

Care Costs of Non-Small Cell Lung Cancer, Colorectal Cancer, and Thyroid Cancer in Türkiye: A Delphi Panel Study



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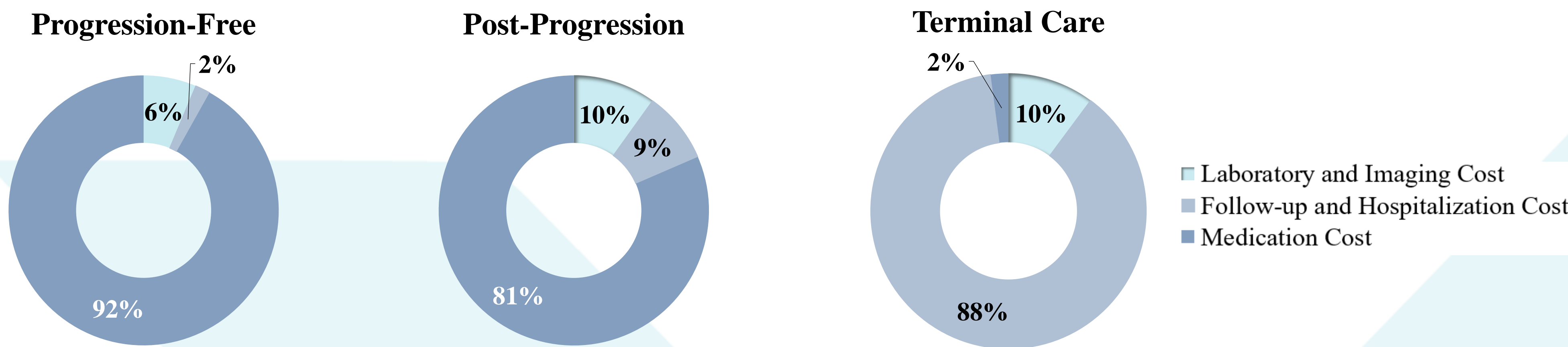
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Introduction

- Historically, cancer has been one of the most expensive medical conditions to treat¹.
- Cancer is a global public health problem due to its increasing incidence and the high cost of care².
- Cancer patients face high financial burdens due to the costs of cancer treatment, in addition to the challenges of societal costs and the economic impact of the disease³.
- Cancer patients receive care as they approach the end of their lives, in addition to the progression-free and post-progression period of their disease. Although most studies do not address the cost of terminal care, it represents a significant cost for healthcare systems, patients and their families⁴.
- This study aims to calculate the annual treatment costs for non-small cell lung cancer (NSCLC), colorectal cancer (CC), and follicular and papillary thyroid cancer (FPTC) in Türkiye.

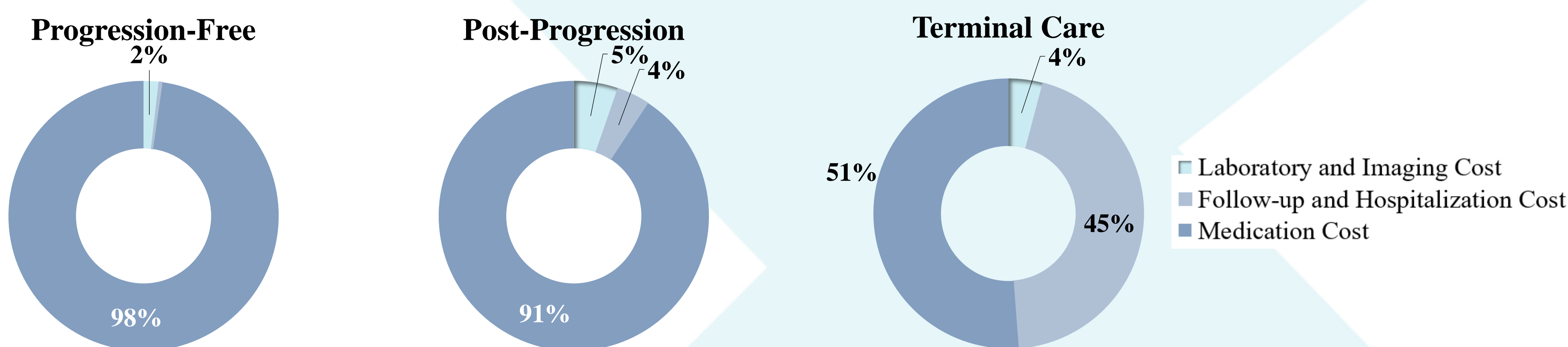
NSCLC

Phase	Total Cost	Laboratory and Imaging Cost	Follow-up and Hospitalization Cost	Medication Cost
Progression-Free	67,017 TL	4,227 TL	1,210 TL	61,580 TL
Post-Progression	74,687 TL	7,398 TL	6,424 TL	60,865 TL
Terminal Care	17,442 TL	1,772 TL	15,307 TL	364 TL



