

# HTA Indexing in Purpose-Built INAHTA and CRD HTA Databases

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## Aim

- To determine if a random sample of Technology Appraisals (TAs) available on the National Institute for Health and Care Excellence (NICE) website were also available in the International Network of Agencies for Health Technology Assessment (INAHTA) and Centre for Reviews and Dissemination (CRD) Health Technology Assessment (HTA) databases.

Would a researcher **miss relevant TAs** if they relied solely upon the INAHTA and/or CRD HTA databases?

## Background

- Systematic reviews supporting HTAs commonly include searches for guidance, in the form of TAs. This guidance is produced by HTA agencies such as NICE in the United Kingdom.<sup>1,2</sup>
- Searches for TAs can be undertaken directly, through searches of the websites of guidance-producing agencies, or indirectly through the following web-based, federated databases:
  - INAHTA database (currently up to date)
  - CRD HTA database (last updated 31 March 2018)
- An objective of these databases is to provide 'a single point of access' to ongoing or published HTAs 'that would otherwise be more difficult and time-consuming to search for on individual agency websites'.<sup>3</sup> Researchers have not evaluated the extent to which these databases provide reliable and complete access to TAs also available on agency websites.

## Methods

A search of the NICE website was conducted by navigating to guidance and limiting the search to 'Technology appraisal guidance'. A total of 601 TAs were downloaded on 21 April 2022. The order of TAs was randomized in Microsoft Excel. The first twenty TAs were chosen for analysis, irrespective of the technology chosen or date of publication. Searches of the INAHTA and CRD HTA databases were done in parallel by two independent researchers (CC and SS) in May and June 2022.

## Findings

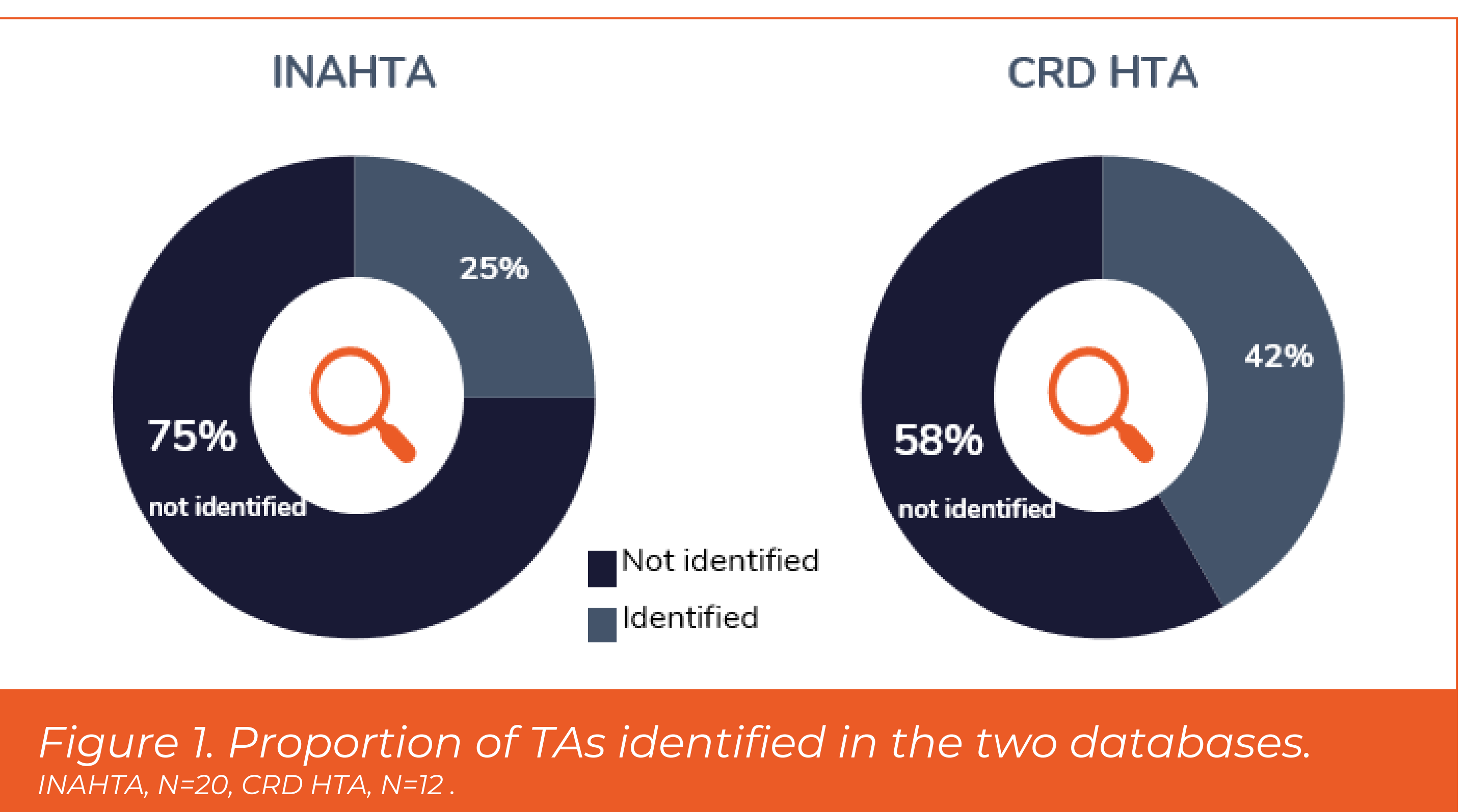
Coverage of the 20 TAs was incomplete in both databases (Table 1).

