#### Health Economics Research Centre

Nuffield Department of Population Health



# Facilitating external use with user-friendly interfaces: a health policy model case study

HERC

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useR! 2019

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# Motivation: what is a health policy model?

A <u>health policy model</u> is a tool to inform policy decisions by projecting people's life courses. Predictions include

- disease events
- life expectancy
- quality of life
- healthcare costs
- effects of treatments
  - positive (disease risk reduction) and negative (adverse effects)

Projections made over long time periods (eg lifetime)



# Motivation: why are health policy models needed?

Healthcare budgets are limited and not all treatments can be recomended even if effective

- Models show whether treatments are good value for money
- Health policy models are increasingly used by policy makers and clinicians
- In UK, cost-effectiveness analyses are required by NICE
  - Good-value-for-money: £20-30K per extra quality-adjusted life-year (QALY)
- Flexible models can help answer many policy questions
- Aim for transparency, reliability, reproducibility and usability



#### Motivation: how to facilitate usability?

	Transparency	Reliability	Usability
Release the code	yes	yes	no useRs only code mis-use
Publish equations and methods	yes (sort of)	yes (sort of)	no analysts only
Provide user-friendly interface	no black box	no	yes NB: user vs useR
Publish equations and methods and provide user-friendly interface	yes (sort of)	yes (sort of)	yes

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#### SHARP CKD-CVD outcomes model

#### Introduction

Model overview

Glossary

File specifications

#### Model parameters

Type of analysis

Patient characteristics

Treatment parameters

Annual healthcare costs

#### Introduction

The SHARP CKD-CVD outcomes model simulates long-term cardiovascular event rates, kidney disease progression, (quality-of-life adjusted) survival and healthcare costs associated with individual patient profiles and treatments. It can be applied to patient populations with moderate-to-severe chronic kidney disease who are over 40 years of age, and can be used with individual patients as well as groups of patients.

The model reports long-term projections as well as cost-effectiveness results comparing against the 'no treatment' strategy. The evaluated health outcomes and costs are reported separately for each treatment arm. The user can vary parameters to assess sensitivity of the results.

To perform the analysis, specify the required parameters using the 'Model parameter' tabs and click on the 'Run analyses' button on the Results tab. Please refer to the User guide and the published manuscript for further information.

The Glossary tab contains a list of commonly used definitions.

#### Citation

When referring to this program in publications, please cite the following references:



# Case study: SHARP CKD-CVD model Background

- Chronic kidney disease (CKD) increases cardiovascular (CV) risk
- Want to project long-term outcomes in CKD
  - cardiovascular events, CKD progression, life expectancy, quality of life, healthcare costs;
  - enable implementation of treatments to reduce cardiovascular risk
    - assess long-term effects and cost-effectiveness.
- Patient-level data from a trial
  - baseline characteristics, within-trial events
- Risk equations derived from the data
- Combined into a Markov model to do lifelong projections
  - validated internally and externally



#### SHARP CKD-CVD model: need for a user-friendly interface

- The model to be useful for NICE, other analysts, clinicians...
- User-friendly interface accessible from anywhere
- No need for knowledge / installation of R
- Adaptation to other scenarios/countries
  - national mortality rates
  - national healthcare costs
- Customising parameters in the current setting
  - treatment to be assessed
  - population characteristics
  - duration of treatment / time horizon
  - discount rate





http://one-elevenbooks.com/shiny-or-the-truth/

- Application accessed via a link
- The user only sees the front end
- All programs/data stored externally
- The front end can be modified using CSS themes, htmlwidgets, and JavaScript actions
  - fancy fonts, links, email addresses etc
  - error checking on data entry

