

health technologies; innovative and efficient HTA processes are needed. “Adaptive HTA”, referring to the pragmatic use of HTA methods and existing (HTA) evidence, might offer solutions. We will present the results from a scoping review that mapped existing tools, methods, practices to transfer existing HTAs; and reflect on these findings given our own experiences of adaptation processes in LMICs.

**Methods.** We undertook a scoping review and systematically searched five electronic databases. Inclusion of articles followed strict in- and exclusion criteria. Data extraction focused on information regarding tools, methods, and practices that could aid the transferability of HTA analysis. Here, HTAs referred to full-HTAs and other HTA products, as partial HTAs, economic evaluations, or systematic reviews. Lastly, we mapped the possible overarching factors that can affect transferability.

**Results.** The search (November 2020) identified 2030 hits, of which 19 were included. Most HTA transfers followed five steps that closely resemble a de novo HTA process. The identified transferability tools, often checklists, were merely aids or a “catalyst” for the transfer and provided limited guidance for the whole transfer process. Contrastingly, we identified three frameworks that can support the whole process: European Network for HTA (EUnetHTA) Adaptation Toolkit, TRANSFER framework for systematic reviews, and paper series on systematic reviews for economic evaluations. Lastly, our findings pointed to various challenges and knowledge gaps; especially for transfers in low and middle income countries evidence is limited.

**Conclusions.** The re-use of existing evidence in HTA reports is not new; and readily part of de novo and adaptive processes. The innovative nature of adaptive HTA comes from its ability to unpack the process of adaptation and transferability. Simultaneously, this scoping review highlighted gaps in existing adaptive methods, and could aid future adaptive HTA process for experienced and new HTA-doers.

## OP74 Assessing Public Confidence Towards COVID-19 Vaccines Through Social Media Insights Leveraged Using Artificial Intelligence Techniques

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**Introduction.** In areas where public confidence is low and there is a lack of understanding around behaviors, such as COVID-19 vaccine hesitancy, there is a need to explore novel sources of evidence. When leveraged using artificial intelligence (AI) techniques, social media data may offer rich insights into public concerns around vaccination. Currently, sources of ‘soft-intelligence’ are underutilized by policy makers, health technology assessment (HTA) and other public health research agencies. In this work, we used an AI platform to rapidly detect and analyze key barriers to vaccine uptake from a sample of geo-located tweets.

**Methods.** An AI-based tool was deployed using a robust search strategy to capture tweets associated with COVID-19 vaccination, posted from users in London, United Kingdom. The tool’s algorithm automatically clustered tweets based on key topics of discussion and sentiment. Tweets contained within the 12 most populated topics with negative sentiment were extracted. The extracted tweets were mapped to one of six pre-determined themes (safety, mistrust, under-representation, complacency, ineffectiveness, and access) informed using the World Health Organization’s 3Cs vaccine hesitancy model. All collated tweets were anonymized.

**Results.** We identified 91,473 tweets posted between 30 November 2020 and 15 August 2021. A sample of 913 tweets were extracted from the twelve negative topic clusters. Of these, 302 tweets were coded to a vaccine hesitancy theme. ‘Safety’ (29%) and ‘mistrust’ (23%) were the most commonly coded themes; the least commonly coded was ‘under-representation’ (3%). Within the main themes, adverse reactions, inadequate assessment, and rushed development of the vaccines as key findings. Our analysis also revealed widespread sharing of misinformation.

**Conclusions.** Using an AI-based text analytics tool, we were able to rapidly assess public confidence in COVID-19 vaccination and identify key barriers to uptake from a corpus of geo-located tweets. Our findings support a growing body of evidence and confidence surrounding the use of AI tools to efficiently analyze early sources of soft-intelligence evidence in public health research.

## OP76 “Thunderbirds Are Go!” Rapid Response HTA Outputs For COVID-19

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**Introduction.** The COVID-19 pandemic has highlighted the need for rapid assessment of potential health technologies that can improve health outcomes in COVID-19 patients, as well as helping pressurized health service provision. Medical technologies play a key role in the COVID-19 pandemic, especially diagnostic tests and respiratory technologies. This study evaluates the rapid response work that the medical technology evaluation programme (MTEP) at the National Institute for Health and Care Excellence (NICE) has done in response to the COVID-19 pandemic.

**Methods.** Companies routinely submit medical technologies for evaluation by NICE through HealthTech Connect, which is an online portal for devices, diagnostics and digital technologies intended for use in the NHS or wider United Kingdom health and care system. During the COVID-19 pandemic, companies were able to use a designated email address if they perceived their technology may benefit the healthcare system regarding the COVID-19 pandemic. This new system bypassed the usual full registration and data submission. All technologies were reviewed that were submitted via HealthTech connect and email between March 2020 and June 2021.

**Results.** During this period, 20 technologies were submitted to MTEP. Most of these technologies were submitted via email. These technologies consisted of a mix of digital, diagnostic, and respiratory