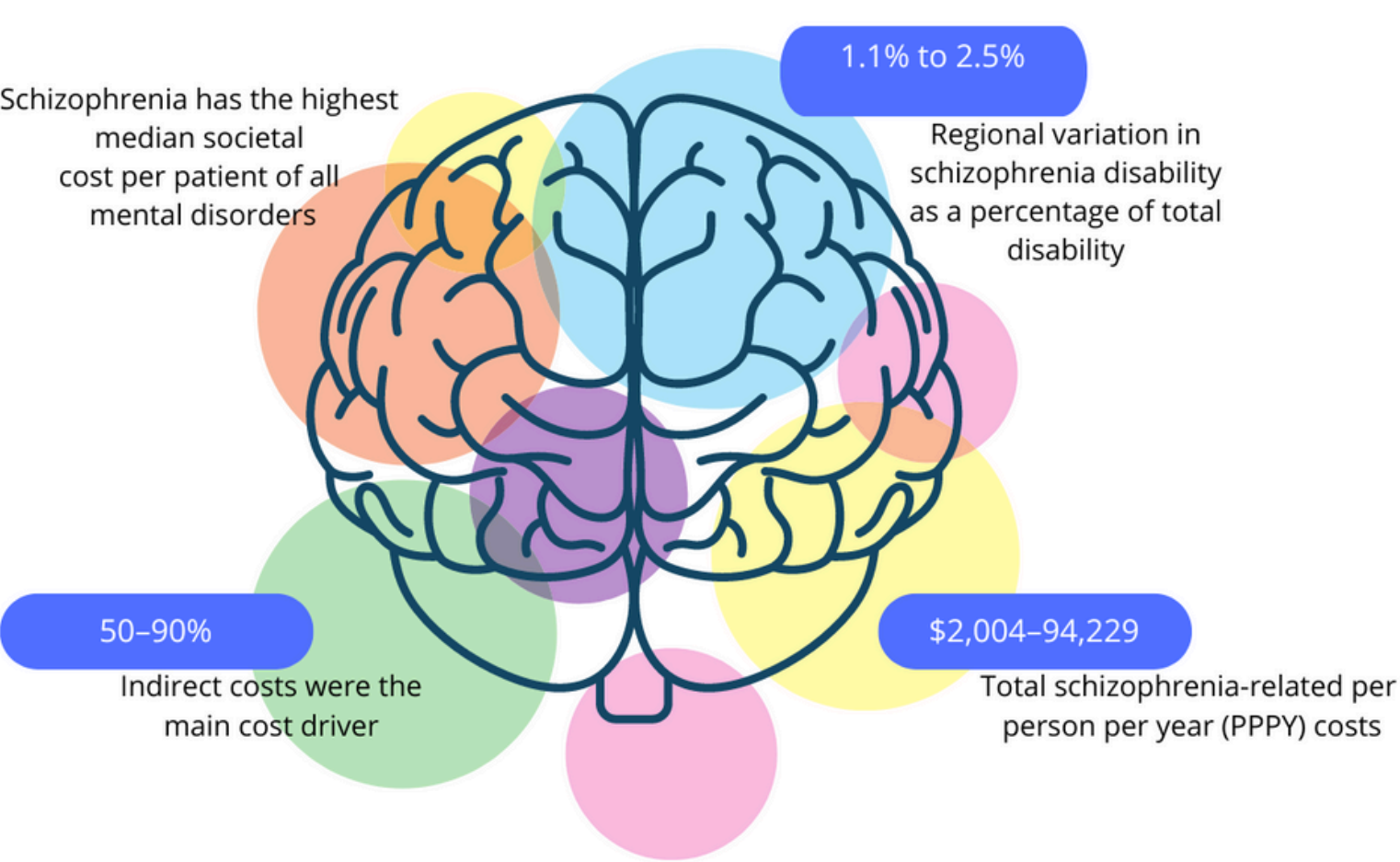


Schizophrenia Burden and Economic Burden Under an Impact Analysis by Therapeutic Scheme

