

PARALLEL SESSION 2.5

BEST BUYS, WASTED BUYS AND CONTROVERSIES IN NCD PREVENTION

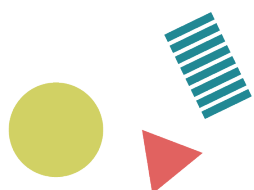


| BACKGROUND

The world is facing a spectre of non-communicable diseases (NCDs), which will diminish the length and quality of life, interact with existing health conditions, raise household and public health expenditures, and increase the burden of care on family members. A number of policies have been implemented to fight NCDs and studies have shown some interventions to be 'best buys' whereas others are 'wasted buys'. Most NCDs can be preventable and, given the generally lower cost and simpler delivery of preventive interventions, a move towards preventive rather than curative interventions could be attractive. Another approach that is gaining prominence in discussions of NCDs is 'do-it-yourself' or DIY interventions. NCDs are by definition not contagious or infectious and people develop them over the course of their lives for many reasons including those to do with lifestyle. As such, they can be prevented if people modify their lifestyles (i.e., in DIY interventions). At present, there is no definitive collection of evidence on 'best buys', 'wasted buys', and DIY interventions for the prevention of the NCD burden that governments, health professionals, NCD program managers, and healthy lifestyle promotion personnel can use.

| OBJECTIVES

This session will introduce an upcoming information package which aims to provide details on Best Buys, Wasted Buys, and DIYs in NCD prevention focusing on cardiovascular diseases (heart disease and stroke), diabetes, chronic lung disease and cancers. This work is not intended to offer a one-size-fits-all approach for making recommendations on NCD prevention. It seeks instead to identify how different systems can create and utilize information for identifying interventions offering best value for their populations.





Panelist

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Professor Adam Elshaug, M.P.H., Ph.D., is an internationally recognized researcher and policy advisor specializing in the calculation of low-value care (prevalence and costs of) and reducing waste to optimize value in health care. He is Chair and Professor in Health Policy and Co-Director of the Menzies Centre for Health Policy (MCHP) at The University of Sydney, Australia. Professor Elshaug is a Ministerial appointee to the (Australian) Medicare Benefits Schedule (MBS) Review Taskforce. This is undertaking a 4-year process to review Australia's entire Medicare fee-for-service system utilising HTA principles and processes. In October 2017 Professor Elshaug was appointed to the Board of the NSW Bureau of Health Information (BHI), an arms-length government agency that publicly reports on the performance of all public hospitals. He is a Chief Investigator within the Wisser Healthcare Collaborative: <http://wiserhealthcare.org.au/> and a Chief Investigator and Lead of the Safety, Quality and Value stream of the recently awarded USD\$100 million 'Digital Health Cooperative Research Centre' (DHCRC). Professor Elshaug is Senior Fellow with the Lown Institute in Boston, USA. Professor Elshaug was a 2010-11 Commonwealth Fund Harkness Fellow based at the US Agency for Healthcare Research and Quality (AHRQ). From mid-2011 to mid-2013, he then served as NHMRC Sidney Sax Fellow in Harvard Medical School's Department of Health Care Policy. In parallel, he became The Commonwealth Fund's Inaugural Visiting Fellow for 2012-13 in New York City. He is recipient of numerous research awards and over 150 invitations to address conferences, government, academic, insurance and health technology assessment groups internationally. He has published over 120 technical reports and peer review articles with first-author publications in journals such as The Lancet, New England Journal of Medicine, BMJ, JAMA, Medical Journal of Australia, BMJ Quality & Safety. Professor Elshaug was Co-Lead of 2017 'Right Care' Series of papers in The Lancet.