

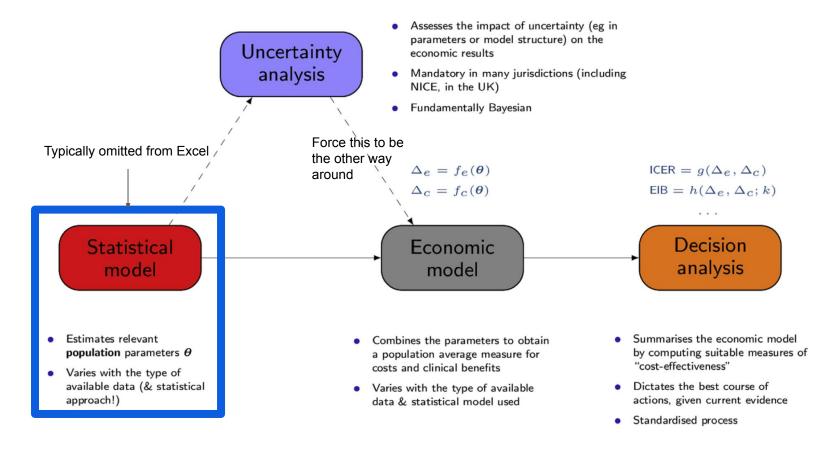
R-HTA in LMICs

Advanced R programming for HTA

R you still using Excel?

- R allows users to perform both parameter estimation (including evidence synthesis) and the subsequent simulation of disease progression and outcomes.
- Analyses can also be done in one software environment so that the economic model does not need to be unnecessarily simplified due to the constraints of Excel
 - This is especially important for model reusability and transparency.
- In complex models, some parameters often cannot be estimated using standard statistical techniques. Unknown parameters can, however, be estimated using model calibration, a technique that identifies parameter values that maximize fit between model output and observed data
 - E.g., optim() and optimx() packages, with genetic algorithms using genalg or with differential evolution using DEoptim.
- Note: see R You Still Using Excel? The Advantages of Modern Software Tools for Health Technology Assessment for further reading

R you still using Excel?



Below is the trace of a well-known model used to teach health economists around the world. It compares a monotherapy and combination therapy antiretroviral regimen. Link here

