OBJECTIVE
To conduct a pharmacoeconomic analysis of oral drugs, tegafur vs capecitabine, for advanced colorectal cancer (CRC) in adult patients.

METHODS
Indirect comparison and network meta-analysis of clinical efficacy and safety of tegafur vs capecitabine and tegafur + calcium folinate vs capecitabine were performed by authors. Cost-minimization analysis (CMA) with calculation of cost minimization difference was used for economic evaluation of studied drugs.

RESULTS
In RCT both tegafur + calcium folinate and capecitabine had a statistically significant advantage over 5-fluorouracil + calcium folinate: the full and partial objective tumor response was achieved in more patients (table 1). There was no statistically significant difference between oral tegafur, both in monotherapy or in combination with calcium folinate, and capecitabine for advanced CRC treatment in an indirect comparison (relative risk (RR) = 1.31; 95% CI [0.70; 2.48] and network meta-analysis (figure 1) of available studies [1-10].

Tegafur seems to be a cost-saving option compared with capecitabine with similar efficacy and safety, RCTs with direct comparison might provide better evidence of these two drugs comparative effectiveness.

DISCUSSION
Tegafur seems to be a cost-saving option compared with capecitabine with similar efficacy and safety, RCTs with direct comparison might provide better evidence of these two drugs comparative effectiveness.

REFERENCES
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