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Indice

Valutazione economica del trattamento con alteplase di pazienti con ictus ischemico in fase acuta, con riferimento all'Italia*

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Abstract

Economic evaluation of alteplase for the treatment of acute ischaemic stroke in Italy

Introduction: Alteplase is a recombinant tissue-Plasminogen Activator (rt-PA) which can reduce disability in patients with acute ischaemic stroke. This study proposes a cost-effectiveness analysis, in the perspective of the Italian National Health Service.

Methods: A life-time Markov model compares alteplase added to standard care versus standard care alone. Depending on treatment outcome, patients enter one of three health states: independent stroke, dependent stroke, and death. In each of the subsequent years, survivors may or may not face recurrence and be re-distributed in the above-mentioned states. The endpoint of the study is the cost per QALY (Quality Adjusted Life Year) gained (that is the incremental cost-effectiveness ratio [ICER]). With regard to costs, the study setting is Italy; treatment, hospitalization, ongoing care resources valuations are based on expert opinion data.

Results: In the base case alteplase resulted a dominant strategy (costs saved per patient: €409). Both in the deterministic and probabilistic sensitivity analysis, alteplase dominance was confirmed in most cases.

Conclusions: Compared with standard treatment, alteplase can be considered a dominant option for the treatment of acute ischaemic stroke in Italy. Such result appears robust when tested against uncertainty.

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