Markov model																				
	MONOTUE	-DADY				1.75			•			00110111	TION THEO	1 D) (1.7	V	0.1	
	MONOTHE		•	_			Years	1	Costs			COMBINA	TION THER		_			Years	Costs	
/ear	A		С	D		no disc	disc	no c	IISC	disc		A	В	С	D		no disc	disc	no disc	disc
0	1	0	0		check	0.000	0.000		F 400	0 5	450	0.056	0.400	0.004		heck	4.00	4.00	0 7000	0 004
1	0.721	0.202	0.067	0.010	1.000	0.990		£	5,463		153	0.858		0.034	0.005	1.000	1.00		£ 7,328	£ 6,91
2	0.520	0.263	0.181	0.036	1.000	0.964		£	6,060		393	0.737	1	0.080	0.014	1.000	0.99		£ 7,571	£ 6,73
3	0.376	0.258	0.277	0.089	1.000	0.911	0.911	£	6,394		368	0.531		0.178	0.044	1.000	0.96		£ 6,002	
4	0.271	0.226	0.338	0.165	1.000	0.835		£	6,381		055	0.383		0.270	0.096	1.000	0.90		£ 6,310	
5	0.195	0.186	0.364	0.255	1.000	0.745		£	6,077	-	541	0.277		0.330	0.170	1.000	0.83		£ 6,305	£ 4,7
6	0.141	0.147	0.361	0.350	1.000	0.650	The second secon	£	5,574	-	929	0.200		0.357	0.258	1.000	0.74		£ 6,020	£ 4,24
7	0.102	0.114	0.341	0.444	1.000	0.556		£	4,963		301	0.144	1	0.357	0.351	1.000	-		£ 5,537	£ 3,68
8	0.073	0.087	0.309	0.531	1.000	0.469		£	4,316		708	0.104			0.444	1.000	0.56		£ 4,943	£ 3,1
9	0.053	0.065	0.272	0.610	1.000	0.390		£	3,682	-	179	0.075		0.307	0.530	1.000	0.47		£ 4,308	£ 2,5
10	0.038	0.049	0.234	0.679	1.000	0.321	0.321	£	3,092		727	0.054		0.271	0.609	1.000	0.39	410050000000000000000000000000000000000	£ 3,682	
11	0.028	0.036	0.198	0.739	1.000	0.261	0.261	£	2,564	-	350	0.039	-	0.234	0.678	1.000	0.32		£ 3,098	£ 1,63
12	0.020 0.014	0.026	0.165 0.136	0.789	1.000	0.211 0.170	0.211 0.170	£	2,102		045	0.028		0.198 0.165	0.737 0.787	1.000	-		£ 2,572	-
13 14	0.014	0.019	0.136	0.830 0.865	1.000	0.170		£	1,708		801 609	0.020		0.165	0.787	1.000	0.21 0.17		£ 2,111	
15	0.010	0.014	0.090	0.893	1.000	0.133	0.135	£	1,103		460	0.013	-	0.136	0.829	1.000	0.17		£ 1,717	
16	0.007	0.010	0.030	0.093	1.000	0.107	The second secon	£	878		346	0.008		0.090	0.892	1.000	0.14		£ 1,111	
17	0.003	0.005	0.072	0.933	1.000	0.063	0.063	£	695	- Contract	258	0.005		0.030	0.892	1.000		-	£ 885	-
18	0.004	0.003	0.037	0.933	1.000	0.057		£	548	C	192	0.004		0.072	0.933	1.000	0.03		£ 701	
19	0.003	0.004	0.045	0.959	1.000	0.032	0.032	£	431	t.	142	0.003		0.036	0.933	1.000	0.07		£ 553	
20	0.001	0.003	0.038	0.968	1.000	0.032		£	337		105	0.002		0.036	0.959	1.000	0.04	7.07.007	£ 435	
					sum	7.99	7.99		£63,745	£ 44	663				8	um	8.94	8.94	£72.575	£ 50,6

```
a_P_NT ← a_P_SoC
a_P_NT["A", "B", 1:2] ← p_AB * n_rr_trteffect # transition from health state fr
a_P_NT["A", "C", 1:2] ← p_AC * n_rr_trteffect # transition from health state fr
a_P_NT["A", "Death", 1:2] ← p_AD * n_rr_trteffect # transition from health state
a_P_NT["A", "A", 1:2] \leftarrow (1 - p_AB * n_rr_trteffect) * (1 - p_AC * n_rr_trteffect
a_P_NT["B", "C", 1:2] ← p_BC * n_rr_trteffect # transition from health state fr
a_P_NT["B", "Death", 1:2] ← p_BD * n_rr_trteffect # transition from health state
a_P_NT["B", "B", 1:2] \leftarrow (1 - p_BC * n_rr_trteffect) * (1 - p_BD * n_rr_trteffect)
a_P_NT["C", "Death", 1:2] ← p_CD * n_rr_trteffect # transition from health stat
a_P_NT["C", "C", 1:2] \leftarrow 1 - p_CD * n_rr_trteffect # transition from health state
v s init \leftarrow c("A" = 1, "B" = 0, "C" = 0, "Death" = 0) # initial state vector
m_M_SoC ← array(matrix(0, nrow = n_cycles + 1, ncol = n_states),
                 dim = c(n_{cycles} + 1, n_{states}),
                 dimnames = list(0:n_cycles, v_names_states))
m_M_NT ← m_M_SoC
m_MSoC[1, ] \leftarrow v_s_init
m_M_NT[1, ] \leftarrow v_s_init
```

```
### Markov Trace ----
# Iterative solution of cSTM Status Quo
for (t in 1:n_cycles) {
# Fill cohort trace
m_M_SoC[t + 1, ] \leftarrow m_M_SoC[t, ] %*% a_P_SoC[ , , t]
# Iterative solution of cSTM New Treatment
m_M_NT[t + 1, ] \leftarrow m_M_NT[t, ] %*% a_P_NT[ , , t]
}
```

