Reviewer’s report

Title: What do we need to know? Data sources to support evidence-based decisions using health technology assessment in Ghana

Version: 0 Date: 20 Dec 2019

Reviewer: Matthias Perleth

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This is a descriptive study of available data sources for evidence based decision-making in the health care system in Ghana with regard to approaching universal health care and the role, HTA may play in this development. The paper is considered to be a starting point for further analyses. The data sources are related to six domains, ranging from epidemiology to equity. This is derived from previous work and also refers to a health economic reference case published elsewhere (Wilkinson et al. 2016). The paper refers to the World Health Assembly resolution 67.23 of 2014, which stresses the role of HTA and "urges" member states to establish an HTA system in the context of achieving universal coverage. Therefore, the concept appears to be appropriate in light of limited resources. This publication is part of a process to inform evidence-based priority setting in Ghana.

Comments:

p. 5: the Methods section is rather short; first, the reference to previous work of the group is related to India, which raises the questions of comparability (or transferability, respectively). While it is clear that the domains are taken from the above mentioned study, it is still desirable to describe to what extent any modifications might be necessary to account for the peculiarities of the Ghanaian health care system. It is also desirable to present more details on how the data sources were identified, e.g. in an appendix. It would be interesting to know, which information source contributed to what extent to the results.

p. 6: data sources for burden of disease are focused on their usefulness for economic evaluations; however, from a public health point of view, other aspects, such as geographic distribution, severity or surveillance of vaccine-preventable diseases are not explicitly addressed, but would in case of urgency need to be informed without economic evaluations.

p. 7, on clinical trials: although it is true that for some drugs race matters in terms of efficacy and safety, for most drugs it does obviously not; therefore, international registries, such as Clinicaltrials.gov, would also be valuable sources; trials conducted in a local, regional or national context, however, would be more relevant for complex interventions which require implementation of services into the Ghanaian health care system.

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Quality of written English
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