http://dismod.ndph.ox.ac.uk/kidneymodel/app/



SHARP CKD-CVD outcon ×	eymodel/app/
SHARP CKD-CVD o	utcomes model (beta version)
Introduction	Introduction
Model overview	The SHARP CKD-CVD outcomes model simulates long-term cardiovascular event rates, kidney disease progression, (quality-of-life adjusted) survival and healthcare costs associated with individual patient profiles and treatments. It can be applied to patient populations with moderate-to-severe chronic kidney disease who
Glossary	are over 40 years of age, and can be used with individual patients as well as groups of patients.
File specifications	The model reports long-term projections as well as cost-effectiveness results comparing against the 'no treatment' strategy. The evaluated health outcomes and costs are reported separately for each treatment arm The user can vary parameters to assess sensitivity of the results.
Model parameters	To perform the analysis, specify the required parameters using the 'Model parameter' tabs and click on the 'Run analyses' button on the Results tab. Please refer to the User guide for further information
Type of analysis	The Glossary tab contains a list of commonly used definitions.
Patient characteristics	Citation
Treatment parameters	When referring to this program in publications, please cite the following references:
Annual healthcare costs	Schlackow I, Kent S, Herrington W, Emberson J, Haynes R, Reith C, Wanner C, Fellström B, Gray A, Landray MJ, Baigent C, Mihaylova B, on behalf of the SHARP Collaborative Group. A lifetime model of health outcome in moderate-to-severe chronic kidney disease. Under review.
Health-related quality of life	Schlackow I, Mihaylova B. The SHARP outcomes CKD-CVD outcomes model. 2016; available at
Non-vascular death probabilities	http://dismod.ndph.ox.ac.uk/kidneymodel/app/
Decision parameters	Contact
Analyses	For queries, bug reports and suggestions, please email kidneymodel@ndph.ox.ac.uk
Analyses	Acknowledgements
Results	We thank Oliver Verran and Seamus Kent for their contribution to the development of the first version of the model and providing further feedback. We are also grateful to the IT team of the Oxford University's Nuffield Department of Population Health for their support in installing and running the software.



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SHARP CKD-CVD ou	itcomes model (beta version)
Introduction Model overview Glossary	The following example files are provided to help with the model use, see User guide for detailed file descriptions Input file with patient characteristics: default values (one patient) and several patients Non-vascular death probabilities: 2014 UK non-vascular death probabilities Output analysis files: long-term projections (deterministic) summary and patient-level
File specifications	Output analysis files: long-term projections (probabilistic) summary and patient-level Output analysis files: cost-effectiveness analysis (deterministic) summary and patient-level Output analysis files: cost-effectiveness analysis (probabilistic) summary and patient-level
Model parameters Type of analysis Patient characteristics	
Treatment parameters Annual healthcare costs	
Health-related quality of life Non-vascular death probabilities	
Decision parameters Analyses	
Results	



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SHARP CKD-CVD outcomes model (beta version)					
	Type of analysis				
Introduction	Long-term projections				
Model overview	Long-term projections Cost-effectiveness analysis				
Glossary	Include uncertainty?				
File specifications	No (deterministic analysis)				
Model parameters					
Type of analysis					
Patient characteristics					
Treatment parameters					
Annual healthcare costs					
Health-related quality of life					
Non-vascular death probabilities					
Decision parameters					
Analyses					
Results					



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SHARP CKD-CVD outcomes model (beta version)					
Introduction	Select characteristics for a single patient or import a text file with these characteristics for one or more patients.           Import a file with patient characteristics				
Model overview Glossary	Reset inputs				
File specifications	Demographic and socio-eco	nomic characteristics			
Model parameters	Age (years)	Gender	Ethnicity White		
Type of analysis	Highest educational	Smoking status			
Patient characteristics	Highest educational Adult dependants attainment No		Never smoked		
Treatment parameters	Any post-secondary education				
Annual healthcare costs					
Health-related quality of life	Alcohol drinker	Body mass index 25-29 kg/m <sup>2</sup>			
Non-vascular death probabilities		20-20 kg/m			
Decision parameters	Clinical factors Diastolic blood pressure	Systolic blood pressure	HDL cholesterol		
Analyses	75-84 mmHg	130-149 mmHg	0.9-1.1 mmol/L		
Results	Albumin	Haemoglobin	Phosphate		
	3.9-4.1 g/dL 🔹	11.6-12.9 g/dL 🔹	1.2-1.4 mmol/L 🔹		
	Urinary albumin:creatinine ratio				
	30-300 mg/g				



