HEALTH TECHNOLOGY ASSESSMENT SPECIAL INTEREST GROUP

2025 HTA SIG ROUNDTABLE DISCUSSIONS

WHAT IS HTA?

Health technology assessment (HTA) is a multidisciplinary process that uses explicit methods to determine the value of a health technology to help inform decision-making and promote an equitable, efficient and high-quality health system.

WHO ARE WE?

The Lymphoma Coalition (LC) Health Technology Assessment Special Interest Group (HTA SIG) is comprised of LC Members who are involved, or wish to become more involved, in the HTA evaluation of new drugs in their country for the treatment of lymphoma and CLL.

OUR FOCUS

We leverage evidence-based data to strengthen patient submissions for new technologies.

We share best practices to increase and improve patient involvement in HTA processes.

We explore learning opportunities to understand HTA processes across countries and regions.

ROUNDTABLE DISCUSSIONS – BY THE NUMBERS

Amsterdam, The Netherlands

13 countries represented

Four roundtable topics

55% of participants rate their **understanding of artificial intelligence** as 7 out of 10.

42% believe **artificial intelligence should be integrated in HTA**, but only when it adds clear value.

67% use AI (or may soon) to **summarise information** faster and easier.

40% believe **advocating for real-world evidence** in HTA should be a priority.

50% believe that real-world evidence is important for **influencing HTA policy**.

ROUNDTABLE TOPICS

ARTIFICIAL INTELLIGENCE IN HTA

A standardised definition of artificial intelligence (AI) does not exist. Some HTA authorities (like those in Canada and the United Kingdom) are exploring how AI supports drug appraisal processes in their country and to provide clarity on how AI methods align with the generation and reporting of evidence.

What are the benefits and opportunities? Improved data collection, analysis of large datasets, improved efficiency, comprehensive information assessment.

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What are the challenges and risks? Potential bias based on algorithms, reduced transparency, scientific validity and reliability, ethical considerations and reduced human oversight.

AI MODELS EXPLAINED

Although methods vary widely, they usually exhibit some level of adaptivity and autonomy.

- **Generative AI** generates data/text in response to user prompts based on certain characteristics.
- **Machine Learning** finds patterns in datasets and translates findings into an algorithm or model.
- **Large Language Models** looks at vast amounts of text to understand and infer new content.
- **Natural Language Processing** looks at linguistic patterns, words and sentences to generate speech or text.
- **Synthetic Data** reproduces the characteristics of original data using machine learning algorithms and other approaches.
- **Deep Learning** uses patterns in data to predict an output for complex learning tasks.

What's Next for HTA SIG?
Providing information about AI and AI literacy can help LC Members increase their knowledge and understanding of AI in the context of HTA as it continues to evolve.

POPULATION, INTERVENTION, COMPARISON AND OUTCOMES (PICOS)

PICO refers to four different elements used in evidence-based research to formulate clinical questions. With treatments in the lymphoma landscape rapidly evolving, clear, focused questions leading to better evidence searches and precise clinical questions help guide evidence-based decisions.

PICO EXPLAINED

P = Population. Patient populations ensure the selected definition is clear, specific and reflects the relevant target group.
I = Intervention. Patient feedback means they can ask questions based on their experiences with existing technologies and practical considerations on the expected use – this helps to ensure that the information about a technology is patient relevant.
C = Comparator. For the clinical evaluation of a new technology, it is necessary to understand how well it performs when compared to an existing technology.
O = Outcome. Patients can help identify outcomes that are both relevant and important. By providing relevant input on outcomes and sharing their experiences, patients can contribute to discussions about outcomes that matter most to them.

What's Next for HTA SIG?
Sharing relevant information about the PICO framework in evidence-based practice is one way LC can help Members critically evaluate PICO questions for clarity and clinical relevance.

ADVANCED THERAPY MEDICINAL PRODUCTS (ATMPS)

Many LC Members contribute to HTA appraisals and processes for new drugs or technologies in their country with patient experience data. Patient submissions to HTA authorities take time to complete and often require resources and expertise. As LC Members may receive funding from pharmaceutical and other partners, transparency in the disclosure of funding sources, conflicts of interest and sources of patient data are important.

ATMPs EXPLAINED

ATMPs are medicines based on gene, tissue or cellular therapies – for lymphoma, these include CAR-T or bispecific antibodies. As ATMPs are often expensive, patient experience plays a significant role in helping to inform funding decisions about specific therapies.

What's Next for HTA SIG? Developing a global Position Statement on Transparency for Members to use will help clarify funding sources, highlight conflicts of interest and mitigate misconceptions that patient organisations advocate for reimbursement of new treatments based on funding sources.

REAL-WORLD EVIDENCE AND PATIENT ADVOCACY

Small patient populations are often underrepresented and operating in under-resourced settings. By supporting standardised approaches for the collection and generation of real-world data/real-world evidence, LC Members can utilise patient experience data to influence HTA appraisals and decision-making about new technologies.

REAL-WORLD DATA AND REAL-WORLD EVIDENCE EXPLAINED

- Real-world data refers to data collected in clinical practice, healthcare delivery, patient-reported outcomes and health related quality-of-life.
- Real-world evidence is information derived from the analysis of real-world data. It captures the complexities of real-world clinical practice, provides insights about how treatments perform over time and helps to accelerate approvals and reduce costs to help streamline the approval process.
- The benefit of real-world evidence includes faster drug development and approval, lower development costs and wider use of external control arms to clinical trials.

What's Next for HTA SIG? Providing LC Members with detailed Global Patient Survey on Lymphoma & CLL (GPS) data synopses will help Members leverage real-world evidence data and evidence for HTA patient submissions.

ABOUT LYMPHOMA COALITION

Lymphoma Coalition, a worldwide network of patient groups with a full or partial focus on providing support to patients with lymphoma, was formed in 2002 and incorporated as a not-for-profit organisation in 2010.

The need for a central hub of consistent and reliable current information was recognised, as well as the need for lymphoma patient organisations to share resources, best practices, and policies and procedures.

With this in mind, four lymphoma organisations started Lymphoma Coalition.

Reaching a significant milestone in FY25, our network now encompasses over 95 member organizations spanning more than 55 countries around the world.

Lymphoma Coalition respectfully listens to those affected by lymphoma, including CLL, and use what we learn to collaboratively guide global efforts that have local impact. Credible and principled, integrity is central to all we do.

VISION

A better future for everyone impacted by lymphoma.

MISSION

Lymphoma Coalition is the leading global coalition of patient organisations. We work together to generate and provide trusted information, knowledge, and best practice to influence and make possible equitable care.

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