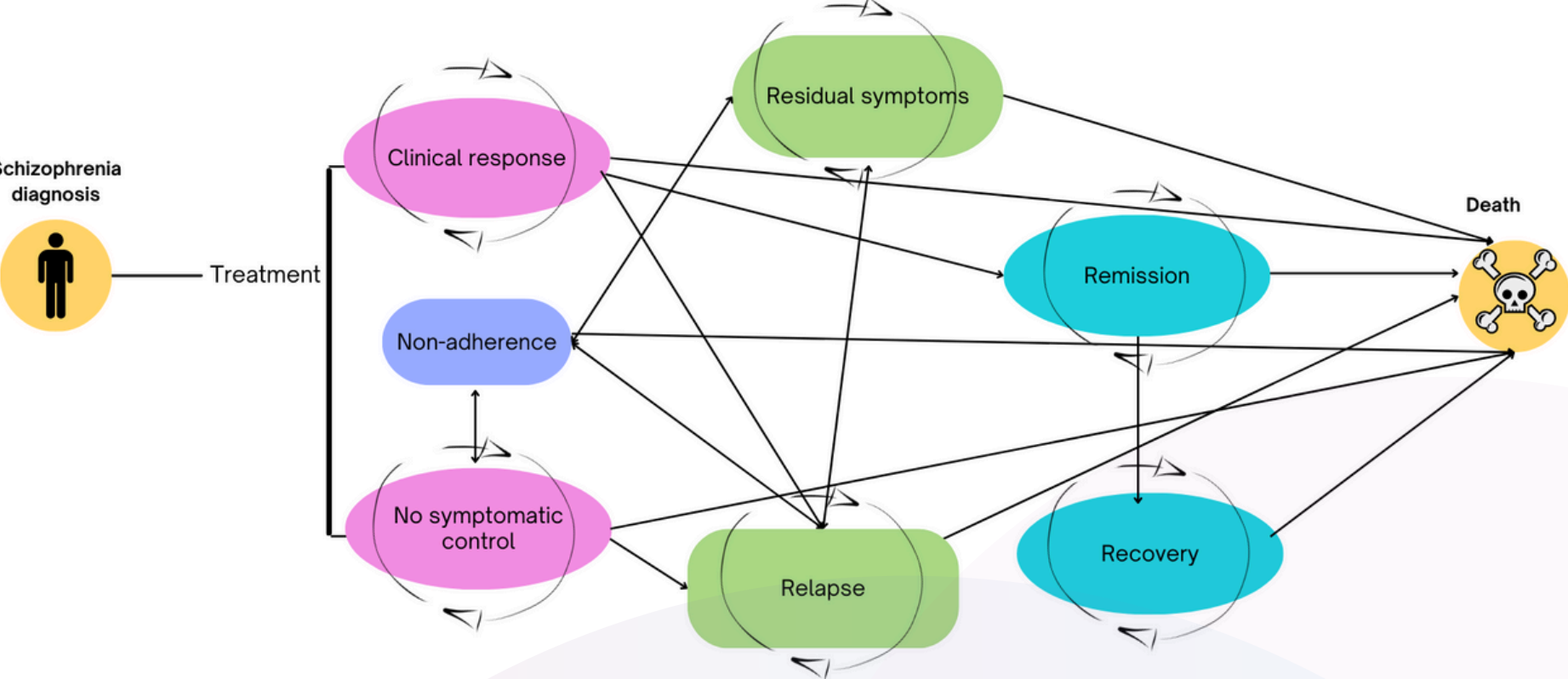
Colimon S*, Cortés J**, Agudelo C*

*SAMEIN, Medellín, Colombia,
**Subred centro-oriente y subred sur, Bogotá, Colombia

Introduction



Results



Methods

Propose a conceptual model to assess the magnitude of lost health due to schizophrenia in the Colombian context.

To carry out a study on the burden of a disease using AVISAS, an epidemiological approach is employed that integrates morbidity, mortality, and disability data related to the disease

In the context of schizophrenia, this model is applied to simulate the natural course of the disease and assess the impact of different treatments on clinical and economic outcomes over time. Recent studies have used the Markov model to analyze the cost-effectiveness of pharmacological interventions, psychosocial therapies, and disease management programs in patients with schizophrenia

Transition matrix for LAIs								
	No symptomatic control	Clinical response	Non-adherence	Relapse	Residual symptoms	Remission	Recovery	Death
No symptomatic control	0,3588	0	0,02	0,62	0	0	0	0,0012
Clinical response	0	0,25	0	0,1988	0	0,55	0	0,0012
Non-adherence	0,5408	0	0,45	0,008	0	0	0	0,0012
Relapse	0,0529	0,75	0,0439	0,11	0,042	0	0	0,0012
Residual symptoms	0	0	0	0,2288	0,32	0,45	0	0,0012
Remission	0	0	0	0	0	0,1788	0,82	0,0012
Recovery	0	0	0	0	0	0	0,9988	0,0012
Death	0	0	0	0	0	0	0	1

Oral Transition matrix								
	No symptomatic control	Clinical response	Non-adherence	Relapse	Residual symptoms	Remission	Recovery	Death
No symptomatic control	0,008	0	0,1708	0,82	0	0	0	0,0012
Clinical response	0	0,11	0	0,6388	0	0,25	0	0,0012
Non-adherence	0,008	0	0,0908	0,9	0	0	0	0,0012
Relapse	0,089	0,011	0,173	0,1458	0,58	0	0	0,0012
Residual symptoms	0	0	0	0,28	0,56	0,1588	0	0,0012
Remission	0	0	0	0,0388	0	0,52	0,44	0,0012
Recovery	0	0	0	0,42	0	0	0,5788	0,0012
Death	0	0	0	0	0	0	0	1

Conclusions

Schizophrenia is a disease of high social impact, with higher prevalence in vulnerable populations and affects not only patients but also the entire family/social environment. In disease burden it is above COPD and diabetes, with proximity to more prevalent pathologies such as heart failure and cancer. Patient profiling for therapeutic assignment generates positive impacts on the reduction of the total burden.