Over the past two decades, the development of new healthcare technologies has become an essential component in most European healthcare systems. Innovative technologies, such as new drugs, devices, diagnostic tools and organizational procedures provide benefits both to individual patients and to the health care system as a whole, allowing local and national governments, as well as manufacturers of healthcare tools, to improve the effectiveness, safety, efficiency and quality of medical treatments. The impact of such demands on health policies still poses new challenges to policy makers when dealing with high quality innovations in health-care delivery. They often must contemporarily try to balance demand with an overall budget whilst respecting the principles of equity and accessibility of treatments for individual patients.

Health Technology Assessment - HTA - as commonly defined, is a multidisciplinary field of policy analysis. It studies the medical, social, ethical, and economic implications of the development, diffusion, and use of health technology, with the primary aim of providing all these useful elements in the planning and decision making processes at a macro-meso-micro health policy-making level. [1]

Despite the increasing supply of different products, Italy too (with differences in regional health service organization and provision) along with most European countries, has set up a HTA system in order to identify which innovations are potentially able to really improve its national, healthcare service. Decision-makers are responsible for the planning and programming activity and, as a consequence, for the introduction of innovative healthcare technologies as well. [2-4]

The Health Technology Assessment activity is usually performed to evaluate existing technologies and those currently in use where the time factor plays a decisive role. A comprehensive and reliable HTA report requires time and, though extremely useful, it might be available to decision-makers at a later stage.
makers too late, i.e. when the key decision has been already taken. To overcome this possible limitation, in a typical HTA activity scenario, the Horizon Scanning (HS) Process has evolved, a term (within a horizon) which implies the recognition and identification of developing healthcare technologies and the evaluation of their possible clinical and managerial impact on the healthcare delivery system. Differently from HTA, the HS process assesses technologies in advance, thus suggesting to decision makers how to allocate funds more appropriately, on the basis of EBM (Evidence Based Medicine) processes.

The Italian Society of Health Horizon Scanning (SIHHS) was created on May 4th, 2009, in Naples, with the collaboration of several institutions and professionals from different scientific backgrounds: hygienists, clinicians, economists, pharmacists, clinical engineers, etc [5].

The SIHHS’s primary objective is to combine research with vocational training, thus finding a direct link to the pharmaceutical industry, a major player in the process of improving the efficiency and quality of medical treatments. Even Regions should be able, in a near future, to play a proactive role alongside industry, thus creating new ways of cooperating, and stimulating the production of innovative products that are useful to the sector, especially for those diseases which still have little technological solutions.

It was not by chance that a Campaign for SIHHS was set up. In 2008, the regional Department of Healthcare approved the “Robinson” project on a proposal by the ANMDO (National Association of Medical Doctor Hospital Directions) for the implementation of HTA in healthcare structures and, in the same year, the “Robinson in hospital” project was also granted, involving state and teaching hospitals in the Region.

In February 2009 the Campania Region founded the first HTA Committee whose task mainly consisted in spreading the culture of Health Technology Assessment within all regional healthcare units through the promotion of scientific events devoted to managers, clinicians, nursing and administrative personnel.

This committee, formed by a multi-disciplinary team and coordinated by the head of the regional Healthcare Department, also had the assignment of organizing a regional steering group of experts and referents from individual local healthcare units and public and teaching hospitals in the Region.

Starting from such local institutional settings, the SIHHS intends to poll together and, to some extent, try to forecast the demand for technology products through the networking of professionals from regional healthcare units, universities and local Departments in the area.

In Italy, the development of a collaborative culture among the various institutional levels (healthcare units, regional departments and Universities) and industries devoted to healthcare research and technological innovation represents a new policy issue and an undoubtedly important goal.

In comparison with other existing HS experiences, what makes SIHHS markedly characteristic in its mission is its self-sufficient role in identifying new technologies whilst keeping those apparently outdated technologies under investigation. The HTA process acts, therefore, as an operating arm, as a tool for Horizon Scanning activities, and not vice versa as it is usually deemed.

Before detecting or identifying new and emerging technologies, the HS expert’s task consists in correcting previous processes, or those under investigation and, when necessary, to peer into the past or evaluate healthcare technologies that are deemed to be ineffective.

A HS activity should be performed as if rummaging in an old warehouse, eliminating unnecessary things and reclaiming what can be still useful (the “Old Staff Dealer” project, also proposed by ANMDO to the Regional Health Care Department).

In such a scenario, a steady cooperation with university researchers represents another important issue for development which allows newly created companies to meet future methodological and procedural challenges, those that can be brilliantly overcome only through work experiences with various professionals, combining research and clinical practice in the best possible way.

Among the SIHHS’s main objectives, particular attention has been drawn to the importance of transforming research findings into clinical practice as well as to the involvement of different practitioners, in the light of the ongoing recent debate regarding translational research. This latter issue deals with the transfer of results from one scientific field to another, according to a well-defined investigation scheme and the use of such knowledge, where the findings of a research process become the basic starting point of successive schemes. Thus a nexialist is the expert capable of combining scientific research with clinical practice, one who is able to make all the various disciplines involved dialogue with each other (for instance, clinical medicine and
economics) and one who has the assigned task of making such functional approaches work to the best effectiveness. The *nexialist* is a “facilitator”, as would be an actual HS user [6].

Furthermore, the SIHHS intends to establish a set of clinical recommendations to be operatively used as strategic guidelines to enhance and promote their adoption within clinical and organizational settings [7]. The intent is to limit the growth of self-referential projects, offering, on the contrary, a concrete approach to formal programmes, which are permanent, incisive and based on the clear definition of roles and responsibilities of both health and managerial personnel.

The use of guidelines in Italy is an opportunity to update practitioners on recent research findings, to inform and educate patients about a proper demand, and to assess the effectiveness and appropriateness of the healthcare service provided [8].

For these reasons, the activities of multidisciplinary collaboration within the Italian Society of Health Horizon Scanning become particularly relevant.

The general aim is to modernize the healthcare system through the design and/or the experimentation of innovative clinical, organizational and managerial models, efficaciously responding to healthcare needs, and contemporarily ensuring that the appropriate levels of benefits have been achieved, while minimizing risks and maximizing efficiency.

References