

PREFER

Patient Preferences in Benefit-Risk Assessments during the Drug Life Cycle

Version 1.1 May 2017

Disclaimer: This presentation and its contents reflects the view of the presenter and not the view of PREFER, IMI, the European Union or EFPIA.

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About the PREFER project



The Patient Preferences in Benefit-Risk Assessments during the Drug Life Cycle (PREFER) is a five year project that has received funding from the **Innovative Medicines Initiative 2** Joint Undertaking under grant agreement No 115966. This Joint Undertaking receives support from the European Union's **Horizon 2020** research and innovation programme and **EFPIA**.

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Unmet need PREFER addresses

Currently a lack of understanding of how patient perspectives on benefits and risks can best inform decision-making.

PREFER aims to identify, characterise, and apply preference elicitation methods in all stages of drug life cycle.

PREFER project goals

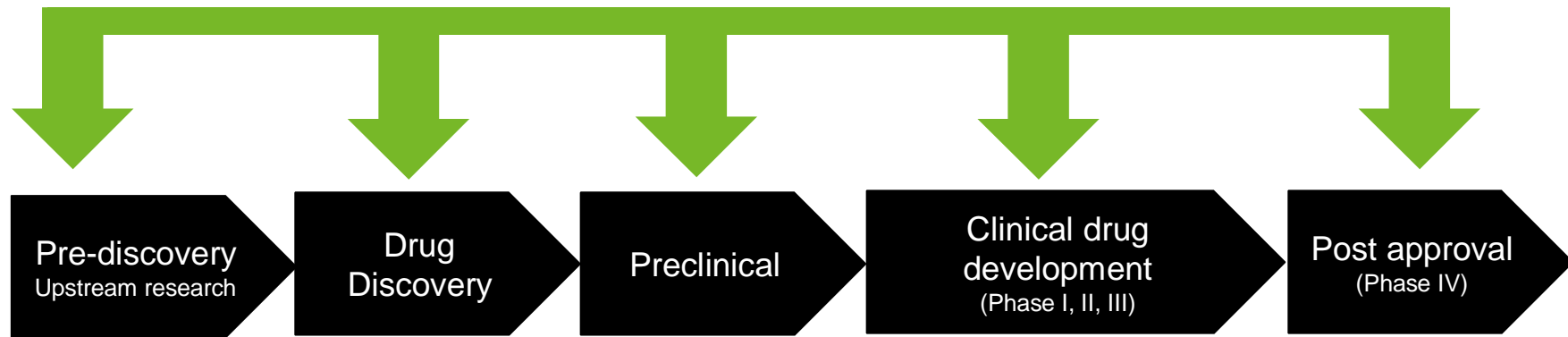
- Establish **recommendations to support development of guidelines** for
 - Industry
 - Regulatory Authorities
 - HTA bodies & payers
- **on how and when to include patient preferences** on benefits and risks of medical products.

PREFER approach

- **Run patient preference studies** in academic and industry settings.
- **Provide a better understanding** of the best-practice approach to patient-preference studies.
- **Show how patient preference studies can support decision** making for industry, regulators and HTA bodies.

Seeks methods for all stages

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PATIENT PREFERENCES



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Public-private partnership

- **Coordinator:** Uppsala University (Mats Hansson)
- **Project leader:** Novartis Pharma (Conny Berlin)
 - 10 Academic research institutions
 - 4 Patient organisations
 - 1 Health Technology Assessment body
 - 2 SMEs (small and medium sized enterprises)
 - 16 Pharmaceutical companies

PREFER partners



Erasmus
University
Rotterdam



UNIVERSITY OF
BIRMINGHAM



Universitätsklinikum
Erlangen



KU LEUVEN

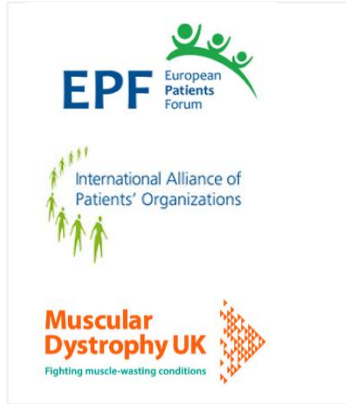


Organisation of PREFER

- Shared leadership at all levels
 - From leadership, to work packages to tasks
- Stakeholder partners & advisory groups
 - Patient Advisory Group
 - HTA and Payers Advisory Group
 - Regulatory Advisory Group
- Scientific & Ethics advisory boards

