

Cost of Illness in patient with Synovial Sarcoma in México (2010-2021)

Palafox-Torres D.I 1, Chávez-Millán M.F 1, Martínez-Tlahuel J.L 2, Paladio-Hernandez J.A 3.

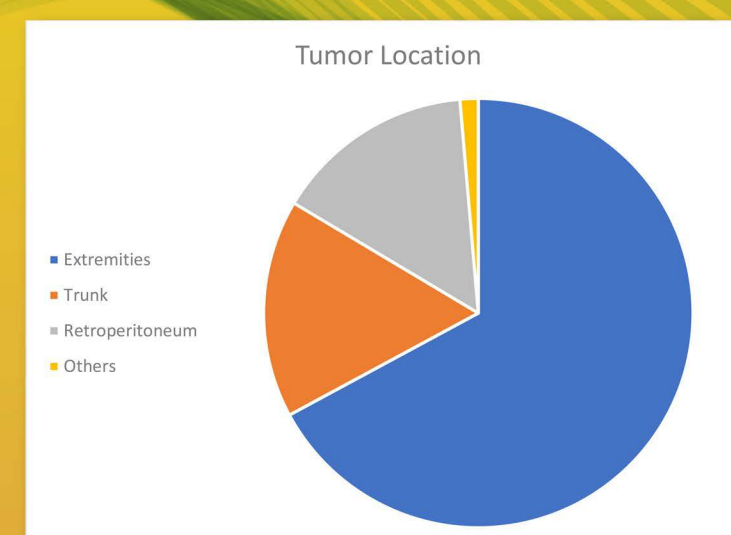
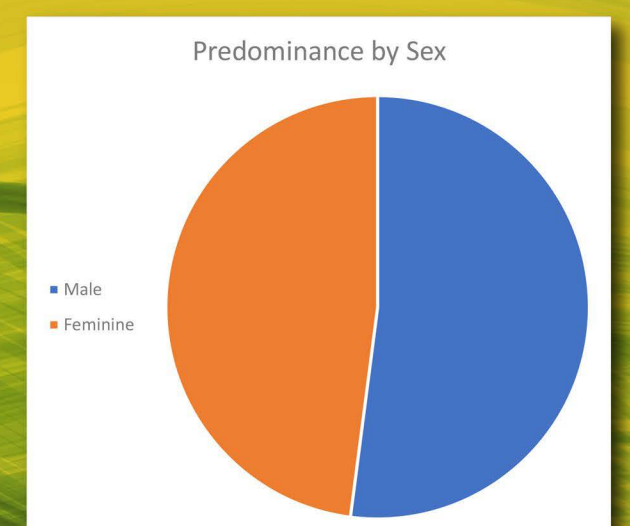
1. Independent Consultant, Cuautitlan Izacalli, EM, México 2. Instituto Nacional de Cancerología, CDMX3. Independent Consultant, Cuautitlan Izacalli, EM, México

Introduction

The sinovial sarcoma is a malignant mesenchyma. Although sarcomas are a rare disease, they account for approximately 1% of the total tumors, and are responsible for 2% of cancer mortality. This represents between 5 and 10% of all soft tissue sarcomas, and is the fourth frequency, after malignant fibrous histiocytoma, liposarcoma and rhabdomyosarcoma.

Objetive

The objective of this study is to estimate the total medical cost of illness of Synovial Sarcoma at the National Institute of Cancerology (Mexico City), in the last 10 years (2010-2021)



Methods

We estimated the direct costs of all patients treated at the INCAN in the last 10 years. The average age of the patients was 33.5 years, no predominance by sex was observed. Data on hospital admissions, emergency department and outpatient visits and drug prescriptions within 10 years from synovial sarcoma diagnosis were obtained from administrative databases. Outcomes measure were the average per-patient real-world costs over this ten-year period and were calculated and stratified by stage of disease at diagnosis, tumor histology and tumor site. Costs are expressed in 2022 USD.

Main costs per patient during treatment:	
Drug acquisition (pain control medications, antibiotics and antiemetics)	\$8,500
Administration costs	\$7,350
Lines of therapy	\$10,200
Palliative treatment	\$2,180
Total: \$28,230 USD	

Results

A total of 73 patients were followed. Total mean per-patient health care cost was \$28,230USD (\$22,233-\$32,009). Advanced synovial sarcoma systemic treatment costs were driven primarily by drug acquisition and administration costs. Treatment-related costs increased during later lines of therapy. For palliative treatment, pain control medications were the most common and for adverse events antibiotics and antiemetics.

Conclusion

This study showed that higher stages of disease are significantly more costly to manage, due largely to adjuvant chemotherapy. The present results can serve as a reference for further economic evaluations on treatment strategies for patients with Synovial Sarcoma.