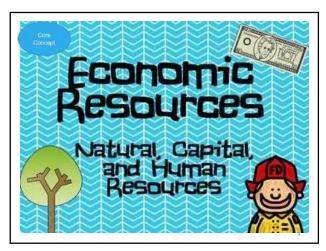


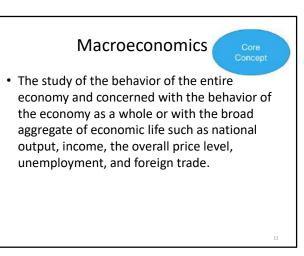
| Sequence of Lecture | |
|---|-------------|
| Learning Objectives | (1 slide) |
| 2. Core Subject | (27 slides) |
| 3. Research | (1 slide) |
| 4. Bioethics | (1 slide) |
| 5. End of lecture assessment | (1 slide) |
| 6. Reading source | (1 slide) |
| J. Reading source | (1 shue) |
| | |
| | |

Health economics Concept Health economics is concerned with the efficient utilization of economic resources such as Human • The application of the theories, concepts and resource, materials, financial resources and with techniques of economics to health sector. the alternative uses of resources in the health • TYPES????? services sector. 7

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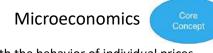


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Definitions



- The study of how men and society end up choosing to employ scarce resources that could have alternative uses.
- Economics is the study of how people allocate their limited resources in an attempt to satisfy their unlimited wants.
- The subject matter of economics lies on the production, distribution and consumption of economic goods.

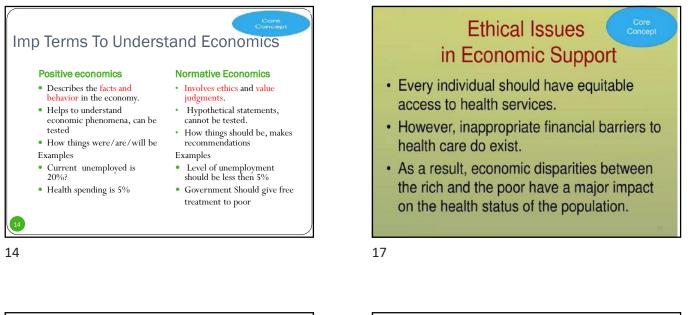


• Deals with the behavior of individual prices and quantities (Issues at individual level). Our knowledge of economics helps us to manage our personal lives, to understand society and to design better economic policies.

| Micro-Economics | Macro-Economics |
|--|--|
| Micro economics studies the decisions made by individual and business concerning the distribution of resources and prices of goods and | Macroeconomics, studies the behavior of not only particular company or industries but whole economy. |
| services. | It includes understanding how |
| It deals with a specific industry or a sector, the connections of firms and households in the market. | unemployment, price levels, growth rate affects the economy wide aspects such as the Gross National Product (GNP). |
| For example, microeconomics would study how a company could lower its prices to increase its product demand in the market. | For example, macroeconomics would look at how an increase/decrease in net imports would affect a nation's capital account. |

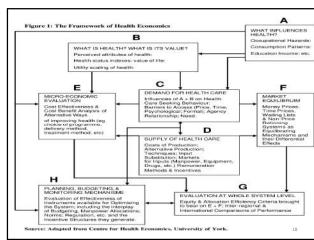


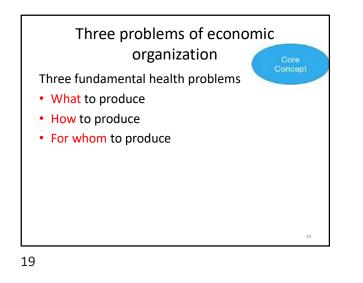
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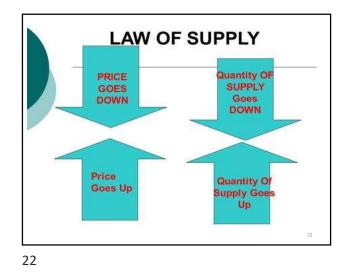


Rationale And Focus Of Health Economics

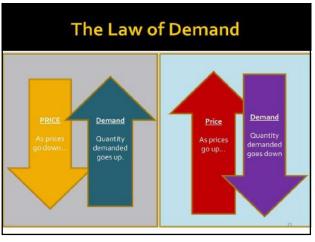
- 1. More productive at work and earn higher income.
- 2. May spend more time in labour force
- 3. May invest more in education, it will increase their productivity.
- 4. May save more by increase in life expectancy

