

Health technologies

Report by the Secretariat

1. At its 121st session, in May 2007, the Executive Board noted a report by the Secretariat¹ on two areas of concern outstanding from the discussion at its 120th session, in January 2007. Board members asked for more specific information on plans for implementing the actions requested of the Director-General in resolution WHA60.29 on health technologies.
2. That resolution noted that the term “health technologies” refers to the application of organized knowledge and skills in the form of devices, medicines, vaccines, procedures and systems developed to solve a health problem and improve quality of lives. Since medicines and vaccines are already covered by other programmes, this report focuses specifically on medical devices.
3. The Secretariat will continue to work with Member States to develop norms, standards and guidelines, including a nomenclature system for medical devices and a standardized glossary of definitions relating to health technologies (and in particular to medical devices). To this end, the Secretariat will propose a mechanism that will build on the work of existing expert advisory panels on blood transfusion medicine, clinical surgical procedures and transplantation. Existing networks and partnerships in specific technical areas will be maintained, including the Global Collaboration for Blood Safety, the Safe Injection Global Network and the Global Initiative for Emergency and Essential Surgical Care. Other new networks and partnerships are being developed with institutes in Member States. In October 2007, Fudan University, Shanghai, China, was designated the WHO Collaborating Centre for Health Technology Assessment and Management.
4. Mechanisms and analytical tools will be designed to support Member States in assessing their needs for health technologies and ensuring the availability and use of those health technologies. These tools will help in identifying system prerequisites (infrastructure, resources and governance) and establishing inventory-management systems for mapping available health technologies, identifying health technology needs at various levels of health systems, tracking the availability of medical devices, and planning for their replacement or repair, when needed. These tools will also be used in the provision of support for strengthening the management of health information technology through the use of information and communication technology for clinical applications, particularly in primary health care.
5. The Secretariat will provide support to Member States in improving national policies and programmes for planning, implementing and monitoring activities related to health technologies.

¹ Document EB121/2007/REC/1, summary record of the first meeting, section 5.

Local production of selected medical devices and diagnostics may decrease costs and increase availability and sustainability, but robust systems are required to assure quality, safety and efficacy. Technical guidance and support will be provided to strengthen national regulatory authorities, national reference laboratories and post-market surveillance and to help assess and strengthen quality-management systems in manufacturing companies. A new initiative will focus on facilitating and reinforcing global, regional and national systems for surveillance, reporting and investigation of adverse events and for optimizing the traceability of health products, including selected diagnostics, blood and blood products, and cells, tissues and organs for transplantation.

6. The Secretariat will cooperate with other bodies in the United Nations system, international organizations, academic institutions and professional bodies in this area and will emphasize, in particular, support for Member States to prioritize, select and acquire health technologies. The Priority Medical Devices Project, which began in May 2007, aims to identify those preventive, diagnostic, therapeutic and assistive medical devices that are currently not available on the market, and whose development would be a priority because of the associated disease or disability burden or socioeconomic issues of medical relevance. A comprehensive analysis of gaps in the market, using scientifically sound methods and incorporating feedback on needs identified by different stakeholders, has been initiated. This approach will be refined and endorsed through a formal technical consultation process and will subsequently be applied to diseases and disabilities with a high burden or their risk factors. The project will incorporate an assessment of potential barriers to innovation of medical devices. It will support the development of national policies and form the basis for a research and development agenda.

7. The Secretariat will create interrelating sets of data on medical devices, procedures, services, human resources and technology management, and their interactions. It is intended that such data will be used as guidance for countries or groups of countries about health technologies that are indispensable for the management of priority diseases, conditions and disabilities at different levels of health-care delivery systems and in various settings. The data will be accompanied by sufficient supplementary information to enable Member States to determine what is feasible and appropriate to their circumstances. That information would include infrastructure and workforce requirements, procedures, reference tools, associated operational costs and, where relevant, the costs of decommissioning individual technologies.

8. Further support for prioritizing and the acquisition of medical technologies will be provided through a clearinghouse on the WHO web site, which will offer guidance on appropriate medical devices for use in different levels of care, settings, infrastructure and intended health interventions. This information will be complemented by a database designed to provide support to Member States in selecting core health technologies that are of particular importance for specific diseases and conditions, based on data and trends in burden of disease, population, health system status and financial resources.

9. The tools developed will be integrated into guidelines, training modules and workshops, thereby enabling the Secretariat to provide support to Member States with vulnerable health-care systems in identifying and putting in place appropriate health technologies, in particular medical devices, that will facilitate access to quality services in primary health care.

ACTION BY THE EXECUTIVE BOARD

10. The Board is invited to note this report.

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