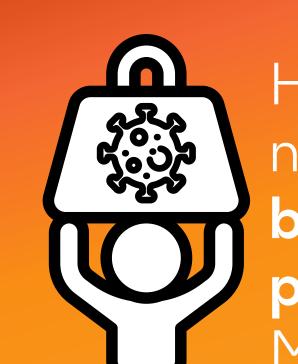
EE132

CLINICAL AND ECONOMIC BURDEN OF HERPES ZOSTER IN MEXICO: A RETROSPECTIVE MEDICAL CHART ANALYSIS IN A PRIVATE HEALTHCARE SETTING



Herpes zoster and postherpetic neuralgia impose a significant burden on patients and the private healthcare sector in Mexico.



Digital poster

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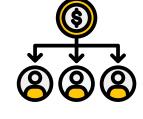
Background

- HZ leads to a painful rash. Complications, including PHN, may arise. Patients with HZ (and PHN) have a substantial loss in quality of life.¹
- HZ and PHN impose a substantial burden on patients and the healthcare system.²
- Information regarding the economic impact of HZ on the healthcare system in Mexico is limited. In one prospective study, conducted in Latin America including Mexico, average costs per HZ episode were \$1,465 USD from a public payer's perspective.³

Aims



Assess the **healthcare resource use** (HCRU) and **economic burden** of herpes zoster (HZ) and postherpetic neuralgia (PHN) in Mexico from a private healthcare perspective.



Evaluate healthcare resource use and costs by age category and by comorbidity.



Describe treatment pathways of patients with HZ in Mexico.

Methods

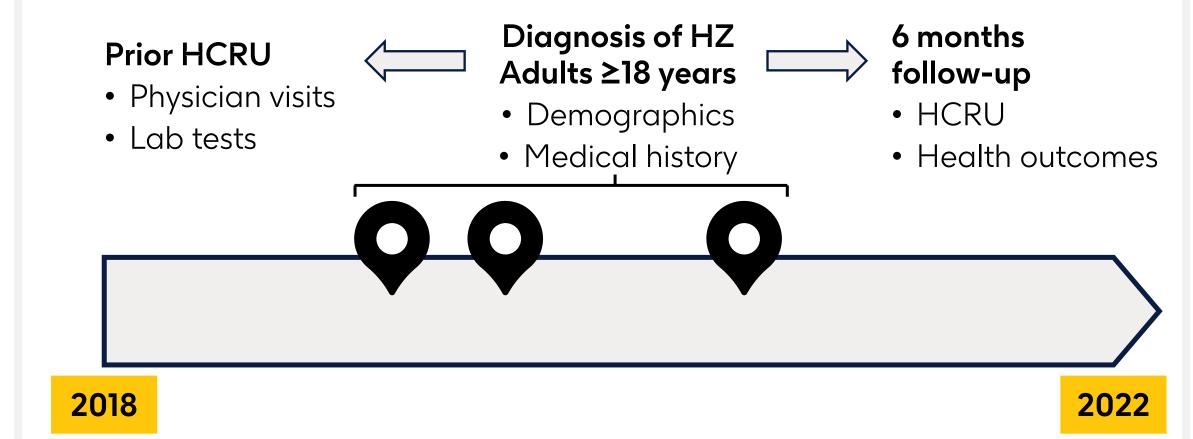


Retrospective, medical chart review at 5 private clinics in Mexico (Figure 1, Figure 2).



Pilot study on 10 patients to develop study extraction form (Supplementary information).

Figure 1: Study scheme

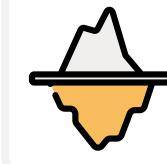


Note: People were stratified by age (e.g., 18-29, 30-39, 40-49, 50-59, 60-69, 70-79 and ≥80 years) and by comorbidity (supplementary information).



Direct costs were calculated using costs for:

- Physician/specialist visits
- Hospitalization
- Drug costs (average from local pharmacy prices)

