

## LEVERAGING TIME-USE DATA TO ESTIMATE MARKET AND NON-MARKET PRODUCTIVITY LOSSES DUE TO

# RESPIRATORY SYNCYTIAL VIRUS (RSV) DISEASE AMONG ADULTS AGED ≥60 YEARS IN THE UNITED STATES (US)



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#### (i) INTRODUCTION



**RSV** is a **major cause of acute respiratory infection** among older adults, with clinical and economic **burden increasing with age**.<sup>1,2</sup>



To capture the broad value for money when evaluating healthcare interventions, recent guidelines recommend the inclusion of a societal perspective<sup>3,4</sup>; however, **indirect costs** are often limited to wages lost due to missed work (market productivity losses).<sup>5</sup>



Market losses are **limited to those who remain in the workforce**; yet older adults provide substantial added value to society under the form of non-market productive activities such as caregiving, household activities and volunteering, among others.6



In this study, we aim to facilitate more comprehensive economic evaluations for RSV interventions in older adults by estimating both market and non-market productivity **losses** due to RSV cases and premature mortality in US adults aged ≥60 years.

#### METHODS



**Time losses** relevant to RSV were retrieved from literature<sup>7,8</sup>:

- Hospitalized lower respiratory tract disease (LRTD) cases: 7 days
- Emergency department (ED) and outpatient visit cases: 3.3 days
- Nonmedically-attended cases: 0.5 day (60-64 years) to 1 day (≥65 years)



These time losses were classified as market, non-market, or non-productive activities<sup>9</sup> based on an analysis of American Time Use Survey (ATUS)<sup>10</sup> data.



RSV-specific time losses were **valued at unit costs**, derived from the US Bureau of Labor Statistics<sup>11</sup> for market productivity losses, and from Grosse et al.<sup>9</sup> for non-market productivity losses. Non-productive time was valued at \$0. (Supplementary material)



Productivity losses due to RSV premature death were included by inflating published estimates<sup>9</sup> using the gross domestic product deflator.<sup>12</sup> Note: Productivity growth was not applied when deriving 2022 estimates.



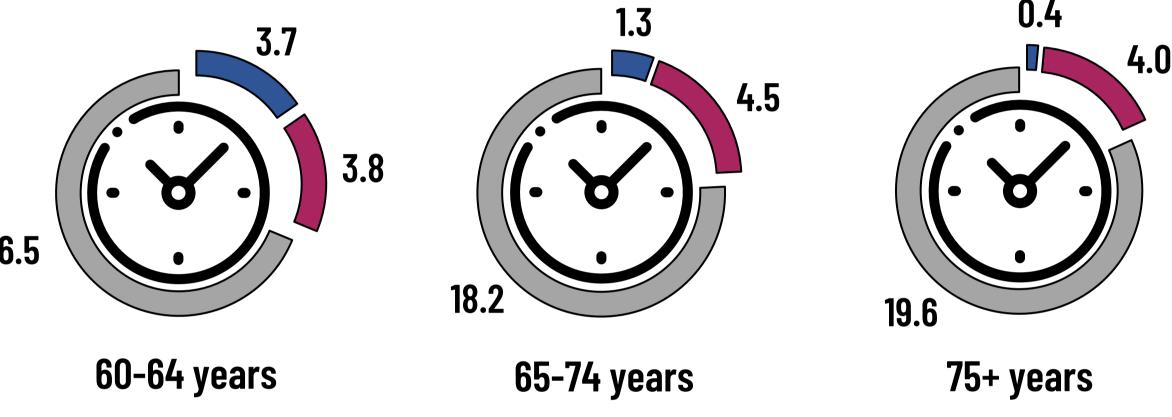
A **Markov model**<sup>2</sup> was used to estimate annual productivity losses due to RSV disease and premature death in US adults aged ≥60 years.

### RESULTS



- Older adults spent less time performing market vs. non-market productive activities.
- Market productive activities decreased with age, whereas nonmarket productive activities remained relatively stable throughout the age groups.