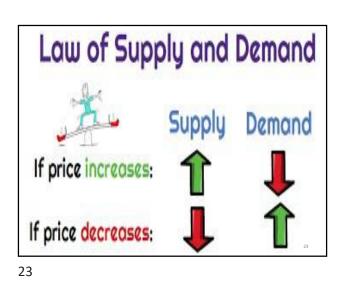


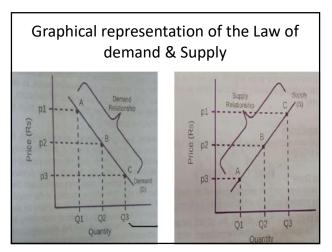


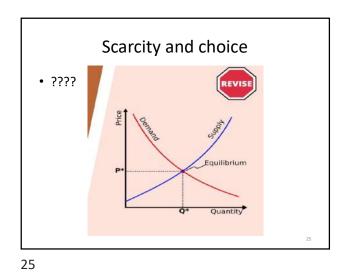


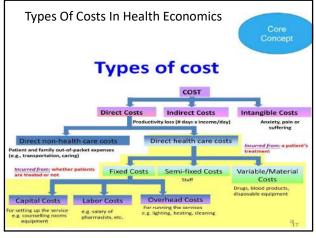
Supply relationship
Demand relationship
The law of Demand
The law of Supply
Time and supply
Supply and Demand Relationship

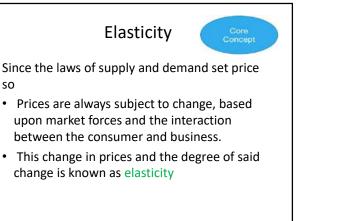


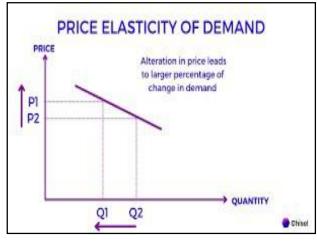


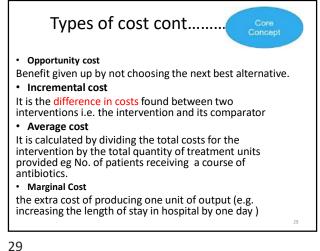


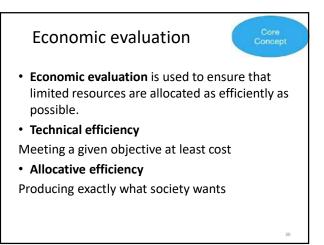


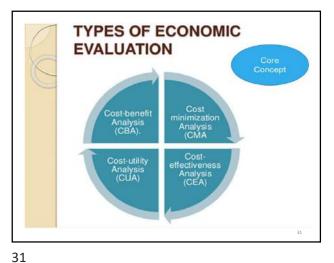






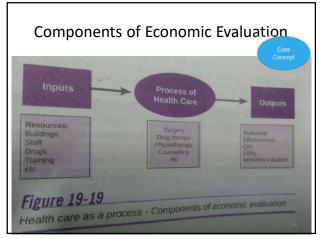


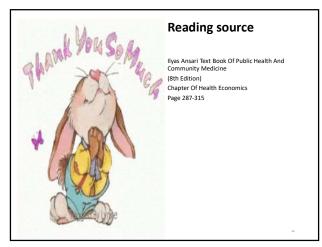




| Туре | Characteristics | Parameter | Advantages | Disadvantages |
|--------------------|--|--|---|--|
| Cost-minimization | Used when two or more inter- ventions of equal effectiveness are being compared, but their costs are different | Cost | Easier to conduct than full cost-effectiveness analysis | Interventions must have equal effectiveness |
| Cost-effectiveness | Health outcomes are not valued but are reported in physical units such as life-years gained or cases successfully treated | Cost/ non-quality- adjusted outcome | May be quicker and easier to conduct than cost-util- ity analysis | Difficult to compare studies with varying out- comes; give little credit to interventions that pri- marily improve quality o life; fail to account for adverse effects |
| Cost utility | A type of cost-effectiveness study that typically measures health improvement in QALYs | Cost/ QALY | Useful when comparing alternative treatments that produce outcomes of different types; useful when increased survival is bought at the expense of reduced quality of life | May bias in favor of thos individuals with poten- tially more years to live in a good health state |
| Cost benefit | Attaches a monetary value to the consequences (costs and effec- tiveness) of an intervention by asking health care consumers what they would be willing to pay for health services that achieve certain outcomes | Cost | Allows comparison of medical and nonmedical interventions (nonmedi- cal interventions typically use cost-benefit): pro- vides a more definitive endpoint than cost effectiveness | May show bias toward in terventions for the rich (i they are more willing to pay than the poor); place a dollar value on human life |

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End of lecture assessment

- Economics studying the decision made by individual & business concerning the distribution of resources & prices of goods & services is :
- a. Macroeconomics
- b. Microeconomics
- c. Positive economics
- d. Negative economics
- e. Normative economics

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