CURRICULUM VITAE

(A) Date Prepared: 15 April 2019

1. Name: **ERIC ANDREW FINKELSTEIN, PH.D, M.H.A.**

   Summary of career highlights: Dr. Finkelstein is Professor of Health Services and Systems Research at the Duke-NUS Medical School, Singapore and the Executive Director of the Lien Centre for Palliative Care. He also holds appointments at NUS School of Public Health and Duke University Global Health Institute. His research focuses on the economic causes and consequences of health behaviors, with a primary emphasis on the use of traditional and behavioral economic incentives to influence behaviors in ways to improve the public's health. Recent research also focuses on studies to better understand the complicated decisions that revolve around end of life care. He has published over 200 manuscripts and 2 books in these areas, and also successfully commercialized an Obesity Cost Calculator for employers and insurers. Based on google scholar, he has an h-index of 57 and his publications have been cited over 44,000 times, including in the landmark Supreme Court decision upholding the U.S. Affordable Care Act (aka Obamacare). He was included in the list of the World's Most Highly Cited Researchers in 2015, 2016 and 2017 by Thomson Reuters and Clarivate Analytics.

2. Institution of primary appointment: **Duke-NUS Medical School**

3. Secondary appointment(s), if any (include clinical faculty appointment with NUS if applicable):
   - Duke University, Global Health Institute;
   - National University of Singapore, Saw Swee Hock School of Public Health.

4. Present rank(s) and title(s):
   - Executive Director, Lien Centre for Palliative Care
   - Professor in Health Services and Systems Research Program, Duke-NUS Medical School, Singapore;
   - Director of Research, NUS Institute for Health in Asia (NIHA);
   - Professor, Saw Swee Hock School of Public Health, National University of Singapore;
   - Research Professor, Global Health Institute, Duke University.

5. Medical Licensure: **NA**

6. Specialty certification(s) and dates: **NA**

7. Date of birth: **March 26, 1970**

8. Citizen of: **United States of America**

9. Education

Major	**Institution**	**Date (Year)**	**Degree**
Math/Economics	U. of Michigan, Ann Arbor, MI	1991	B.A.
Economics	U. of Washington, Seattle, WA	1996	M.A.
Economics	U. of Washington, Seattle, WA	1998	Ph.D.
Health Admin.	U. of Washington, Seattle, WA	1999	M.H.A.

10. Professional Society Memberships:
    - International Society for Pharmacoeconomics and Outcomes Research (ISPOR) Singapore;
    - The Obesity Society, USA.
    - Society for Medical Decision Making (SMDM)

11. Professional training and academic career (chronologically, beginning with first postgraduate position):

Institution	Position/Title	Dates
University of Washington, Seattle	Lead Teaching Assistant (TA), Micro & Macroeconomics	1995 - 1996
University of Washington, Seattle	Lead Teaching Assistant (TA)	1996 - 1998
University of Washington, Seattle	Instructor, Advanced Microeconomics	1998
RTI International	Senior Health Economist	1999 - 2006
RTI International	Director, Public Health Economics Program	2006 - 2007
Duke University	Visiting Instructor, Health Economics	2000 - 2007
University of North Carolina, Center for Health Promotion and Disease Prevention	Research Fellow	2008 - 2012
Duke-NUS Medical School	Deputy Director	2009 - 2012
Duke-NUS Medical School	Associate Professor	2009 - 2013
Duke University, Global Health Institute	Associate Professor of Research	2009 - 2013
National University of Singapore Saw Swee Hock School of Public Health	Associate Professor	2012 - 2013
National University of Singapore Initiative to Improve Health in Asia (NIHA)	Director of Research	2012 - Date
Lien Centre for Palliative Care	Executive Director	2012 - Date
Duke-NUS Medical School	Professor	2013 - Date
National University of Singapore Saw Swee Hock School of Public Health	Professor	2013 - Date
Duke University, Global Health Institute	Professor of Research	2013 - Date

(B) Publications in Peer Reviewed Journals (cited by 41,814, h-index 58, i10-index 144)

1. Verghese N, Barrenetxea J, Bhargava Y, Agarwal S, **Finkelstein E.A.** (2019) Government Pharmaceutical pricing strategy in the Asia-Pacific region: an overview. *Journal of Market Access and Health Policy.* 2019 Apr; doi 10.1080/20016689
2. Krishnan A, **Finkelstein E.A.,** Levine E, Foley P, Askew S, Steinberg D, Bennett GG. (2019). Weight Gain Prevention in Primary Care Practice: Cost and Cost-effectiveness Analysis. *Journal of Medical Internet Research.* 2019 Apr; doi 10.2196/12201
3. **Finkelstein E.A.**, Verghese N.R. (2019) Incremental cost-effectiveness of evidence-based non-surgical weight loss strategies. *Clinical Obesity.* 2019 Apr; 9(2):e12294.
4. Ozdemir S, Jafar TH, Choong LHL, **Finkelstein E.A.** (2019) Family dynamics in a multi-ethnic Asian society: comparison of elderly CKD patients and their family caregivers experience with medical decision making for managing end stage kidney disease. *BMC Nephrology*, 2019 Mar; 20(1):73.
5. Zhen C, **Finkelstein E.A.,** Karns S.A., Leibtag E., Zhang C. (2019). Scanner Data-Based Panel Price Indexes. *American Journal of Agricultural Economics.* 2019 Jan; 101(1):311-329
6. Ang FLJ, Agarwal S, **Finkelstein E.A.,** (2019) Pilot randomized controlled trial testing the influence of front-of-pack sugar warning labels on food demand. *BMC Public Health* 2019 Feb 7; 19(1):164
7. Tham, E., Tan, P.T., Loo, E., Goh, A., Teoh, O.H., Yap, F., Tan, K.H., Godfrey, K., Van Bever, H., Lee, B.W., **Finkelstein, E.A.**, Chong, Y.S., Shek, L. (2019). Early childcare enrolment is a risk factor for transient early wheeze and persistent wheeze but not late onset wheeze. *Pediatric Allergy and Immunology*. 2019 Feb; 30(1):122
8. Perlman, A., Forgerite, S.G., **Finkelstein, E.A.** et al (2018). Efficacy and Safety of Massage for Osteoarthritis of the Knee: a Randomized Clinical Trial. *Journal of General Internal Medicine* 2018 Dec 12, doi 10.1007/s11606
9. Tyagi S, Koh GC, Nan L, Tan KB, Hoenig H, Matchar DB, Yoong J, **Finkelstein E.A.,** Lee KE, Venketasubramanian N, Menon E, Chan KM, De Silva DA, Yap P, Tan BY, Chew E, Young SH, Ng YS, Tu TM, Ang YH, Kong KH, Singh R, Merchant RA, Chang HM, Yeo TT, Ning C, Cheong A, Ng YL, Tan CS. (2018) Healthcare Utilization and cost trajectories post-stroke: role of caregiver and stroke factors. *BMC Health Services Research.* 2018 Nov 22; 18(1):188
10. Malhotra, C., Sim, D., Jaufeerally, F.R., **Finkelstein, E.A.** (2018). Associations between understanding of current treatment intent, communication with health care providers, preferences for invasive life-

sustaining interventions and decisional conflict: Results from a survey of patients with advanced heart failure in Singapore. *BMJ Open*. 2018 Sep 19; 8 (9):e021688

11. Holloway EE, Constantinou M, Xie J, Fenwick EK, **Finkelstein E.A**., Man REK, Coote M, Jackson J, Rees G, Lamoureux EL. Improving eye care in residential aged care facilities using the Residential Ocular Care (ROC) model: study protocol for a multicentered, prospective, customized, and cluster randomized controlled trial in Australia. *BMC* 2018 Nov 26;19(1):650
12. Ozdemir S. & **Finkelstein, E.A.** (2018). Cognitive Bias: The Downside of Shared Decision Making. *JCO Clinical Cancer Informatics.* 2018 Nov; 2:1-10
13. Malhotra C, Foo R, Singh R, Ozdemir S, Teo I, Sim D, Jaufeerally FR, Aung T, Yeo KK, Nadkarni N, **Finkelstein, E.A**. (2018). Study protocol for a cohort study of patients with advanced heart failure in Singapore. *BMJ Open*. 2018 Sep 17; 8(9):e022248
14. Tyagi, S., Koh, G.C.H.,Nan, L.,Tan, K.B., Hoeing, H.,Matcher, D.B., Yoong, J.,**Finkelstein, E.A.**,Lee, K.E.,Venketasubramaniam, N., Menon,E.,Chan, K.M.,De Silva, D.A., Yap, P., Tan, B.Y.,Chew, E., Sherry, H.Y., Ng, Y.S., Tu, T.M., Ang, Y.H.,Kong, K.H., Singh, R., Merchant, R.A., Chang, H.M., Yeo, T.T., Ning, C., Cheong, A., Ng, Y.L., Tan, C.S. (2018) Can caregivers report their care recipients' post-stroke hospitalization and outpatient visits accurately? Findings of an Asian prospective stroke cohort. *BMC Health Services Research.* 2018 Oct 25; 18(1):817
15. Seah S.S.Y., Rebello S.A, Tai B.C., Tay Z., **Finkelstein, E.A.**, van Dam, R.M. (2018). Impact of tax and subsidy framed messages on high- and lower-sugar beverages sold in vending machines: a randomized crossover trial. *International Journal of Behavioral Nutrition and Physical Activity.* 2018 Aug 13; 15(1):76.
16. Palmer K., Saha C., Phillips E., Krishnan A., Foster G., **Finkelstein, E.A.**, Wojtanowski A. Marrero D. (2018). The Two-Year Outcomes and Cost Effectiveness of a Commercial Weight Loss Program for the Prevention of Type 2 Diabetes among People with Prediabetes. *Endocrinology, Diabetes and Obesity*. 2018, 1(1):6.
17. **Finkelstein, E.A.**, Ozdemir S., Malhotra C., Tazeen H. Jafar, Lina, H.L. Choong & Sheryl, S.W. Gan (2018). Understanding Factors That Influence the Demand for Dialysis among Elderly in a Multi-Ethnic Asian Society. *Health Policy.* 2018 Jun 27. pii: S0168-8510(18)30189-1.
18. Chen Zhen, **Finkelstein, E.A**., Shawn A. Karns, Ephraim S. Leibtag & Zhang Chenhua (2018). Scanner Data-based panel price indexes. *American Journal of Agricultural Economics*. 0(0): 1–19.
19. Tan, E.G.F., Teo I, **Finkelstein, E.A**. & Chan, C.M. (2018). Determinants of Regret in Elderly Dialysis Patients. *Nephrology.* 2018 May 7 doi: 10.1111/nep.13400.
20. Teo I, Singh R, Malhotra C, Ozdemir S, Dent RA, Kumarakulasinghe NB, Yeo WL, Cheung YB, Malhotra R, Kanesvaran R, Yee ACP, Chan N, Wu HY, Chin SM, Allyn HYM, Yang GM, Neo PSH, Nadkarni NV, Harding R, **Finkelstein E.A.** (2018). Cost of Medical Care of Patients with Advanced Serious Illness in Singapore (COMPASS): prospective cohort study protocol. *BMC Cancer*. Apr 23;18(1):459.
21. **Finkelstein, E.A.**, Wenying Li, Grace Melo, Kiersten Strombotne & Chen Zhen. (2018). Identifying The Effect of Shelf Nutrition Labels on Consumer Purchases, Results of a Natural Experiment and Consumer Survey. *American Journal of Clinical Nutrition.* 107(4):647-651
22. Sloan R.A., Kim Y., Sahasranaman A., Müller-Riemenschneider F., Biddle S., **Finkelstein, E.A.** (2018). The influence of a consumer-wearable activity tracker on sedentary time and prolonged sedentary bouts: secondary analysis of a randomized controlled trial. *BMC Research Notes.* 11(1):189
23. Jafar TH, Tan NC, Allen JC, **Finkelstein E.A.**, Goh P, Moey P, Quah JHM, Hwang SW, Bahadin J, Thiagarajah AG, Chan J, Kang G, Koong A., (2018). Management of hypertension and multiple risk factors to enhance cardiovascular health in Singapore: The SingHypertension cluster randomized trial. *Trials*. 2018 Mar 14;19(1):180.
24. Alex R. Cook, Xiahong Zhao, Mark, I.C., Chen & **Finkelstein, E.A.** (2018). Public preferences for interventions to prevent emerging infectious disease threats: A discrete choice experiment. *BMJ Open.* 8(2):e017355
25. Daniel S.W. Ting, Carol, Y.L., Cheung, **Finkelstein, E.A.** & T.Y. Wong. (2017). Development and Validation of a Deep Learning System for Diabetic Retinopathy and related Eye Diseases using Retinal Images from Multi-ethnic Populations with Diabetes, *JAMA.* 318(22):2211-2223
26. Chia YMF, Teng TK, Tan ESJ, Tay WT, Richards AM, Chin CWL, Shimizu W, Park SW, Hung CL, Ling LH, Ngarmukos T, Omar R, Siswanto BB, Narasimhan C, Reyes EB, Yu CM, Anand I, MacDonald MR, Yap J, Zhang S, Finkelstein EA, Lam CSP. Disparity Between Indications for and Utilization of Implantable

Cardioverter Defibrillators in Asian Patients With Heart Failure. *Circ Cardiovasc Qual Outcomes*. 2017 Nov;10(11).