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SHARP CKD-CVD outcomes model			
	Select characteristics for a single patient or import a text file with these characteristics for one or more patients.		
Introduction	✓ Import a file with patient characteristics		
Model overview	Browse example_input_data_error.csv		
Glossary	Upload complete		
File specifications	The model cannot be executed. Please check the following conditions: The following columns are missing: ethnicity		
Model parameters	The following columns are in the wrong format: smoker (needs to be numeric)		
Type of analysis	The following columns contain disallowed values: age (age column can only take values between 40 and 90); sex (sex column cat take values 0, 1); DM (DM column can only take values 0, 1. Participants with diabetic nepropathy should be marked as having d		);
Patient characteristics	CKDDuration (CKDDuration column values should be between 0 and the participant's age)		
Treatment parameters			
Annual healthcare costs			
Health-related quality of life			
Non-vascular death probabilities			
Decision parameters			
Analyses			
Results			•



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SHARP CKD-CVD ou	itcomes model (be	eta version)			
Introduction		Hazard ratios should correspond to full compliance with treatment for each of the outcomes below. The rates should be on the exponential scale.			
miodecion	Reset inputs				
Model overview	Tracturent offer	4-			
Glossary	Treatment effect				
File specifications	correlation matrix from the	Treatment effects for the probabilistic sensitivity analyses are sampled from log-normal distributions using the correlation matrix from the SHARP study. Enter the estimates for the hazard ratios together with the 95% confidence interval (CI) on the exponential scale.			
Model parameters	Cardiovascular deat	h			
Type of analysis	Hazard ratio	Lower 95% CI	Upper 95% Cl		
Type of analysis	0.9	0.8	1		
Patient characteristics	Cardiovascular deat	h or non-fatal major atheroscler	otic event		
Treatment parameters	Hazard ratio	Lower 95% Cl	Upper 95% Cl		
Annual healthcare costs	0.9	0.8	1		
Health-related quality of life					
		h or non-fatal major vascular ev			
Non-vascular death probabilities	Hazard ratio	Lower 95% CI	Upper 95% Cl		
Decision parameters	0.9	0.8	1		
Analyses	Compliance (%)				
100					
Results	Daily treatment	Daily treatment cost (full use)			
	1				

SHARP CKD-CVD outcom ×					
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SHARP CKD-CVD out	comes model (beta versior	n)			
The default values are based on SHARP data and UK 2014 prices.					
Introduction	Reset inputs				
Model overview		analyses are derived from the SHARP data using the bootstrap			
Glossary		means and the standard errors below, and the costs will be red values are based on SHARP data and UK 2014 prices [1].			
File specifications	Annual cost of CKD				
Model parameters	CKD stage 3B				
model parametero	mean estimate	standard error			
Type of analysis	427	32			
Patient characteristics	CKD stage 4				
Treatment parameters	mean estimate	standard error			
Annual healthcare costs	417	27			
Health-related quality of life	CKD stage 5				
Non-vascular death probabilities	mean estimate	standard error			
	556	41			
Decision parameters	On dialysis, for year of dialysis initiation	an			
Analyses	mean estimate	standard error			
Results	20112	198			
	On dialysis, not for year of dialysis init	tiation			
	mean estimate	standard error			
	24709	51			
	24109	01			



