COST-EFFECTIVENESS OF ELETRIPTAN VERSUS SUMATRIPTAN: RESULTS FROM A RANDOMIZED, CONTROLLED TRIAL
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OBJECTIVE: Migraine is a chronic, episodic condition that places a tremendous burden on the health care system, employers, patients and families. This study compared the cost-effectiveness of treating a migraine with one dose of eletriptan 40 mg or sumatriptan 100 mg during a 24-hour period.

METHODS: This study used data from a randomized, placebo-controlled trial to compare the cost-effectiveness of eletriptan 40 mg and sumatriptan 100 mg in treating acute migraine. Three effectiveness measures were compared (sustained headache response at 1 and 2 hours, and sustained pain-free response at 2 hours) over a 24-hour period in defining treatment success. The total cost of treating all evaluable patients was defined as the total cost of the triptans used by patients up to 24 hours after the first dose. The cost per successfully treated patient (CPSTP) was calculated for each of the three definitions of treatment success. The CPSTP is the total cost of treating evaluable patients divided by the number of successfully treated patients.

RESULTS: For the 1-hour sustained headache response, the CPSTP estimates were $103 (95% CI: $89–122) for eletriptan and $149 (95% CI: $126–177) for sumatriptan. For the 2-hour sustained headache response, the estimates were $48 (95% CI: $44–53) and $67 (95% CI: $60–76) for eletriptan and sumatriptan, respectively. For the 2-hour sustained pain-free response, the estimates were $90 (95% CI: $79–105) for eletriptan and $151 (95% CI: $127–181) for sumatriptan. The benefit of eletriptan 40 mg over sumatriptan 100 mg is clear for all three measures of success. CONCLUSIONS: The CPSTP, calculated for each effectiveness measure, was consistently lower for eletriptan 40 mg versus sumatriptan 100 mg. These results support the use of eletriptan 40 mg over sumatriptan 100 mg in acute migraine management, and can be used to assist decision makers in formulary considerations.