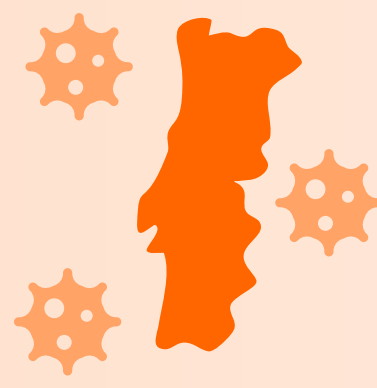


# Burden of Hospitalization Related to Adult Herpes Zoster Infection in Portugal

Silva F<sup>1</sup>; Zarkadoulas E<sup>2</sup>; Castanheira R<sup>1</sup>; Castro O<sup>1</sup>; Costa J<sup>3</sup>; Silva Miguel L<sup>4</sup>; Bulhosa C<sup>4</sup>; Figueira D<sup>4</sup>; Borges M<sup>4</sup>

<sup>1</sup>GSK, Algés, Portugal; <sup>2</sup>GSK Wavre, Belgium; <sup>3</sup>Faculty of Medicine, University of Lisbon, Lisbon, Portugal; <sup>4</sup>IQVIA Portugal, Lisbon, Portugal

## Conclusions

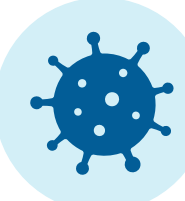


This study characterized **HZ hospitalizations in Portugal**, evidencing longer hospital stay for older patients and for patients who developed HZ complications.



The **annual economic burden** related to HZ hospitalizations exceeded **half a million euros**, translating into an average cost per patient of almost €3,000.

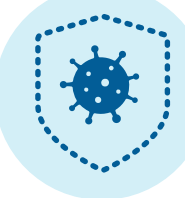
## Background



**Herpes zoster (HZ)** is a viral disease characterized by a **painful or pruritic vesicular rash**, which is caused by the reactivation of the latent **varicella zoster virus**.<sup>1-4</sup>



In **Europe**, the **HZ incidence** is estimated to be between **2.0 and 4.6 cases per 1,000 person-years**, and sharply increases among patients aged ≥50 years.<sup>5,6</sup>



**Immunocompromised (IC)** patients are at **higher risk of HZ**, due to reduced T cell-mediated immunity.<sup>3,4,6,7</sup>



**HZ and its complications cause an important clinical and economic burden in older adults and immunocompromised patients** because of their impact on quality of life and associated costs, including hospitalization costs.

## Aims



This study aimed to **characterize the inpatient burden associated with HZ in mainland Portugal, as well as the associated costs**.

## Methods



We conducted a retrospective study based on secondary healthcare data collected from the 2017 Portuguese Hospital Morbidity Database.



This study characterized hospitalized adult patients (≥18 years) with a primary diagnosis of HZ and their inpatient episodes.



Each hospitalization episode cost was calculated considering the diagnosis-related group funding values for 2018 defined by order No. 254/2018.



Subgroup analyses were performed for patients aged ≥50 years and for IC patients aged ≥18 years.

*Additional methods information available in supplementary material (QR-code).*

## Results

- There were 813 patients identified with at least one episode of HZ or HZ complication, out of 804,451 patients in the database (see HZ patient's flowchart, QR-code).
- 189 patients (23%) had an HZ episode as primary diagnosis (191 hospitalization episodes in total).

### Demographic characteristics of HZ patients (see additional information available in supplementary material (QR-code))

	HZ with complications			HZ without complications		
	All patients*	≥50 yo	IC ≥18 yo	All patients*	≥50 yo	IC ≥18 yo
Number of patients, n	134	92	22	55	39	15
Men, n (%)	69 (51.5)	41 (44.6)	16 (72.7)	20 (36.4)	14 (35.9)	5 (33.3)
Mean age (SD), years	68.1 (18.5)	76.1 (11.1)	64.4 (15.6)	71.7 (14.3)	77.1 (10.1)	60.7 (12.2)
Age group, n (%)						
18-49 yo	24 (17.9)	-	4 (18.2)	4 (7.3)	-	3 (20.0)
50-59 yo	17 (12.7)	14 (15.2)	3 (13.6)	5 (9.1)	3 (7.7)	2 (13.3)
60-69 yo	14 (10.4)	8 (8.7)	6 (27.3)	11 (20.0)	5 (12.8)	6 (40.0)
70-79 yo	35 (26.1)	29 (31.5)	6 (27.3)	15 (27.3)	11 (28.2)	4 (26.7)
≥80 yo	44 (32.8)	41 (44.6)	3 (13.6)	20 (36.4)	20 (51.3)	0 (0.0)
Inpatient deaths for all-cause mortality, n (%)	8 (6.0)	5 (5.4)	2 (9.1)	2 (3.6)	2 (5.1)	0 (0.0)

\*All patients also include 18-49 yo no IC.

