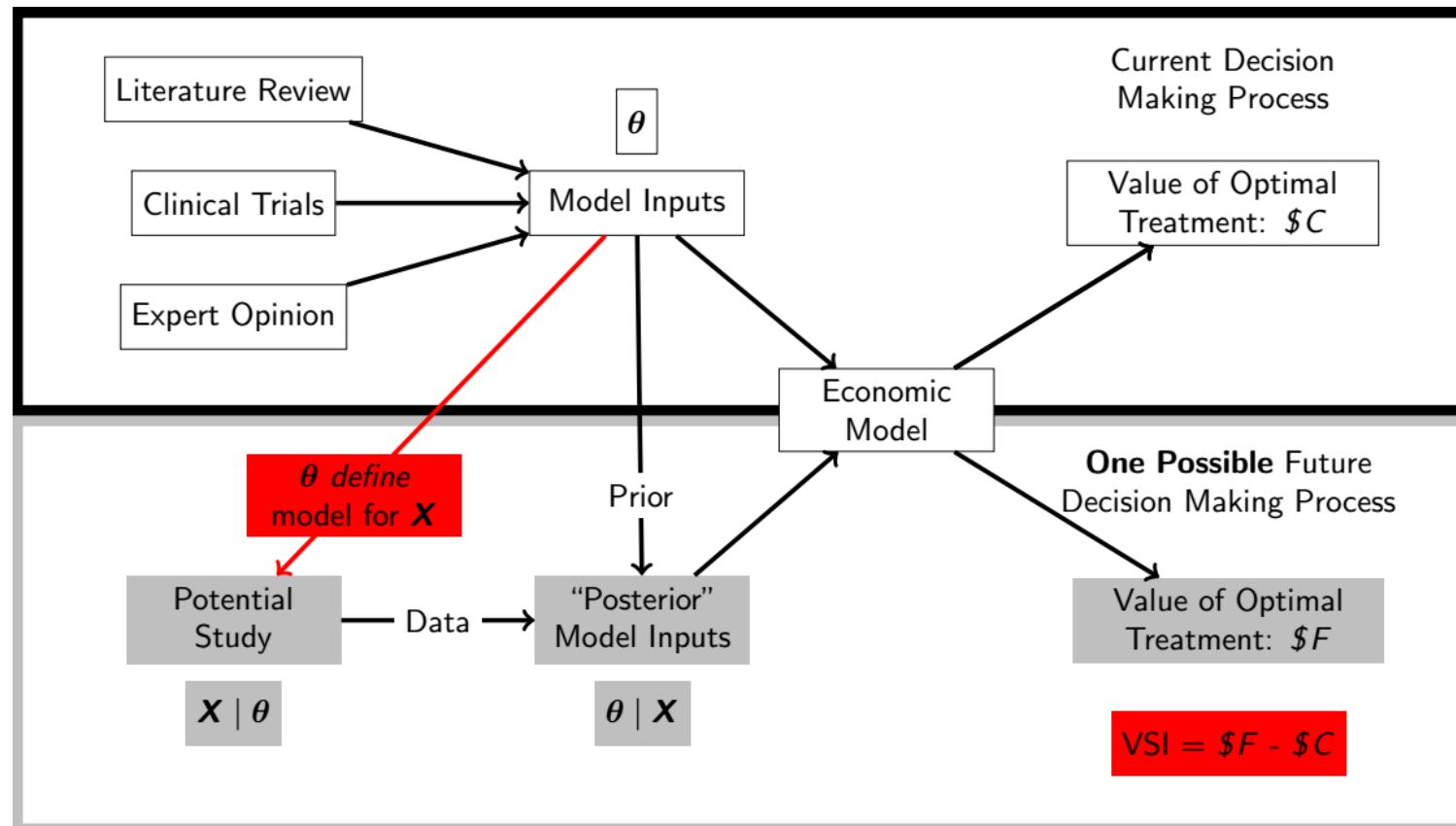
This means that traffic to and from SAVI is now