## Time use by age group in hours per day



RSV-related productivity losses were highest for adults aged 60-64 years and decreased with age; non-market activities contributed substantially to productivity losses across all older adults.

No productivity

Non-market productivity

<b>Productivity losse</b>	s due to RSV URTD cas	se <sup>8-10,12</sup>		
	Market	Non-Market	Total	
60-64 years	\$156	\$74	\$230	
65-75 years	\$65	\$114	\$180	
75+ years	\$17	\$102	\$120	
Productivity losses due to RSV LRTD case <sup>7-10,12</sup>				
	Market	Non-Market	Total	
60-64 years	\$275	\$130	\$405	
65-75 years	\$112	\$195	\$307	
75+ years	\$32	\$186	\$218	

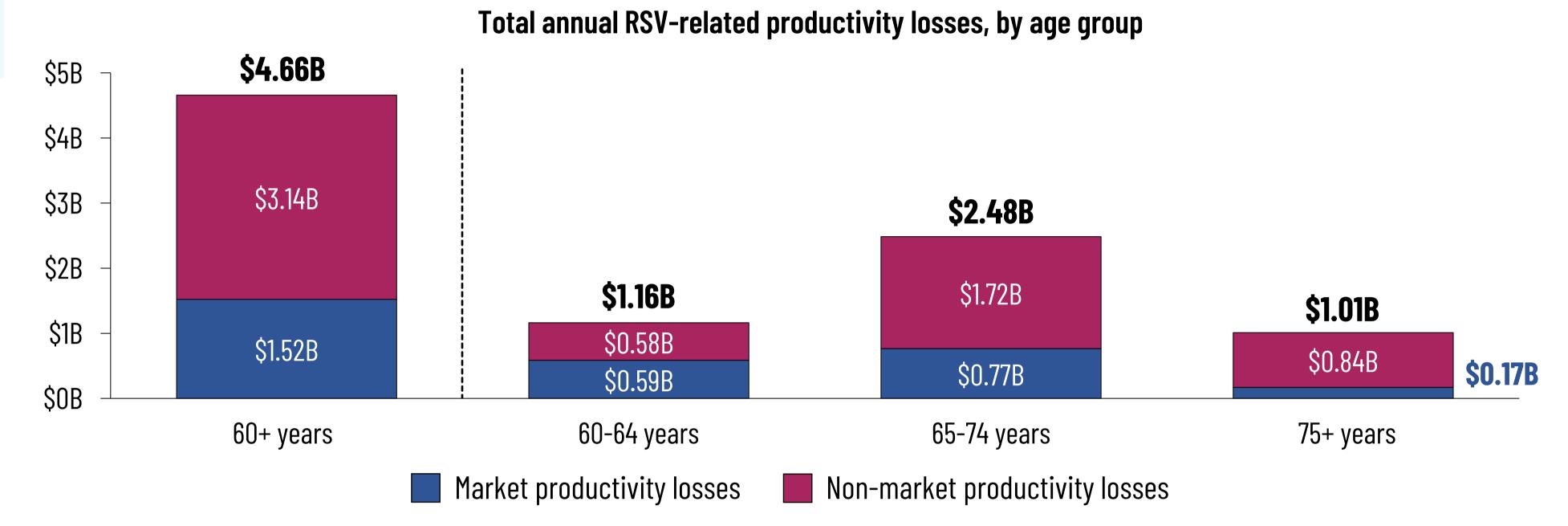
Productivity losses due to premature RSV-related death <sup>9,12</sup>				
	Market	Non-Market	Total	
60-64 years	\$322,286	\$380,945	\$703,231	
65-69 years	\$155,004	\$310,438	\$465,441	
70-74 years	\$73,002	\$231,650	\$304,651	
75-79 years	\$34,391	\$155,016	\$189,407	
80-84 years	\$14,921	\$85,933	\$100,853	
85-89 years	\$6,745	\$36,867	\$43,612	
90+ years	\$2,211	\$8,059	\$10,270	

