

Health-economic evaluations of person-centred care

Akademisk avhandling

Som för avläggande av filosofie doktorsexamen vid Sahlgrenska akademien, Göteborgs universitet kommer att offentligen försvaras i Arvid Carlsson, Medicinargatan 3, den 28 februari 2020, klockan 09.00.

av Laura Pirhonen

Fakultetsopponent: Tor Iversen, Professor, Oslo Universitet, Norge

Avhandlingen baseras på följande delarbeten

- I. Pirhonen L., Olofsson E.H., Fors A., Ekman I., Bolin K., 2017, Effects of person-centred care on health outcomes - A randomized controlled trial in patients with acute coronary syndrome, *Health Policy* 121(2): 169-179.
- II. Pirhonen L., Bolin K., Olofsson E.H., Fors A., Ekman I., Swedberg K., Gyllensten H., 2019, Person-centred care in patients with acute coronary syndrome: cost-effectiveness analysis alongside a randomized controlled trial, *PharmacoEconomics - Open* 3(4): 495-504.
- III. Pirhonen L., Gyllensten H., Olofsson E.H., Fors A., Ali L., Ekman I., Bolin K., The cost-effectiveness of person-centred care provided to patients with chronic heart failure and/or chronic obstructive pulmonary disease, submitted.
- IV. Pirhonen L., Gyllensten H., Fors A., Bolin K., A health-economic model of competing interventions for patients with acute coronary syndrome, submitted.

Health-economic evaluations of person-centred care

Laura Pirhonen

Institute for health and care sciences,
Sahlgrenska academy, Gothenburg University, Sweden.

Abstract

Person-centred care aims at making the individual partake in the healthcare decision-making and at supporting individual health management. This stands in contrast to usual care, which typically has more focus on the particular disease at hand, rather than on the person behind the disease. Interventions in which care is delivered according to the person-centred care approach belong to a larger group of interventions, usually referred to as complex interventions. It is well-known that evaluating such interventions frequently entails methodological challenges. The overall objective of this thesis was to contribute to the field of evaluation of complex interventions, by adding to the emerging, but still rather scarce, knowledge concerning the effects and the cost-effectiveness of person-centred care interventions. An essential part of this endeavor was to examine the effects achieved by person-centred care by applying a range of different outcome measures and methods.

The thesis is comprised of four articles, all of which employed data from randomized controlled trials of person-centred care interventions conducted at the University of Gothenburg Centre for Person-Centred Care. In study I the effects of a person-centred care intervention for patients with acute coronary syndrome was estimated. In studies II and III, the cost-effectiveness of person-centred care provided to patients with (i) acute coronary syndrome and (ii) chronic obstructive pulmonary disease and/or chronic heart failure, compared with usual care, was estimated. In study IV, the outcomes observed among patients with acute coronary syndrome receiving person-centred care, or usual care, were projected to a post-trial point in time. A Markov-type health-economic model was constructed and the corresponding long-term cost-effectiveness of person-centred care was calculated. Overall, the results obtained in these studies suggest that person-centred care is both more effective and less costly than usual care, both in the short and in the long-term perspective.

Keywords: Person-centred care; Economic evaluation; Cost-effectiveness; Health outcomes; Markov model; Randomized controlled trial; Acute coronary syndrome; Chronic heart failure; Chronic obstructive pulmonary disease