Expected value of sample information



Expected value of sample information



Stolen from various presentations by [Anna Heath](#)

Expected value of sample information

 Jackson et al (2021)

- EVSI measures the value of reducing uncertainty by running a study of **a given design**

$$\text{EVSI} = E_{\mathbf{X}} \left[\max_t E_{\theta|\mathbf{X}} [\text{NB}_t(\boldsymbol{\theta})] \right] - \max_t E_{\theta} [\text{NB}_t(\boldsymbol{\theta})]$$

↑
Value of decision based
on **sample** information
(for a given study design)

↑
Value of decision based
on **current** information

- Can compare the benefits and costs of a study with given design
 - To see if a proposed study likely to be a good use of resources
 - To find the optimal study design

Expected value of sample information

doi Jackson et al (2021)

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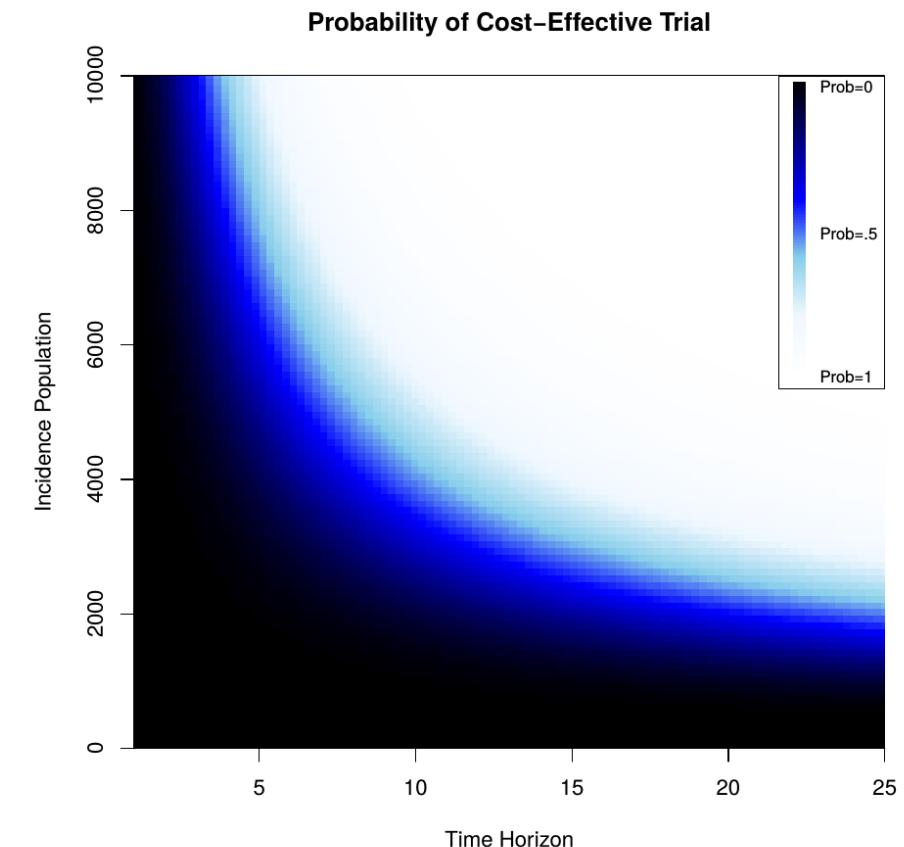
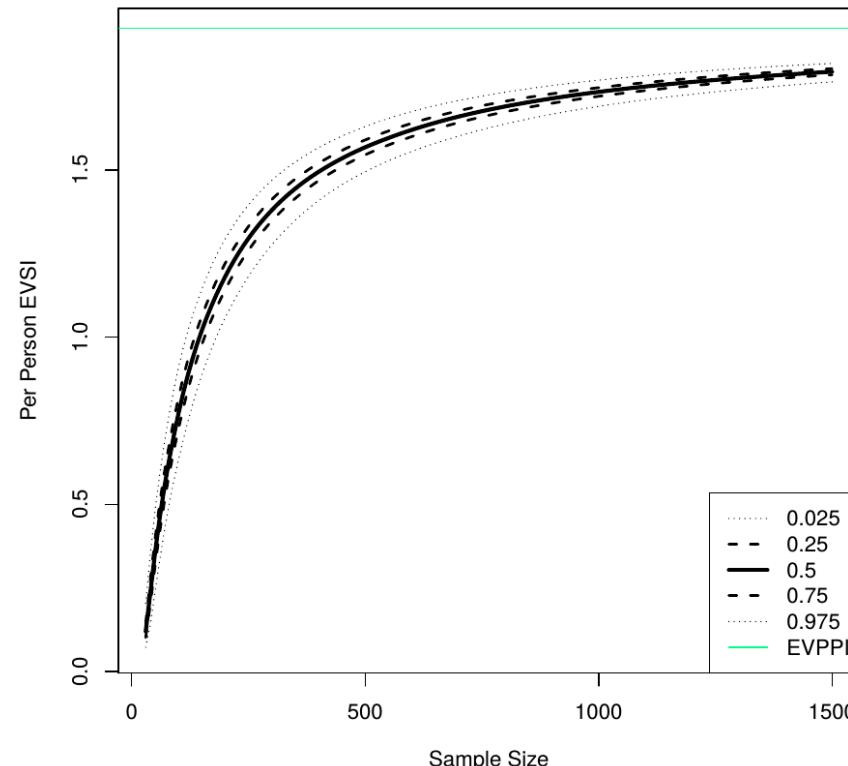
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Value of decision based
on **current** information