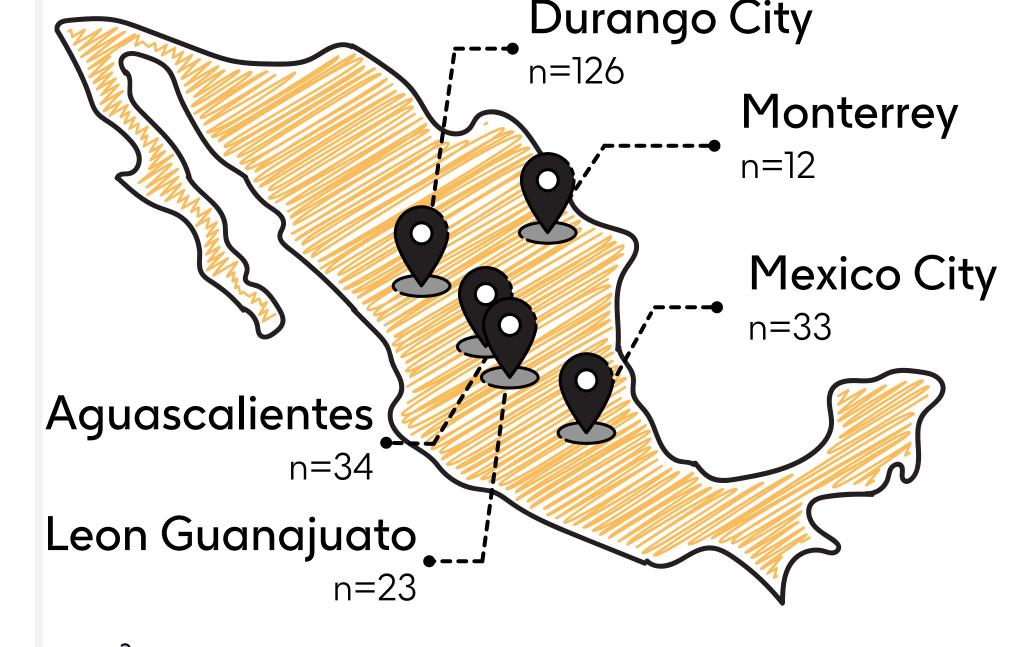


Indirect costs

 Days off work due to outpatient visits, hospitalizations, and follow up visits

Results

Figure 2: Study Population (n=228) and Baseline Characteristics



■ 18-29y

■ 30-39y

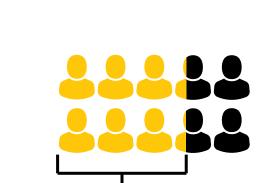
40-49_V

50-59y

■ 60-69y

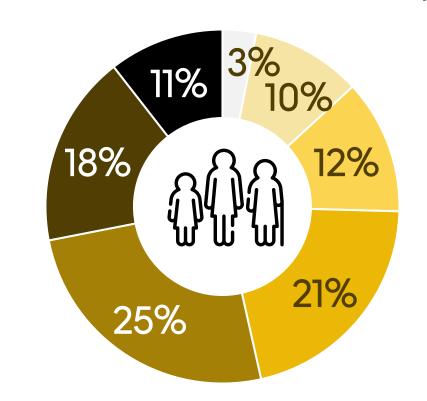
■ 70-79y

■ ≥80y

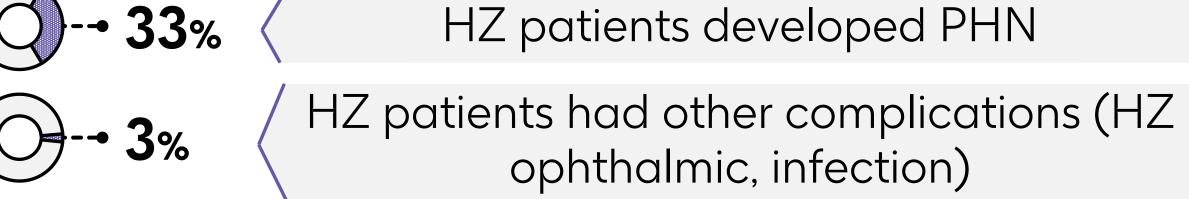


67% with at least 59% female one comorbidity

Complications in People with Comorbidity[†]



Complications Overall



Patients hospitalized

Figure 3: Direct Costs

Overall Population ■ Without PHN 8,000 ■ With PHN 6,000 Average 16,000 12,000 8,000 40-49y 50-59y 60-69y 70-79y 80+y

People with vs without Comorbidity§ comorbidity n=53 (OSD) 80,000 60,000 ■ Without PHN and with comorbidity n=90 ■ With PHN and without comorbidity n=19 40,000 ■ With PHN and with comorbidity n=57 20,000 18-29y 30-39y 40-49y 50-59y 60-69y 70-79y 80+y

Total direct costs

- \$87,465 without PHN
- \$404,677 with PHN



Total indirect costs

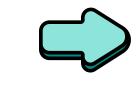
- \$5,411 without PHN
- \$6,884 with PHN



\$551 (\$317- \$791) without PHN

\$3,826 (\$694-\$6,868) with PHN

People with PHN and with comorbidity contribute more to direct costs.



Cost contributions are higher in older age groups (≥50 years).



There are large variations in costs per HZ episode.

 \dagger : Refers to people with the four most common comorbidities (n=118) in this study sample, ie, hypertension (n=51), type 2 diabetes (n=34), HIV/AIDS (n=18) and hypothyroidism (n=6).

§: Patients with unknown PHN status were excluded from the analysis by PHN status.

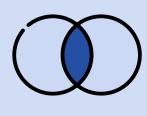
Conclusions



HZ causes a substantial burden to patients and the private healthcare sector.



33% of patients with HZ develop PHN. PHN was a major cost driver for direct costs.



More than 50% of patients had **comorbidities**. People with comorbidities were more likely to develop PHN and they incurred higher costs.

Abbreviations

HCRU, healthcare resource use; HIV/AIDS: human immunodeficiency virus/acquired immunodeficiency syndrome; HZ, herpes zoster; min, minimum; max, maximum; n, number; PHN, postherpetic neuralgia; Q, quartile; US: United States; USD, US Dollar; y, year

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Disclosures

Conflict of interest: Huerta-Garcia Gloria is employed by GSK. Ahmed Nurilign and Guzman-Holst Adriana are employed by and hold financial equities in GSK. Adrian Camacho-Ortiz declares consulting fees from AstraZeneca and payment for lectures from Pfizer and MSD. These authors declare no other financial and non-financial relationships and activities. Alejandro Ernesto Macias Hernandez, Edgar Pérez Barragán and Juan Carlos Tinoco declare no financial and non-financial relationships and activities and no conflicts of interest. Funding: GSK (VEO-000519).