27. Bilger M, Shah M, Tan, N.C., Howard, K.L., Xu H.Y., Lamoureux EL & **Finkelstein, E.A.** (2017). Trial to Incentivise Adherence for Diabetes (TRIAD): study protocol for a randomised controlled trial. *Trials*. 18(1):551.
28. Ozdemir S., Hong King Wu, **Finkelstein, E.A.** & Tina T. Wong. (2017). Parents' Views on their Children's Use of Eye Drops and Willingness to Accept a New Sustained-Release Subconjunctival Injection. *Clinical Ophthalmology*. 1903-1909
29. **Finkelstein, E.A.** (2017). Cost effectiveness of obesity interventions: Will we know it when we see it? *Pediatrics*. 140(3). pii: e20171916
30. Nguyen, H.V., **Finkelstein, E.A.**, Mital, S., & Gardner, D. S. (2017). Incremental Cost-Effectiveness of Algorithm-Driven Genetic Testing Versus no Testing for Maturity Onset Diabetes of the Young (Mody) in Singapore. *Journal of Medical Genetics*. 54(11):747-753
31. Butte, N. F., Hoelscher, D. M., Barlow, **Finkelstein E.A.** & Gonzalez. (2017). Efficacy of a community- versus primary care–centered program for childhood obesity: TX CORD RCT. *Obesity*. 25(9):1584-1593
32. Jafar, T.H., Jehan, I., de Silva, H.A., Naheed, A., Gandhi, M., Assam, P., **Finkelstein, E.A.**, Quigley, H.L., Bilger, M., Khan, A.H. & Clemens, J.D. (2017). Multicomponent intervention versus usual care for management of hypertension in rural Bangladesh, Pakistan and Sri Lanka: study protocol for a cluster randomized controlled trial. *Trials*. *18*(1):272. PMCID: PMC5469065
33. Nguyen H.V., Bose, S., Mital S, **Finkelstein, E.A.** & Koh M.S. (2017). Is bronchial thermoplasty cost-effective as treatment for problematic asthma patients? Singapore's perspective on a global model. *Respirology.* 22(6):1102-1109. **Won Fukuchi Award *for* best original research paper published in the journal in 2017.**
34. **Finkelstein, E.A.**, Kwang-Wei Tham, Benjamin, A. & Haaland, Aarti Sahasranaman. (2017). Applying economic incentives to increase effectiveness of an outpatient weight loss program (TRIO) – A randomized controlled trial. *Social Science & Medicine.* 185, 63-70
35. Ozdemir, S., Wong, T.T., Allingham, R.R. & **Finkelstein, E.A.** (2017). Predicted patient demand for a new delivery system for glaucoma medicine. *Medicine,* 96(15). PMCID: PMC5403112
36. Ozdemir S., Bilger M. & **Finkelstein, E.A.** (2017). Stated uptake of physical activity rewards programmes among active and insufficiently active full time employees. *Applied Health Economics and Health Policy.* 647-656. PMID: 28434180
37. Vedanthan, R., Kamano, J.H., Lee, H., Andama, B., Bloomfield, G.S., DeLong, A.K., Edelman, D., **Finkelstein, E.A.**, Hogan, J.W., Horowitz, C.R. & Manyara, S. (2017). Bridging Income Generation with Group Integrated Care for cardiovascular risk reduction: Rationale and design of the BIGPIC study. *American Heart Journal.* 188:175-185
38. **Finkelstein, E.A.**, Ozdemir S., Malhotra C., Jafar T.H., Choong H.L. & Suhardjono. (2017). Identifying factors that influence physicians' recommendations for dialysis and conservative management in Indonesia. *Kidney International Reports.* 2(2):212-218
39. Malhotra C., Ling X., Ozdemir S., Kanesvaran R., Chan No. & **Finkelstein, E.A.** (2016). A comparision of attitudes toward length and quality of life between community dwelling older adults and patients with advanced cancer. *Psycho-Oncology.* 26(10):1611-1617
40. Bilger M., Kruger E.J. & **Finkelstein, E.A.** (2016). Measuring Socioeconomic Inequality in Obesity: Looking Beyond the Obesity Threshold. *Health Econ.* 26(8):1052-1066. PMCID: PMC5516143
41. **Finkelstein, E.A.**, Haaland B., Bilger M., Sahasranaman A., Sloan R.A., Nang E.E.K. & Evenson, K.R. (2016). Effectiveness of activity trackers with and without incentives to increase physical activity (TRIPPA): a randomized controlled trial. *The Lancet Diabetes & Endocrinology. 4*(12):983-995.
42. Nguyen H.V., Tan G.S., Tapp R.J., Mital S., Ting D., Wong T.H., Tan C., Laude A., Shyong T.E., Tan N.C., **Finkelstein, E.A.**, Wong T.Y. & Lamoureux E.L. (2016). Cost Effectiveness of A National Telemedicine Diabetic Retinopathy Screening Program in Singapore. *Ophthalmology. 123*(12):2571-2580.
43. Bilger M., Wong T.T., Howard K.L., Lee J.Y., Toh A.N., John G., Lamoureux E.L. & **Finkelstein, E.A.** (2016). Study on Incentives for Glaucoma Medication Adherence (SIGMA). A Randomized controlled trial to increase glaucoma medication adherence using value pricing: study protocol for a randomized controlled trial. *Trials. 17*(1):316. PMCID: PMC4947326
44. W Tobe S. & **Finkelstein, E.A.** (One of 115 listed collaborators). Global Alliance for Chronic Diseases Hypertension Research Teams with the World Hypertension League. (2016) The Global Alliance for

Chronic Diseases Supports 15 Major Studies in Hypertension Prevention and Control in Low-and Middle-Income Countries. *J Clin Hypertens. Greenwich. 18*(7):600-605
45. Malhotra C., Bilger M., Liu J. & **Finkelstein, E.A.** (2016). Barriers to breast and cervical cancer screening in Singapore: A mixed methods analysis. *Asia Pacific Journal of Cancer Prevention. 17*(8):3887-3895
46. Malhotra C., Sim D.K., Jaufeerally F., Vikas N.N., Sim G.W., Tan B.C., Ng C.S, Tho P.L., Lim J., Chuang C.Y, Fong F.H, Liu J. & **Finkelstein, E.A.** (2016). Impact of advance care planning on care of patients with heart failure: Study protocol for a randomized controlled trial. *Trials. 17*(1):285. PMCID: PMC4902978
47. Jafar T.H., de Silva A., Naheed A., Jehan I., Liang F, Assam P.N., Legido-Quigley H., **Finkelstein, E.A.**, Ebrahim S., Hameed A. & COBRA-BPS Study Group. (2016). Control of Blood Pressure and Risk Attenuation - A Public Health Intervention in rural Bangladesh, Pakistan, and Sri Lanka: Feasibility Trial Results. *Journal of Hypertension. 34*(9):1872-1881
48. Malhotra C., Wong G.C.S., Tan B.C., Ng C.S.H., Lee N.C., Lau C.S.L., Sim D.K.L. & **Finkelstein, E.A.** (2016). Living with heart failure: Perspectives of patients from an Asian setting. *Proceedings of Singapore Healthcare. 25*(2):92-97
49. Ding D., Lawson K.D., Kolbe-Alexander T., **Finkelstein, E.A.**, Katzmarzyk P.T., Mechelen W. & Pratt M., Lancet Physical Activity Series 2 Executive Committee. (2016). The Economic Burden of Physical Inactivity: A Global Analysis of Major Non-Communicable Diseases. *The Lancet. 388*(10051):1311-1324
50. Nguyen H.V., Tan G.S., Tapp R.J., Mital S., Ting D., Wong T.H., Tan C., Laude A., Shyong T.E., Tan N.C., **Finkelstein, E.A.**, Wong T.Y. & Lamoureux E.L. (2016). Cost Effectiveness of A National Telemedicine Diabetic Retinopathy Screening Program in Singapore. *Ophthalmology. 123*(12):2571-2580
51. Nguyen V.H., Bose S. & **Finkelstein, E.A.** (2016). Incremental Cost-Utility of Sevelamer Relative to Calcium Carbonate for Treatment of Hyperphosphatemia among Pre-Dialysis Chronic Kidney Disease Patients. *BMC Nephrology. 17*(1):45. PMCID:PMC4848865
52. Dong D., Ozdemir S., Bee Y.M., Toh S.A., Bilger M. & **Finkelstein, E.A.** (2016). Measuring High-risk Patients' Preferences for Pharmacogenetic Testing to Reduce Severe Adverse Drug Reaction: A Discrete Choice Experiment. *Value in Health.* 19(6)767-775
53. **Finkelstein, E.A.**, Malhotra C., Chay J., Chopra A., Kanesvaran R. & Ozdemir S. (2016). Impact of treatment subsidies and cash pay-outs on treatment choices at the end of life. *Value in Health. 19*(6):788-794
54. **Finkelstein, E.A.**, Mansfield C., Wood D., Rowe B., Chay J. & Ozdemir S. (2016). Tradeoffs between Civil Liberties and National Security: A Discrete Choice Experiment. *Contemporary Economic Policy.* 35(2): 292-311
55. Yong K.L., Nguyen H.V., Cajucom-Uy H.Y., Foo V., Tan D., **Finkelstein, E.A.** & Mehta J.S. (2016). Cost Minimization Analysis of Precut Cornea Grafts in Descemet's Stripping Automated Endothelial Keratoplasty. *Medicine. 95*(8):e2887. PMCID: PMC4779024
56. Luo N., Wang X., Ang M., **Finkelstein, E.A.**, Aung T., Wong T.Y. & Lamoureux E. (2015). A Vision "Bolt-On" Item Could Increase the discriminatory Power of the EQ-5D Index Score. *Value Health. 18*(8):1037-1042
57. Corso P., **Finkelstein, E.A.**, Miller T., Fiebelkorn I. & Zaloshnja E. (2015). Incidence and lifetime costs of injuries in the United States. *Injury Prevention. 21*(6):434-440
58. Flynn T.N., Bilger M., Malhotra C. & **Finkelstein, E.A.** (2015). Are Efficient Designs Used In Discrete Choice Experiments Too Difficult For Some Respondents? A Case Study Eliciting Preferences for End-Of-Life Care. *PharmacoEconomics. 34*(3):273-284
59. Malhotra C., Chan N., Zhou J., Dalager H.B. & **Finkelstein, E.A.** (2015). Variation in physician recommendations, knowledge and perceived roles regarding provision of end-of-life care. *BMC Palliative Care. 14*(1):52. PMCID:PMC4623295
60. Chen P.Y., **Finkelstein, E.A.**, Ng M.J., Yap F., Yeo S.H., Rajadurai V.S., Chong Y.S., Gluckman, P.D., Saw S.M., Kwek Y.C. & Tan K.H. (2015). Incremental Cost-effectiveness Analysis of Gestational Diabetes Mellitus Screening Strategies in Singapore. *Asia-Pacific Journal of Public Health. 28*(1):15-25
61. Epstein L.H., **Finkelstein, E.A.**, Katz D., Jankowiak N., Pudlewski C. & Paluch R.A. (2015). Effects of nutrient profiling and price changes based on NuVal® scores on food purchasing in an on-line experimental supermarket. *Public Health Nutrition. 19*(12):2157-2164