- Can compare the benefits and costs of a study with given design
 - To see if a proposed study likely to be a good use of resources
 - To find the optimal study design
- Computationally complex
 - Requires specific knowledge of the model for (future/hypothetical) data collection
- Again, recent methods have improved efficiency
 - Regression-based (Strong et al, 2015)
 - Importance Sampling (Menzies et al, 2016)
 - Gaussian approximation (Jalal et al, 2015; Jalal and Alarid-Escudero, 2018)
 - Moment matching (Heath et al, 2018)
- Can be used to drive design of new study (eg sample size calculations)

doi Heath et al (2021)

Expected value of sample information

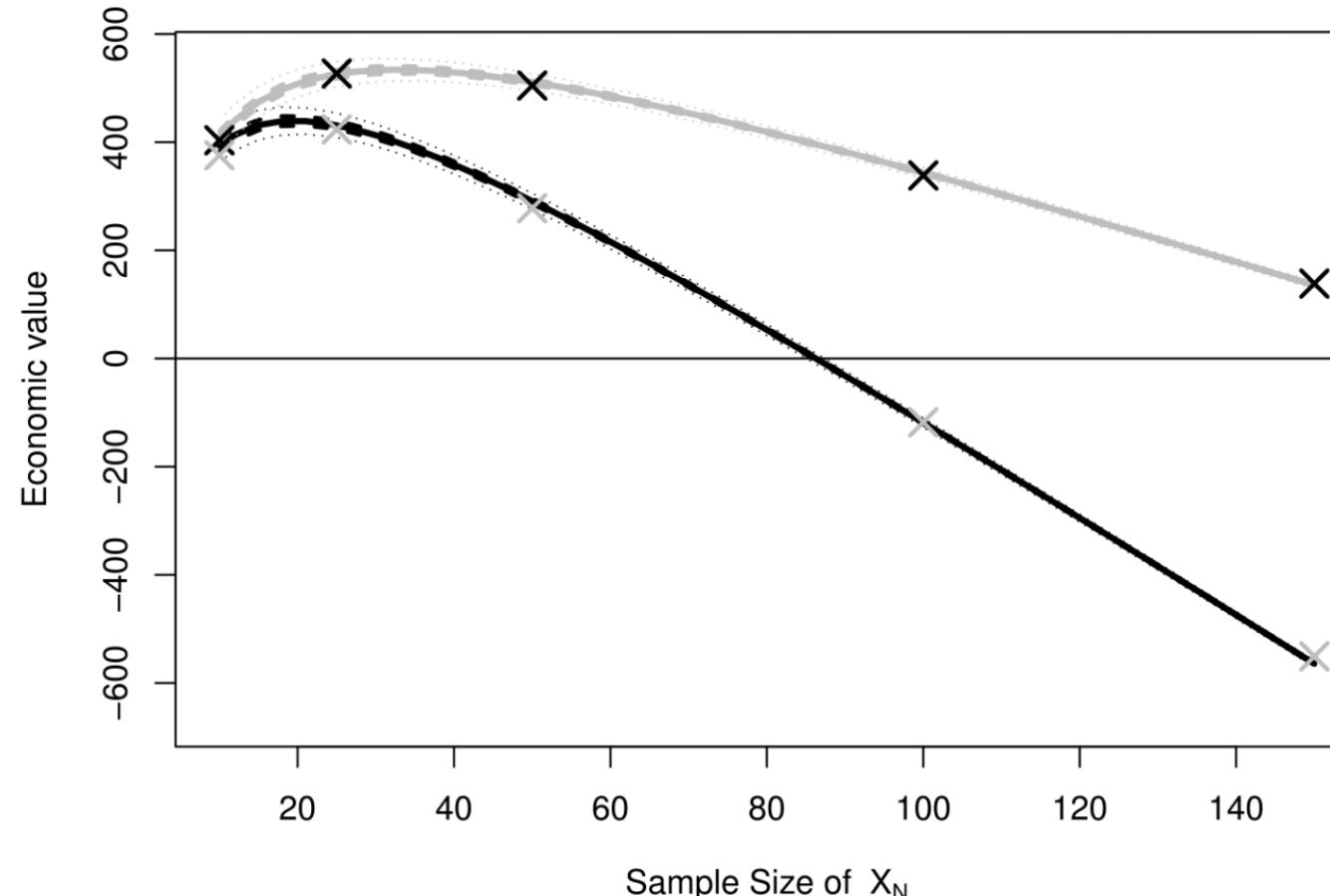


 <https://github.com/giabaio/EVSI> and <https://github.com/chjackson/voi>

 <https://egon.stats.ucl.ac.uk/projects/EVSI>

 [Heath et al \(2019\)](#)

Expected value of sample information



NICE HTA evaluation methods update (2021)

2.16. The use of Expected Value of Perfect Information (EVPI) will **not** be adopted into the NICE methods. Stakeholders raised concerns about this proposal and the majority disagreed with it. It was noted that the added value of EVPI and how it would be used in decision-making was unclear as experiences from other countries suggested that its added value to decision making is minimal. There were concerns that it would add complexity to decision making, and the additional burden for analysts and reviewers may not be worth it. On the other hand, some stakeholders argued that the proposal did not go far enough and should include expected value of partially perfect information (EVPPPI) and expected value of sample information (EVSI).

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- Push from industrial representatives, despite attempts at clarifying/simplifying concepts/guidelines
- CADHT actually say

When the decision problem includes consideration of further research to inform future decisions, a value-of-information analysis should be undertaken as part of the reference case. [...] To identify these critical values and correctly quantify the impact of a parameter taking a specific value (on both the probability of an intervention being cost-effective and the expected net benefit), recent methodological work suggests that a two-stage expected value of perfect parameter information analysis may be useful

- HTA is fundamentally based on statistical modelling – and statisticians should be much more heavily involved in the whole process
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- Vol methods can be very helpful
 - They can address multiple questions, including research prioritisation
 - Vital in issues such as managed entry/conditional reimbursement
- Still a battle...