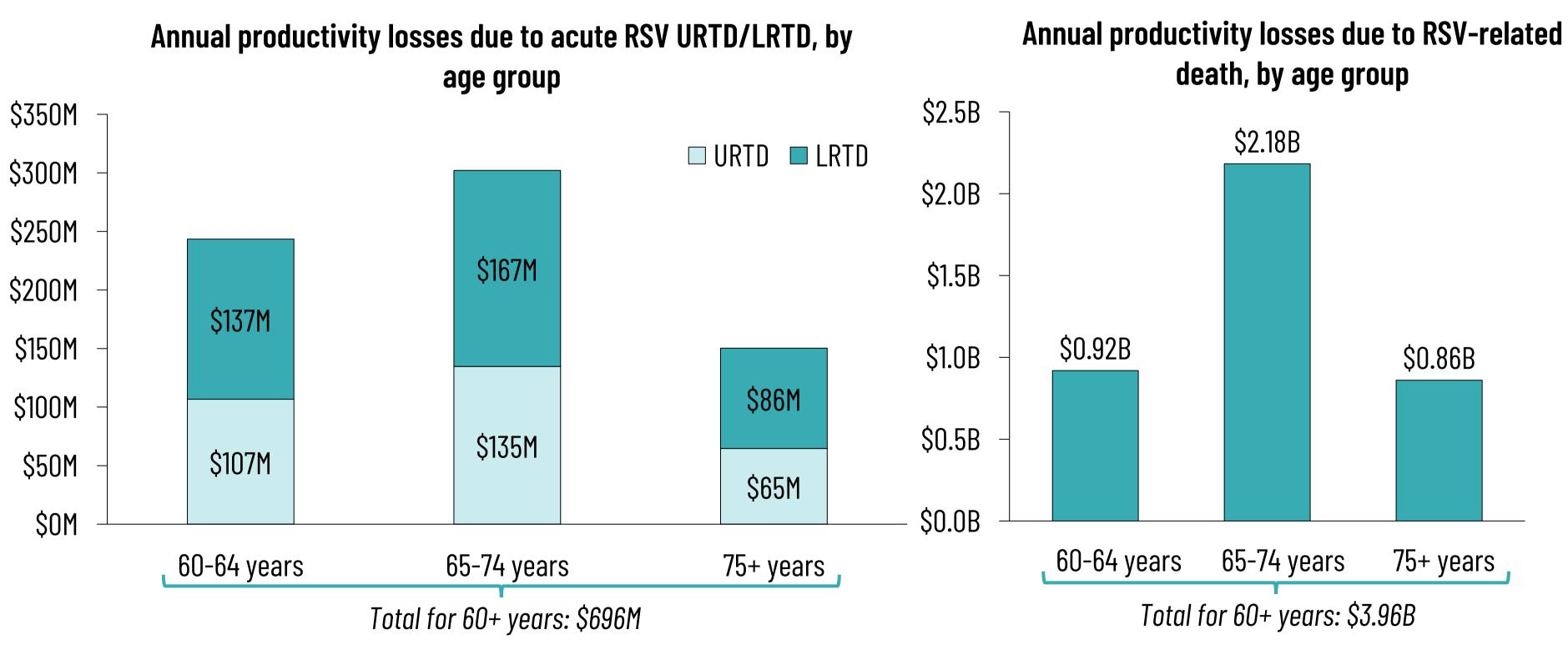
LRTD: lower respiratory tract disease; RSV: respiratory syncytial virus; URTD: upper respiratory tract disease; Note: Total values may differ due to rounding

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- 25% of productivity losses due to RSV occur in adults aged 60-64 years.
  67% of productivity losses result from disruptions in non-market productive activities.





- ✓ In addition to clinical and direct medical cost burden, RSV causes nearly \$4.7 billion in productivity losses among US older adults annually (out of the total \$7.4 billion societal cost of RSV<sup>2</sup>).
- Capturing both market and non-market productivity losses more comprehensively reflects older adults' value to society, with non-market productivity losses estimated at approximately \$3.1 billion.

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