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European Association of Urology



## Letter to the Editor

**Re: Niranjan J. Sathianathen, Badrinath R. Konety, Fernando Alarid-Escudero, Nathan Lawrentschuk, Damien M. Bolton, Karen M. Kuntz. Cost-effectiveness Analysis of Active Surveillance Strategies for Men with Low-risk Prostate Cancer. Eur Urol 2019;75:910–7**

### **Standardized Reporting for Economic Analyses Should be Mandatory**

We read the article on cost-effectiveness by Sathianathen et al. [1] with great interest and would like to raise the following issues.

In 1995 the International Society for Pharmacoeconomics and Outcomes Research established a reference for methods and reporting of the results in economic analyses. As a result of that work, the Consolidated Health Economic Evaluation Reporting Standards (CHEERS) statement was published to allow researchers to report in an organized and understandable way the important and fundamental elements of an economic evaluation [2].

According to the CHEERS statement, both the costs and the effectiveness that feed simulation models must be rigorously described to understand and especially support decision-making. In this case, Sathianathen et al. fail to describe elements of the utmost importance in the development of a cost-effectiveness analysis. The first issue is related to the country from which the economic elements were taken, especially if the perspective was the health system. Therefore, this is not an element that can be left to the reader's deduction and should be made explicit.

The effectiveness values used in the model must come from a systematic review process that is thoroughly and transparently described; expert opinions can be added to the model, but should not be the only determinant of the model. In this case, the elements corresponding to the

systematic review were not reported. In addition, standardized and widely validated resources and methods have been described to calculate quality adjusted life years (QALY) [3,4], but none of them are described in the study.

The purpose of this letter is not to detail each of the reporting elements in the manuscript, but rather to highlight the tools available for optimal development and reporting of economic evaluations.

**Conflicts of interest:** The authors have nothing to disclose.

### References

- [1] Sathianathen NJ, Konety BR, Alarid-Escudero F, Lawrentschuk N, Bolton DM, Kuntz KM. Cost-effectiveness analysis of active surveillance strategies for men with low-risk prostate cancer. *Eur Urol* 2019;75:910–7.
- [2] Husereau D, Drummond M, Petrou S, et al. Consolidated Health Economic Evaluation Reporting Standards (CHEERS) statement. *Eur J Health Econ* 2013;14:367–72.
- [3] Sassi F. Calculating QALYs, comparing QALY and DALY calculations. *Health Policy Plan* 2006;21:402–8.
- [4] Shaw JW, Johnson JA, Coons SJ, Care SM, Mar N. US valuation of the EQ-5D health states: development and testing of the D1 valuation model. *Med Care* 2005;43:203–20.

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January 7, 2019

DOI of original article: <https://doi.org/10.1016/j.eururo.2018.10.055>.

<https://doi.org/10.1016/j.eururo.2019.01.012>

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