



NATIONAL INSTITUTE FOR HEALTH AND WELFARE

# Evaluation of Implementation Process of Prenatal Screening in Finland

8th Annual Meeting – HTAi 2011 Rio de Janeiro, Brasil

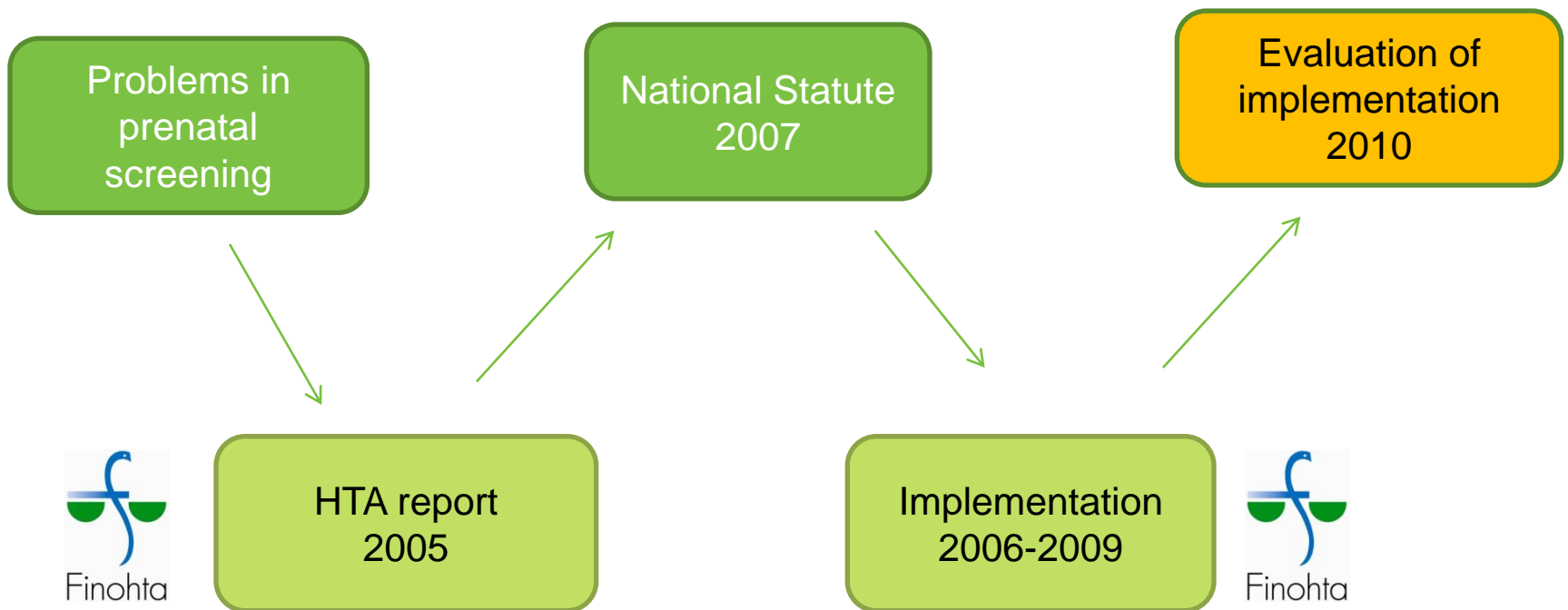
Ulla Saalasti-Koskinen, Minna Kivipelto, Jaana Leipälä, Niina Haake, Marjukka Mäkelä  
FINOHTA (Finnish Office for Health Technology Assessment)

# Prenatal screening

- Aims
  - to identify gestational age
  - to identify possible structural or chromosomal abnormalities
- In order to
  - plan delivery and early care of a newborn with abnormality
  - give the family an opportunity to decide on possible termination of pregnancy
- Screening methods: Early ultrasound, NT (nuchal translucency scan), blood tests, structural ultrasound
- Confirmatory tests e.g. Chorionic Villus Sampling (CVS) needed after abnormal screening test
- Participation in screening is voluntary at all stages



# Implementing Prenatal Screening in Finland



# Background

- Regional inequality in prenatal screening
- Differences in screening methods, some of poor quality



- HTA report (FINOHTA):
  - Best methods for national screening
  - Cost-effectiveness
  - Identified major problems to be discussed before national decision