62. Dong D., Tan-Koi W.C., Gim G.T., **Finkelstein, E.A.** & Sung C. (2015). Cost-effectiveness analysis of genotyping for HLA-B*5801 and an enhanced safety program in gout patients starting allopurinol in Singapore. *Pharmacogenomics. 16*(16):1781-1793
63. Dong D., Bilger M., Van Dam R.M. & **Finkelstein, E.A.** (2015). Consumption of Specific Foods and Beverages and Excess Weight Gain Among Children And Adolescents. *Health Affairs. 34*(11):1940-1948
64. **Finkelstein, E.A.**, Bilger M., Flynn T. & Malhotra C. (2015). Preferences for end-of-life care among community-dwelling older adults and patients with advanced cancer: A discrete choice experiment. *Health Policy.* 119(11):1482-1489
65. Lamoureux E., Mcintosh R., Constantinou M., Fenwick E., Xie J., Casson R., **Finkelstein, E.A.**, Goldberg I., Healey P, Thomas R., Ang G.S., Pesudovs K. & Crowston J. (2015). The Glaucoma Initial Treatment Study: Comparing the effectiveness of selective laser trabeculoplasty with topical medication as initial treatment: study protocol for a randomized controlled trial. *Trials. 16*:406. PMCID:PMC4567808
66. Epstein L.H., **Finkelstein, E.A.**, Raynor H., Nederkoorn C., Fletcher K.D., Jankowiak N. & Paluch R.A. (2015). Experimental analysis of the effect of taxes and subsides on calories purchased in an on-line supermarket. *Appetite. 95:245-251*
67. Boh C., Li H.H., **Finkelstein, E.A.**, Haaland B.A., Xin X.H., Yap S., Pasupathi Y. & Ong M.E. (2015). Factors Contributing to Inappropriate Visits of Frequent Attenders at the Emergency Department of a Tertiary Hospital. *Academic Emergency Medicine. 22*(9):1025-1033
68. Malhotra C., Farooqui M.A., Kanesvaran R., Bilger M. & **Finkelstein, E.A.** (2015). Comparison of preferences for end-of-life care among patients with advanced cancer and their caregivers: A discrete choice experiment. *Palliative Medicine. 29*(9):842-850
69. Goodwin N.J., O'Farrell S.E., Jagoe K., Rouse J., Roma E., Biran A. & **Finkelstein, E.A.** (2015). The Use of Behaviour Change Techniques in Clean Cooking Interventions to Achieve Health, Economic and Environmental Impact. A review of the evidence and scorecard of effectiveness. *Journal of Health Communication. 20* (sup1):43-54
70. **Finkelstein, E.A.**, Sahasranaman A., John G., Haaland B.A., Bilger M., Sloan R.A., Khaing N.E. & Evenson K.R. (2015). Design and baseline characteristics of participants in the Trial of Economic Incentives to Promote Physical Activity (TRIPPA): A randomized controlled trial of a six month pedometer program with financial incentives. *Contemp Clin Trials. 41*:238-247
71. Lai H., Choong C.V., Fook-Chong S., Ng Y.Y., **Finkelstein, E.A.**, Haaland B., Goh E.S., Leong B.S, Gan H.N., Foo D., Tham L.P., Charles R., Ong M.E & PAROS study group. (2015). Interventional strategies associated with improvements in survival for out-of-hospital cardiac arrests in Singapore over 10 years. *Resuscitation. 89*:155-161
72. Tan T.E., Peh G.S.L., **Finkelstein, E.A.** & Mehta J.S. (2015). A practical model for economic evaluation of tissue-engineered therapies. *WIREs Systems Biology and Medicine. 7*(2):91-100
73. Ang M., Nguyen H.V., Sieh Y.K., Shu C., Chee S.P. & **Finkelstein, E.A.** (2015). Cost-Effectiveness of Alternative Strategies for Interferon-gamma Release Assays and Tuberculin Skin Test in Tuberculous Uveitis. *British Journal of Ophthalmology. 99*(7):984-989
74. Hoelscher D.M., Butte N.F., Vandewater E.A., Sharma S.V., Huang T., **Finkelstein, E.A.**, Pont S., Sacher P., Byrd-Williams C., Oluyomi A., Durand C., Li L.L. & Kelder S.H. (2015). Incorporating Primary and Secondary Prevention Approaches to Address Childhood Obesity Prevention and Treatment in a Low-Income, Ethnically Diverse Population: Study Design and Demographic Data from the Texas Child Obesity Research Demonstration (TX CORD) Study. *Childhood Obesity. 11*(1):71-91. PMCID:PMC4696423
75. **Finkelstein, E.A.**, Strombotne K.L., Zhen C. & Epstein L.H. (2014). Food prices and obesity: A review. *Advances in Nutrition. Nov 14;5* (6):818-821
76. **Finkelstein, E.A.** & Kruger E. (2014). Meta- and Cost-Effectiveness Analysis (CEA) of Commercial Weight Loss Strategies. *Obesity. 22*(9):1942-1951
77. **Finkelstein, E.A.** (2014). How big of a problem is obesity? *Surg Obes Relat Dis. 10*(4):569-570
78. Tan T.E., Peh S.L., George B.L., Cajucom-Uy H.Y., Dong D., **Finkelstein, E.A.** & Mehta J.S. (2014). A Cost-Minimization Analysis of Tissue-Engineered Constructs for Corneal Endothelium Transplantation. *PLOS ONE. 9*(6):e100563. PMCID: PMC4065108
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188. **Finkelstein, E.A**., Fiebelkorn, I.C., Corso, P. S. & Binder, S.C. (2004). Medical expenditures attributable to injuries in the United States, 2000. *Journal of the American Medical Association.* 291, 817–818; *Morbidity and Mortality Weekly Report.* 53(1), 1–4
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192. Max, W., Rice, D.P., **Finkelstein, E.A.** & Bardwell, R.A. & Leadbetter S. (2004). The economic toll of intimate partner violence against women in the United States. *Violence and Victims. 19*(3), 259–272.
193. Mobley, L.R., **Finkelstein, E.A**., Khavjou, O.A. & Will, J.C. (2004). Spatial analysis of body mass index and smoking behavior among WISEWOMAN participants. *Journal of Women's Health. 13*(5), 519–528
194. Saver, B. G., Ritzwoller, D.P., Maciosek, M., Goodman, M. J., Conrad, D.A., **Finkelstein, E.A.** & Cain, K.C. (2004). Does payment drive procedures? Payment for specialty services and procedure rate variations in three HMOs. *American Journal of Managed Care. 10*(3), 229–237
195. Will, J.C., Farris, R.P., Sanders, C.G., Stockmyer, C.K. & **Finkelstein, E.A**. (2004). Health promotion interventions for financially disadvantaged women: An overview of the WISEWOMAN projects. *Journal of Women's Health. 13*(5), 484–502
196. **Finkelstein, E.A**., Bray, J.W., Chen, H., Larson, M.J., Miller, K., Tompkins, C. &Manderscheid, R. (2003). Prevalence and costs of major depression among elderly claimants with diabetes. *Diabetes Care. 26*(2), 415–420
197. **Finkelstein, E.A.** & Corso, P.S. (2003). Cost-of-illness analyses for policy making: A cautionary tale of use and misuse. *Expert Review of Pharmacoeconomics and Outcomes Research. 3*(4), 367–369
198. **Finkelstein, E.A.**, Fiebelkorn, I.C. & Wang, G. (2003). National medical expenditures attributable to overweight and obesity: How much and who's paying? *Health Affairs* (Web exclusive). W3–219–226
199. **Finkelstein, E.A**., Kosa, K. M. & Brown D.R. (2003). Use of incentives to motivate health behaviors among employees. *Gender Issues. 21*(3), 50–59
200. **Finkelstein, E.A**., Troped, P.J., Will, J.C. & Palombo, R. (2002). Cost-effectiveness of a cardiovascular disease risk reduction program aimed at financially vulnerable women: The Massachusetts WISEWOMAN project. *Journal of Women's Health. 11*(6), 519–526
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(B) Publications in Non-peer reviewed journals:

1. Reviews and chapters in books:
    a. Miller T., **Finkelstein, E.A.**, Zaloshnja E. & Hendrie D. The Cost of Child and Adolescent Injuries and The Savings from Prevention, in K. Liller (Ed.), *Injury Prevention for Children and Adolescents: Research, Practice, and Advocacy, Second Edition*, Washington DC: American Public Health Association, 21-81, 2012
    b. **Finkelstein, E.A.**, and Yang H.K., Obesity and Medical Costs, in The Oxford Handbook of Social Science of Obesity, by Cawley J., Oxford University Press, April, 2011.
    c. **Finkelstein, E.A.**, Hoerger T.H., *Can Fiscal Approaches Help to Reduce Obesity Risk,* in *Obesity Epidemiology From Aetiology to Public Health,* Edited by Crawford D., Jeffery R., Ball K. and Brug J., Oxford University Press, London, November, 2010.
    d. IOM (including **Finkelstein, E.A.**) 2009. *Local Government Actions to Prevent Childhood Obesity.* Washington, DC: The National Academies Press.
    e. Miller T., **Finkelstein, E.A.**, Zaloshnja E., & Hendrie D. (2006). The cost of child and adolescent injuries and the savings from prevention, in K. Liller (Ed.), *Injury prevention for children and adolescents: Research, practice, and advocacy*. Washington, DC: American Public Health Association.
    f. **Finkelstein, E.A.**, Bray J.W., Larson M. J., Miller K., Tompkins C., Keme A., & Manderscheid R. (2003). Prevalence of and payments for mental health and substance abuse conditions in public and private sector health plans. In R. Manderscheid and M. Henderson (Eds.), *Mental health, United States, 2002*. Washington, DC: U.S. Government Printing Office.

2. Authored Books
    a. **Finkelstein, E.A**., & Zuckerman L. (2008). *The fattening of America.* NJ: John *Wiley & Sons, Inc.*
    b. **Finkelstein, E.A.**, *Corso* P.S., & M*i*ller T.R. (2006). *The incidence and economic burden of Injuries in the United States.* Oxford University Press.

3. Editorials and Commentaries
    a. **Finkelstein, E.A.**(Nov 13, 2018) Will fee benchmarks stem S'pore's rising tide of healthcare inflation? TODAY Online
    b. **Finkelstein, E.A.** (Oct 13, 2018) *Lancet Commission on the Value of Death.*
    c. **Finkelstein, E.A.** (July 31, 2018). *When doctors and caregivers do not help patients make the best decisions.* TODAY.
    d. **Finkelstein, E.A.** (March 31, 2016). *How much would you pay to extend your life by a year?* The Straits Times.
    e. **Finkelstein, E.A.** (November 18, 2013). *Lessons from Obamacare for Singapore*. TODAY.
    f. **Finkelstein, E.A.** (April 24, 2013). *A better way to spend on healthcare.* TODAY.
    g. **Finkelstein, E.A**. (May 18, 2012). *Don't discard 3M health model.* The Straits Times.

(C) Presentations (from 2015 to current, most recent first)

1. **Finkelstein, E.A.,** (2019, April) *Value-Based Care in an Academic Institution (Beyond Quality to Value),* Presented at SGH 23rd Annual Scientific Meeting, Singapore.
2. **Finkelstein, E.A.,** (2019, April) *Randomized Control Trial Evaluating the Effects of the Implicit Taxes on the Purchasing of the High-Calories' Products,* Presented at SGH 23rd Annual Scientific Meeting, Singapore.
3. **Finkelstein, E.A.,** (2019, April) *Using the NUSMart Web-Based Grocery Store to Improve Diet Quality Among Singaporean,* Presented at NMRC Awards Ceremony and Research Symposium 2019, Singapore.
4. **Finkelstein, E.A.,** (2019, March) *Using Observational and Experimental Studies to Improve Diet Quality: A Research Agenda,* Presented at Duke Global Health Institute, Durham, North Carolina.

5. **Finkelstein, E.A.,** (2018 December) *5 Steps to Develop a Value Proposition for a New Health Innovation,* Presented at ETH, Zurich, Switzerland.
6. **Finkelstein, E.A.,** (2018 December) *Female Community Health Volunteer Led Lifestyle Intervention is a Highly Cost-Effective, Low-Cost and Scalable Solution for Blood Pressure Control in Nepal,* Lifestyle 2019 Scientific Session, Katmandu, Nepal.
7. **Finkelstein, E.A.**, (2018 December). *Building the Business Case for Health Innovations: Examples and Best Practices.* Presented at Medtronic Asia Pacific Health Economics and Reimbursement Summit, *Singapore*
8. **Finkelstein, E.A.**, (2018 December). *Why Good Deaths Are Hard To Find.* Presented at Cipto Mangunkusumo Hospital RSCM, *Jakarta, Indonesia.*
9. **Finkelstein, E.A.** (November 2018). *Key Consideration in Health Technology Assessment*. Presented at Asia Pacific Health Technology Assessment Workshop Stand-Alone Scientific Symposium, *Singapore*
10. **Finkelstein, E.A.**, (2018 October). *The cost of medicalised Death.* Presented at the Value of Death meeting Lancet Commission, *Bristol, UK*
11. **Finkelstein, E.A.**, (2018 October). *Why Good Deaths Are Hard To Find.* Presented at the National Library Singapore for Singapore Hospice Council.
12. **Finkelstein, E.A.**, (2018 October). *Six Month Results of a Randomized Controlled Trial of an Incentive-based Physical Activity Program Targeting Both Children and Adults (FIT-FAM).* Presented at the 13th Singapore Public Health & Occupational Medicine Conference in Singapore.
13. **Finkelstein, E.A.,** (2018 September). *On Value Based Health Care Delivery and Pricing.* Presented at the Hospital Management Asia 2018 Conference, *Bangkok, Thailand.*
14. **Finkelstein, E.A.,** (2018 September). *HTA Success stories from Singapore: Maximizing the value of Health services Research.* Presented at the Health Intervention and Technology Assessment Program (HITAP), *Bangkok, Thailand.*
15. **Finkelstein, E.A.,** (2018 September). *Behavioural Economics as a Tool for Chronic Disease Prevention: Theory and Evidence*. Presented at the Health Intervention and Technology Assessment Program (HITAP), *Bangkok, Thailand.*
16. **Finkelstein, E.A.,** (2018 June). *Health Technology Assessment and Pharmacoeconomics,* Presented at Centro Hospitalar Conde de S. Januário (CHCSJ)*, Macau*
17. **Finkelstein, E.A.,** (2018 June). *A Single-arm Feasibility Study of GlycoLeap, a Mobile Lifestyle Management Program for People with Type 2 Diabetes. (*Poster) Presented at the 17th International Society of Behavioral Nutrition and Physical Activity (ISBNPA 2018) Annual Meeting in Hong Kong.
18. **Finkelstein, E.A.,** (2018 June). *Encouraging Healthy Nutrition in Purchases in an Online Grocery Setting using Experimental Economics (NUSMart). (*Poster) Presented at the 17th International Society of Behavioral Nutrition and Physical Activity (ISBNPA 2018) Annual Meeting in Hong Kong.
19. **Finkelstein, E.A.,** (2018 June). *Randomized Controlled Trial of an Incentive-based Physical Activity Program targeting both Children and Adults (FIT-FAM).* (Poster) Presented at the 17th International Society of Behavioral Nutrition and Physical Activity (ISBNPA 2018) Annual Meeting in Hong Kong.
20. **Finkelstein, E.A.,** (2018 March). *Economic causes and consequences of health behaviors.* Presented at the Tianfu International Clinical Nutrition Conference, Chengdu, China.
21. **Finkelstein, E.A.,** (2018 March). *Behavioral Economics as a Tool for Chronic Disease Prevention: Theory and Evidence*. Presented at Department of Population Health Science and Policy Grand Rounds, Icahn School of Medicine at Mount Sinai, New York, USA
22. **Finkelstein, E.A.,** (2018 February). *Behavioural Economics and Biases in Decision Making: Ethical Considerations and Practical Recommendations.* Presented at the 25th Annual Conference of Indian Association of Palliative Care (IAPCON 2018) in New Delhi, India.
23. **Finkelstein, E.A.,** (2018 February). *Prognostic awareness and expected survival among advanced cancer patients in Singapore: Results from COMPASS Cohort Study.* Presented at the 25th Annual Conference of Indian Association of Palliative Care (IAPCON 2018) in New Delhi, India.
24. **Finkelstein, E.A.,** (2018 January). *Exploring the Complicated Decisions around End of Life Care: Research at the Lien Centre for Palliative Care, Singapore.* Presented at the Singapore Hospice Council/Lien Centre for Palliative Care Multi-disciplinary Forum in Singapore.
25. **Finkelstein, E.A.,** (2017 November). *Nudges for Chronic Disease Prevention*. Presented at the Future Trends Forum in Taipei, Taiwan.
26. **Finkelstein, E.A.,** (2017 October). *Nudges for Weight Management.* Presented at The Obesity,

