# Flexible Generic Framework for Evidence Synthesis in **Health Technology Assessment**

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# Generic framework for network meta-analysis (NMA)

# Background

- Network Meta-Analysis (NMA) is the synthesis of evidence from multiple interventions by combining using direct and indirect comparisons across a network of studies.
- Different types of data types is available and we need to combine them taking into account the differences among them that are raised from various study designs and different data types.

# Randomised Non-Random Single Arm Controlled ised Studies Trials (SAT) Trials (RCT) (NRS) Individual Aggregated **Participant** Data (AD) Data (IPD)

### Model

- A Bayesian hierarchical models that combines information about multiple treatments from various study designs (RCT, NRS and ST) and different data types (AD and IPD)
- We will extend the model to network meta-regression.
- We will adjust for lower credibility of non-randomized evidence.

#### Data

- Simulated data.
- All types of data about the efficacy of drugs for multiple sclerosis.

### Output

- **R-shiny** web application, where the user inserts the patients characteristics and the relative treatment effects are estimated.
- The treatment hierarchy according to the outcome will also be presented.

# Dose-response meta-analysis

Dose-

response

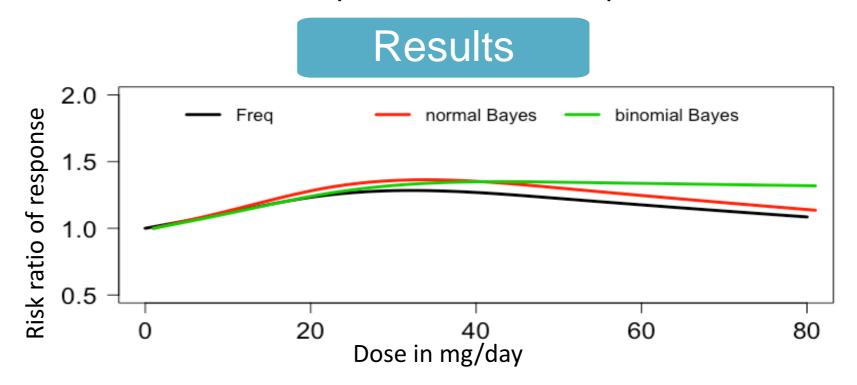
**NMA** 

#### Model

- For dose j in a study i, the dose-response transformation f (e.g. linear) relates the relative effects  $y_{ij}$  to  $dose_{ij}$ . We propose a hierarchical dose-response meta-analysis -model with 2 levels:
- **Level 1:** within each study, the doseresponse curve is estimated.
- Level 2: across studies, all dose-response curves are synthesized using the standard fixed or random-effect model.
- We fit 3 models to the data: two-stage model in frequentist setting, and our hierarchical Bayesian models with normal or binomial likelihood.

#### Data

- A dataset of 77 RCTs comparing response to antidepressants
- 85 different dose-specific effect are reported



- The three approaches meet remarkably.
- our analyses showed dose dependency in efficacy up to around 20–40 mg fluoxetine equivalents.

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