

# Cost-Effectiveness Analysis of RSVPreF3 OA Vaccine in Greece for Adults Aged $\geq 60$ Years

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Digital poster  
Supplemental data



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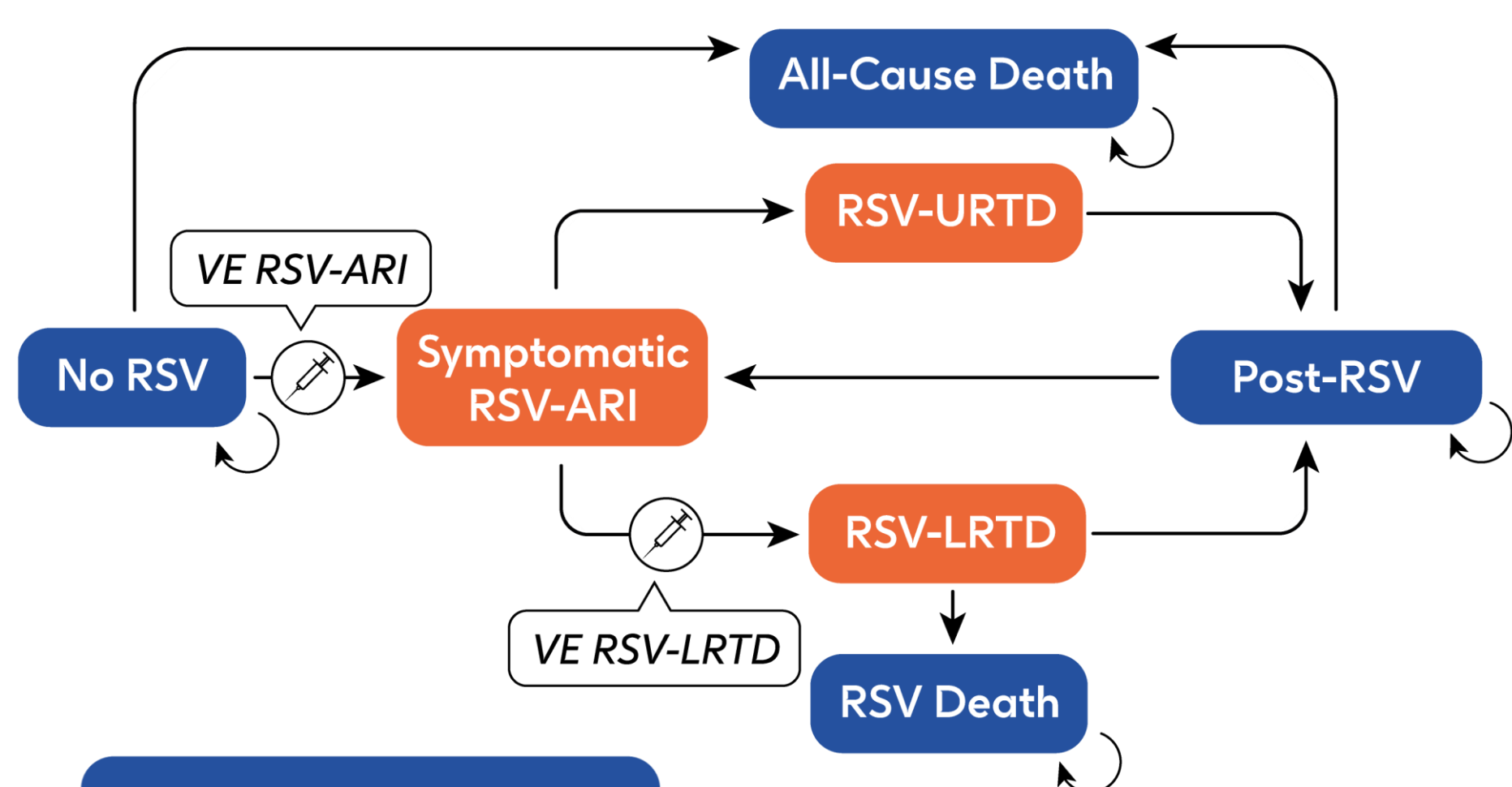
Vaccinating adults aged 70+ and those aged 60-69 with underlying medical conditions with adjuvanted RSVPreF3 is a cost-effective strategy that significantly reduces RSV's burden in Greece.

## Aims

- This study aims to assess the cost-effectiveness and public health impact (PHI) of the GSK adjuvanted RSVPreF3 vaccine, one of the approved preventive interventions for respiratory syncytial virus (RSV) for  $\geq 60$  years population in Greece.

