Cost Comparison Analysis of Apixaban Versus Standard-of-Care Enoxaparin for Thromboprophylaxis After Hip or Knee Replacement in Algeria

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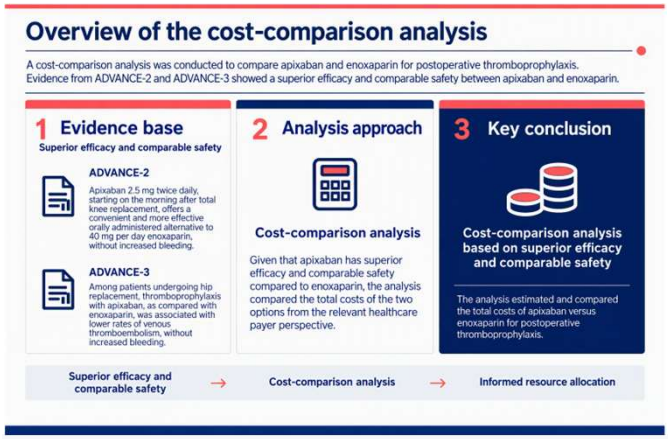
Objective

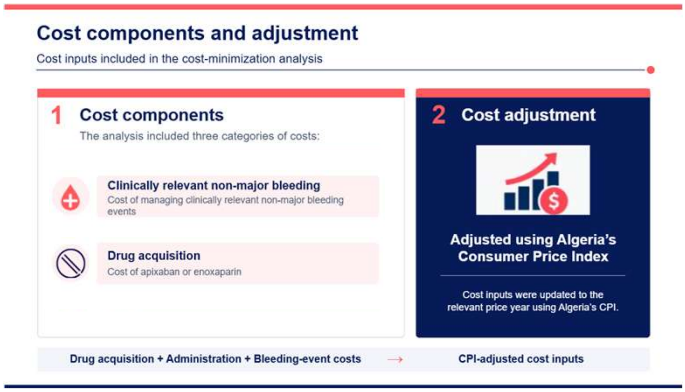
A pharmacoeconomic evaluation was conducted to assess the economic impact of apixaban compared with standard-of-care enoxaparin for venous thromboembolism (VTE) prophylaxis in patients undergoing total hip or knee replacement surgery in Algeria from the payer perspective.

Method

- The model compared total costs associated with apixaban 2.5 mg twice daily and enoxaparin 40 mg once daily.
- Postoperative treatment duration was assumed to be 35 days for total hip replacement (THR) and 10 days for total knee replacement (TKR).

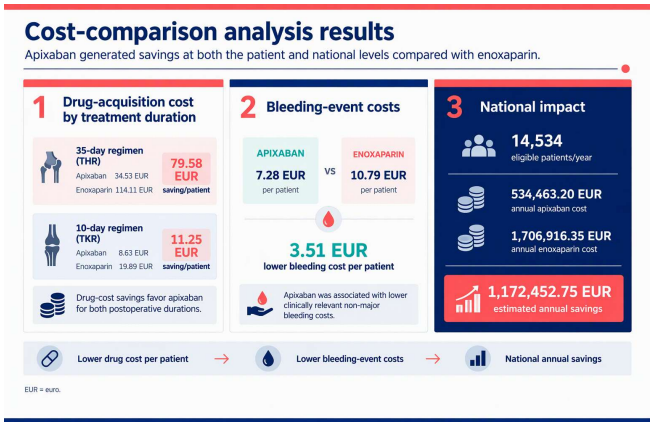


Clinical inputs were derived from **ADVANCE-2** for Total Knee Replacement (TKR) and **ADVANCE-3** for Total Hip Replacement (THR)



CPI: Consumer Price index

Results





Conclusion

From the Algerian payer perspective, apixaban was projected to be a cost-saving alternative to standard-of-care enoxaparin for thromboprophylaxis after hip or knee replacement. Savings were driven primarily by lower drug acquisition and administration costs, with additional reductions in bleeding-related costs. Apixaban may offer a cost saving thromboprophylaxis option for the Algerian healthcare payer.

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