on the feedback from experts, a second version was prepared and published on the INEAS website for public consultation. The Union of Innovative Pharmaceutical Research Companies (SEPHIRE), the National Health Insurance Fund (CNAM), and healthcare professionals provided the majority of feedback. The comments provided by SEPHIRE were discussed during a second workshop. The guidelines were revised and updated based on the comments provided and the final version was published in November 2021.
Conclusions. INEAS adopted a participatory approach for developing its economic guidelines, which enhanced engagement of the major health system stakeholders in the HTA implementation process in Tunisia.

PP102 Selecting The Sequence Of Diagnostic Tests For Leprosy In Brazil

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Introduction. Hansen's disease, or leprosy, is a chronic bacterial infection that affects the nerves, skin, eyes, and nose lining. In 2019, there were 202,256 new cases reported globally, and nearly 28,000 new cases are diagnosed each year in Brazil. The best way to prevent the spread of Hansen's disease is early diagnosis and treatment of infected individuals. Most diagnoses are done clinically, but only the microscopic analysis of slit-skin smears is funded in Brazil. Serologic and polymerase chain reaction (PCR) tests have also been developed to aid in the diagnosis. The goal of this study was to identify the most cost-effective strategy for increasing the diagnosis of Hansen's disease in Brazil.
Methods. We examined the impact of the following four strategies using a decision tree model: (i) slit-skin smear only; (ii) PCR test only; (iii) serologic testing followed by slit-skin smear for positive samples; and (iv) serologic testing followed by slit-skin smear for positive samples and PCR test for negative serologic tests and negative slit-skin smears. The accuracy of the tests was determined using a systematic review and meta-analysis and validated by experts. The costs were calculated from the Brazilian health system perspective. Univariate and probabilistic analyses were also conducted.
Results. Serologic testing or PCR followed by slit-skin smear was dominated in the economic model (more false-negative samples and more costly). The addition of serologic testing and PCR to the diagnostic sequence made the strategy more expensive than slit-skin smears alone, but it significantly reduced the percentage of false negative results (from 7.3 to 2.9%) at an estimated cost of USD 533.61 per incremental diagnosis. Disease prevalence was the most important variable in the sensitivity analysis.
Conclusions. This is the first cost-effectiveness model undertaken for Hansen's disease. The results indicate that incorporating serology and PCR testing into the Brazilian health system could be an appealing option for reducing the spread of Hansen's disease in Brazil.

PP103 Early Health Technology Assessment Of Integrated Care To Increase Employment For Persons With Substance Use Disorder

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Introduction. The unemployment rates among people being treated for substance use disorder (SUD) are high, with Norwegian estimates ranging from 81 to 89 percent. A promising method for improving vocational outcome is Individual Placement and Support (IPS), where employment support is integrated into the treatment regimen. However, the expense and economic gain are covered by different societal sectors, which may be a disincentive for implementing this method. Thus, the aim of this study was to model the potential socioeconomic value of a new SUD treatment service.
Methods. For the simulation study, we made qualified assumptions about costs and socioeconomic gain based on data from scientific and administrative publications, expert opinion, and a randomized controlled trial of treatments for individuals with SUD that was set in a specialized Norwegian healthcare setting. We made assumptions about the proportion of patients likely to obtain employment after participating in the following three interventions: (i) treatment as usual; (ii) a self-help guide and additional workshop; and (iii) IPS.
Results. Based on early socioeconomic simulation modeling for the three interventions, IPS was found to be cost effective over a period of one to two years.
Conclusions. In this study we used early economic modeling to demonstrate the potential value of IPS for increasing employment rates among patients with SUD. Since it is important to secure evaluative support for an innovation at the earliest possible stage, early economic modeling may assist the innovator in implementing a health service that meets predefined user needs while also reducing associated risks. Although there is much uncertainty in such early stages due to a lack of valid data sources, early economic modeling may provide health authorities with much needed decision support when planning for future health services.

PP107 Scale For Measuring Fatigue In Patients With Parkinson's Disease: Scientific Technical Report

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