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SHARP CKD-CVD outcomes model (beta version)					
	The default values are UK quality of life (QoL) utilities	s estimates derived from the SHARP data.			
Introduction		Baseline QoL is the quality of life utility of a 60 year old female, non-smoker, with above secondary education, with BMI 25-30 kg/m <sup>2</sup> , pre-RRT CKD and without diabetic nephropathy or vascular disease.			
Model overview					
Glossary	Reset inputs				
File specifications	Baseline QoL				
Model parameters	0.86				
Type of analysis					
Patient characteristics	Additional effects				
	Demographic and socio-economic charac	teristics			
Treatment parameters	Age (per 10 years)	Male			
Annual healthcare costs	-0.048	0.059			
Health-related quality of life	Completed secondary education	Below secondary education			
	-0.017	-0.036			
Non-vascular death probabilities	Ex-smoker	Current smoker			
Decision parameters	-0.009 -0.037				
Analyses	BMI <25 kg/m²	BMI ≥30 kg/m²			
Results	0.011	-0.043			
	Disease history	•			

#### Discount cost-effectiveness results

Long-term projections in the control group (cumulative probabilities per 1,000 participants)

	MVE or VD	RRT	Vascular deaths	All deaths
At 5 years	184 (159, 213)	409 (357, 444)	57 (44, 76)	205 (194, 222)
At 10 years	281 (244, 319)	643 (594, 683)	118 (92, 155)	415 (398, 438)
Over simulation duration	419 (358, 501)	884 (826, 935)	292 (225, 379)	907 (897, 918)

Long-term projections in the treatment group (cumulative probabilities per 1,000 participants)

	MVE or VD	RRT	Vascular deaths	All deaths
At 5 years	169 (138, 193)	407 (355, 439)	51 (37, 70)	200 (189, 216)
At 10 years	263 (214, 299)	638 (593, 675)	106 (81, 140)	407 (389, 429)
Over simulation duration	397 (328, 477)	877 (813, 927)	271 (207, 371)	905 (896, 915)

Incremental cost-effectiveness over the simulation duration (results per 1,000 participants)

LYs gained	QALYs gained	Incremental hospital costs	Treatment costs	Cost per LY gained	Cost per QALY gained
135 (-4, 279)	107 (22, 227)	698,152 (-416,384, 1,306,000)	5,074,512 (4,904,776, 5,201,336)	42,648 (20,617, 304,068)	54,085 (27,412, 179,555)



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# User-friendly interface: help with debugging and transparency



## User-friendly interface: help with debugging and transparency

- Face validity debugging
  - Easier to do on a user-friendly interface (even for the developers!)
- Feedback from external users
- Running several models against a reference simulation
  - Mount Hood diabetes challenge: models predicting long-term outcomes in diabetes patients
    - everyone gets the same tasks (eg change in life expectancy after statin initiation)
    - core assumptions same for everyone
    - additional assumptions must be documented in a pre-defined template
    - the results are presented, compared and (usually) published
    - user-friendly interface enables replication



### SHARP CKD-CVD model: conclusions

- SHARP CKD-CVD model is a novel resource for evaluating health outcomes and cost-effectiveness of interventions in CKD
- User-friendly web-based freely available interface aids model use
- Together with the published equations / methods helps ensure reliability of the underlying code and methods transparency
- The user can enter with their own parameter values and perform calculations in different settings
- User's perspective taken into account:
  - simple menus, straightforward navigation, pretty looks
  - detailed user-guide
  - example input/output files, file descriptions and default values
  - error checking at data entry could (partially) prevent inappropriate use
  - which parameters should be modifiable?



# SHARP CKD-CVD model: challenges and discussion points

- Day-to-day support
  - Replying to queries, fixing bugs
  - R/package updates may break everything!
  - Not updating is not an option (according to our IT team)
- Is R the best option for such an interface?
  - Might Python be faster and/or have better visualisation capabilities?
  - C++?
- Do the benefits of releasing the code outweigh the risks?



#### Acknowledgements

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#### SHARP CKD-CVD model



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