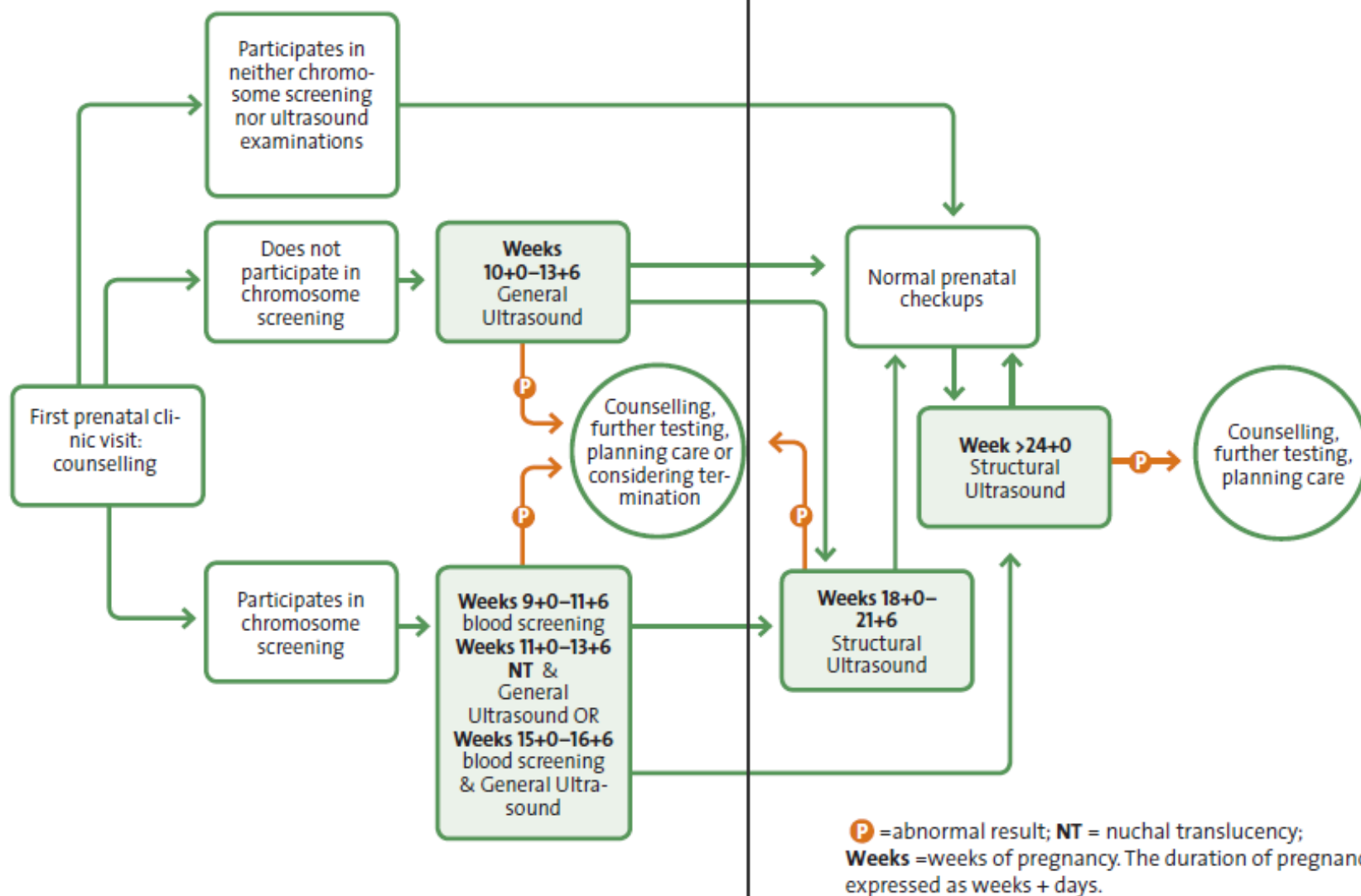


# Decision process

- National Screening Board
  - Processed the HTA report for 9 months
    - Expert hearings and open seminar
  - Recommend prenatal screening for national screening programme
- Ministry of Social Affairs and Health (MoH)
  - Draft statute sent for a wide comment round
  - Prenatal screening included in the new statute of national screening programmes (Jan 2007)
  - Informed consent highlighted in the statute



# Simplified representation of the options available in prenatal screening



# Implementation

- MoH commissioned FINOHTA also to support implementation
  - Training for professionals
  - Information leaflets for families
- Finohta assembled national expert group (5/2006 to 12/2009)
  - gynecology, epidemiology, neonatology, nursing,
  - specialists on ultrasound, abnormalities, medical genetics, HTA, ethics, information and screening,
  - representatives from municipal and regional authorities