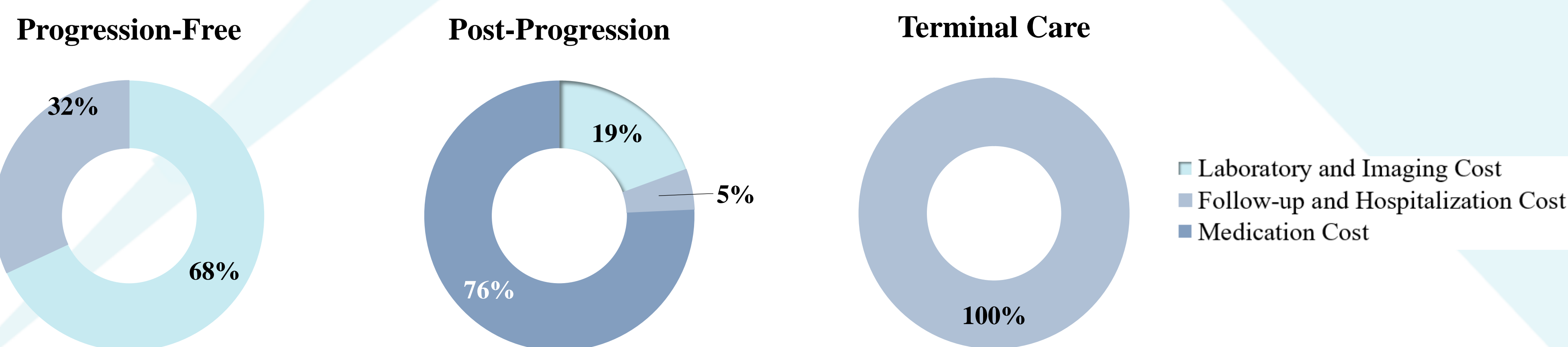
CC

Phase	Total Cost	Laboratory and Imaging Cost	Follow-up and Hospitalization Cost	Medication Cost
Progression-Free	157,207 TL	2,862 TL	679 TL	153,667 TL
Post-Progression	245,340 TL	13,011 TL	9,730 TL	222,600 TL
Terminal Care	62,374 TL	2,560 TL	27,871 TL	31,943 TL



FPTC

Phase	Total Cost	Laboratory and Imaging Cost	Follow-up and Hospitalization Cost	Medication Cost
Progression-Free	3,355 TL	2,283 TL	1,072 TL	0 TL
Post-Progression	101,326 TL	19,674 TL	4,923 TL	76,729 TL
Terminal Care	531 TL	0 TL	531 TL	0 TL



Methods

- Data was collected using the Delphi Panel method; expert opinions were obtained from six oncologists with experience in cancer treatment.
- The standardized questionnaire consisted of questions eliciting the opinions of the expert panelists on the clinical characteristics of patients with NSCLC, CC, and FPTC.
- Analyses were conducted using Microsoft Office Excel based on the perspective of a reimbursement agency.
- The costs of specific treatments, including examinations (laboratory and imaging tests), follow-up and hospitalization (radiotherapy, surgical interventions, outpatient treatment, and hospitalization), and medication (chemotherapy and other medications), for NSCLC, CC, and FPTC were calculated to understand the cost resource for each type of included cancers.
- The total costs for the progression-free period, the post-progression period, and terminal care were calculated.

Results

- The calculated total annual cost of care per patient with NSCLC were 67,017 TL, 74,687 TL, and 17,442 TL for the progression-free, post-progression, and terminal care periods, respectively.
- The annual cost per patient for those with CC for the progression-free period, post-progression period, and terminal care period were 157,207 TL, 245,340 TL and 62,374 TL, respectively.
- The annual cost per patient for patients with FPTC for the progression-free period, post-progression period, and terminal care period were 3,355 TL, 101,326 TL, and 531 TL, respectively.
- For patients with FPTC, terminal care consists only ten days of hospitalization.

Conclusions

- Treatment cost of diseases is important for decision makers.
- Although the costs of cancer treatment vary depending on the patient and the type of treatment applied, they create a great economic burden for health systems and patients.
- The study aims to help decision makers who assess health technology evaluate new treatment options for non-small cell lung cancer, colorectal cancer, and thyroid cancer.
- Receiving terminal care after a cancer diagnosis has been associated with the lowest costs for cancer patients.
- However, the cost of care for patients post-progression is higher than for progression-free patients.

References

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