Policy implementation of PET in Norway

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Background

- No PET-scan facilities in Norway
- 1998: Norwegian HTA centre established
- 1999: Ministry of Health (MOH) requests for an HTA on clinical use of PET
SMMs strategy

1) To base the Norwegian assessment on the INAHTA report
2) To establish a review group of experts from the main Norwegian hospitals
3) To ask this group to assess the INAHTA report, as well as studies identified after or in addition to this report
4) To show cost data for establishing and running a PET facility in Norway
SMM report 8/2000

Summary:

- SMM supports the main conclusions in the INAHTA Joint Report that:
  Among several clinical conditions, only used in cancer, neurology and coronary disease, evidence suggests that PET may give diagnostic advantages compared to other techniques.
  But improved clinical results were unknown.

- The additional publications show some promising results, but there is still a lack of evidence on clinical outcomes.

Impact-1

The MOH decides that public money should not be allocated to establish a PET facility in Norway for the time being

The reason for this decision, was not sufficiently documented clinical value of PET (research use was not discussed)
2003

MOH requests for an update of previous SMM report, in due time for the National Budget 2004.

SMMs strategy:
- To make a rapid review of the HTA reports and SRs, published during 2001-2003
Included HTA reports

- MSAC 2000
- MSAC 2001
- MSAC 2002
- Cedit 2001
- ICES 2001
- DACEHTA 2001
- AHRQ 2001
- AHRQ 2001
- AHRQ 2002
- AHRQ 2002
- AHRQ 2002
- AHRQ 2002
- HTBS 2002
- AETMIS 2002
- ICES 2003

SMM report 6 / 2003

Summary

The clinical use of PET has increased
There is still scarce evidence on clinical or health outcome effects
PET is more accurate than other diagnostic procedures, especially for procedures within oncology, and should be used in
- diagnosis of NSCLC and solid lung tumors
- staging of Hodgkins disease
- metastases from malignant melanoma and colo-rectal cancers
- head and neck tumors
Examinations should be performed within the framework of clinical trials
Impact - 2

MOH in National Budget (2004):

20 mill NOK is allocated together with contributions from industry and Norwegian Research Council, to establish a PET facility at the National Cancer Hospital

Conclusions

SMMs 2 PET assessments have had in impact on political decision-making, mainly because they were based on:

- International agreement within INAHTA
- Support from national experts
- Delivered in time for financial decisions