

# Medical decision making and health technology assessment

any of the key decisions in our lives concern our health and well-being. These decisions are often made for us at the societal level, but as individuals we have increasing say in the management of our own healthcare and in societal decisions. Having said that, welcome to this issue of Medical Writing, which is devoted to medical decision making (MDM) and health technology assessment (HTA). We are proud to present a wide collection of articles written by top experts and organised in four main sections:

- An overview of MDM and HTA in health
- Shared decision making and the patient

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- Medical writing in MDM and HTA
- Wider perspectives.

Michael Drummond opens the issue with an overview of MDM at societal and individual levels and explains the interrelationships between evidence-based medicine, comparative effectiveness research, and HTAs. In the

second article, Wendy Babidge describes the development of HTAs as a multidisciplinary process, compares "eminence-based decisions" to "evidence-based medicine", particularly during the early days of the COVID-19 pandemic, and outlines the expanding "HTA community" in the form of global and regional networks established for collaboration within HTAs and sharing knowledge. Their articles are followed by two country-specific examples of MDM policies: one from Germany, presented by Michael Köhler and Annette Christoph, and another from Slovenia by Valentina Rupel, Marjeta Kuhar, and Dorjan Marušič.

The next section is on shared decision making, which relates to patient involvement



in medical decisions. **Angela Coulter** discusses patient engagement in healthcare processes, reviews existing issues in patient-doctor communication, and considers the influence of the COVID-19 pandemic. **Jeanette Finderup and Dawn Stacey** then provide a comprehensive overview of patient decision aids, including the International Patient Decision Aid Standards (IPDAS), while **Victoria Thomas** in her article introduces the European Patients' Academy (EUPATI), and their collaboration with regulatory bodies such as the National Institute for Health and Care Excellence (NICE).

The third section deals with practical issues for the medical writer when submitting documents about new medicines and reporting HTA data. Lawrence Liberti and Tina Wang open this section with their review of regulatory documents required in submissions for new medicines, and offer practical advice for constructing these documents and the role of the medical writer. A central feature of medical decisions is that they are made under uncertainty. Jacqueline Parsons explains the various sources of uncertainty in HTAs and provides advice for enhancing data transparency and trustworthiness when communicating HTA findings. Don Husereau, Chris Carswell, and Michael Drummond then describe the Consolidated Health Economic Reporting Standards (CHEERS) for optimising quality and transparency in reporting, while Jo Whelan and Tina Krieger provide practical tips for the medical writer working on HTA submissions.

Considerations on MDM and HTA would not be complete without insights into ethical issues, and these are provided in the final section by **Art Gertel** in his discussion of ethical aspects of HTA. **Kate Silverthorne** then outlines a framework for sustainable development in healthcare in the context of climate change and global warming. The features conclude with **Jonathan Mackinnon and Aitana Gisbert**'s thoughts on master protocol studies, followed by the many highly relevant articles in the journal's regular sections.

We would like to express our deep gratitude to the authors who have contributed to this issue. They have not only produced thoughtful and informative contributions that will be of great interest

and use to our readers but have done it with enthusiasm and engagement – and not least with timely delivery of their articles. Thank you!

Maria Kołtowska-Häggström, MD, PhD, runs Proper Medical Writing, the first Polish medical writing agency that operates globally. She has previously worked within the pharmaceutical industry for over 20 years and has an extensive track record of quality of life and patient-reported

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