## Study design

### Static Markov Model Design



Health State

Disease Transition Event

### A monthly-cycle static Markov model

- adults aged 60-69 years with underlying medical conditions
- adults aged  $\geq 70$  years from general population

Healthcare system perspective analyzing costs and benefits of vaccination from a healthcare system's viewpoint only

Time Horizon: 5 years

Cost per dose: € 162.5

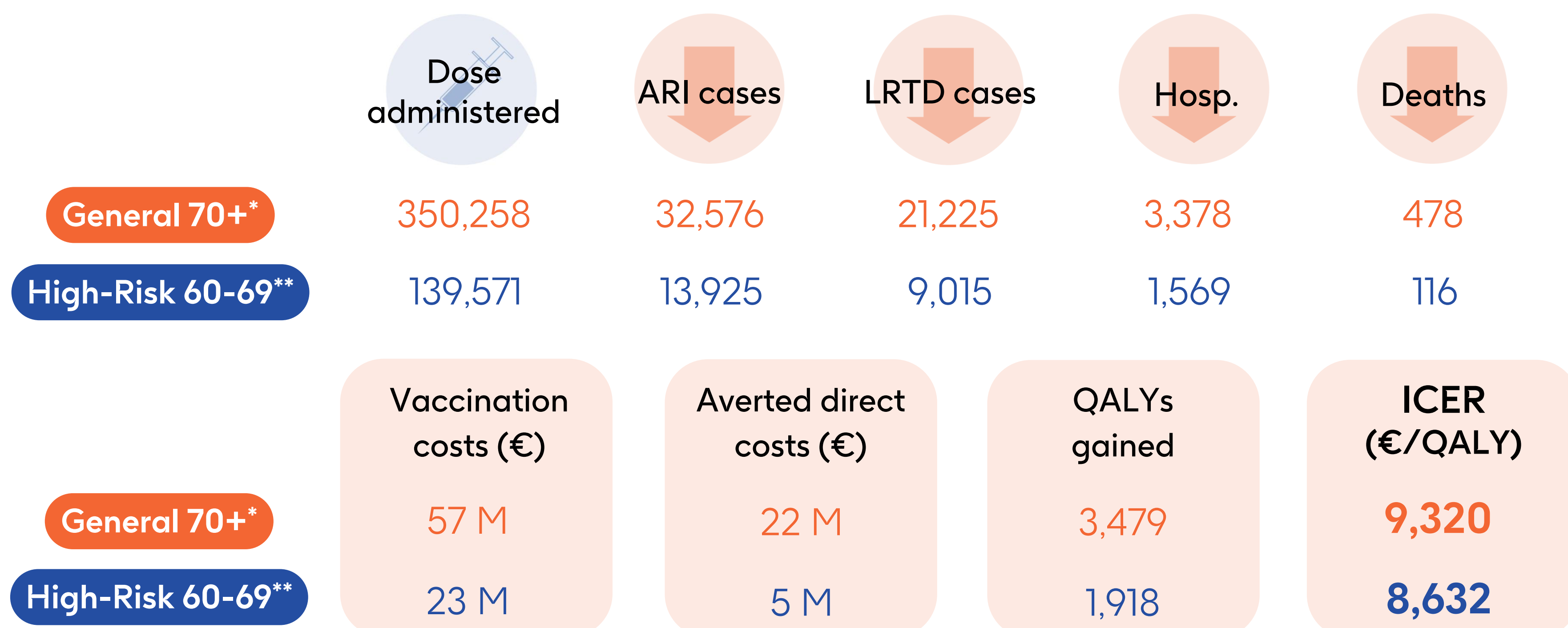
Vaccination Coverage: One-time vaccination 20% among General 70+ population and High-Risk 60-69 population

