Methods. The local prevalence of "rare" and "ultra-rare" conditions was defined in line with international rates (≤4 in 10,000 and <2 in 50,000, respectively) to facilitate an analysis of the rare disease landscape in Singapore, and to identify patients most likely to benefit from the RDF. Public healthcare institutions proposed drugs for consideration, which underwent technical evaluation and were then assessed in line with eligibility criteria by an expert clinical group and prioritized by decision makers for funding.

Results. The number of patients with select rare diseases in Singapore was lower than global estimates contextualized to the local setting. Supporting clinical evidence, funding decisions from overseas health technology assessment agencies, reference pricing considerations, and local budget impact analyses informed the first tranche of drugs (n = 5) recommended. Extensive engagement with pharmaceutical companies was needed to negotiate fair drug prices relative to overseas countries. Additional treatments will be included in the RDF once sufficient funds are raised.

Conclusions. As the evaluation process evolves, wider considerations of disease and treatment experiences from a multi-stakeholder standpoint should be included to inform RDF listings. There is also a need to balance the sustainability of the fund in the longer term with the number of emerging treatments that may require coverage in the future.

PP159 Telemedicine In Paraguay: Contributions Of The Institute Of Health Sciences Research, National University Of Asunción

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Introduction. The modalities of telemedicine that have been developed and applied so far by the Department of Biomedical Engineering and Imaging at the National University of Asunción (IICS-UNA) are as follows: (i) telediagnosis: the remote sending of data, signals, and images for diagnostic purposes; (ii) general telediagnostic imaging; (iii) telemonitoring (including telemetry): remote monitoring of vital parameters to provide automatic or semi-automatic surveillance or alarm services in emergencies, epidemiology, or tele-public health; and (iv) tele-education: the use of telematic networks to provide virtual platforms for educating and training health professionals.

Methods. We conducted a comprehensive review of the scientific works developed by the IICS-UNA in order to evaluate the systematic implementation of Telemedicine in Paraguay. Documents, pilot projects (satellite telegraphy), telediagnostic research, telematics, tele-education, published articles, and statistical data (number of patients attending or studies performed, etcetera) relating to the implementation of the National Telemedicine System by the Ministry of Public Health and Social Welfare since 1999 were reviewed.

Results. Implementation of the telemedicine system has meant that 472,038 patients have attended referral centers nationwide, with 297,999 electrocardiographs, 165,323 computed tomography scans, and 8,697 electroencephalograms being conducted. Projects developed within the framework of the Telemedicine Research Line have included the following:

(i) Development and validation of a clinical telemicroscopy system based on cellular telephony;
(ii) Implementation of a telemetry system for temperature monitoring of the collection of biological samples from a biomedical research center; and
(iii) Production and development of a virtual campus at the National University of Asunción.

Conclusions. Given the current healthcare environment, developing a line of research based on telemedicine is a proactive step, since telemedicine provides an alternative solution to the problem of access to the health system. That is why the IICS-UNA Biomedical Engineering and Imaging Department has developed telemedicine as one of its main lines of research.

PP162 Digital Medication Health Service Platforms Of Pharmaceutical Companies As Novel Sources Of Real-World Data For Health Technology Assessment

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Introduction. Digital medication health service (DMHS) platforms are increasingly used by pharmaceutical companies to provide direct medication health services through digital methods like apps, hotlines, and web services, etcetera. However, the implications of such platforms in supporting health technology assessment (HTA) are rarely discussed in the literature. This presentation sets out the opportunities for using the DMHS platforms of pharmaceutical companies as real-world data sources for HTA.

Methods. A mixed-method qualitative study combining literature review and case study was conducted. Relevant literature was identified by searching the Web of Science and PubMed databases. A case study on current DMHS platforms in China was carried out using an inductive approach to identify the key elements emerging from these platforms.

Results. DMHS platforms of pharmaceutical companies can identify multiple attributes of medication information needs regarding medical products, including effectiveness, safety, and economic factors. The platforms can respond to different stakeholders, including patients and their carers, doctors, nurses, pharmacists, etcetera. As one kind of interactive process, DMHS platforms can provide further services, including patient education, consultation, and evaluation, follow-up visits, chronic disease management, promotion of the rational use of drugs, therapeutic drug monitoring, and adverse drug reaction surveillance and reporting.

Conclusions. The DMHS platforms of pharmaceutical companies provide a unique and valuable real-world data source for HTA. These types of self-reported outcomes have not gained enough attention in HTA. Collective efforts by HTA agencies and pharmaceutical companies are needed to set strategies for integrating DMHS platforms into HTA.

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