PSS5

CLINICAL EFFECTIVENESS OF FUMARIC ACID ESTERS (FUMADERM) IN PSORIASIS: A SYSTEMATIC REVIEW OF LITERATURE

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OBJECTIVES: The purpose of this study was to provide a systematic literature evaluation on clinical efficacy of Fumaderm (FAE) in patients suffering from psoriasis and psoriatic arthritis. METHODS: Systematic literature search in electronic databases (MEDLINE, Cochrane and Embase) was performed (from inception to March 14, 2014). Results were presented by narrative synthesis including a quality assessment using Jadad scale. RESULTS: Three randomized controlled trials were included (Fallahi Arani 2011, Altmeier 1994, Peeters 1992). Quality of studies ranged from 3 to 4 points. Observation period was 16 weeks for all studies. One open-label study comparing FAE with methotrexate (MTX) in moderate to severe chronic plaque psoriasis was identified. The primary efficacy endpoint was the difference in mean change from baseline in Psoriasis Area and Severity Index (PASI). Patients treated with FAE (±SD) decreased to 10.5 ± 6.7 compared with starting value of 18.1 ± 7.0 in patients treated with MTX. The absolute difference between groups (FAE vs MTX) was 7.6 ± 5.0 (p < 0.04). RESULTS: There were no significant adverse events reported for FAE, whereas some adverse events were reported for MTX, mainly nausea and vomiting. CONCLUSIONS: A total of 9,091 patients, 25,734 wounds, and 222,666 encounters for VLU were extracted from the Intellicure Limited Data Set (I-LDS). The I-LDS extracts records with cellular/tissue derived products (CTPs) have shown promising efficacy for VLU; however the success rate is approximately 50% at 6 months. Clinical trials are ongoing. OBJECTIVES: Venous leg ulcers (VLUs) are a debilitating condition for patients with venous insufficiency. Compression therapy is the standard care for treatment of VLU. The objective was to identify patient and clinical characteristics in the VLU population and examine patterns of CTP utilization. METHODS: Retrospective, de-identified electronic medical records from 2007–2013 were extracted from the Intellucare Limited Data Set (I-LDS). The I-LDS extracts records from 96 hospital-based outpatient wound centers. Patient, wound and encounter level characteristics were examined. CTPs of interest included extracellular matrix (ECM), human skin equivalent (HSE), and living skin equivalent (LSE). RESULTS: A total of 9,091 patients, 25,734 wounds, and 222,666 encounters for VLU were identified. The majority of patients was male (50.5%), Caucasian (74.1%), and reported Medicare as their primary insurance (53.4%). The average age was 68.9 (SD 21.5) years. The mean wound surface area was 20.1cm² (SD 83.4). The average overall wound duration was 5.8 months (SD 26.7). Of the 25,734 wounds, 7.1% received an ECM product (595 patients), 7.1% received an HSE product (595 patients), and 7.1% received a LSE product (595 patients). CONCLUSIONS: CTP utilization was relatively low within outpatient wound centers. Results from this analysis indicate that health care providers are using CTPs on older, more difficult-to-heal VLUs.

PSS10

A US HOSPITAL ECONOMIC IMPACT MODEL FOR ORITAVANCIN IN ABSSSI PATIENTS WITH RISK OF MRSA INFECTIONS

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OBJECTIVES: It is estimated that acute bacterial skin and skin structure infections (ABSSSI) are present for about 15% of hospital admissions in the US. Analyses of hospital claims indicate that 74% of ABSSSI admissions involve empiric treatment with methicillin-resistant Staphylococcus aureus (MRSA) active antibiotics. Hospitalization costs could be reduced if moderate-severe ABSSSI patients were treated to a greater extent in the observational unit followed by discharge to outpatient parenteral antibiotic therapy (OPAT). Oritavancin is a novel single-dose regimen, intravenous lipoglycopeptide antibiotic for ABSSSI caused by gram-positive bacteria, including MRSA. The aim of this study was to quantify the potential savings of using oritavancin for ABSSSI patients at risk of MRSA from a US hospital perspective. METHODS: A decision analytic model based on current clinical practice was developed to estimate the economic value of decreased hospital resource usages by oritavancin. Utilization of antibiotics was informed by analysis of the Premier hospital database. Demographic and clinical data were derived from a targeted literature review. ER, observation, laboratory, administration costs were from Medicare National Health Expenditures data. Drug costs were 2014 wholesale acquisition costs. To estimate the economic impact of reducing resources using oritavancin we set its price to $0. RESULTS: For a hypothetical US hospital treating 1,000 ABSSSI patients eligible for MRSA antibiotics/year, the administration of oritavancin in 25.75% of patients facilitates shifting patients to the OPAT setting (441 to 561 patients) with a total annual economic impact of $2,752K. Inpatient and outpatient costs were reduced by $1,543K and $209K, respectively. Inpatient cost savings were derived from a reduction in hospitalizations and an estimated clinical improvement. CONCLUSIONS: Using oritavancin in moderate-severe ABSSSI patients, including those at risk of MRSA, is estimated to deliver an estimated cost reduction of $2,752K/patient by shifting patient care to the OPAT setting, and decreasing resource utilization.