Stakeholder advisory groups

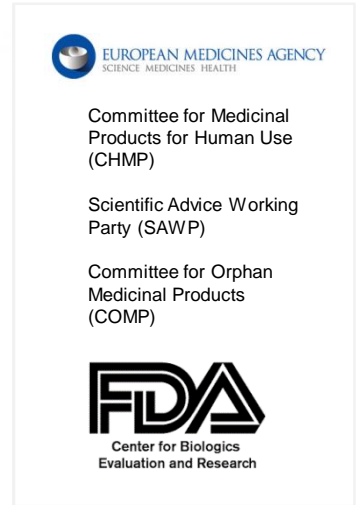
PATIENTS 4 partners



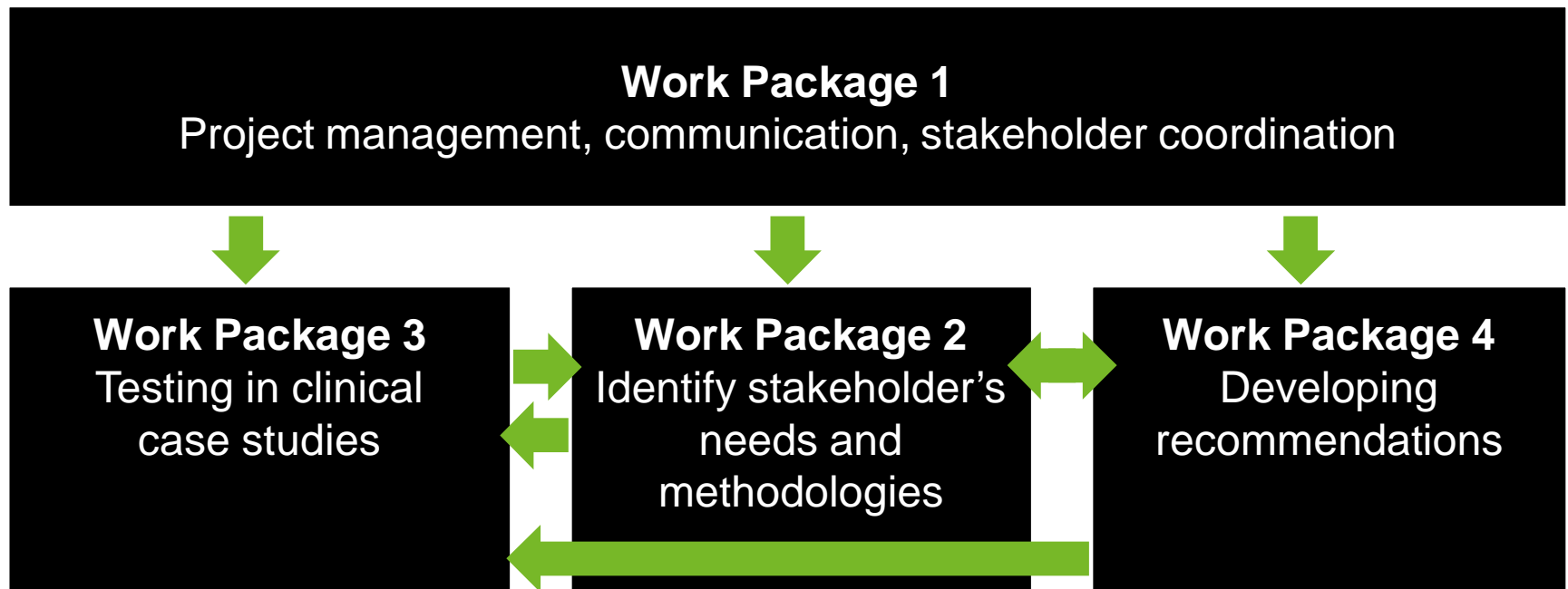
HTA AND PAYERS 1 partner, 5 external advisors