Discount rates: 3.5% for costs and utilities

Scenario: Vaccination vs No vaccination

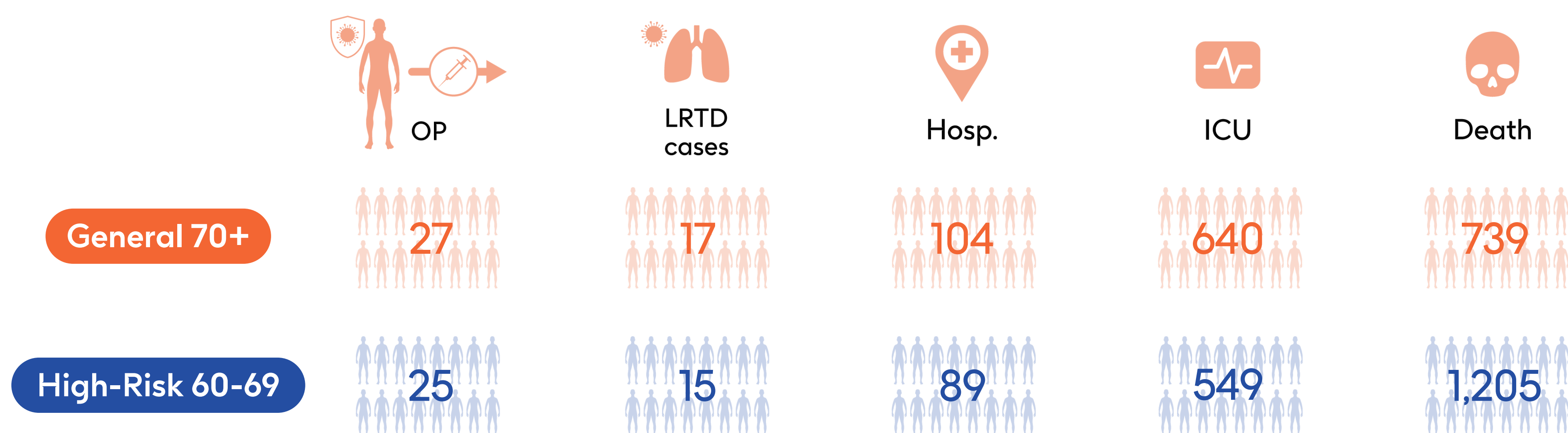
## Results

Adjuvanted RSVPreF3 vaccine would substantially reduce the burden of RSV among greek adults aged  $\geq 60$  years by preventing RSV-LRTD events, hospitalizations, and deaths. Cost-effective outcomes are provided over 5 years.

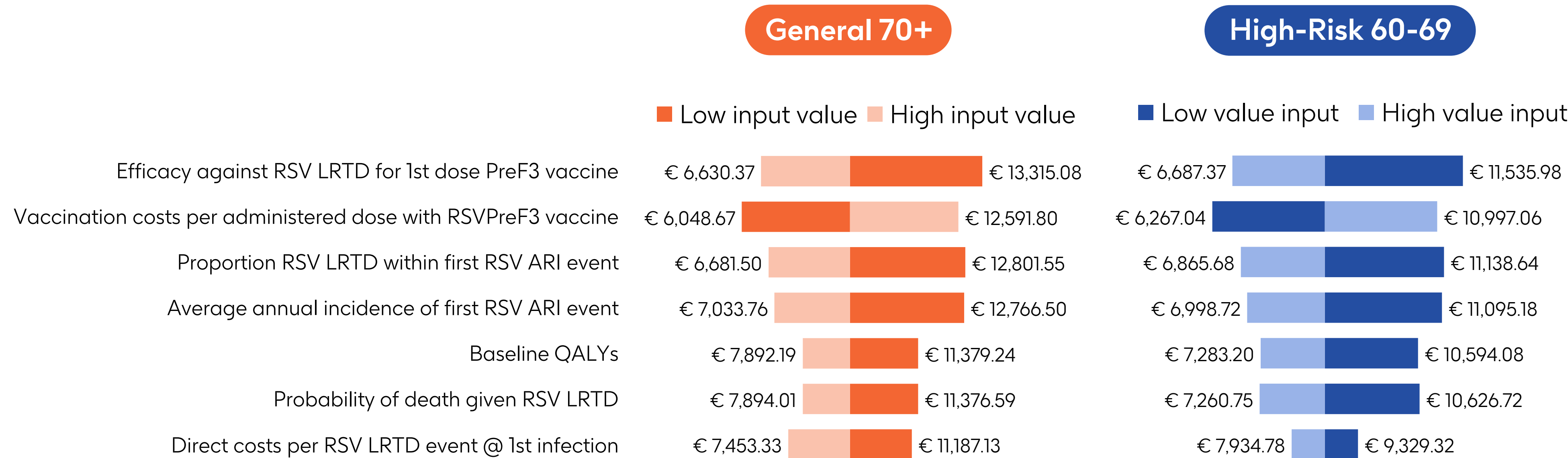


\* adults aged  $\geq 70$  years from general population; \*\*adults aged 60-69 years with underlying medical conditions

Number needed to vaccinate (NNV) to prevent one case of ARI, LRTD, hospitalization, ICU admission, and deaths.



Vaccine efficacy against LRTD and vaccination costs per administered dose drive the impact on ICER in univariate sensitivity analysis of adjuvanted RSVPreF3 vaccine.



## Background

- Respiratory syncytial virus (RSV) infections pose a significant health burden among adults aged  $\geq 60$  years worldwide.<sup>1</sup>
- US data estimates an annual RSV incidence of 3-7% in healthy older adults, compared to 4-10% in risk groups.<sup>2</sup> In adults aged  $\geq 65$  years, the U.S. sees an estimated 159,000 RSV-related hospitalizations annually, similar to over 145,000 in the same age group across the EU.<sup>3</sup>
- The vaccine has been approved for the prevention of RSV-LRTD in individuals 50 years of age and older at increased risk in Europe.<sup>4</sup>

## Conclusions

Administering adjuvanted RSVPreF3 vaccine to adults aged 60 and older in Greece is a cost-effective approach that decreases RSV's burden, including hospitalizations, LRTD events, and deaths. It also enhances QALYs and lowers medical expenses associated with RSV.

### Abbreviations

RSV: respiratory syncytial virus, PHI: public health impact, LRTD: lower respiratory tract disease, NNV: number needed to vaccinate, QALY: quality adjusted life year, ICER: incremental cost effectiveness ratio, Hosp: hospitalization, ICU: intensive care unit

### References

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**Conflict of interest:** EZ and AA are employed by GSK. EZ also holds financial equities in GSK. NK is a consultant working for GMAS which has received consulting fees from GSK for conducting ECONOMIC analyses. These authors declare no other financial and non-financial relationships and activities. Funding: GSK (study identifier: VEO-000943).