### Distribution of HZ complications among HZ patients and costs associated with hospitalization episodes per HZ complication

	Distribution among HZ patients (N=189), n (%)	Average cost per patient*, €
Postherpetic neuralgia (ICD: B02.2)	33 (17.4%)	2,632.51
Zoster with other complications (ICD: B02.8)	33 (17.4%)	1,599.50
Zoster encephalitis (ICD: B02.0)	23 (12.2%)	9,274.59
Zoster ocular disease (ICD: B02.3)	23 (12.2%)	1,399.49
Zoster meningitis (ICD: B02.1)	21 (11.1%)	6,357.51
Disseminated zoster (ICD: B02.7)	14 (7.4%)	1,788.75

\*Among patients ≥50 yo.

### Characteristics and costs associated with hospitalization episodes due to HZ with and without complications by subgroup

	Days of inpatient hospitalization, mean	Average cost per patient, €
All episodes* (N=136;55)	15.3 10.0	3,224.16 2,232.49
≥50 yo (n=92;39)	16.7 10.4	3,877.41 2,349.36
IC ≥18 yo (n=22;15)	12.2 9.3	1,697.33 1,991.51

■ HZ with complications ■ HZ without complications

\*All episodes also include 18-49 yo no IC.

### Distribution of IC conditions among HZ patients (N=189), n (%)

IC patients	n (%)
Hematological malignancy	14 (7.4%)
Solid tumors	13 (6.9%)
HIV	5 (2.6%)
Solid organ and tissue transplant	10 (5.3%)

**IC ≥18-year-old patients represented ~20% of patients at primary diagnosis**

### Characteristics and costs associated with hospitalization episodes due to HZ by subgroup

	Days of inpatient hospitalization, mean	Total cost, €	Average cost per patient, €
All episodes* (N=191)	13.7	554,824.95	2,935.58
≥50 yo (n=131)	14.8	448,346.31	3,422.49
IC ≥18 yo (n=37)	11.1	67,213.89	1,816.59

**Hospitalization costs for the ≥50-year-old patients represented 81% of the total cost**

\*All episodes also include 18-49 yo no IC.

### Costs associated with hospitalization episodes due to HZ by age group

	Average cost per patient, €
18-49 yo	1,756.74
50-59 yo	1,534.31
60-69 yo	1,663.59
70-79 yo	3,924.19
≥80 yo	3,657.53

## Abbreviations

HIV, human immunodeficiency virus; HZ, herpes zoster; IC, immunocompromised; ICD, International Classification of Diseases; n, number of patients/hospitalizations; N, total number of patients/hospitalizations; SD, standard deviation; yo, year-olds.

## References

- Oxman MN. J Am Osteopath Assoc. 2009;109(6 Suppl):S13-7.
- Schmader KE, Dworkin RH. J Pain. 2008;9(1 Suppl 1):S3-9.
- Kennedy PGE, Gershon AA. Viruses. 2018;10(11):609.
- Albrecht MA, Levin MJ. 2023. Available via <https://medilab.ir/uptodate/show/8327>
- Pinchinat S et al. BMC Infect Dis. 2013;13:170.
- Gabutti G et al. J Med Microbiol. 2016;65(12):1363-9.
- Gershon AA et al. Nat Rev Dis Primers. 2015;1:15016.

[Accessed Sep 19, 2023].

## Acknowledgements

Business & Decision Life Sciences platform provided editorial assistance and publications coordination, on behalf of GSK. Jonathan Ghesquière (Business & Decision Life Sciences, on behalf of GSK) provided medical writing support.

## Disclosures

**Funding:** GlaxoSmithKline Biologicals SA (GSK study identifier: VEO-000494).

Full **conflict of interest declaration** available in supplementary material (QR-code).

Digital poster  
Supplemental data  
Narrated summary

