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Pharmacoeconomics, Outcomes Research, Health Technology Assessment, Comparative Effectiveness, Patient Centered Outcomes Research in Latin America 2016: brief update



One more year has elapsed since our last issue of VIHRI focused on Latin America (LA).

It has been a very active year in our field in LA. Though in even years there is no regional ISPOR meeting, and we wait for the one to be held in Brazil in 2017, there has been considerable activity in Pharmacoeconomics, Outcomes Research, Health Technology Assessment, Comparative Effectiveness, Patient Centered Outcomes Research and other overlapping descriptors our broad field adopts. We will briefly review some LA highlights in our field, and then go over some specific aspects on VIHRI in general, and on this LA issue in particular.

At the macro and international policy level, Universal Health Coverage is gaining momentum in our region, with many international collaborations very active in LA. Another hot topic is the creation and implementation of mechanisms to gain access to high cost drugs (The *Fondo Nacional de Recursos* of Uruguay is the classic example in LA; and the Ricarte Soto Law in Chile, which was recently updated [1], a more recent one). Some key players in the regions working closely with governments are REDETSA (the Latin American HTA network with 25 members from 14 countries in the region) which has recently held its annual meeting for the first time in El Salvador; the Criteria Network (an Inter-American Development Bank [IADB] initiative that supports and disseminates evidence to strengthen health spending policies and benefit plans in LA countries); the DIME platform [2] (a regional initiative, “Informed decisions about high cost drugs”, also funded by the IADB and now in its second phase including 5 additional countries that contribute to the observatory of high cost drugs, OMAIF). Additionally, in April 2016, the first Health Technology Assessment International (HTAi) policy forum was held, with the participation of government, representatives of 10 LA countries, and 17 representatives from the Pharmaceutical and Device industries).

It has also been an active year for many of our regional LA chapters. Some examples include 1) several activities undertaken by the Argentinean ISPOR chapter related to real world evidence or health technology assessment (HTA) and devices; 2) Conferences organized by the Peru ISPOR chapter on HTA and economic evaluations; 3) The IV ISPOR Colombia meeting with more than 200 attendees and more than 20 research studies presented; and 4) The II Central America and the Caribbean ISPOR Chapter meeting on HTA and Economic Evaluations.

We are proud of VIHRI history in these initial years. Since our beginnings in 2012, we have published the work of authors from around the world, including the United States, Brazil, Mexico, Thailand, Columbia, Argentina, Malaysia, Australia, Japan, South Korea, China, United Kingdom, Chile, Taiwan, Singapore, Israel, Hungary,

India, Canada and Russia. These authors have contributed over 250 articles that enrich our understanding of pharmacoeconomics and outcomes research and better inform the scientific community. In 2015, Value in Health Regional Issues published content received over 50,000 page views and downloads on Elsevier's electronic platforms. VIHRI readers from the United States, China, United Kingdom, Colombia and Thailand represent the Top 5 countries accessing articles. Due to the growth as a Journal, we have made applications to be indexed by the National Library of Medicine on PubMed and Medline, and to be recognized by Thomson Reuter's Journal Citation Report. As soon as those decisions are made known to us, we will keep you rightly informed.

Regarding VIHRI, this is the 11th Volume (and the 5th yearly issue devoted to Latin America). Though with some delay, we are still in the queue for National Library of Medicine PubMed/Medline listing, and hope to be reviewed and indexed in the near future. We think this milestone will bring a new stage regarding the relevance and impact of our Journal. This was the first year the *Value in Health Regional Issues* Award for Excellent Article was awarded in our region, to a paper from Viegas et al. reporting the social values from EQ-5D in a Brazilian Southern State.

The papers of this issue provide a flavor of the depth and width that the field is attaining in LA. There are four studies from researchers in Colombia, three from Argentina, and one each from Brazil, Chile, Mexico and Trinidad & Tobago. Several of the papers deal with infectious or vaccine-preventable diseases [3–6]. Others deal with rare disease (the case of type II mucopolysaccharidosis in Colombia), or with diagnostic imaging technologies [7] (PACS in Brazil). Economic evaluations constitute the bulk of the issue [3–5,7–10], but there is also a study evaluating novel methods to derive social preferences in Trinidad & Tobago [11], a descriptive study depicting health-related quality of life in HIV patients [4], and a study evaluating the productivity and micro-economic impact of cardiovascular patients in Argentina [12].

We hope that you enjoy this issue and come to know a bit of the lively and increasingly rigorous activity of our field in Latin America. Hopefully, we will continue to advance, each time further, in the use of sound principles for societal decision making and towards the best possible Universal Health Coverage in each and every one of the countries in Latin America.

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Federico Augustovski, MD, MSc, PhD

Director, Health Technology Assessment and Health Economics
Department of the Institute for Clinical Effectiveness and Health
Policy (IECS-CONICET); Professor of Public Health,
University of Buenos Aires

Jaime Caro, MDCM, FRCPC, FACP

Chief Scientist, Evidera, Lexington, MA, USA & Adjunct Professor of
Medicine, Epidemiology and Biostatistics,
McGuill University,
Montreal, PQ, Canada

Marcos Bosi Ferraz, MD, MSc, PhD

Associate Professor, Department of Medicine, Division of Health
Economics and Healthcare Management, Escola Paulista de
Medicina - Federal University of São Paulo (UNIFESP) & Director,
São Paulo Center for Health Economics (GRIDES), EPM –UNIFESP,
São Paulo, Brazil

Victor Zárate, MD, MSc, PhD

Researcher, Department of Health Technology Assessment, Chilean
Ministry of Health & Researcher, School of Medicine,
University of the Andes,
Santiago, Chile

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