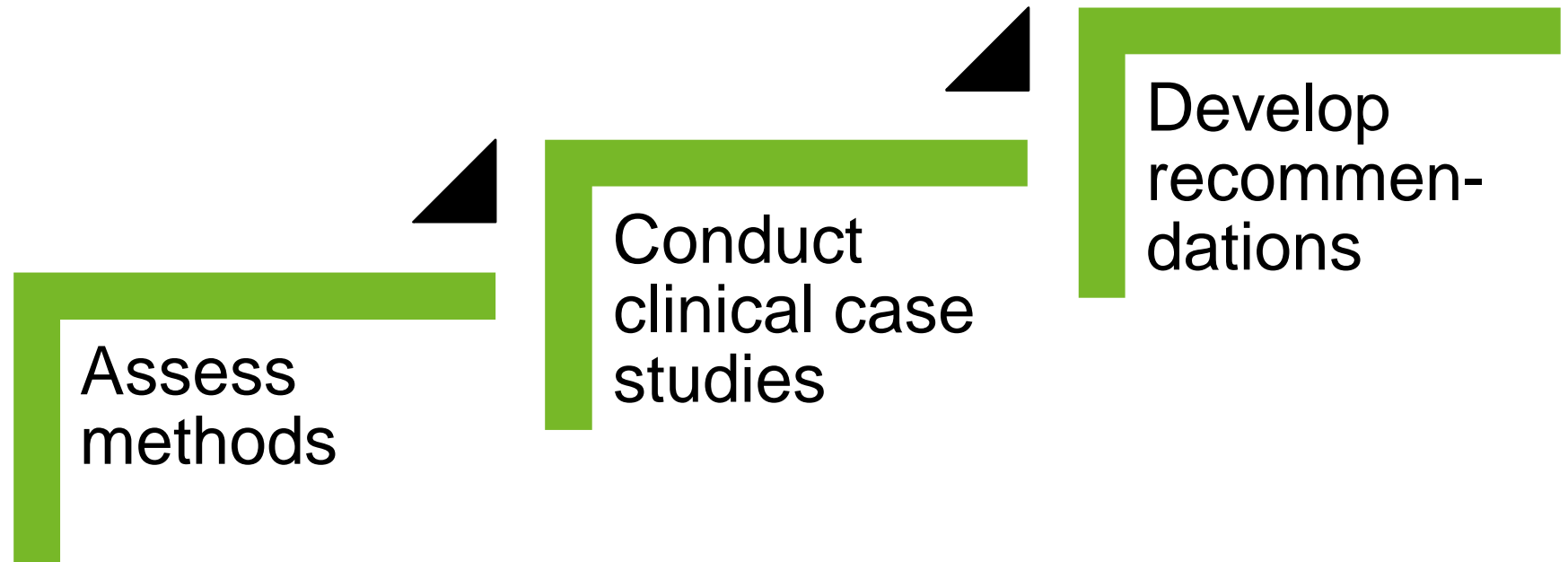
REGULATORS External advisors



PREFER work packages



Stepwise approach



1: Assessing methods

- Literature review
- Interviews and focus group meetings with
 - patient organisations & patients
 - physicians
 - regulatory authorities
 - health technology assessment bodies & payers
 - industry experts
 - & academics

on their key concerns, needs, expectations and desires on the assessment and use of patient preferences.

2: Clinical case studies

Patient preference studies to be conducted in three disease areas where **patients** and **clinical research partners** already provide expertise:

- Cancer
- Rheumatoid arthritis
- Neuromuscular disorders

Partners from the **pharmaceutical industry** will provide additional patient preference studies to cover disease areas from the companies' portfolio.

3: Recommendations

- **Mid-2019:** draft recommendations to be available, testing in other disease areas and decision points by stakeholder advisory groups.
- **Mid-2021:** refined draft recommendations to be available
- **Autumn 2021:** Final recommendations to be presented.

In summary, PREFER

- Will **develop evidence-based recommendations** to guide industry, Regulatory Authorities, HTA bodies, reimbursement agencies
- Carried out by a **diverse consortium** that involves stakeholders: both as partners and advisors

More information

www.imi-prefer.eu

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