rarame	ters of the m	louei		
Name	determinist	alpha	beta	description
Transition	probabilities			
		events	compleme	nt
tpA2A	0.721	1251	483	Transition probability from A to A
tpA2B	0.202	350	1384	Transition probability from A to B
tpA2C	0.067	116	1618	Transition probability from A to C
tpA2D	0.010	17	1717	Transition probability from A to D
tpB2B	0.581	731	527	Transition probability from B to B
tpB2C	0.407	512		Transition probability from B to C
tpB2D	0.012	15	1243	Transition probability from B to D
tpC2C	0.750	1312	437	Transition probability from C to C
tpC2D	0.250	437	1312	Transition probability from C to D
Costs				
dmca	£ 1,701			Direct medical costs associated with state A
dmcb	£ 1,774			Direct medical costs associated with state B
dmcc	£ 6,948			Direct medical costs associated with state C
ccca	£ 1,055			Community care costs associated with state A
cccb	£ 1,278			Community care costs associated with state B
cccc	£ 2,059			Community care costs associated with state C
Drug cos	ts			
cAZT	£ 2,278			Zidovudine drug cost
cLam	£2,086.50			Lamivudine drug cost
Other par	rameters			
RR	0.509			Treatment effect (RR)
cDR	0.06			Annual discount rate - costs (%)
oDR	0.00			Annual discount rate - benefits (%)

```
## Shiny Inputs -----
n_{aqe_min} = 40,
n_{age_max} = 60,
               # max age of follow up default is 60
d_r = 0.035
                # default discount rate for costs & OALYS (NICE 3.5%)
c_Trt_1 = 2278, # cost of treatment default 2278
c_Trt_2 = 2086.50, # cost of treatment default 2086.50
n sim = 1
){
 ## Non-shiny inputs -------
 n_cycles ← n_age_max - n_age_min # time horizon, number of cycles
 v_{names\_states} \leftarrow c("A", "B", "C", "Death") # define names of health states
 n_states ← length(v_names_states) # number of health states
## Generate parameter inputs ------
 gen_params ← function(){
  # wrap parameter values in data frame
  df_params ← data.frame(
   p_AA = 0.721, # transition from health state A to A
   p_AB = 0.202, # transition from health states A to B
   p_AC = 0.067, # transition from health states A to C
   p_AD = 0.010, # transition from health states A to Death
```

```
v_c_SoC ← c(c_direct_state_A, c_direct_state_B, c_direct_state_C, 0)
a_c_SoC ← array(matrix(v_c_SoC, nrow = n_states, ncol = n_states, byrow = T),
                 dim = c(n_states, n_states, n_cycles + 1),
                 dimnames = list(v_names_states, v_names_states, 0:n_cycles))
# Note: the advantage of creating a cost array with the same dimensions as the
# transition array is that you can take advantage of vectorisation - which is
                                                              wrapper.R
# Add drug costs
a_c SoC[, c("A", "B", "C"),] \leftarrow a_c SoC[, c("A", "B", "C"),] + c_Trt_1 \# dre
a_c_NT ← a_c_SoC # create New Treatment costs array
a_c_NT[ , c("A", "B", "C"), 1:2] \leftarrow a_c_NT[ , c("A", "B", "C"), 1:2] + c_Trt_2
a_Y_c_SoC ← a_A_SoC * a_c_SoC # SoC
a_Y_c_NT ← a_A_NT * a_c_NT # New Treatment
m_costs_SoC ← rowSums(t(colSums(a_Y_c_SoC))) # SoC
m_costs_NT ← rowSums(t(colSums(a_Y_c_NT))) # New Treatment
```

A Case Study in HIV/AIDS: Group exercise

- Change in the time horizon of the R model script (hint: younger age, line 21-23 in R script)
- Change the transition probability from health state A to health state B (line 68 in the R script)
- Change the risk ratio of the treatment effect between mono vs combination therapy (line 63 in the R script)
- Change the direct costs for health state C (line 223 in the R script)