

Pseudo-code for LTBI screening model

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Introduction

Describes a type of microsimulation and cost-effectiveness analysis using a synthetic cohort of recent immigrants to the UK. Much of the work is in setting up the cohort.

Pre-simulation setup

- Load in ETS/pre-screening dataset, denote by X
- Define simulation constants
 - Number of Monte-Carlo iterations, N
 - Age range for screening
 - Year cohort
 - Screen delay range, 5 years
 - Time horizon (default life-time 100 years)
- Define cost-effectiveness distributions
 - Willingness to pay
 - Secondary infections
 - Costs
 - QALY
 - Test performance
 - Effectiveness
 - Current year
- Create **policy**
- Define which subsets of cohort to target for screening
 - WHO incidence
 - All QALY?
 - All costs?
 - Treatment regimen
 - LTBI test
- Define **scenario**
 - Screening pathway probability distributions
 - Cost distributions
- Sample screening year $\text{unif}[0, 5]$ for X
- Remove individuals from X according to
 - Simulation constants
 - Screening year
- Join probability LTBI by incidence in country of origin and year
 - Sample realisations
- Calculate time to events from dates
- Create probability incidence curve
 - Append Sutherland and Lancet
- Generate TB progression times for LTBI individuals, consistent with other dates
- Join CFR for given age
 - Sample case fatality realisations, I_{cf}
- Calculate QALYs for TB cases from progression date to death for
 - Disease-free

- Cured
- Case fatality
- Status-quo i.e. either fatality or cured depending on I_{cf}
- Calculate future discounts at
 - Time of notification
 - Time of secondary infection (i.e. 1 year afterwards)
- Define decision tree object structures, denote d_{health} and d_{cost}

Simulation

- Set policy $i = 1$
- Remove individuals from X according to $f(X, i) = X'$
- Calculate mean screening delay from entry to screening and associated discount
- Calculate proportion in each incidence group from X'
- Get treatment regimen from policy, $t = treatment(i)$
 - Get cost of treatment, $cost(t)$
 - Get effectiveness of treatment, $eff(t)$
- Substitute cost and probabilities in to d
 - Incidence groups
 - LTBI status
 - $eff(t)$
 - $cost(t)$
 - GP incentives

Screening model

- Set scenario $j = 1$
- Assign branch value for j to d_{health} and d_{cost}
- For d_{health} and d_{cost} and each iteration $n = 1, \dots, N$
- Sample
 - Branch probabilities
 - Costs
 - Utilities/QALYs
- Calculate
 - Total expected values for cost c_1^s and QALYs q_1^s
 - Subpopulation probabilities, P , including LTBI to cured

TB model

- Set scenario $j = 1$
- For each iteration $n = 1, \dots, N$
- Sample TB treatment cost
- Calculate status-quo, with discounting
 - Cost, c_0^{tb}
 - QALYs, q_0^{tb}
- Get $p = P(\text{LTBI to cured})[n]$
- Replace first p proportion of TB cases with disease-free individuals
- Calculate screened outputs, with discounting
 - Cost, c_1^{tb}
 - QALYs, q_1^{tb}
- Sum screening and TB costs and QALYs
 - $c_1^s + c_1^{tb}$
 - $q_1^s + q_1^{tb}$