Bariatric and Endocrine Societies (OBES) Symposium 2017 in Singapore.

27. **Finkelstein, E.A.,** (2017 October). *Using Behavioral Economics to Transform Measurement Tools into Intervention Tools.* Presented at Duke Kunshan Conference on Digital Health Science and Innovation: Partnerships between Academia and Industry in Kunshan, Jiangsu Province, China.
28. **Finkelstein, E.A.,** (2017 October). *Exploring the Complicated Decisions around End of Life Care: Research at the Lien Centre for Palliative Care, Singapore*. Presented at Cicely Saunders Institute, Department of Palliative Care, Policy and Rehbilitation London, United Kingdom
29. **Finkelstein, E.A.,** (2017 September). *Applying Behavioral Economic Principles to Design Health Interventions*. Presented at 6th Asia Pacific Primary Care Research Conference (APPCRC), Singapore.
30. **Finkelstein, E.A.,** (2017 September). *Nudges For Healthy Living*. Presented at 6th Asia Pacific Primary Care Research Conference (APPCRC), Singapore.
31. **Finkelstein, E.A.,** (2017 September). *Developing a Value Message for Health Care Innovation*. Presented at Apollo Endosurgery Inc., Austin, Texas, USA.
32. **Finkelstein, E.A.,** (2017 September). *Exploring the Complicated Decisions around End of Life Care*. Presented at University of Tennessee in Memphis, USA.
33. **Finkelstein, E.A.,** (2017 September). *Behavioral Economics as a Tool for Chronic Disease Prevention: Theory & Evidence*. Presented at University of Tennessee in Memphis, USA.
34. **Finkelstein, E.A.,** (2017 September). *An Introduction to Research and Education at the Duke-NUS Lien Centre for Palliative Care*. Presented at Duke University in Durham, USA.
35. **Finkelstein, E.A.,** (2017 September). *RWE in best practice – What Types of Evidence for what purpose. Building a Business Case for Healthcare Innovations using RWE*. Presented at APAC Real World Data Summit, Bangkok.
36. **Finkelstein, E.A.,** (2017 September). *The Emergence of RWE and Harnessing it to Support Value-Based Models*. Presented at APAC Real World Data Summit 2017, Bangkok.
37. **Finkelstein, E.A.,** (2017 July). The Value of Integration - A Health Service Perspective: *The Differential Costs of Living and Dying: Embracing Multiple Perspectives*. Presented at 12th Asia Pacific Hospice Conference (APHC 2017) – Greater Than the Sum of Its Parts, Singapore.
38. **Finkelstein, E.A.,** (2017 July). Revolutions in the Economics of Health Systems: *Understanding Factors That Influence the Demand for Marginally Life Extending Treatments: The Case of Dialysis Among Elderly Singaporeans.* Presented at 12th World Congress of the International Health Economics Association, Boston, USA.
39. **Finkelstein, E.A.,** (2017 April). *Health Technology Assessment (HTA): Budget Impact Analysis in National Essential Drug List Selection.* Presented at 6th HTAsia link MOH Workshop in Hanoi, Viet Nam.
40. **Finkelstein, E.A.,** (2017 April). New Device Interventions & Health Technology Assessment: *Predicted Patient Demand for a New Delivery System for Glaucoma Medicine.* Presented at SGH 22nd Annual Scientific Meeting, Singapore.
41. **Finkelstein, E.A.,** (2017 March). Affordable Cancer Care in Asia: *Funding spotlight - Access to palliative care.* Presented at War on Cancer session 2017 by *The Economist*, Singapore.
42. **Finkelstein, E.A.,** (2017 March). *Stated Uptake of Incentive-Based Physical Activity Rewards Programmes Among Active and Insufficiently Active Full Time Employees.* Presented at NMRC Awards Ceremony and Research Symposium 2017, Singapore.
43. **Finkelstein, E.A.,** (2016 December). *How can health care systems better support families, care-givers and community members in caring for people of all ages for who death is near?* Presented at Salzburg Global Seminar Session 562 Rethinking Care toward the End of Life in Salzburg, Austria.
44. **Finkelstein, E.A.,** (2016 November). *Behavioral Economics – Evidence for Chronic Disease Prevention?* Presented at 6th ISPAH Congress in Bangkok, Thailand.
45. **Finkelstein, E.A.,** (2016 October). *Comparing Health Systems.* Presented at 9th Healthcare Policy and Governance Programme in Singapore.
46. **Finkelstein, E.A.,** (2016 October). *Impact of treatment subsidies and cash payouts on treatment choices at the end of life.* Presented at 21st International Congress on Palliative Care in Montreal, Canada.
47. **Finkelstein, E.A.**, (2016 September). *Applications in Behavioural Economics to Reduce Risk Factors for Chronic Diseases.* Presented at Singapore International Public Health Conference in Singapore.
48. **Finkelstein, E.A.**, (2016 September). *Success Stories of Health Economics in Singapore.* Presented at

Singapore International Public Health Conference in Singapore.

49. **Finkelstein, E.A.**, (2016 September). *Old Habits Die Hard - Behavioural Economics to the Rescue.* Presented at Singapore Health & Biomedical Congress in Singapore.
50. **Finkelstein, E.A.**, (2016 September). *Using Behavioral Economics to Improve Diabetes Prevention and Treatment.* Presented at Singhealth Duke-NUS Scientific Congress 2016 in Singapore.
51. **Finkelstein, E.A.**, (2016 September). *Incremental Cost-Effectiveness of Algorithm-Driven Genetic Testing versus No Testing for Maturity Onset Diabetes of the Young (MODY) in Singapore.* Presented at ISPOR 7th Asia-Pacific Conference in Singapore.
52. **Finkelstein, E.A.**, (2016 August). *Cost-Utility of Sevelamer vs. Calcium Carbonate for Treatment of Hyperphosphatemia among Pre-Dialysis CKD Patients.* Presented at Sanofi-Aventis lecture in Singapore.
53. **Finkelstein, E.A.**, (2016 August). *Economic aspects of providing cancer care in a public health system in Singapore.* Presented at National Cancer Centre COE program in Singapore.
54. **Finkelstein, E.A.**, (2016 June). *Introduction to Behavioural Economics and Use of Incentives for Chronic Disease Prevention and Treatment.* Presented at Moi University Hospital Grand Rounds in Eldoret, Kenya.
55. **Finkelstein, E.A.**, (2016 June). *Making the Business Case for Health Innovations.* Presented at Moi University Hospital Grand Rounds in Eldoret, Kenya.
56. **Finkelstein, E.A.**, (2016 May). *Applying health economics in Asia*. Presented at FT Asia Healthcare & Life Sciences Summit Forging Frontiers for Pharmaceuticals in Singapore.
57. **Finkelstein, E.A.**, (2016 February). *Success stories of local cost-effectiveness analyses*. Presented at NMRC Awards Ceremony and Research Symposium 2016 in Singapore.
58. **Finkelstein, E.A.**, (2016 January). *Impact of treatment subsidies and cash payouts on treatment choices at the end of life*. Presented at SMDM 2nd Biennial Asia-Pacific Conference in Hong Kong.
59. **Finkelstein, E.A.,** (2015 December). *Use of Stated Preference Surveys to Quantify Preferences and Willingness to Pay for End of Life Care.* Presented at Duke Kunshan University in Kunshan, China.
60. **Finkelstein, E.A.**, (2015 November). *Using Discrete Choice Experiments to Understand Preferences and Willingness to Pay for End of Life Care.* Presented at University of Virginia in Charlottesville, Va., USA.
61. **Finkelstein, E.A.**, (2015 November). *1) The Singapore Health System 2) Preferences and willingness to pay for End of Life care in Singapore.* Presented at Emory University in Atlanta, Ga., USA.
62. **Finkelstein, E.A.**, (2015 November). *Use of Stated Preference Surveys to Quantify Preferences and Willingness to Pay for End of Life Care.* Presented at Health Services Seminar at Georgia Tech in Atlanta, Ga., USA.
63. **Finkelstein, E.A.**, (2015 November). *Behavioural Economics – Evidence for Chronic Disease Prevention*. Presented at University of Georgia, Athens, Ga., USA.
64. **Finkelstein, E.A.**, (2015 November). *Behavioural Economics – Evidence for Chronic Disease Prevention*. Presented at Research Seminar in U. Of Pennsylvania Prevention Research Center in Philadelphia, Pa., USA.
65. **Finkelstein, E.A.**, (2015 November). *Behavioural Economics – Evidence for Chronic Disease Prevention*. Presented at Temple University in Philadelphia, Pa., USA.
66. **Finkelstein, E.A.**, (2015 October). *Behavioural Economics – Evidence for Chronic Disease Prevention.* Presented at NUS-Cambridge Joint Research Symposium in Singapore.
67. **Finkelstein, E.A.**, (2015 October). *Demystifying Health Economics – Facilitating Access to Quality Health Products.* Presented at CoRE Scientific Conference in Singapore.
68. **Finkelstein, E.A.**, (2015 September). *Behavioural Economics – Evidence for Chronic Disease Prevention.* Presented at NUS Social Service Research Seminar Series in Singapore.
69. **Finkelstein, E.A.**, (2015 September). *FIVE Steps to develop a value proposition FOR health innovations: Examples from Paediatric Obesity and Atopic dermatitis.* Presented at Nestlé Nutrition Institute Symposium: Cost effectiveness analysis in allergy prevention in Singapore.
70. **Finkelstein, E.A.**, (2015 August). *End of Life Treatment Choices: Do We Get it Right?* Presented at IARU ALH Steering Committee Meeting in Copenhagen, Denmark.
71. **Finkelstein, E.A.**, (2015 August). *Behavioral economics and obesity prevention.* Presented at International Symposium on Obesity Prevention in Seoul, South Korea.
72. **Finkelstein, E.A.**, (2015 August). *Impact of subsidies and cash payouts on treatment choices at the end of life.* Presented at Seoul National University in Seoul, South Korea.

