Appendix B. Final Prioritization Survey

Hepatitis C Future Research Needs Questionnaire #2	Exit this survey
Ranking	
* 1. Stakeholder Information:	
Name:	

Instructions:

The purpose of Questionnaire #2 is to rank the top future research priorities. A list of the 12 highest ranked topics from Questionnaire #1 is included below. Please reflect on which topics you feel are the highest priority and rank them from 1 to 12, with 1 being the most clinically important. When making your prioritization, keep in mind that we are trying to understand what areas of research have the highest potential to make an immediate impact as well as which research topics you think should be conducted first. Please consider the Effects Health Care's Program Selection Criteria, which includes appropriateness, importance, desirability of new research/duplication, feasibility, and potential impact (described below) when making your prioritization decisions.

For each of the following, please select a rank for each gap, with 1 being highest priority

Effective Health Care Program's Selection Criteria

Appropriateness:

• Represents a health care drug, intervention, device, technology or health care system/setting available (or soon to be available) in the United States.

• Relevant to 1013 enrollees (Medicare, Medicaid, S-CHIP), or other federal health care programs.

• Represents one of the priority conditions designated by the United States Department of Health and Human Services.

Importance:

• Represents a significant disease burden, large proportion or priority population.

• Is of high public interest, affects health care decision-making, outcomes, or costs for a large proportion of the United States population or for a priority population in particular.

• Was nominated/strongly supported by one or more stakeholder groups.

Represents important uncertainty for decision makers.

• Incorporates issues around both clinical benefits and potential clinical harms.

• Represents important variation in clinical care, or controversy in what constitutes appropriate clinical care.

• Represent high costs to consumers, patients, health care systems or payers, due to common use, high unit costs, or high associated costs.

Desirability of New Research/Duplication:

• Would not be redundant (i.e., the proposed topic is not already covered by available or soon-to-be available high quality systematic review by the Agency for Healthcare Research and Quality or others).

Feasibility

• Effectively uses existing research and knowledge by considering adequacy of research for conducting a systematic review, and newly available evidence.

Potential Impact

• Potential for significant health impact significant economic impact potential change potential risk from inaction addressing inequities and vulnerable populations and/or

addressing a topic with clear implications for resolving important dilemmas in health and health care decisions made by one or more stakeholder groups.

*2. Please rank the gaps in order of priority, with no overlap (1 = Highest Priority, 12 = Lowest Priority, with no gap receiving the same ranking as another)

	1 - Highest Priority	2	3	4	5	6	7	8	9	10	11	12 - Lowest Priority
Lack of studies in screen detected patients	0	0	0	0	0	0	0	0	0	0	0	0
Lack of studies enrolling broader spectrum of patients, including those with medical and psychological comorbidities seen in clinical practice, such as advanced cirrhosis and IV drug users	0	0	0	0	0	0	0	0	0	0	0	0
Lack of studies that adequately control for potential confounders reporting clinical outcomes in patients who experience SVR with those who do not experience SVR	0	0	0	0	0	0	0	0	0	0	0	0
Need for well-designed, independently funded studies. Almost all of the randomized trials were funded by pharmaceutical companies. Such studies tend to report more favorable results from drugs produced by the funder than studies funded by governmental or other sources.	0	0	0	0	0	0	0	0	0	0	0	0
Lack of studies enrolling patients with advanced age (>65-70 years)	0	0	0	0	0	0	0	0	0	0	0	0
Lack of studies reporting long-term followup of patients exposed to telaprevir and boceprevir to understand the long-term harms associated with use ef telaprevir and boceprevir	0	0	0	0	0	0	0	0	0	0	0	0
Need for evidence on new drugs currently in clinical phases, including oral regimens without interferon	0	0	0	0	0	0	0	0	0	0	0	0
Need for methodologically rigorous studies conducted in settings applicable to U.S. populations evaluating the association between achieving an SVR and improvements in clinical outcomes	0	0	0	0	0	0	0	0	0	0	0	0
Lack of studies evaluating the usefulness of genomics and other methods for individualized treatment decisions in patients with HCV infection using genomics or other melhods (e.g., treatment algorithms) and how these treatment decisions affect clinical outcomes	0	0	0	0	0	0	0	0	0	0	0	0

Need for evidence on new drugs currently in clinical phases, including oral regimens without interferon	0	0	0	0	0	0	0	0	0	0	0	0
Need for methodologically rigorous studies conducted in settings applicable to U.S. populations evaluating the association between achieving an SVR and improvements in clinical outcomes	0	0	0	0	0	0	0	0	0	0	0	0
Lack of studies evaluating the usefulness of genomics and other methods for individualized treatment decisions in patients with HCV infection using genomics or other methods (e.g., treatment algorithms) and how these treatment decisions affect clinical outcomes	0	0	0	0	0	0	0	0	0	0	0	0
Need for studies designed using an effectiveness paradigm to understand real- world effects of antiviral regimens, including effects related to the poorer treatment adherence than expected from efficacy trials	0	0	0	0	0	0	0	0	0	0	0	0
Lack of studies assessing important long- term clinical outcomes associated with current antiviral treatments for chronic HCV infection	0	0	0	0	0	0	0	0	0	0	0	0
Lack of studies on effects of using non- invasive methods for assessing liver fibrosis to guide treatment decisions	0	0	0	0	0	0	0	0	0	0	0	0

You have completed questionnaire #2. Thank You.

Done

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