

Final report

This report provides an overview of the research topic allocation, project proposal development, presentation to the 37th Technical Appraisal Committee (TAC), and subsequent decision made during the meeting on the research topic allotted to JIPMER HTA resource centre.

Project Title: Cost-effectiveness of implementing the project SANKALP in the Rewari district of Haryana in India

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Project Background:

Project SANKALP represents an innovative approach aimed at strengthening TB elimination efforts of the state TB cell. Launched as part of Becton Dickinson (India)'s Corporate Social Responsibility (CSR) initiatives, the pilot project commenced in one Tuberculosis Unit (TU) in July 2022; in the Khol TB unit, the project targeted to cover 2.2 lakh population spanning across 38,000 households in 118 villages in the year one. The project focused on screening the general population aged ≥ 5 years for presumptive TB symptoms. Additionally, individuals < 5 years presenting with presumptive TB symptoms were referred to the medical officer for further evaluation.

The project introduced strategies that brought TB diagnostics closer to the community through a mobile van equipped with cutting-edge technology. Notably, the project leveraged AI-assisted teleradiology services to enhance diagnostic capabilities. As communicated during the discussion, the pilot project demonstrated the following results, with 143 TB cases being diagnosed. Of those diagnosed, 126 individuals were promptly initiated on treatment through active follow-up, and 74 successfully completed their treatment.

Consultation with the SANKALP project team:

During the development of the protocol, an online meeting was convened on 02.08.23, bringing together representatives from the SANKALP project team, the Department of Health Research (DHR), and JIPMER. The primary objective of this meeting was to discuss the methodologies for conducting the cost-effectiveness study on the SANKALP project and to ascertain the data requirements from the SANKALP team.

In the meeting, the availability of written operational guidelines for the project for review was not confirmed. Moreover, data related to the budget split-up (human resources, training, screening, and diagnostics pertaining to the intervention) that will be essential to carry out the economic evaluation

was not readily available with the SANKALP project team. Concerns were also raised by the programme managers of the Sankalp team regarding privacy issues in providing detailed cost information.

Regarding outcome information, the SANKALP project team was asked to provide data on utility. While they expressed the feasibility of conducting a primary study, it was noted that the reported outcomes to date are short-term, such as case notification rate and treatment completion rate. For the development of a Markov model with a lifetime horizon, data on long-term outcomes, particularly reactivation of infection (a significant factor for TB elimination), were deemed essential, which is currently unavailable. Given the nature of the intervention (pilot phase), it was suggested that the economic evaluation study be conducted after an additional two to three years.

Presentation at the 37th TAC Meeting:

We presented the research proposal at the 37th TAC meeting held on 8 August 2023, where the stakeholders and experts evaluated the potential of the project. During the presentation, we highlighted the rationale behind conducting the economic evaluation, emphasizing the need for robust evidence on both clinical effectiveness and cost-effectiveness to guide decision-making in healthcare resource allocation. We presented the outcome of the online consultative meeting with the Project Sankalp, indicating the scarcity of data required for undertaking the economic evaluation. This lack of evidence was an important consideration in the subsequent discussion.

The TAC committee expressed that the project is a good initiative, but it does not require an HTA because the project primarily functions as an enhancer for the state Tuberculosis cell's efforts in tuberculosis detection and management. Further concerns were also raised in term of lack of clarity on how the project's activities align with the National strategic plan for TB elimination (2017-25), and availability of data on clinical effectiveness and costs associated with the project. On these grounds, the TAC recommended the authors not to proceed with this as a cost effectiveness study project and complete this study with a short report. The committee recommendations are available in the 37th TAC meeting minutes (Proposal no. 4). The protocol submitted and the proposal presented in the TAC is attached to this email for your reference.

Conclusion:

Based on the recommendations of the TAC meeting, we have decided not to pursue the cost-effectiveness study.