73. **Finkelstein, E.A.**, (2015 June). *Develop a Strong Value Message for Economic Decision Makers.* Presented at AOAP Retreat in Bangkok, Thailand.
74. **Finkelstein, E.A.**, (2015 June). *Introduction to Economic Evaluation in the Hospital Setting*. Presented at Harapan Kita and Chipto Hospitals in Jakarta, Indonesia.
75. **Finkelstein, E.A.**, (2015 May). *Palliative Care.* Presented at The 9th Asian Forum of Chronic Disease Initiatives (AFCKDI) in Jakarta, Indonesia.
76. **Finkelstein, E.A.**, (2015 May). *Preferences for life extending treatments and palliative care among cancer patients in Singapore.* Presented at The 11th Asia Pacific Hospice Conference, 2015 in Taipei, Taiwan.
77. **Finkelstein, E.A.**, (2015 April). *Older adult, patient and caregiver's willingness to pay for moderately life extending cancer treatments and other aspects of quality EOL care. Results of a discrete choice experiment in Singapore.* Presented at Interdisciplinary Conference on Health-Related Research in Korea supported by Korean National Research Foundation in Sogang University, Seoul, Korea.
78. **Finkelstein, E.A.**, (2015 March). *Behavioral Economics Has Been Identified as a Promising Strategy to Improve the Health of Older Adults.* Presented at Duke-NUS/Duke-Durham Bridging Symposium: Global Burden of Non-communicable Diseases with a focus on Vascular Disease in Singapore.
79. **Finkelstein, E.A.**, (2015 March). *Preferences and Willingness to Pay for End of Life Care in Singapore: Population, Patient, Caregiver, and Physician Perspectives.* Presented at SingHealth Research Grand Rounds in Singapore.
80. **Finkelstein, E.A.**, (2015 March). *End of Life Treatment Choices among Singaporeans.* Presented at "Choices" orientation session for physicians in the renal department in Singapore.
81. **Finkelstein, E.A.**, (2015 March). *Behavioral Economics And Chronic Disease Prevention: Results From Three Randomized Trials.* Presented at NMRC Awards Ceremony and Research Symposium 2015 in Singapore.
82. **Finkelstein, E.A.**, (2015 February). *Choice of treatment to extend life vs supportive care at the end of life.* Presented at 22nd International Conference of Indian Association of Palliative Care IAPCON 2015 in Hyderabad, India.
83. **Finkelstein, E.A.**, (2015 February). *A Brief Overview of Lien Centre for Palliative Care.* Presented at LKC Medical School Workshop on Primary Care Research in Singapore.

1. Professional awards and special recognitions:

- Included in list of World's Most Highly Cited Researchers in 2015, 2016, 2017 and 2018 by Thomson Reuters and Clarivate Analytics
- One of the Most Highly Cited Articles in Journal of Health Economics from 2013 to 2016
- *Health Affairs* most read paper 2009
- Successfully commercialize an Obesity Cost Calculator, which generated over $400K in revenue
- RTI Highly Published Author Award, 2007
- RTI Early Career Author Award, 2006
- RTI Highly Published Author Award, 2006
- Nominee (with Phaedra Corso and Ted Miller), Society for Advancement of Violence and Injury Research (SAVIR), Research! America's Garfield Award for Public Health Impact for *The Incidence and Economic Burden of Injuries in the United States,* 2006
- RTI Outstanding Paper Award, 2005
- RTI Highly Published Author Award, 2005
- RTI Outstanding Paper Award, 2004
- Langton Award for Outstanding Undergraduate Teaching, 1998
- Fellow, Agency for Health Care Policy and Research, 1997 to 1999
- Special Contribution Award, Department of Veterans Affairs, 1996

2. Organizations and participation: (Offices held, committee assignments, etc.)

a. Panel and Committee Membership
   - Committee Member of the Lancet Commission on Global Hearing Loss (2019- present)
   - Committee Member of the Lancet Commission on the Value of Death (2019- present)
   - Invited Member, 3rd Subcommittee for the National Advisory Committee on Cancer (NACC) (2019-present)
   - Ex-Officio Member, Health Services Research Institute Management Committee (HSRIMC), (1 April 2018 to 31 March 2021)
   - SingHealth Advisory Member for Enhancing Innovation Committee (01 Dec. 2018 to present)
   - Duke-NUS Centre of Regulatory Excellence (CoRE) Internal Appointments and Promotions Committee (APC), (15 Nov 2017 to 14 Oct 2019)
   - Singapore Population Health Improvement Centre (SPHERiC), Scientific & Knowledge Translation Committee (SKTC), (1 Aug 2017 to 1 Aug 2021)
   - Ministry of Health Disease Management Workgroup, Diabetes Prevention and Care Taskforce, (19 July 2016 to 12 June 2019)
   - Ministry of Health Disease Management Workgroup, Cancer Prevention and Care Taskforce, (19 July 2016 to 12 June 2019)Singapore Ministry of Health
   - NUS Initiative to Improve Health in Asia (NIHA) Management Committee, (2016 to present)
   - Duke-NUS CORE Internal Appointments and Promotions Committee (APC), (2015)
   - 1st International Public Health Conference in conjunction with the 7th Public Health & Occupational Medicine Conference in (2012)
   - Singapore Hospice Council, (2012 – present)
   - Invited Member to Technical Consultation on Identifying Approaches to Control Obesity, World Health Organization, Melbourne, Australia (11-13 April 2011)
   - Invited member, Regional High-Level Meeting on Scaling up Multi-sectoral Actions for Non-communicable Disease Prevention and Control, World Health Organization, Seoul Republic of Korea (17-18 March 2011)
   - 5th Singapore Public Health & Occupational Medicine Conference, (2010)
   - ISPOR Singapore (2010 – present)
   - Graduate School Program Committee, Duke-NUS Graduate Medical School, (2010 – present)
   - Medical Student Program Committee, Duke-NUS Graduate Medical School, (2010 – present)
   - Institute of Medicine's Committee on Childhood Obesity Prevention Actions for Local Governments, (2009)

b. Reviewer
   - Ageing and Palliative Care for Temasek Foundation Innovates CLG Limited, (2017-2020)
   - UK Medical Research Council Peer Reviewer, August, 2018.
   - ARF Tier 2 Ministry of Education Grants Review - T24-1901-P06 - *Explaining the rise in healthcare expenditures: Evidence from Singapore*, (2018)
   - National Medical Research Council (NMRC) Health Services Research New Investigator Grant application – "*Understanding factors associated with returning to work after a diagnosis of a chronic disease and/or onset of a disability in Singapore*" (2017)
   - Health Services Research Institute's (HSRI) Health Services Research and Analytics Technologies for SingHealth (HEARTS) Review Committee, (FY17/18)
   - The National Medical Research Council Local Review Panel (LRP) for the Health Services Research New Investigator Grant (HSR NIG) Scheme, (2013 – 2014)
   - National Center for Injury Prevention and Control, Initial Review Group, (2008)
   - NIH Community Influences on Health Behaviors study section, (2007-2008)
   - NIH Special Emphasis Panel (Social Science and Population Studies), (June 2006)
   - National Science Foundation (2007)

c. Scientific Advisory Board Membership

- Lifestyle Medicine Economic Research Consortium (2018 to present)
- Council of Directors of the True Health Coalition, GLIMMER Initiative
- Farewell LLC, (2017)
- Weight Watchers International Inc., (2015 to present)
- Virgin Pulse, (2015 to 31 December 2016)
- Curves International Holdings Inc. and Jenny Craig Inc., (1 June 2014 to 31 January 2015)

d. Editorial Boards
- Health Psychology, (2010 – 2015)
- American Journal of Preventive Medicine, (2009 – 2016)
- American Journal of Health Promotion, (2012 to 2015)
- Guest Editor for a Special Issue on Behavioral Economic in Health for the journal Health Psychology, (2012)

3. Previous and current teaching and mentoring responsibilities:

a. Co-led a 5 day Leadership Development Programme to regional health policy makers entitled Fostering Effective Health Systems Leadership in an Interconnected World, 3 to 8 December, 2017.

b. Duke-NUS Executive Education Course Offering: 'Building the Business Case for Health Innovations' (2014-present) – Lead Facilitator
- 27-31 October 2014
- 19-23 October 2015
- 7-9 September 2016
- 3-5 May 2017

c. Academic Teaching at National University of Singapore – Lead Instructor
- Health Economics (one semester annually beginning in 2010)
- Health Technology Assessment (one semester annually beginning in 2017)

d. Short courses:
- Modelling Obesity and Economics at University of Alabama, Birmingham in Birmingham, USA (14 May 2014)
- 4 hour course on Cost-Effectiveness Analysis at Xi'an Jiaotong University in Xi'an, China (21 May 2012)
- 20 hour course on Comparative Structure and Finance of Health Systems in the Duke-PKU Global Health Certificate Program at Peking University in Beijing, China (13-17 June 2011, 4-8 June, 2012)

e. Mentoring Roles [*means at least one manuscript published]

1. Ph.D. students
- Chong Jia Loon, Duke-NUS Medical School, Singapore. Member of Thesis Advisory Committee (2016-present)*
- Kang Wan Chen, Duke-NUS Medical School, Singapore. Member of Thesis Advisory Committee (2015-present)*
- Tan Pui San, Duke-NUS Medical School, Singapore. Member of Thesis Advisory Committee (2015-2016)*
- Dong Di, Duke-NUS Graduate Medical School, Singapore. Primary dissertation adviser (2010-2015). *Di won the best dissertation in Social Sciences award**
- Yanyi Guan, Saw Swee Hock School of Public Health. Member of Thesis Advisory Committee (TAC). (2014)*
- Jiang Li, University of North Carolina. Member of Thesis Advisory Committee. (2009-2013)*

2. 3rd year Medical students (2012-present):
   - Tim Khoo (Duke University Class of 2011)*
   - Saideep Bose (Class of 2012)*
   - Connie Boh (Class of 2013; Co-mentor)*
   - Hsuan Lai (Class of 2014; Co-Mentor)*
   - Wang Hao (Class of 2014; Co-Mentor)
   - Chen Pin Yu, Petty (Class of 2015; Co-Mentor)*
   - Andalib Hossain (Class of 2016)
   - Wu Hong King (Class of 2017)*
   - Chia May Fen, Yvonne (Class of 2017; Co-mentor)*
   - Tan Gui Fang, Edlyn (Class of 2018; Co-mentor)*
   - Ng Guan Yee, Duke-NUS Medical School, Singapore (MS2, MD Class of 2020; Co-mentor)
3. Duke-Global Health Masters students:
   - Danni Zhao, Jiayang Hong (2017)
   - Junjian Gaoshan, Weixi Jiang, Junyang Wang and Shu Chen* (2014)
4. Others
   - Geraldine John (Practicum Supervisor Saw Swee School of Public Health, NUS 2014)*

4. Areas of research interests: health economics, healthcare financing, behavioral economics, obesity, conjoint analysis.

5. Summary of Research Support

YEAR	GRANTS AS PI
2009 - Present	SGD $15,716,897

(D) <u>Current Research Report</u>

1. Grant: 1R01DK115939-01A1 (PI: Herring) 1/09/18 – 30/06/23
National Institute of Diabetes and Digestive and Kidney Diseases 1.2 calendar months
Total Direct Costs: USD $485,849 ($34,888 Duke-U. subcontract)
Partnering with WIC to prevent excessive weight gain in pregnancy
We propose a pragmatic trial design in which we will intervene during pregnancy in Urban (Philadelphia) and rural (Durham) WIC clinics, using WIC resources. The proposed project will constitute the first translation of a comprehensive antenatal obesity treatment program focused exclusively on low-income, ethnic minority mother, using strengths of mHealth and WIC provider counselling for intervention delivery
Role: Co-Investigator

2. Grant: Temasek Foundation Innovates (2018-SMF-0004) 1/09/18-31/08/20
Total Value Awarded: SGD $150,928
Survival Expectations and Hope among Cancer Patients at End-of-Life (SHAPE)
The primary aim of this study is to discern patient's beliefs about prognosis independent of hope. Secondary Aims are to 1) identify factors that influence patient's beliefs, 2) explore whether and how patients would like to receive prognostic information and 3) the percentage who received the information the way they would have liked. We address these aims by randomizing cancer patients with a prognosis of less than one year to receive one of two versions of a survey. Version 1 includes prognosis questions similar to those used in prior studies. Version 2 includes identical questions but incorporates an incentive compatible strategy where a reward is offered for 'correct' answers, as determined by their treating physician's prediction. We hypothesize that, although many patients will continue to be overly optimistic about their prognosis, those patients responding to Version 2 will provide more accurate estimates.

