

Professor Tracy Roberts PhD, MPhil(Econ), BSc(Econ)(Hons) RGN

Professor of Health Economics and Head of Unit

Health Economics

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About

Tracy Roberts is Professor of Health Economics and Head of Unit.

Tracy has specific research interest in the area of economic evaluation and in particular of testing and screening programmes, particularly in the areas of Sexual Health, Obstetrics and Gynaecology. Latterly she has developed interest in pursuing outcome valuation for use in economic evaluation in these clinical specialties.

Tracy has a wide range of applied research publications in these areas and has been a successful health economic applicant to both the MRC and NCCHTA on numerous grant applications valuing more than £15 million in total.

Qualifications

- PhD in Health Economics 2008
- MPhil(Oxon) in Economics 1992
- BSc (Hons) Economics 1990
- Registered General Nurse 1987

Biography

Tracy joined HEU in January 1998, having previously worked in health economics research at Oxford University. Her interests in the health service developed a decade earlier when she qualified as General Nurse in St Bartholomew's Hospital, London. This was before she studied Economics at University College London and subsequently Wolfson College, Oxford. Her main research interests are in the area of economic evaluation particularly in the areas of Sexual Health, Obstetrics and Gynaecology. Tracy has published widely in these areas and has been a successful applicant to both the MRC and NCCHTA on a wide range of major research projects.

In February 2009 Tracy was appointed Professor of Health Economics.

Tracy has been active in teaching throughout her time in the Unit and in 2008 she assumed the role of Director of Teaching and Director of the MSc programme. For the period August 2005 through July 2006 she was Acting Director of HEU (In the absence of the Director who was on sabbatical) and it was during this period that HEF underwent a successful Quinquennial review by the NCCRCO.

Tracy leads two applied research themes within the Unit: women's health and infection. She also works within the two main methodological themes of modelling and capabilities.

Teaching

Teaching Programmes

- **[MSc in Health Economics and Health Policy \(/postgraduate/courses/taught/med/health-economics-policy.aspx\)](#)** (Programme Director 2008-2011)
- **[Masters in Public Health \(/postgraduate/courses/taught/med/public-health.aspx\)](#)**
- 3rd year undergraduate module on Health Economics
- 2nd year undergraduate module in Public Economics
- **[Medicine and Surgery MBChB \(/undergraduate/courses/med/medicine.aspx\)](#)** Special Study Module for 3rd year medical students
- Graduate Entry medical student teaching

Postgraduate supervision

Tracy is interested in supervising doctoral research students in the following areas:

- Economic evaluation including health state valuation and particularly temporary health state valuation in gynaecology and and sexual health clinical areas

Research

RESEARCH THEMES

Women's sexual and reproductive health; clinical trials; capabilities; and modelling

RESEARCH ACTIVITY

ECONOMIC EVALUATION OF SCREENING AND DIAGNOSTIC PROGRAMMES

Much of Tracy's work has focussed on the economic evaluation of screening programmes. This began in 1997 in Oxford when she completed some work commissioned by the RCOG on alternative strategies for antenatal ultrasound screening which highlighted the lack of clear evidence based guidance in the context of antenatal ultrasound screening. This led to the funding of a systematic review on the effectiveness and cost effectiveness of antenatal ultrasound screening.

When Tracy joined the Birmingham team in 1998, she sought the opportunity to continue to carry out evaluative work in the economics of screening programmes. She collaborated with researchers in the Department of Social Medicine in Bristol University on a successful bid to evaluate the economics of Chlamydia screening (ClaSS project). She was Chair of the Economic Work-stream for the project. To date there are 7 peer reviewed publications arising from the economic work-stream with many more arising from subsequent related projects. Significant methodological and policy issues identified by the economic component of this project include the application of the wrong modelling approach in the previously published economic evaluations which in turn have led to misplaced policy decisions. The project also formed the basis of her PhD thesis.

She has been the lead economic applicant on many other successful National Co-ordinating Centre for Health Technology Assessment (NCCHTA) bids. These have been in the clinical area of obstetrics and gynaecology, including neonatal screening, or in the area of sexual health, these include the following completed NCCHTA projects in which an economic evaluation was an integral component: Testing to predict risk factors associated with Pre-eclampsia; Screening to prevent pre-term birth; Screening for Haemoglobinopathies in pregnancy and the Pulse Oximetry Screening in Newborn Infants study; Heavy menstrual bleeding; Cervical cancer; and Vulval cancer.

SYSTEMATIC REVIEWS, ECONOMIC ANALYSES ALONGSIDE CLINICAL TRIALS AND MODELLING

Tracy has undertaken and published a number of systematic reviews of economic studies, including antenatal care; ultrasound screening in pregnancy; and economic evaluations on Chlamydia trachomatis screening. Many of the economic evaluations of screening interventions have also required a significant modelling component as many of the data required for the evaluations were obtained from systematic reviews. Tracy led the systematic review of economic evaluations of Chlamydia screening which identified that the majority of published studies had used the wrong modelling approach. A very preliminary search of the HIV literature has identified a similar problem and a systematic review carried out by an MSc student for the dissertation (supervised by Tracy) has been published.