		INAHTA	CRD HTA			INAHTA	CRD HTA
TA210	2010	✓	✓	TA467	2017	✗	✗
TA73	2003	✓	✓	TA279	2013	✗	✗
TA96	2006	✓	✓	TA727	2021	✗	N/A
TA52	2002	✓	✓	TA743	2021	✗	N/A
TA177	2009	✓	✓	TA718	2021	✗	N/A
TA156	2008	✗	✗	TA685	2021	✗	N/A
TA226	2011	✗	✗	TA662	2020	✗	N/A
TA317	2014	✗	✗	TA640	2020	✗	N/A
TA345	2015	✗	✗	TA583	2019	✗	N/A
TA256	2012	✗	✗	TA538	2018	✗	N/A

Table 1. Results of searches for selected TAs in the two databases. INAHTA, N=20, CRD HTA, N=12. N/A, not applicable as these TAs were published after the last update of the CRD HTA database on 31 March 2018.

## Findings

In the INAHTA database, 15 of 20 TAs (75%) were not identified via full-title or intervention-specific searches (Figure 1). In the CRD HTA database, 7 of 12 TAs (58%) that were published prior to the last update of the database (31 March 2018) were not identified.



Both databases identified the same five TAs. Coverage was more comprehensive up to 2010, with all five TAs identified in this time period and only one other TA in this time period not identified (TA156). Coverage after 2010 was poorer, with none of the fourteen TAs published after 2010 identified on the INAHTA database and none of the six TAs published after 2010, but before the last update in 2018, identified on the CRD HTA database.

## Discussion

**Conclusion:** Coverage of TAs in the two databases was incomplete.

**Implications for practice:** For researchers needing to identify NICE TAs, a search of the NICE website is essential, and it should be performed as a priority over searches of the INAHTA or CRD HTA databases.

**Implications for research:** Extending the analysis to further cases, and examining the coverage of other agencies, would seem a valuable next step. This would help determine the coverage of the INAHTA database and indicate where updates should be made.

### References

- Arber M, et al. *Int J Technol Assess Health Care*. 2018;34(6):547-554.
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- INAHTA database. 2020; <https://www.inahta.org/hta-database/>. Accessed June 19, 2022.

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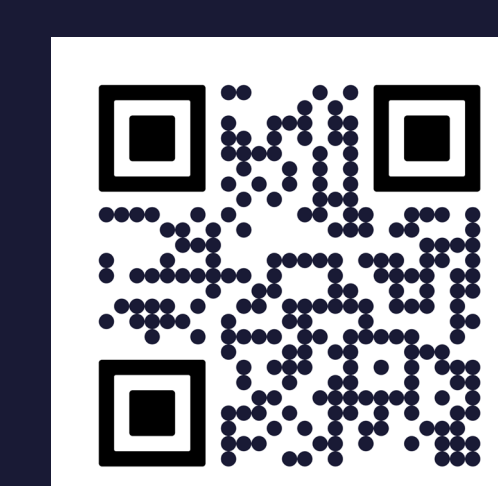
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