PND38

Cost of health care services offered by Parkinson Disease Associations in Spain.

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Introduction
Parkinson’s Disease (PD) is among the most common neurodegenerative
diseases. PD is characterized by bradykinesia, tremor, rigidity and postural
instability. Comorbidities such as mental disorders, autonomic dysfunction,
difficulties in swallowing and speech, as well as sleep impairment, may occur
during the course of the disease.¹

Care of PD patients consumes a considerable amount of health care resources
and represents a significant economic burden on patients and their families.² In
Spain, there are over 45 Parkinson Disease Associations (PDA) encompassed in
the Spanish Parkinson Federation, which provide PD patients and their relatives
a wide range of care services with partial and variable financial support from the
government.

Objective
To estimate the costs associated to PDA’s offered services and to calculate the
potential savings that they represent to the National Health System (NHS).

Methods
• A survey conducted by the Spanish Federation of PDA collected information
on location, number of members, type of services offered by PDAs and use by
patients of the offered services of each PDA. Services were classified
according to whether or not they were potentially financed by the NHS, based
on the existing national portfolio for reimbursed services.

• Weekly use was recorded and costs were calculated upon official rates³
(updated to €, 2014). Potential savings for the NHS were estimated by
calculating the weekly costs associated to potentially financed services
that were provided by the PDA.

Results
PDA and patients participants
• 42 Spanish PDAs that embraced a total of 11,420 patients participated in the
study. After questionnaire reviews, one was excluded from the study, consequently, a total of 41 PDAs and 11,274 patients were included in the
analysis.

Use of services offered by PDA
• Among the 26 different services offered by PDAs, speech therapy (n=41 PDAs
offered this service), physiotherapy (n=39), cognitive stimulation (n=23) and
occupational therapy (n=23) were the most frequently offered services by
PDA.

• A 53.8% of services provided by PDAs were classified as potentially
refundable by the Spanish NHS.

• The 22.6% and 19.3% of PD patients attended to physiotherapy and speech
therapies, being both of them the most commonly used services (Figure 1).

Table 1. Weekly cost attributable to PDA offered services.

<table>
<thead>
<tr>
<th>Services offered by PDA</th>
<th>NHS Refundable (€/week)</th>
<th>NHS Not refunded (€/week)</th>
<th>Total Cost (€/week)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physiotherapy</td>
<td>€140,128.97</td>
<td>€15,195.00</td>
<td>€155,323.97</td>
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<tr>
<td>Speech therapy</td>
<td>€62,541.76</td>
<td>€20,167.50</td>
<td>€82,709.26</td>
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<td>Occupational Therapy</td>
<td>€34,826.96</td>
<td>€3,457.12</td>
<td>€38,284.08</td>
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<td>Logotherapy</td>
<td>€24,115.86</td>
<td>€5,004.00</td>
<td>€29,120.86</td>
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<td>Psychology</td>
<td>€33,241.98</td>
<td>€6,842.00</td>
<td>€39,083.98</td>
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<tr>
<td>Adapted Transport</td>
<td>€109,480.00</td>
<td>€6,142.69</td>
<td>€115,622.69</td>
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<tr>
<td>Neurology</td>
<td>€31,984.80</td>
<td>€9,241.20</td>
<td>€41,226.00</td>
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<tr>
<td>Other services</td>
<td>€56,842.85</td>
<td>€4,570.35</td>
<td>€61,413.15</td>
</tr>
<tr>
<td>TOTAL COST</td>
<td>€125,963.18</td>
<td></td>
<td>€125,963.18</td>
</tr>
</tbody>
</table>

Weekly costs associated to services offered by each PDA
• Weekly mean costs per PDA were €15,980.97 (SD:22,662.98).
• Weekly costs were heterogeneous among different PDAs, ranging from
€1,442.08/week (Castile and Leon) to €207,599.55/week (Castile-La Mancha).
Differences were mainly due to the different number of PDA members and
the diversity of services offered by each PDA.

Potential annual cost saving by NHS
• If we extrapolate the weekly cost of services offered by PDAs to annual costs it
would rise to €34,071,433.24. Considering the cost attributable to services
potentially financed by the NHS, the potential annual cost saving for the
Spanish health system may reach €26,676,000.

• Besides this cost saving, a better disease control and an improvement of
quality of life of these patients may contribute to potential savings of direct
costs.

Conclusions
PDA offer valuable services to PD patients and carers and contribute to make the
costs of the supportive and complementary care of the disease more
affordable to society. Their economic efforts imply great savings to the Spanish
NHS.

References