PSS11

ECONOMIC IMPACT OF VISUAL IMPAIRMENT: A PILOT STUDY IN SINGAPORE

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OBJECTIVES: To examine the economic impact and independent determinants of visual impairment (VI) in Singapore. METHODS: 100 patients with VI associated with the most common eye diseases were recruited from the Singapore National Eye Centre. VI was classified as mild and moderate/severe VI based on the presenting visual acuity (VA) in the better-seeing eye. Medical costs (MC) and loss of productivity (LP) in the patients and their families were estimated based on the center’s billing data and self-reported data, respectively. LP was calculated for working patients based on absenteeism due to VI. Linear regression models were used to assess the association between MC and VI, MC and EQ-5D, and between LP and VI. RESULTS: A considerable number of glaucoma patients do not reach IOP target, blindness globally. The newly published IGS guidelines state that if the first choice monotherapy is well tolerated and has effective intra ocular pressure (IOP) lowering but has not succeeded in reaching the target pressure, the addition of a second drug should be considered. METHODS: German patient databases were searched in the following areas: glaucoma prevalence and incidence studies in German population as well as treatment paradigm in glaucoma patients. RESULTS: Our analysis identifies high number in patients in treatment of glaucoma. CONCLUSIONS: Glaucoma care needs to be given higher priority in public health programs. Especially treatment options for glaucoma patients in need for a combination therapy should be in the focus of health care system decision makers as well as further research in glaucoma clinical trials and clinical care.

SENSORY SYSTEMS DISORDERS – Cost Studies

PSS8

PHARMACOEPIDEMIOLOGY OF CELLULAR/TISSUE DERIVED PRODUCTS FOR THE TREATMENT OF LEG ULCERS IN OUTPATIENT CARE SETTINGS

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OBJECTIVES: Venous leg ulcers (VLUs) are a debilitating condition for patients with venous insufficiency. Compression therapy is the standard care for treatment of VLU; however the success rate is approximately 50% at 6 months. Clinical trials with cellular/tissue derived products (CTPs) have shown promising efficacy for the treatment of VLU. The objective was to identify patient and clinical characteristics in the VLU population and examine patterns of CTP utilization. METHODS: Retrospective, de-identified electronic medical records from 2007–2013 were extracted from the Intellucare Limited Data Set (I-LDS). The I-LDS extracts records from 96 hospital-based outpatient wound centers. Patient, wound and encounter level characteristics were examined. CTPs of interest included extracellular matrix (ECM), human skin equivalent (HSE), and living skin equivalent (LSE). RESULTS: A total of 9,091 patients, 25,734 wounds, and 222,666 encounters for VLU were identified. The majority of patients was male (50.5%), Caucasian (74.1%), and reported Medicare as their primary insurance (53.4%). The average age was 68.9 (SD 21.5) years. The mean wound surface area was 20.1cm² (SD 83.4). The average overall wound duration was 5.8 months (SD 26.7). Of the 25,734 wounds, 7.1% received an ECM product (595 patients), 7.1% received an HSE product (595 patients), and 7.1% received a LSE product (595 patients). CONCLUSIONS: CTP utilization was relatively low within outpatient wound centers. Results from this analysis indicate that health care providers are using CTPs on older, more difficult-to-heal VLUs.

PS3

THE EPIEDEMIC MEDICATION TREATMENT FOR GLAUCOMA AND OCULAR HYPERTENSION IN GERMANY

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OBJECTIVES: The purpose of this study is to review the epidemiology and the treatment paradigm of German glaucoma population and to assess the frequency of switches from monotherapy to second- or third-line combination therapy in primary open angle glaucoma in German patients. Glaucoma is the second leading cause of blindness globally. The newly published IGS guidelines state that if the first choice monotherapy is well tolerated and has effective intra ocular pressure (IOP) lowering but has not succeeded in reaching the target pressure, the addition of a second drug should be considered. METHODS: German patient databases were searched in the following areas: glaucoma prevalence and incidence studies in German population as well as treatment paradigm in glaucoma patients. RESULTS: Our analysis identifies high number in patients in treatment of glaucoma. CONCLUSIONS: Glaucoma care needs to be given higher priority in public health programs. Especially treatment options for glaucoma patients in need for a combination therapy should be in the focus of health care system decision makers as well as further research in glaucoma clinical trials and clinical care.