Role: Principal Investigator

3. Novartis Singapore Pte Ltd (2018-0099)
Total Value Awarded: SGD $49,920 1/03/18-1/12/18

Migraine Project: Economic Burden of Migraine in Singapore Migraine, a common disabling primary headache disorder, is often misconceived as a low-impact condition, despite being ranked among the twenty most disabling illnesses worldwide. It imposes a substantial economic burden on society due to healthcare resource utilization and lost productive time. This study aims to quantify the economic burden of migraine in Singapore, and estimate the incremental costs borne by migraine-sufferers compared to migraine-free respondents, using an on-line web-panel.
Role: Principal Investigator

4. Roche Singapore Pte Ltd 16/10/17-15/04/18
Total Value Awarded: SGD $34,775

Drug Pricing Policies in Asia-Pacific Countries: In efforts to contain rising public sector expenditures on prescription medicines, many APAC countries have adopted formal and informal pharmaceutical pricing strategies. This narrative review describes the most commonly used strategies, including a detailed examination of the use of International Reference Pricing (IRP) in sixteen APAC countries.
Role: Principal Investigator

5. Grant: GPMOHPREDIC1 (PI Bee) 01/08/17-30/09/22
Singapore Ministry of Health (MOH) 0.6 months per year
Funding amount: SGD $4,245,251

The Pre-Diabetes Interventions and Continued Tracking to Ease-out Diabetes Programme (The Pre-DICTED Programme)

The proposed study will evaluate the effectiveness of a community-based large-scale prevention programme (PreDICTED) in reducing the rate of progression from pre-DM to DM through a large scale randomized controlled trial. This proposal study will evaluate the effectiveness and cost effectiveness of the PreDICTED intervention compared to usual care over the 3 year intervention period.
Role: Co-Investigator

6. Grant : 5R18-DK109518-2 (PI Bennett) 01/05/16-30/04/21
US National Institute of Health 0.8 months per year
Total value of USD $435,182

A Pragmatic Trial of a Digital Health Intervention to Prevent Weight Gain in Primary Care

This pragmatic trial conducted in a rural community health center system will test the effectiveness of a 12-month weight gain prevention intervention consisting of self-monitoring and feedback via interactive voice response and/or text messaging, tailored skills training, and responsive coaching.
Role: Co-Investigator

7. Grant: 1R01-DK109696-01A1 (PI Bennett) 01/02/17-31/1/21
US National Institute of Health 0.4 months per year
Total value of USD $445,668

Optimizing a standalone text messaging-based weight loss intervention

This experimental trial among 592 obese adults will include a core 6-month weight loss texting intervention that includes tailored behavior change goals, interactive self-monitoring, automated feedback, and skills training. Using a fractional factorial design, participants will be randomized to one of 16 experimental conditions that will test the text messaging components.
Role: Co-Investigator

8. Grant: 1R01HL130816-01 (PI Herring) 15/01/16 – 31/12/20
US National Institute of Health (NIH) 0.4 months per year
Total Direct Costs: USD $514,775 ($26,477 Duke U. subcontract)

Community-based obesity treatment in African American women after childbirth: a randomized

controlled trial of WIC mothers
This project aims to reduce disparities in obesity by implementing and evaluating a novel community-based behavioral weight loss intervention in African American WIC participants during the first postpartum year.
Role: Co-Investigator

9. Grant: HSRGDB16Dec003 12/10/17 – 31/10/20
Singapore Ministry of Health (MOH) 1.2 months per year
Total Value Awarded: SGD $1,631,294.20
A Randomized Trial to Slow the Progression of Diabetes (The TRIPOD study)
We will conduct a three arm randomized controlled trial to test whether a low cost mobile diabetes management application (DMAPP), with or without an incentive program (INCENT), can improve blood sugar levels at 12 months as measured by HbA1c levels (primary) among those with type 2 diabetes. We hypothesize that DMAPP will improve HbA1c relative to control but that the greatest improvements will occur for those exposed to both interventions (DMAPP+INCENT). Similar hypotheses will be tested for secondary outcomes, including proportion of participants progressing to treatment with insulin, weight, blood pressure, physical activity, dietary outcomes, glucose monitoring, number of medications, and medication adherence. All outcomes will be tested at baseline, 6, 12, 18, and 24 months. We will also quantify the incremental cost effectiveness of DMAPP and DMAPP+INCENT and the net cost implications of both from a third party payer's perspective.
Role: Principal Investigator

10. Grant: NMRC/CTGIITL/0001/2014 (PI Sng) 12/06/17-11/06/20
Singapore Ministry of Health (MOH) 0.25 months per year
Total value of SGD $54,570
Collaborative Outcomes with Labour Epidural Use (COLEUS) Study
The objective of this collaboration is to investigate the value of epidural pumps that are developed by Dr Sng's group at KKH. We will develop a discrete choice experiment (DCE) survey to estimate women's willingness to pay for reducing chances of breakthrough pain, motor block, instrumental delivery and postpartum depression.
Role: Co-Investigator

11. 2RO1DK056746-14 (Harvey/West) 01/04/15 - 31/03/20
US National Institute of Health (NIH) 0.25 months per year
Total Direct Costs: USD $688,924
Internet Assisted Obesity Treatment: Enhanced by Financial Incentives
The major goal of this randomized controlled trial is to determine whether incorporating financial incentives increases the amount and duration of weight losses achieved by Internet-delivered behavioral treatment. A secondary, exploratory aim is to quantify the incremental cost-effectiveness of each intervention strategy compared to established cost-efficacy thresholds. Overweight and obese adults at two study sites (N=416; 27% minority) will randomized to: (1) Internet intervention; or 2) Internet intervention plus financial incentives for implementation of key self-management behaviors (daily self-weighing, self-monitoring of dietary intake and achieving step goals) (Internet+Incentives). Measures of body weight, treatment engagement (e.g., attendance, self-monitoring, website utilization, motivational factors, weight control behaviors) and treatment delivery cost will be obtained over an 18-month period.
Role: Consultant

12. 1R01HL125487-01A1 01/12/14 – 30/11/19
PI Rajesh Vedanthan, MD MPH, Mount Sinai School of Medicine (MSSM) 0.7 months per year
US National Institute of Health (NIH)
Total Value Awarded: USD $3.4M (Duke PI Finkelstein – total value of Duke subgrant - $260K)
Bridging Income Generation with Group Integrated Care (BIGPIC)
Cost-effective, context-specific, and culturally appropriate interventions are critical to reduce risk factors for CVD in LMICs, and both group medical visits and microfinance have the potential to achieve this. In partnership with the Government of Kenya, the Academic Model Providing Access to Healthcare Partnership has expanded its clinical scope of work in rural western Kenya to include diabetes and hypertension, and has piloted group care and microfinance initiatives with promising early results.

However, the effectiveness of these strategies individually, and in combination, on improving CVD risk is not known. Thus, the overall objective of this proposal is to utilize a transdisciplinary implementation research approach to address the challenge of reducing CVD risk in low-resource settings via a group randomized controlled trial.
Role: Co-Investigator

13. Grant: N-911-000-004-001 01/10/14-30/09/19
Lien Centre for Palliative Care 2 months per year
Total Value Awarded: SGD $7,500,000
The Lien Foundation, SingHealth Foundation, and National Cancer Centre Singapore have provided funding to support a Centre of Excellence in Palliative Care housed within the Duke-NUS Graduate Medical School. The Lien Centre for Palliative Care (LCPC) mission focuses on developing and delivering traditional and blended learning palliative care education programs targeted physicians and allied health professionals, initiating and incubating high value research projects, and engaging with key stakeholders in Singapore and the region in efforts to enhance the end of life experience for patients and caregivers.
Role: Principal Investigator

14. Grant: NMRC/HSRG/0060/2016 08/02/17 – 28/02/19
Singapore Ministry of Health (MOH) 0.75 months per year
Total Direct Costs: SGD $822,594
Multiphase Evaluation of Healthier Choice Symbol (HCS) Logo
In efforts to promote a healthy diet, in 2001 the Singapore Health Promotion Board (HPB) supplemented traditional nutrition labelling with the Healthier Choice Symbol (HCS), which identifies food items within a specific category of foods (e.g., Sugar-Sweetened Beverages) as healthier choices. In 2009, HPB introduced enhanced versions of the HCS, although some firms continue to use the original logo. The enhanced versions look similar to the original but include additional information that focuses on particular macronutrients, including sugar, sodium, fat, calcium and whole grains. The new information takes one of two themes. It either indicates that the food contains more of a healthy ingredient, including whole grains or calcium, or less of a less healthy ingredient, including sugar, sodium, or total or trans-fat. As poor diets are known risk factors for chronic disease, the HCS logos may improve food purchasing patterns and help stem the rising trend in chronic diseases in Singapore. The study aims to assess the role of the HCS logos in influencing food choice.
Role: Principal Investigator

15. Grant: HSRGEoL16Dec001 12/10/17-31/01/19
Singapore Ministry of Health (MOH) 1 month per year
Total Value Awarded: SGD $209,492.00
Tailoring Health Communication Materials to Improve Decision Making of Elderly ESRD Patients (RE-TREAT)
The goal of this proposal is to explore and improve decision-making among older ESRD patients. Aim 1 proposes to conduct a qualitative study of ESRD patients to explore factors that were influential in their decision to choose a form of dialysis or CM, information that they would have liked to know, their treatment experiences, and whether and to what extent they may have experienced decision regret. Aim 2 uses the results of Aim 1 to develop a new set of counselling material, including printed material and a video with patient testimonials, to be used as patient decision aids, specifically for elderly ESRD patients. Aim 3 evaluates the patient decision aids from Aim 2 in a Phase II trial, using stated choice (primary) and revealed choice (secondary). If the results from Aim 3 suggest the new information is superior, they will be further tested in a longer term study that focuses on real, as opposed to stated, choices.
Role: Principal Investigator

16. R01HL119568 (PI Ward / Linnan) 01/01/14 – 31/12/18
US National Institutes of Health (NIH) 0.1 months per year
Total Value Awarded: USD $489,547
Care2BWell: A Worksite Physical Activity & Wellness Program for Child Care Staff
Child care workers are among the lowest wage workers in the US workforce; and face a wide range of chronic health conditions. This randomized controlled trial in 104 child care settings will test the effects

of a multi-level physical activity intervention on worker physical activity outcomes (primary) and other risk behaviors. We will also assess changes in the workplace environment at these centers that support health.
Role: Consultant

17. Grant: 2015-SMF-0003 24/12/15-23/12/18
Singapore Millennium Foundation 1 month
Total Value Awarded: SGD $749,922
Costs and Medical Care of Patients with Advanced Serious Illness in Singapore (COMPASS)
This is a longitudinal study which aims to prospectively capture health care utilization, cost, and quality of life indicators from 600 patients with advanced cancer using both administrative and survey data collected until patient's death. Patients and their caregivers are interviewed by the research team at baseline and subsequently at every three months until the patient's death. Additionally, the study recruits patient's treating physician. After patient's death, caregivers are asked to complete a questionnaire at 8 weeks and 6 months after patient's death assessing bereavement adjustment. This study is being conducted at National Cancer Centre, National University Hospital and Tan Tock Seng Hospital.
Role: Principal Investigator

18. Grant: NMRC/HSRG/0053/2016 1/10/16-31/10/18
Singapore Ministry of Health (MOH) 0.75 months per year
Total Value Awarded: SGD $999,972
Singapore cohort of patients with advanced heart failure (SCOPAH)
Congestive heart failure (CHF) is one of the leading causes of death in Singapore. Although anecdotal data suggests that end-of-life (EOL) care that patients with advanced CHF receive is sub-optimal, limited data is available that assesses the EOL experience of patients and that can be used to identify specific areas for improvement. Further, advance care planning, a promising intervention recently introduced in Singapore to enable patients with life limiting illnesses, including those with advanced CHF, to receive EOL treatments according to their own preferences, has not been systematically evaluated. This project thus aims to (1) enroll 250 patients with advanced CHF and follow them for a period of one year or till they die, to assess their EOL experience and to identify specific areas for improvement; and to (2) conduct a randomized controlled trial of 250 patients with advanced CHF to assess whether patients receiving ACP are more likely to receive EOL care consistent with their preferences. Results from this project will provide recommendations for ways to improve EOL care for patients with advanced CHF and test the effectiveness of ACP.
Role: Principal Investigator

19. Grant: MR/N006178/1 (PI Tazeen) 01/09/15-31/08/18
UK Medical Research Council/Department for International Development 0.1 months per year
Total Value Awarded: £1,992,221
Primary Care Strategies to Reduce High Blood Pressure: A Cluster Randomized Trial in Rural Bangladesh, Pakistan and Sri Lanka (COBRA-BPS)
This is a cluster randomized controlled trial (RCT) in 30 rural communities in Bangladesh, Pakistan and Sri Lanka aimed at reducing BP levels of individuals with hypertension (systolic BP ≥140 mm Hg or diastolic BP ≥90 mm Hg, or on antihypertensive therapy). The RCT will enrol 2550 individuals aged 40 years or older with hypertension in these communities to evaluate the effectiveness and cost-effectiveness of a "multi-component strategy (MCI)".
Role: Co-Investigator

20. Grant: NMRC/HSRNIG/0013/2016 (PI Ozdemir) 07/07/15-31/07/18
Singapore Ministry of Health (MOH) 0.5 months per year
Total Value Awarded: SGD $99,920
Randomized Controlled Trial of a Physical Activity Program for Teenagers (FIT-TEEN)
Childhood obesity is one of the major challenges in developed countries, including Singapore. One of the main reasons behind growing childhood obesity is low levels of physical activity, and children may be patterning their levels of inactivity after their parents. Physical activity interventions that target children and parents could have a significant public health impact. Incentives for meeting activity goals can be effective in promoting sustained levels of physical activity. We propose to test two types of incentive

strategies (fixed threshold versus a dynamic threshold based on peer effects). We also hypothesize that the average number of steps taken by children will be higher when families are compared to other families in terms of physical activity than when they are not compared to other families.
Role: Co-Investigator

21. Grant: NMRC/HSRG/0052/2015 (PI Bilger) 20/06/15-30/06/18
Singapore Ministry of Health (MOH) 0.5 months per year
Total Value Awarded: SGD $490,285
Randomized control trial to improve hypertension outcomes using wireless home blood pressure monitoring with automatic outcome-based feedback and financial incentives
We propose a 6-month randomized controlled trial with 228 hypertensive patients with uncontrolled blood pressure from the Singhealth Polyclinic in Bedok, Singapore. The proposed trial will have three equal sized and parallel study arms in order to measure the incremental effectiveness and cost-effectiveness of an intervention with wireless HBPM and automatic outcome-based feedback with and without financial incentives compared to HBPM alone.
Role: Co-Investigator

