A Day in the Life of a **Health Economist** at Costello Medical Consulting

Today I arrive just before 9am, and check with the other Health Economists how their day is looking; it's useful to keep abreast of what projects they're working on as my input or support might be needed at a later stage. As a Health Economist I tend to have a couple of big projects which are ongoing, along with a couple of smaller ones. I have a great deal of autonomy over how I structure my day – I generally allocate larger blocks of time for the big developments to models, and then fit in smaller tasks around that.

A lot of my time is spent working on economic models for pharmaceutical drugs. These models will vary in style, depending on the aim – often I'm looking to show what the costs and the effects of taking up a new drug would be, or what impact the drug would have on current levels of spending. I start by making the small changes to the model, which might be required as a result of new data becoming available or due to a recommendation from a client. I then start making the larger changes and developments; the models are usually built in Microsoft Excel, and it is enjoyable getting to know how to use this program in an advanced way, to reflect the complexities of a disease area. I occasionally use STATA and R, but most of the coding I do is in Microsoft Visual Basic. I find the process of building a whole economic model, from conceptualisation through to testing, really rewarding.

It's important to keep the clients informed with what work we've been doing on the project, so before lunch I make some slides highlighting our progress, and the next developments to be made to the model. I send off those slides, and then grab a sandwich and pop to the nearby Botanic Garden for lunch which is a lovely spot for a break. After lunch, I have a teleconference call with the rest of the project team to discuss these changes – it's helpful to get more guidance on what the client wants, so these regular updates are important. After the call I discuss the project with the rest of the team which includes members of the Evidence Development team and HTA Analysts. The Evidence Development team will be searching out relevant literature for the model, and the HTA Analysts will be involved in the writing up of the model. It's therefore really valuable to work with them and take on board any suggestions they may have.

Another aspect of working with models that I often encounter is adapting other models, including ones that clients have made. This involves figuring out how the model works and then testing out different scenarios and how they influence the results. Through the day I will also be on hand to help with any technical, modelling, or statistics based questions that others in the office might have. Due to the technical nature of my job, my input is valued on a range of projects across the company, so it's a great role for having lots of interaction with other colleagues. Similarly, whenever I have queries that arise from my project work I can approach others for help.

In the afternoon I make a start on a new project. For this I have to understand the disease area, including what happens to patients over the course of their disease and their treatment with various health technologies, to enable me to build a model that accurately fits the reality of the clinical situation. This allows me to see the relevance of what I'm building, and even though the model will be built in Excel, it has a grounding in the real world.

I spend the rest of the day working on slides for a workshop with clinicians later this month. We hope to gather more information on what the inputs for the model will be and receive their feedback on whether they think our model is appropriate. These workshops are a great way to learn how models need to be adapted to actually reflect clinical practice and offer a chance to get out of the office and discuss my work with clinical experts in the field.