









#### HARVARD T.H. CHAN SCHOOL OF PUBLIC HEALTH

Center for Health and the Global Environment

# Value of Information to Inform Decision Making Under Uncertainty















## VALUE OF INFORMATION TO INFORM DECISION MAKING UNDER UNCERTAINTY

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- Prioritize where additional investment will lead to maximal benefits
- Identify research areas with the greatest likelihood of influencing clinical practice and patient outcomes
- Quantify the expected opportunity loss from decision making under uncertainty by estimating the value of obtaining additional information through research



- Based on Bayes Rule: P(A|B) = P(B|A)P(A)/P(B)
- Traditional hypothesis testing (e.g., clinical trial) gives you p(data|hypothesis) but what you want is p(hypothesis|data)
- There is a 90% chance that the net benefit of protocol a exceeds that of protocol b
- p(expected benefit of future study|existing [clinical trial] data)



- Goal is to make the decision offering the greatest net benefit given constraints
- There is uncertainty in the inputs to the decision
- Expected cost of uncertainty is determined by the probability that a decision based on existing information will be wrong and the consequences if the wrong decision is made
- Expected value of (im)perfect information



- The estimated mean net benefit of the new technology/drug/intervention
- The amount and results of existing data
- The value placed on opportunity losses when they occur
- The size of the patient population who could benefit from the new technology/drug/intervention



 $EVPI = E\{\max_{a} NMB(a,s)\} - \max_{a} \{NMB(a,s)\}$ 

- where E{max<sub>a</sub> NMB(*a*,*s*)} represents the expected net monetary benefits under perfect information
- max<sub>a</sub> E{NMB(*a*,*s*)} represents the expected net monetary benefits under prior information
- Assess the optimal action for all possible values of s and then determine the weighted average of the resulting values over the prior belief about the likelihood of each event



- Benefits described in terms of utilities, QALYs, DALYs
- \$/QALY or other cost-effectiveness ratios
- Predicted costs as compared to monetized benefits
- Number of patients impacted is essential for population VOI



### **Example Decision Tree**





- What would it be worth to conduct an observational study on n = 60 patients who are on the new treatment?
- EVSI = \$5,550 per patient; compare to cost
- What would be the EVSI for a study allocating nT = 200 patients to new treatment and another nC = 200 to standard care?
- EVSI = \$3,260 per patient



Conclusions

- Value of information techniques are used to evaluate research priorities based on reducing uncertainty
- Builds on existing cost-effectiveness studies using Bayesian statistics
- No "off the shelf" software requires linking models, software platforms



# Further Reading

- Thorn et al. 2015 Interpretation of the Expected Value of Perfect Information and Research Recommendations: A Systematic Review and Empirical Investigation, *Medical Decision Making*, DOI: 10.1177/0272989X15586552
- Steuten et al. 2013 A Systematic and Critical Review of the Evolving Methods and Applications of Value of Information in Academia and Practice, *PharmacoEconomics*, 31:25–48
- Carlson et al. 2013 Value-of-Information Analysis within a Stakeholder-Driven Research Prioritization Process in a US Setting: An Application in Cancer Genomics, *Medical Decision Making*, 33:463–471.
- Andronis et al. 2015 A Practical Application of Value of Information and Prospective Payback of Research to Prioritize Evaluative Research, *Medical Decision Making*, DOI: 10.1177/0272989X15594369