22. Research Collaboration Agreement - Ref: 2016-1595 06/12/16-05/06/18
NUS/SingHealth Polyclinics/ KKT Technology Pte Ltd 0.4 months per year
Total Value Awarded: SGD $62,632
A single arm feasibility study of Glyco Leap, an on-line lifestyle modification and self-management program for people with Type 2 diabetes
This feasibility study will explore the use of Glyco Leap, a proprietary online lifestyle modification and self-management education program developed by Holmusk, Singapore for people with type 2 diabetes, as an add-on to primary care delivered through the SingHealth Polyclinic at Tampines. The goal of the study is to test whether patients with diabetes who receive care at the clinic are amenable to such an intervention, to quantify program fidelity for those who do enroll in the study, and to explore the extent to which the intervention can be used in conjunction with primary care in efforts to improve health outcomes. If results are promising, a randomized controlled trial will follow.
Role: Principal Investigator

23. Grant: AG-2014-001 27/11/14-26/05/18
National University of Singapore GAI Aging Cluster 0.5 months per year
Total Value Awarded: SGD $320,000
Encouraging Healthy Nutrition Purchases in an Online Grocery Setting using Experimental Economics (NUSMart)
This study proposes to develop an online grocery store and enroll participants to make their typical grocery purchases through this store. Using the information gathered from the participants' purchasing behavior, this proposal will apply experimental economic methods to test the extent to which food purchasing behavior can be positively influenced through a series of nutrition information and/or incentive-based interventions. The findings from this research can be used by policymakers in efforts to improve the value of nutrition information to discourage unhealthy food consumption, and by insurers and others looking to design value-based programs that reward participant's for healthier food purchases.
Role: Principal Investigator

24. Grant: NIHA-2013-1-005 (PI Bilger) 10/09/13-09/03/18
National University of Singapore (NUS) 0.5 months per year
Total Value Awarded: SGD $249,880
A Randomized Controlled Trial to Improve Diabetes Outcomes through Financial Incentives (TRIAD)
Type II diabetes is associated with a host of adverse and costly complications, including heart attacks, strokes, blindness, kidney failure, and severe neuropathy that may result in amputations. For those with diabetes, glycemic control is essential to minimize complications but many fail at being sufficiently adherent to their treatment. We propose to test two incentive-based intervention strategies aimed at improving diabetes outcomes amongst patients with uncontrolled glycemic levels. The incentives are tied either to processes aimed at improving blood sugar levels (glucose testing, physical activity and medication adherence) or directly to the intermediary outcome (blood glucose in the acceptable range). While process incentives are likely to provide more motivation for

treatment adherence, as these goals may be comparably easier to meet, these incentives only reward intermediary outcomes and it might be more effective to reward successfully achieving a health outcome directly.
Role: Co-Investigator

25. Grant: NMRC/HSRG/0048/2015 25/02/15-28/02/18
Singapore Ministry of Health (MOH) 0.5 months per year
Total Direct Costs: SGD $540,457
Randomized Controlled Trial of an Incentive-based Physical Activity Program targeting both children and adults (FIT-FAM)
There is overwhelming evidence that sustained physical activity reduces the risk of many common diseases. Yet, data reveals low levels of physical activity among working age adults and their children in Singapore. One strategy that has been successfully employed to influence behaviors of parents is to use their children as an intermediary. This strategy has a successful track record in public health, where children have helped their parents quit smoking and wear seatbelts. In this study we propose to test whether children can promote increased physical activity of a working parent at the same time that they increase their own activity level. This proposal is an extension of a prior study where we showed that modest financial incentives can increase physical activity levels among youth. We now propose to conduct a follow-on trial where the reward is tied not only to the child's own steps, but to that of their parents. Rewards will be based on step activity measured through a state-of-the-art wireless step counter. Just as children were motivated to increase their own activity levels in efforts to achieve the incentive, we hypothesize that they will also be effective advocates for increasing the activity levels of their parents.
Role: Principal Investigator

Pending Research Report

Application ID: HSRGHP18may-0004
Singapore Ministry of Health (MOH)
Total Grant Value Applied: SGD $549,730.00
Using the Multiphase Optimization Strategy to Improve Diet Quality (MOSTDQ)
Abstract: Poor diet quality is a well-established risk factor for numerous NCDs. As a result, Singapore is looking for strategies to improve diet quality. Possible strategies include price manipulations, food labelling, targeted messaging, and behavioral nudges. Each strategy can be implemented using multiple approaches and in combination with the others. Yet to date, no studies have addressed how different interventions can be combined across these domains in efforts to cost effectively improve diet quality. That is the focus of this effort. Specifically, we propose to apply the Multiphase Optimization Strategy (MOST) framework and our fully functional web-based grocery store (NUSMart), containing over 4,000 products, to design a multicomponent intervention aimed to cost effectively improve diet quality (Aim 1). We will then conduct a 2-arm randomized controlled trial to test whether the assembled multicomponent intervention has a sustained positive effect on diet quality over repeated purchases (Aim 2). This study is the first to propose to systematically combine select components of an evidence-based multi-component intervention in efforts to improve diet quality of consumers in Singapore. Given rising rates of obesity, diabetes, and other chronic diseases, and the government's interest in using food policy to improve diet quality, this study is both timely and has high potential to have a significant public health impact in Singapore and beyond

Completed Research Report (2009 to present)

1. Grant: NMRC/HSRNIG/0007/2015 07/07/15 – 31/07/17
Singapore Ministry of Health (MOH)
Total Value Awarded: SGD $99,745
The Role of Risk Factors in Influencing Inpatient Utilization and Costs: Evidence from linked Singapore Chinese Cohort Data
As the country becomes wealthier and its population ages, Singapore is facing a dual health challenge. It wants to expand access to insurance coverage and subsidy for its people, and at the same time, find ways

to control healthcare costs. Thus far, the government has been proactive in responding to this dual challenge. Recent policy efforts expanded coverage to accommodate those with low incomes and the elderly. In particular, changes have been proposed for MediShield to cover the entire population. These policy changes raises the need to address a number of issues related to the costs of expanded access and more generally, to identify strategies to control costs. This research aims to quantify elderly's inpatient costs during their aging years and at their end-of-life stage, with a focus on the cost burden associated with risk factors (such as smoking, obesity, drinking) and chronic diseases.

Role: Mentor for new investigator

2. Contract: Sanofi-Aventis (CL2014-006) 19/08/14-18/08/15
Sanofi-Aventis Singapore Pte Ltd
Total Value Awarded: SGD $28,355
Cost Effectiveness of Sevelamer vs Calcium Carbonate in Singaporean Patients with CKD-ND
Hyperphosphatemia is a universal problem with chronic kidney disease and is an independent risk factor for increased morbidity and mortality. Phosphate binders can lower the level of phosphate in the blood but lead to their own set of complications with prolonged use. This study will compare the cost-effectiveness of an older calcium based binder with Sevelamer, a new non-calcium based binder, using a Markov model of the Singapore chronic kidney disease population.
Role: Principal Investigator

3. Grant: SHF/13/GMC(2)/017(US) 01/04/14-31/03/15
SingHealth Foundation
Total Value Awarded: SGD $154,650
Develop a Palliative Care Online Training Portal for Healthcare Professionals
The portal is a dynamic e-learning platform that provides relevant training and information on palliative care to 1) healthcare professionals, 2) non-professional caregivers and 3) the general public (volunteers, students etc.) who will benefit from increased knowledge in palliative care and palliative care services.
Role: Principal Investigator

4. Grant: 2013-SMF-0002 03/02/14-02/02/17
Singapore Millennium Foundation
Total Value Awarded: SGD $260,480
Knowledge and preferences for treatment of end stage renal disease among elderly patients and their family caregivers
Understanding patient's preferences regarding treatment for end-stage renal disease (ESRD) is important to guide treatment recommendations and policies. Currently, treatment choices for ESRD are likely to be distorted by a lack of knowledge among patients and their caregivers regarding outcomes and costs that result from a given choice. Therefore, this study proposes to assess patient and caregiver knowledge about outcomes and costs of dialysis and conservative treatment, and to quantify the extent to which select features and outcomes of dialysis influence the decision to choose it over conservative treatment, and the change in uptake that would result from a given change in one of the attribute levels (or better information on that attribute). The study involves focus groups with stated preference conjoint survey with elderly stage 4 and 5 chronic kidney disease patients.
Role: Principal Investigator

5. Grant: SMPO201302 (PI Tan PH) 01/01/14-30/06/15
Stratified Medicine Programme Office Singapore
Total Value Awarded: SGD $520,000 (Duke-NUS SGD $20,000)
Stratification of triple negative breast cancer into clinically relevant groups
This project evaluates the costs of treating triple breast cancers in Singapore and estimates the cost effectiveness of triple negative breast cancer stratifying tests using a Markov model.
Role: Co-Investigator

6. Grant: SMPO201301 (PI Gardner) 01/01/14-31/03/15
Stratified Medicine Programme Office Singapore
Total Value Awarded: SGD $520,000 (Duke-NUS SGD $20,000)
Translational genetic approaches for stratifying adults with young onset diabetes and diagnosing monogenic diabetes in Singapore
This project uses a Markov model to estimate the cost-effectiveness of genetic stratifying tests for specific types of MODY in Singapore.
Role: Co-Investigator

7. Contract: NMRC (HLTHQ0ECO14000206/1) 21/08/14-26/01/15
National Medical Research Council (NMRC)
Total Value Awarded: SGD $65,000
Estimate return on investment for eye research funding provided by Singapore to Ministry of Health
The goal of this study is to estimate the Singapore government's return for investments in eye research.
Role: Principal Investigator

8. Grant: MOH (HLTHQ0ECO14000206/1) 21/08/14-26/01/15
Singapore Ministry of Health (MOH)
Total Value Awarded: SGD $52,000 (Duke-NUS SGD $13,000)
ITQ for the provision of analysis services to estimate return of investments in eye research in Singapore to Ministry of Health
Develop a model to estimate return on investment in eye research by Singapore Ministry of Health (MOH).
Role: Principal Investigator

9. Grant: NIHA-2013-1-004 10/09/13 – 09/09/15
NUS Global Asia Institute
Total Value Awarded: SGD $239,148
A Randomized Controlled Trial to Motivate and Sustain Physical Activity using Financial Incentives (TAKSI)
This is a randomized controlled trial of taxi drivers to test (1) the extent to which different types of financial incentives, when combined with a pedometer-based activity program, motivates and sustains physical activity; and (2) whether mental accounting exists among drivers and if so, the extent to which framing of the incentives as cash or taxi rental credits influences both primary and secondary outcomes.
Role: Principal Investigator

10. Contract: CL2013-009 14/06/13-14/06/14
Vivus, Inc.
Total Value Awarded: USD $75,000
Cost-Effectiveness of Treatment with Qsymia
There are two principle aims of this project. The first aim is to quantify the cost-effectiveness of a new weight loss drug, Qsymia, compared to a placebo, in terms of quality-adjusted life years (QALYs) gained. The second aim is to quantify the cost-effectiveness of Qysmia compared to other weight loss products, including gastric banding and gastric bypass surgery, commercial weight loss programs with published clinical trial data, and other commercially available (or soon to be available) weight loss drugs.
Role: Principal Investigator

11.Grant: 2012-SMF-0001 01/02/13-31/01/16
Singapore Millennium Foundation
Total Value Awarded: SGD $164,783
Survey on Preferences for care at the end of life among cancer patients in Singapore
This is a stated preference conjoint survey of 500 breast, colorectal and lung cancer patients in Singapore to understand their preferences and willingness to pay for care at EOL.
Role: Co-Investigator

12. Grant: LCPC(I)/2013/0002 (N. Chan, NUH is PI) 01/02/13-31/05/15

National University Cancer Institute Endowment fund & NUH Cancer Fund
Total Value Awarded: SGD $15,225
National Survey of Physicians regarding Palliative Care Provision
The project aims to understand variation in end of life care practices among physicians dealing patients suffering from life limiting illnesses in Singapore
Role: Co-Investigator

13.Grant: NHMRC APP10466 01/01/13-31/12/16
Australia National Health and Medical Research Council (NHMRC)
Total value Awarded: AUS $861,581.08
Improving vision and quality of life: An innovative and comprehensive eye care model for individuals in residential care facilities
To date, Australia does not have a comprehensive eye health service model for those living in residential care facilities. To address this gap, we have developed a novel model of eye care for people living in residential care facilities. We have pilot tested this new model and our initial results suggest that it has the potential to be an effective eye care model for managing vision impairment and improving QoL for this subset of the Australian population. In this study, we will assess the effectiveness and cost-effectiveness of this new model of eye care for older people across several residential care facilities.
Role: Co-Investigator (Lamoreaux; U. of Melbourne is PI)

