

The Global Cost of Schizophrenia (SCZ) : Insights from a Systematic Review

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ACCEPTANCE
CODE

EE657

OBJECTIVE

Analyze the direct, indirect, and intangible costs of schizophrenia worldwide, and provide insights into cost variations by country income levels.

METHODS

Timeframe: January 2010 – June 2024

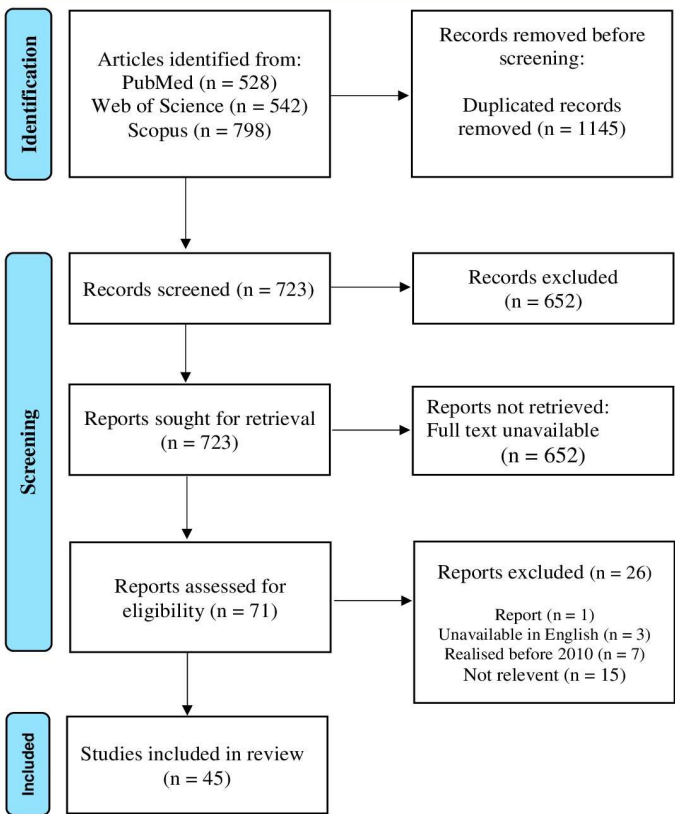
Inclusion Criteria

Population: Patients with schizophrenia

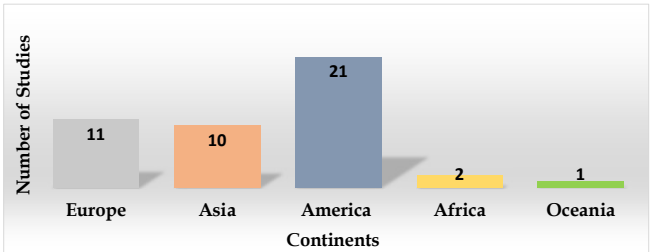
Type of cost: Direct & Indirect costs

Language: English or French

Identification of studies via PubMed, Web of Science and Scopus databases



RESULTS



Studies mainly conducted in Europe and the Americas.

Country-Specific Costs Variations:

- Higher direct costs in high-income countries (e.g., \$32,920 in the US) compared to upper-middle-income countries (e.g., \$371 in Thailand).
- Lower-middle-income countries, such as Nigeria, faced significant challenges, with direct costs as low as \$349 per patient, and higher indirect costs (e.g., \$1,183 in Sri Lanka).

Direct vs. Indirect Costs

Studies evaluating both direct and indirect costs showed that indirect costs are often higher (e.g., Indirect costs at 72% of the total, amounting to \$72 million in Malaysia)

Key indirect costs:

Productivity loss = \$32,141; Crime-related costs = \$22,342; Fiscal losses = \$56,707; Caregiver impact = \$22,087

Cost Type	Average Cost (USD)	Details
Direct Costs (Average)	\$11,213	Annual cost per patient
Direct Costs (Range)	\$349 - \$32,920	Minimum in Nigeria to Maximum in the US
Indirect Costs	-	Higher than direct costs, e.g., productivity loss (\$32,141)

DISCUSSION

Schizophrenia imposes significant economic burden, with substantial direct costs like hospitalization and medication, and indirect costs such as productivity loss. Financial impacts vary across regions, shaped by healthcare policies and local practices.

CONCLUSION

This systematic review highlighted significant cost variations of SCZ across countries. High-income countries had higher direct costs due to advanced healthcare. Upper-middle-income countries and lower-middle-income countries faced lower costs, reflecting economic constraints and limited resources. Understanding these disparities is crucial for policymakers to optimize resource use and improve patient care.

RECOMMENDATIONS

- Raise Awareness: Inform stakeholders about the economic burden of SCZ.
- Invest in Prevention: Promote early detection and effective treatment to reduce costs.
- Improve Access to Care: Strengthen health services to lower direct costs.