ECONOMIC EVALUATION OF SEXUAL HEALTH INTERVENTIONS

The economic evaluation of sexual health interventions is currently a clinical area of particular interest not least because many interventions, resources and policies applied in this area have often no cost-effectiveness evidence to support their instigation.

Tracy's involvement in the screening for Chlamydia trachomatis (ClaSS) project laid the groundwork for more collaborative work with researchers in other universities in the area of sexual health and has led to invitations to collaborate on sexual health projects with researchers at University College London, Brighton University and Bart's Hospital. These collaborations have led to successfully funded projects: "Can expedited Partner therapy improve outcomes of partner notification? A feasibility study and exploratory trial" which is in collaboration with researchers from St. Bartholomew's Hospital. The Ballseye project which is seeking to improve uptake of sexual health interventions by men is a collaboration with Bart's Hospital and funded by the NIHR programme grants panel and and NIHR HTA trial on partner notification programmes is in collaboration with the University of Brighton.



(<http://www.adobe.com/go/getflashplayer>)

Other activities

- Invited to join NIHR Programme grant Core Methodologist Group as Health Economist (2010)
- Invited member of College of Panellists who will serve on the panels and sub-panels that will consider both short-listed and full applications submitted to the NIHR Programme Grants for Applied Research Programme. (2008)

TRIAL STEERING GROUPS

- The NIHR funded ProtecT Trial (University of Bristol) now the largest RCT of treatment for localised prostate cancer in the world - Trial Steering Committee Member (2010)
- UK Collaborative NIHR Funded INFANT Trial (National Perinatal Epidemiology Unit, University of Oxford) – Trial Steering Committee Member
- Wellcome Funded Vitamins In Pregnancy Trial– Trial Steering Committee Member

Publications

Meads C, Auguste P, Davenport C, Malysiak S, Sundar S, Kowalska M, Zapalska A, Chomiak P, Guest P, Thangaratinam S, Martin-Hirsch P, Borowiack E, Barton P, **Roberts TE**, Khan K. Effectiveness of PET-CT imaging in detecting and managing recurrent cervical cancer: Systematic review of evidence and economic modelling. *Health Technology Assessment In Press*

Roberts TE, Barton PM, Auguste P, Middleton L, Furnston A Ewer A. Pulse Oximetry as a screening test for Congenital Heart Defects in Newborn Infants: a cost-effectiveness analysis. *Archives of Diseases in Childhood*. 2012;97:221-226. doi: 10.1136/archdischild-2011-300564

AK Ewer, AT Furnston, J Deeks, L Middleton, HM Pattison, R Powell, **TE Roberts**, P Auguste, P Barton, J Daniels, A Bhojer, S Thangaratinam, P Satodia, S Deshpande, B Kumaratne, S Sivakumar, R Mupanemunde, KS Khan. Pulse oximetry as a screening test for congenital heart defects in newborn infants: a test accuracy study with evaluation of acceptability and cost-effectiveness. *Health Technology Assessment* 2012; Vol. 16:no 2

Roberts TE, Tsourapas A, Sutcliffe LJ, Cassell JA, and Estcourt CS, Is Accelerated Partner Therapy (APT) a Cost-Effective Alternative to Routine Patient Referral Partner Notification in the UK? Cost consequence analysis of an Exploratory trial *Sexually Transmitted Infections* doi:10.1136/sextrans-2011-050176

Estcourt C, Sutcliffe L, Cassell J, Mercer C, Copas A, James L, Low N, Horner P, Clarke M, Symonds M, **Roberts TE**, Tsourapas A, Johnson A. Can We Improve Partner Notification Rates through Expedited Partner Therapy in The UK? Findings From An Exploratory Trial of Accelerated Partner Therapy (APT). *Sexually Transmitted Infections* doi:10.1136/sti.2010.047258

Bryan S, Dormandy E, **Roberts TE**, Ades AE, Barton PM, Juarez-Garcia A, Andronis L, Karnon K, Marteau TM. The Cost-Effectiveness Of Primary Care Screening For Sickle Cell And Thalassaemia. *British Journal of General Practice*. Doi 10.3399/bjgp11x601325

Roberts TE, Tsourapas A, Middleton LJ, Champaneria R, Daniels JP, Cooper KG, Bhattacharya S and Barton PM. A Cost-Effectiveness Analysis of Hysterectomy, Endometrial Ablation and the Levonorgestrel Intra Uterine System (Mirena®) For the Treatment of Heavy Menstrual Bleeding. *British Medical Journal* 2011; 342:d2202

Bhattacharya S, Middleton LJ, Tsourapas A, Lee AJ, Champaneria R, Daniels JP, **Roberts TE** et al. Effectiveness and cost effectiveness of hysterectomy, endometrial

