A feasibility and applicability study of a health related quality of life measurement in Vietnam

Vu Thi Quynh Mai

Akademisk avhandling
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För att delta digitalt via Zoom:
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Opponent: Professor Feng Xie, Department of Clinical Epidemiology & Biostatistics, McMaster University

Department of Epidemiology & Global Health
Introduction: An evidence-based strategy is used the national social health-insurance programme in Vietnam to assess healthcare technologies. Health technology assessments (HTA) have become increasingly important within decision-making processes. This doctoral project involved developing a health-related quality of life (HRQOL) measurement to be used in HTA in Vietnam.

Methodology: The doctoral project used a mixed-methods approach, which comprised a health-preference elicitation study using a combination of time-trade-off and discrete choice experiments method for the EQ-5D-5L, as recommended by the EuroQol Group (Objective 1). The project incorporated a validity study that utilised secondary data (Objective 2), a cost-utility analysis that utilised both secondary data and normative costing data (Objective 3), and a qualitative study that utilised empirical data (Objective 4). Additionally, the doctoral project resulted in an EQ-5D-5L reference dataset for the general population of Vietnam.

Results: A generic preference-based HRQOL measurement was developed for the Vietnamese population using the EQ-5D-5L instrument. This tool can be utilised not only as an outcome measurement for HTA, but in other health-science disciplines. The EQ-5D-5L comprises a descriptive system with five questions, a visual analogue scale (EQ-VAS), and a value set that facilitates the assignment of health-state values (Sub-study 1). The doctoral project proposed an EQ-5D-5L reference dataset that could serve as a basis for HRQOL comparison in Vietnam (Sub-study 2). It has added evidence on the validity of the EQ-5D-5L for the Vietnamese population through a known-groups validation conducted on individuals with hypertension (Sub-study 2). This validation has facilitated the establishment of a favourable environment for the implementation of this tool in Vietnam. Additionally, the satisfactory performance of the EQ-5D-5L has been shown in producing data that is useful for the cost utility analysis in Vietnam (Sub-study 3). Despite concerns regarding the appropriateness of the EQ-5D-5L in reflecting HRQOL for disease-specific populations, the tool has been accepted and is commonly used in Vietnam (Sub-study 4).

Conclusion: The outcomes of the doctoral project are a favourable HTA environment, facilitation of evidence-based decision-making, and contribution to the goal of achieving universal health coverage in Vietnam.

Keywords
Health related quality of life, health technology assessment, Vietnam, health preference measures