14. Grant: HSRG11NOV023 12/12/12–30/06/15
Singapore Ministry of Health (MOH)
Total Value Awarded: SGD $159,500
Use of Conjoint Analysis to Estimate Cost-Effective Strategies for Increasing Screening Rates for Breast and Cervical Cancer Screening Programs
Many Singaporeans do not undertake screenings consistent with recommended guidelines. The aim of this study is to improve our understanding of key factors that guide the decision of whether or not to use cancer screening services and determine how to cost-effectively increase the reach of the programs. We propose conducting focus groups in order to identify the key factors that drive the decision to attend a screening exam. Conjoint analysis methods will then be used to estimate the relative importance of each of these factors and the extent to which modest incentives, targeted information and other strategies identified via the focus groups are expected to increase screening uptake. We will also give a special attention to the identification of potential knowledge gaps and misconceptions about cancer screening.
Role: Principal Investigator

15. Contract: CL2012-026 20/11/12-05/11/13
Sanofi-Aventis Singapore Pte Ltd
Total Value Awarded: SGD $32,100
Analysis of Indonesian Family Life Survey (IFLS) Analysis
This project aims to quantify, to the extent possible, the following information for Indonesia: Prevalence of non-communicable diseases (NCDs) and related risk factors, including diabetes/high blood sugar, hypertension, heart problems and stroke; Direct and indirect costs for select NCDs; and other measures of burden for these NCDs, which may include greater levels of unemployment, higher rates for insurance, greater healthcare utilization, and greater government transfers for treating these conditions among low income and/or aged individuals, and to forecast expected burden in the future.
Role: Principal Investigator

16.Grant: NIHA0742.001 16/08/12-14/11/15
NUS Global Asia Institute
Total Value Awarded: SGD $127,500
A Randomized Incentive-Based Weight Loss Trial in Singapore
This is a randomized controlled trial in collaboration with the Life Centre at SGH which seeks to (1) test the extent to which traditional or behavioral economic incentives, when combined with an existing evidence-based weight loss program, improve weight loss and weight loss maintenance and (2) compare the cost-

effectiveness of each program.
Role: Principal Investigator

17. Grant: R01- CA167091, (Epstein; U Buffalo is lead) 01/04/12–01/04/15
US National Heart, Lung and Blood Institute (NHLBI)
Total Value Awarded: Duke-NUS Direct Costs: $110,000
The Influence of pricing and nutrient profiling on food purchases
The application proposes to conduct a four-group randomized controlled trial to evaluate the influence of food price changes in the form of taxes and subsidies and nutrient profiling on food purchasing behaviors among ethnically and socioeconomically diverse individuals.
Role: Co-Investigator

18.Grant: HSRG10NOV002 01/01/12-31/08/15
Singapore Ministry of Health (MOH)
Total Value Awarded: SGD $980,300
A Randomized Trial of Economic Incentives to Promote Walking Among Full Time Employees
There is overwhelming evidence that increased physical activity confers a variety of health benefits, yet recent survey data reveal that full time employees over age 35 are among the least active subsets of the Singaporean population. Employers in Singapore are increasingly looking to economic incentives to encourage healthy behaviors among employees although the evidence base justifying the use of these programs is limited. We propose to address this gap by (1) assessing the reach and sustainability of employer-based walking programs through a stated preference conjoint analysis, (2) quantify the effectiveness of a 6 month walking program, and (3) determine the cost-effectiveness of a scalable incentive-driven employer based walking program both with and without incentives.
Role: Principal Investigator

19. Grant: LCPC (1)/2011/001 01/12/11-30/11/13
Duke-NUS Medical School, Lien Centre for Palliative Care
Total Value Awarded: SGD $40,000
Preferences for End-of-life Care among End Stage Cancer Patients in Singapore
Understanding preferences for care at the end-of-life (EOL) is important for planning and improving services that provide such care. Satisfying the needs of dying patients without unduly burdening the healthcare system is a public health priority; however preferences concerning care at EOL remain largely unknown. This project proposes to field a stated preference conjoint survey to 250 end-stage cancer patients and their caregivers in Singapore in order to understand their preferences for care at EOL.
Role: Principal Investigator

20. Grant: 2R01AT004623-03, (Pearlman; Duke U. is lead) 01/09/11-30/06/15
US National Institute of Health (NIH)
Total Value Awarded: Duke Direct Costs: $1,831,525
Multisite RCT Investigating the Efficacy of Massage in Osteoarthritis (EMBARK)
To use a randomized trial to assess the effectiveness and cost-effectiveness of 8 weeks of Swedish massage relative to conventional treatment of knee osteoarthritis. Therapeutic effect will be measured by validated outcome measures (WOMAC, VAS, ROM, 50-ft walk) at the conclusion of therapy (8 weeks), as well as at 16, 24, 36, and 52 weeks post-baseline.
Role: Co-I, Lead Economist

21.Grant: U18DP003367-1, (Hoelscher U. of Texas is lead) 01/09/11-30/09/15
US Centers for Disease Control and Prevention (CDC)
Total Value Awarded: Duke Direct Costs: $93,990
Texas Childhood Obesity Research Demonstration (CORD): Using a System-Level Approach to Prevent Child Obesity
The goal of this demonstration project is to develop, implement and evaluate an integrated, systems-oriented obesity prevention and control program for underserved, ethnically diverse children age 2 to 12. The project will take place in Austin and Houston Texas.
Role: Co-I, Lead Economist

22. Grant: DPRT/AGE/2010/20 04/04/11-31/12/14
NUS-Virtual Institute for the Study of Ageing
Total Value Awarded: SGD $299,700
A Blueprint for Identifying a Successful Walking Program Targeting Singaporeans 50+
The goal of this proposal is to develop a physical activity program expected to have high uptake among older adults, partly through the use of modest financial incentives, in efforts to identify an effective long term strategy for increasing physical levels among older Singaporeans. The study aims to conduct an in-home nationally representative state preference conjoint survey aimed at identifying options for low cost, scalable, physical activity programs targeting older adults, and to conduct a 3 month pilot randomized control trial (RCT) of 100 older adults (aged 50+) to test the effectiveness of a model program in Singapore.
Role: Principal Investigator

23. Grant: HSRG/0006/2010 (Koh; NUS is PI) 01/02/11-31/01/13
Singapore Ministry of Health (MOH)
Total Value Awarded: SGD $987,000
The health, social and financial effects of care-giving among primary caregivers of elderly stroke patients in the first post stroke year: a prospective cohort study.
The primary aim of the study is to prospectively assess the health, social and financial effects of care on a cohort of stroke patient-caregiver dyads from stroke onset to one year poststroke.
Role: Co-Investigator

24.Grant: NHMRC APP1009844 01/01/11-31/12/16
Australia National Health and Medical Research Council (NHMRC)
Total Value Awarded: AUS $614,240
Comparing the Effectiveness of Selective Laser Trabeculoplasty with Tropical Medication For The Treatment of Primary Angle Closure Glaucoma: A Multicentred, Prospective, Randomized Controlled Clinical Trial
This research proposed a multicentre prospective randomized study, which will determine the optimum first line therapy for people with primary open angle glaucoma. This study will: evaluate treatment outcomes with respect to patient quality of life (QoL); provide a detailed economics effectiveness analysis; and compare the clinical effectiveness with respect to degree of IOP lowering and rates of treatment failure.

Role: Co-Investigator (Lamoreaux; U. of Melbourne is PI)

25. Grant: EDG/NMRC/10May040 (Singapore – Saw; NUS is lead) 01/01/11-30/12/12
Singapore National Medical Research Council (NMRC)
Total Value Awarded: SGD $199,179
An Exploratory Randomized Controlled Trial of a Novel Family-Based Intervention to increase Outdoor Time for the Prevention of Myopia and Increase Physical Activity among Singapore Youth
This study aims to develop, implement, and evaluate a novel incentive-based family intervention to increase time spent outdoors and increase physical activity among children aged 6 to 10 years in a 1-year exploratory randomized controlled trial.
Role: Co-Investigator

26. Grant: NMRC/NIG/1036/2010 (Malholtra; Duke-NUS is PI) 01/01/11-31/01/14
Singapore National Medical Research Council (NMRC)
Total Value Awarded: SGD $165,000
Preferences for care at the end-of-life among middle-aged and older Singaporeans.
Understanding preferences for care at the end-of-life is important for planning and improving services that provide such care. However, the nature and extent of these preferences among Singaporeans remains unknown. This study aims to understand: 1.) Preferences for care at the end-of-life among Singaporeans aged 50 years and over and 2.) Whether preferences for care at the end-of-life vary by demographic and socio-economic characteristics.
Role: Co-Investigator

27. Grant: ABC123 (Song; NUS is lead) 01/05/10-30/04/11
National University of Singapore Medicine-Business Seed Grant
Total Value Awarded: Direct Costs SGD $50,000
Association Between Health Behaviors and Intra-Day Work Performance: A Mobile Survey Study of Nurses
The goal of the proposed study is to examine the short-term relationship between health-related behaviours and job performance. Our proposed study population are nurses on shift work in a major tertiary hospital in Singapore. Behaviours, which will be measured several times per day over a 7-day interval, include sleep patterns, quantity and quality of food consumption, and leisure time physical activity.
Role: Co-Investigator

28. Grant: RTI# 1-312-0212385 01/11/09–30/04/11
US Robert Wood Johnson Foundation (RWJF)
Total Value Awarded: USD $32,400
Studying the Effect of Beverage Taxes on Children's Energy Intake and Tax Revenue.
The goal of this proposal is to use the Nielsen Company's Homescan longitudinal dataset of household weekly at-home food expenditures, which contains unparalleled information concerning the quantity and price of specific food purchases to address the following specific aims: 1. Compare differences in total household energy costs (cents per megajoule [MJ]) and energy costs for 43 common food categories between lower- and higher-income households. 2. For six obesity-promoting food items (pizza, French fries, salty snacks, cookies, sweetened breakfast cereals, and caloric carbonated beverages), conduct a detailed product-level analysis to determine differences in quantities purchased (by weight or by volume and by total calories) and differences in energy costs (cents/MJ) between lower- and higher-income households. 3. Use econometric models of household food purchases to conduct policy-relevant simulations addressing the extent to which policy makers can encourage healthier food consumption via targeted taxes/subsidies on select food products (e.g., tax on caloric carbonated beverages).
Role: Principal Investigator

29. Grant: RTI# 4-312-0211772 01/08/09 -31/07/11
US Department of Homeland Security (DHS)
Total Value Awarded: USD $34,792
Economic Analysis to support the Assessment of the Social Welfare Implications of US Counter-terrorism Policies.
The purpose of this study is to explore individual's preferences concerning methods for reducing terrorist threats and the reductions in deaths on U.S. soil that would be required for individuals to willingly accept these measures. We will field a stated preference conjoint survey to a national sample of 1,000 adult living in the U.S. using the Knowledge Networks web-enabled panel. Survey respondents will complete a series of exercises in which they are asked to compare two potential options, described by the levels of the key attributes and the expected number of deaths from terrorism expected to occur over the next 5 years should that option be chosen. Individuals are expected to choose their preferred options. Using these results and discrete choice econometric methods, we will quantify average preferences over different program features and how these preferences vary by population subsets.
Role: Principal Investigator

30. Grant: RTI# 0280800.373.02 (Finkelstein) 01/09/08–30/09/11
US Robert Wood Johnson Foundation (RWJF)
Total Value Awarded: Direct Costs $268,147
The goal of this proposal is to use the Nielsen Company's Homescan longitudinal dataset of household weekly at-home food expenditures to determine differences in quantities purchased (by weight or by volume and by total calories) and differences in energy costs (cents/MJ) between lower- and higher-income households and to conduct policy-relevant simulations addressing the extent to which policy makers can encourage healthier food consumption via targeted taxes/subsidies on select food products (e.g., tax on caloric carbonated beverages).
Role: Principal Investigator

31. Grant: R01 HL084400-01 (Jakicic; U of Pitt is lead) 01/09/07-30/06/12
US National Heart, Lung and Blood Institute (NHLBI)
Total Value Awarded: Duke-NUS Direct Costs USD $123,383
The Effect of a Stepped-Care Approach to Long Term Weight Loss
The purpose of this project is to examine whether a chronic-care obesity intervention delivered in a "stepped-care" manner results in improved weight loss compared to a standard behavioral weight loss intervention (SBWP group).
Role: Co-Investigator

32. Grant: R01- 5-34396 (Linnan; UNC is lead) 01/09/06–31/05/12
US National Heart, Lung and Blood Institute (NHLBI)
Total Value Awarded: Duke-NUS Direct Costs: USD $101,829
WAY to Health - Interventions to Control Obesity in North Carolina Colleges
The purpose of this project is to test the effectiveness and cost-effectiveness of four interventions aimed at reducing weight among overweight employees in North Carolina colleges. The interventions are being fielded in 12 colleges. These interventions are an expansion of a prior study funded by the CDC that focused on reducing weight among employees of North Carolina Community Colleges. Two of the four Arms include incentive-based weight loss strategies first developed in the prior study. The study is being conducted over an 18 month time period.
Role: Co-Investigator

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