COST-MINIMIZATION ANALYSIS AND TOTAL COST ANALYSIS FOR A WEIGHT RANGE IN CROHN’S DISEASE TREATMENT WITH ANTI-TNF BIOLOGICS UNDER BRAZILIAN PRIVATE HEALTH CARE SYSTEM PERSPECTIVE

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ABSTRACT

OBJECTIVE: The aim of this study was to describe the total treatment costs related to Crohn’s Disease treatment with biologics and to evaluate these costs based on the most prevalent weight range.

METHODS: A cost-minimization analysis was performed among adalimumab-subcutaneous (ADA) and infliximab-intravenous (IFX) to compare the total treatment costs in Crohn’s disease according to the Brazilian Private HealthCare System perspective. Total treatment cost was calculated based on the dose per application, number of vial/syringe, cost of application and median and range of weight. These inputs were based on scientific literature. Yearly treatment cost was calculated for patients with a median of 68kg, according to doses defined in product labels. A cost analysis for a weight range was performed. Drug prices were based on Factory Prices plus 18% taxes (CMED source). An univariate analysis was performed to determine the impact on results.

RESULTS: The median patient weight used in this analysis was 68±4,08kg (Weight range: 64 to 72kg - normal distribution). For IFX the Medication Cost was R$92.478.12, Application Cost was R$2.360.33 and the Total Treatment Cost was R$94.838.45. For ADA the Medication Cost was R$85.807.15, Application Cost was R$3.788.98 and the Total Treatment Cost was R$89.596.13. Comparing the scenario with IFX and ADA, the treatment with ADA presented savings for nearly 68% of patients with Crohn’s Disease in the Brazilian Private HealthCare System.

CONCLUSION

The treatment of CD with ADA compared to IFX presented economic savings for nearly 68% of patients with CD in the Brazilian Private HealthCare System.

REFERENCES


DISCLOSURES

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