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INTRODUCTION

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Everywhere health policy makers experience a growing gap between what is medically possible and what is economically feasible. So it becomes ever more necessary to deploy the resources available for health care as efficiently as possible. In the last three decades we have seen increasing research activity in the area of economic appraisal of health care interventions and programmes. Recently, an exponential rise in the number of published studies was observed [1, 2]. There is relatively little evidence, however, of the use of such studies in health policy and of their actual impact. At a European Community workshop in Crete, October 1992, which was held under the title "From results to action: the role of economic appraisal in developing policy for health technology", an attempt was made to clarify the role of economic appraisal in health policy and to understand the mechanisms which contribute to the appropriate use of information on cost-effectiveness in health care decision-making.

This special issue contains a selection of the papers presented at this workshop. The organizer of the workshop, Drummond, introduces the issue in the first paper, and describes a wide range of policy options to rationalize the diffusion and use of health technologies, to some of which economic appraisal is applied or is potentially applicable. Furthermore, he provides a number of suggestions on how to make economic appraisal more relevant to decision-making. The paper by Davies *et al.* reports on a survey of economic evaluations in EC countries to identify the impact of the results on decision- and policy-making in health care. The results of the survey suggest that there is scope for improving the impact of economic appraisal and that the method of dissemination, the source of funding and the initial objectives of a given study may be important determinants of its use.

After these two introductory papers the specific situation in a number of countries is discussed, taking a specific perspective in each case. Rutten and van der Linden discuss the role of economic appraisal in insurance based health care systems, using the case of the Netherlands as an example. The role of the organization governing the public insurance scheme is highlighted, as this agency has assessed several methods of initiating research in this field and is committed to use economic appraisal results for policy development. This situation may change when the system becomes more decentralized, forcing new actors to make themselves acquainted with and use economic evaluation techniques. Henshall and Drummond consider the actual and potential use of economic appraisal in the management of the National Health Service in the United Kingdom, and they suggest that the recent reforms may even increase the opportunities and demand for economic evaluation. Furthermore, they discuss a number of practical problems, such as the generation of reliable and relevant economic data, the targeting of these data to the appropriate decision-makers and the supply of resources and expertise. These problems are common to most countries. Moatti *et al.* throw more light on the debate concerning 'researcher driven' vs 'policy driven' economic research, suggesting the need of instituting 'intermediate' expert structures and the requirement for researchers specifically to take into account decision-makers' objectives and constraints. In this respect they point to new institutions in France intended to help bridge the gap between research and policy.

France describes a health system in turmoil in Italy, where he observes only minimal impact of economic appraisal and where there is confusion about the division of responsibilities between central and regional governments. The latter is identified as a key problem to strengthening the role of economic appraisal. The regional perspective is highlighted by Granados and Borràs, who describe the position of a Catalan agency for technology assessment as a part of the regional department of health. This is one of the rare examples where research in this area is carried out by a department within a governmental agency, and the authors discuss the advantages and disadvantages of such position. Alban describes the various ways in which economic appraisal is supporting health policy in a decentralized system like in Denmark. She stresses the necessity to educate both managers and politicians in the concept of efficiency and the appropriate use of the results of economic appraisal. Finally, Selby Smith *et al.* use eight examples to illustrate the policy context for economic appraisal in Australia and its actual impact on health policy, medical practice and health status. These

examples clearly illustrate the need for establishing strong links between the various players in the research and policy area.

Each of the last three papers in this special issue considers a specific topic in relation to economic appraisal. The first, by Banta and Vondeling, deals with the delicate problem of the timing of an economic appraisal. They illustrate this problem using the case of lasers, which are diffusing relatively rapidly in health care, while few of their applications have been well evaluated. They propose an integrated strategy of monitoring and regulating diffusion and simultaneously initiating a programme of economic appraisal. Rovira makes a plea for standardization of the methodology of economic appraisal to ensure comparability and to foster transferability of the results of studies in this field. Finally, Szczepura and Kankaanpää present the results of a survey on the interest in assessment of health care technologies among European organizations and their needs for training both policy-makers and researchers in this field.

What can be concluded from the papers as a group? First, only in a few cases has an official role for economic appraisal in health policy been formulated, but in more cases one can observe an actual impact of such studies. Secondly, close links between researchers and policy-makers help the latter to interpret appropriately the results of economic appraisal and to further an adequate use in policy-making. Researchers on the other hand should understand the policy context of the research and the options and restrictions faced by policy-makers. A continuous dialogue between analysts and decision-makers is useful. Thirdly, there seems to be a wide range of policy instruments available for which economic appraisal results can be used, and the choice of the best policy option depends on the type of technology, on its position in the diffusion cycle and on the general health policy context. Fourthly, the analysis needs to be relevant to local circumstances. Given the need for analysis to be well focused it is not easy to use results from studies performed elsewhere. Methods are becoming available to help in the transfer of economic appraisal results, although this is not straightforward. And finally, the information produced by economic appraisal may improve the performance of the market for health care if the objective of such a market is the supply of cost-effective technologies and their efficient use. The supply of economic data is a necessary condition for efficiency in health care.

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