

# Systematic Literature Review for Utility Data in Acute Myeloid Leukaemia

## Case Study



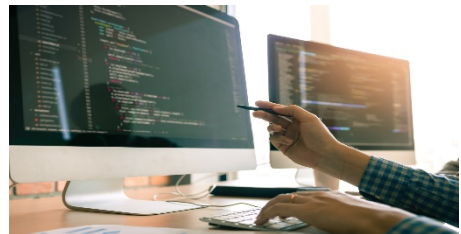
YHEC carried out a systematic literature review of utilities data for Daiichi Sankyo Inc. to support a health technology assessment (HTA) submission of quizartinib in patients with acute myeloid leukaemia (AML). Utilities are a key driver in determining incremental cost-effectiveness ratios (ICER) for interventions being assessed by HTA agencies worldwide. The choice of utility values for decision analytic models should be based on a careful scrutiny of health state definitions and utility elicitation methods, in order to identify the most appropriate data.

The research was presented at the 2019 International Society for Pharmacoeconomics and Outcomes Research (ISPOR) European Congress.

YHEC searched nine databases, four HTA agency websites and four conferences. Twenty-six studies reported utilities (EQ-5D, TTO, proxy data, mapped data etc.) for a number of health states. There was

a wide variation in AML utilities, even within the same health states: induction chemotherapy, 0.16 to 0.75; consolidation chemotherapy, 0.46 to 0.89; complete remission, 0.62 to 0.99; partial remission, 0.6574 to 0.7060; relapsed/refractory, -0.11 to 0.8. Some studies were unclear about line of therapy.

This review outlined the available data to be considered for use in HTA modelling. Selecting utilities for models should maximise validity by considering how these data can be best applied to different populations, taking into consideration underlying disease activity differences, utility elicitation methods and differences in health state definitions.



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