PD151 Informal Networking For Health Technology Assessment Capacity Building In African Countries

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Introduction: The HTAfrica group is an informal network of individuals enthusiastic about health technology assessment (HTA) in Africa. In 2021, a grassroots network was founded to explore HTA issues relevant to African countries. Through webinars and information exchanges, the group aims to cultivate social capital and cohesion among members to co-create knowledge on key HTA issues that are important in the region.
Methods: The HTAfrica group uses a social media platform to convene and deliver programming. Individual users request to join and are approved by the group coordinators. Once joined, users can read and make blog posts and participate in webinars offered on relevant topics. Despite the size of the group (177 members in 2024), engagement in 2021 and 2022 was relatively low (average 3.1 people per session). In 2023, a structured eight-part introductory HTA webinar series was offered to improve engagement, in place of the ad hoc discussions on topics that were offered the previous year.
Results: Eight webinars were offered to group members to introduce them to HTA and its potential importance for African countries. They included journal-based case studies of five African countries (Egypt, Ethiopia, Ghana, Malawi, and South Africa) and a concluding webinar to summarize learnings. A co-creation approach was taken where the perspectives of all participants contributed to the group's learnings. The webinar series ended in June 2024 and had a lower participation rate (average of two per session) but = greater cohesion among participants than did the ad hoc topics approach.
Conclusions: The eight-part series was offered from October 2023 to June 2024. While the number of participants per session was lower in the structured series, the individuals formed stronger connections and gained more intangible benefits. To form a strong network, a mix of both ad hoc hot topics and a structured series approach may be optimal for the formation of looser peripheral parts of the network (ad hoc approach) as well as fostering stronger cohesion in the network core (structured series approach).

PD153 Horizon Scanning Analysis Of The Obesity Medicines Pipeline

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Introduction: Horizon scanning provides timely intelligence about innovative health technologies in clinical development by commercial and non-commercial organizations. The horizon scanning for obesity medicines, carried out by the National Institute for Health and Care Research Innovation Observatory (IO), aimed to identify emerging obesity medicines to inform decision-making by national stakeholders and to shape future research.
Methods: In July 2023, the IO utilized horizon scanning methodology to identify medicines for preventing and treating obesity either primarily or as a comorbidity. The scans included medicines in preclinical and clinical development (phase I, I/II, II, II/III, III, or IV) sponsored by industry and non-industry for all population groups. Trial locations included Australia, Canada, the European Union, the UK, and the USA. Data were collected from the IO's internal database (the Medicines Innovation Database), ClinicalTrials.gov, the European Union Drug Regulating Authorities Clinical Trials Database, the World Health Organization International Clinical Trials Registry Platform, and the Citeline Pharmaprojects database. The data were systematically screened and analyzed.
Results: A total of 405 clinical trials were identified that evaluated 177 unique medicinal interventions. Among these, 47 unique preclinical interventions were identified from preclinical studies. A total of 256 (63%) trials were sponsored by industry, 139 (34%) by non-industry, and 10 (3%) by industry and non-industry jointly. The top five drug classes included anorectic or anti-obesity medicines (n=75; 42%), antihyperglycemics (n=24; 14%), anti-inflammatories (n=8; 5%), hepatoprotectants (n=7; 4%), and antihyperlipidemics (n=4; 2%). At the time of scanning, 48 (27%) medicines were unlicensed in the UK and 129 (73%) were not. Among the licensed medicines, 37 (77%) were off patent and 11 (23%) were on patent.
Conclusions: The IO's horizon scanning process can identify and deliver timely intelligence to support decision-making and facilitate adoption of new medicines to target areas of unmet clinical need. The obesity medicines scan identified medicinal interventions in preclinical and clinical development and provides valuable insights into the trends and research gaps in preventing and treating obesity.

PD154 Horizon Scanning Report Identifying Technologies For Pediatric Neurological Trauma

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Introduction: Children and young people comprise one quarter of the UK's population. Neurological trauma (e.g., traumatic brain injury and spinal cord injury) is one of the most common causes of death and disability in this population group, yet health technology innovations for these patients lag behind those for adults.
Methods: Using the horizon scanning methodologies developed by the Innovation Observatory, systematic searches were performed to identify registered clinical trials, published funding awards, and news articles that focused on innovative devices and digital and diagnostic health technologies developed for use in children and young people

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