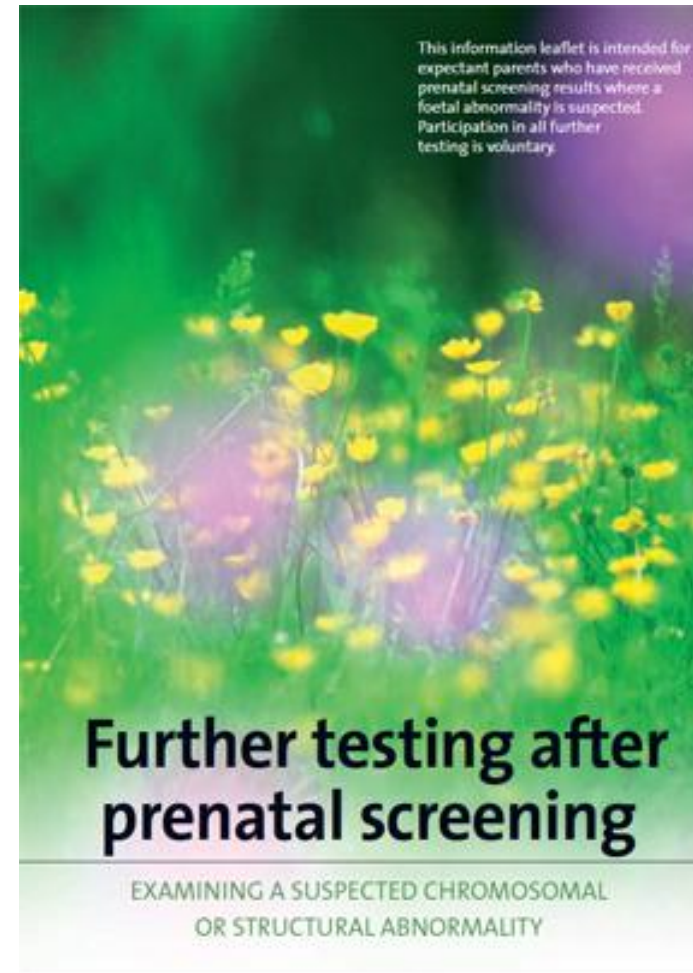
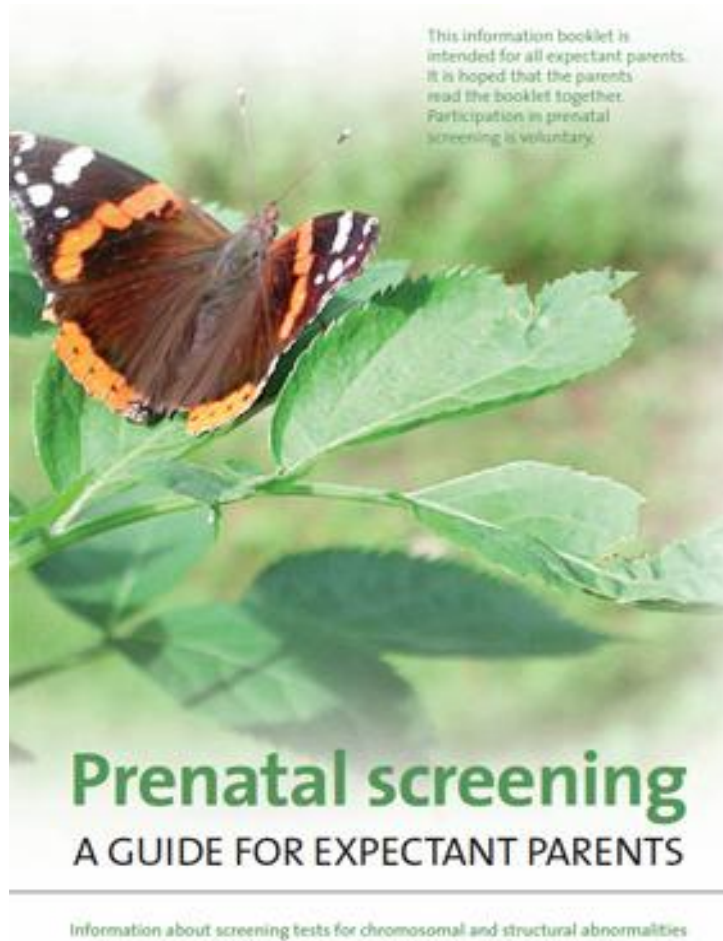
# Products for maternity care professionals

- 3 training sessions for trainers
- Training package on website
- A guide for informing families about screening
  - Sample sentences for different situations
  - Information gathered e.g. from parents, US nurses
- Risk cards illustrating probabilities in screening for chromosomal aberrations
  - Chromosome abnormality vs. risk of miscarriage associated with invasive test
- Public website where all information is available





# Products for families





# Evaluating the implementation

- Two external evaluators
- Study questions
  - Steps in the implementation process?
  - Tools produced by the expert group?
  - Utilisation of these tools?
- Methods
  - Surveys, interviews, sales volumes, number of website visitors and downloads, documentations
- Target groups: maternity care professionals, expert group



# Changes in screening 2007-2009

- The proportion of municipalities organising:
  - Early general ultrasound 74% → 92%
  - Early combined screening (NT+blood test) 58% → 87%
  - Serum blood test 10% → 62%
  - Structural ultrasound 77% → 88%
  - Structural ultrasound after 24 weeks 8% → 51%



# Other results

- Innovative development process
- All products useful but marketing incomplete
- Familiarity with products varied
  - Guides for pregnant families best known
  - Website well known
  - Risk cards unfamiliar
- Main strengths
  - Broad expert group innovative in providing information in practical form
  - User collaboration at all stages



Let all flowers blossom...

Thank you!

