

Conclusions. Although the results are promising for using telemedicine to bridge gaps and improve equity in the provision of basic health services for patients with chronic diseases in remote locations during the COVID-19 pandemic, a widespread use assessment should be undertaken before this tool is adopted.

PD43 Estimating Societal Costs Associated With Vision Loss And Delayed Cataract Surgery: The Potential Impact Of The COVID-19 Pandemic

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Introduction. Cataract surgery is the most commonly performed surgical procedure in the UK (approx. 472,000 annually). The suspension of interventions due to the COVID-19 pandemic, has had a devastating impact on patients' access to care. In the UK a complete cessation of elective cataract surgery during the crisis has been an unfortunate reality and encompassed a 14 week hiatus to services in the National Health Service. Patients on prolonged waiting lists may experience negative outcomes during the wait period, including vision loss, increased risk of falls, and ultimately, poorer health-related quality of life (HRQoL). The objective of this research was to estimate the potential societal costs associated with vision-loss related to prolonged waiting times for cataract surgery, as a consequence of COVID-19 in the UK.

Methods. In this analysis, we present estimates relating to two cohorts: a hypothetical cohort of 1,000 cataract surgeries and quarterly estimates of cataract surgeries in the UK. Quarterly estimates (n=122,969) were chosen to reflect a suspension of cataract surgeries for 14 weeks during the COVID-19 crisis. UK cataract surgery numbers were attained from EUROSTAT. Estimates for decreasing visual acuity for those waiting for surgery were attained from the literature, as were the cost estimates associated with cataract-related sight-loss, which were made up of direct, indirect and intangible costs. Five scenarios (at 20% intervals) were simulated for the cost estimates, assuming from 20 percent to 100 percent clearing of waiting lists.

Results. For cohort 1 (1,000 patients), the societal costs associated patients remaining on waiting list for one year, ranged between GBP 237,765 (EUR 279,533) (20% of patients remain untreated) to GBP 1.18m (EUR 1.39m) (100% remain untreated). For cohort 2 (n=122,969) cost estimates are in the region of GBP 29.23m to GBP 146.18m (EUR 34.36m to EUR 171.73m). Estimates consist of direct (15.6%), indirect (28.7%) and intangible costs (55.6%).

Conclusions. Cataract surgery is a sight saving procedure and its impact on HRQoL is overwhelmingly positive. Prolonged waiting times for cataract patients due to COVID-19 is likely to be associated with significant societal costs.

PD44 Realistic Review: Theoretical Model For Monitoring And Evaluation (M&E) Of Health Technology Assessment Management

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Introduction. Realistic Review (RR) is a methodology for systematic review proposed by Pawson (2002), to guide policy formulation. It is aimed at policy makers and decision makers and seeks to explain how a given intervention succeeds or fails in a certain context, allowing the identification of more suitable alternatives to solve problems. The objective of this study was to develop a theoretical model for Monitoring and Evaluation (M&E) of Health Technology Assessment (HTA) management.

Methods. The realistic review sought to identify aspects that influence HTA contributions. Studies were included if they provided a description of context and description of HTA contributions. Key purpose elements were extracted from selected studies and the contexts of HTA contributions were analyzed. The association between context and types and areas of contributions of HTA in different realities was synthesized. We analyzed thirty-one articles published in international journals in the area of health technology assessment and three articles on assessment policy in Brazil, nominated by experts.

Results. It was possible to identify situations that generate demands for HTA; favorable and unfavorable contexts and factors for contributions; main functions of networks; main products resulting from the application of evaluations; results and impact predicted by the action of the networks.

The logical model starts with conjunctural aspects that generate demands: economic, social and cultural. In a favorable context, the definition of priorities and debates in the negotiation arenas influence research and the policy formulation process. Networks identify evidence and contribute to knowledge management, generating products, results and impacts.

Conclusions. The use of the theoretical model created from the realistic review is a tool that allows the M&E of HTA management.

PD45 Paying For Digital Health: What Evidence Is Needed?

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Introduction. Digital transformation has been promoted by the World Health Organization (WHO), Food and Drug Administration