Abstracts

PHARMACOECONOMIC EVALUATION OF IMIQUIMOD (ALDARA) FOR THE TREATMENT OF EXTERNAL GENITAL WARTS IN A DUTCH TREATMENT ENVIRONMENT

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OBJECTIVE: To assess the cost-effectiveness of Aldara (Imiquimod) 5% topical cream versus other therapies for the management of external genital warts (EGWs) in a Dutch treatment environment.

METHODS: An economic model is presented that utilizes a two-stage therapy sequence. Choice of initial and subsequent therapy was based on the results of a recently completed chart review of three dermatology clinics in the Netherlands. This chart review provided valuable guidance regarding treatment switching, resources used (i.e. average number of patient visits) and costs associated with the management of EGWs. Sustained clearance rates were incorporated into the economic model based on published literature of key clinical trial results. Costing was based on nationally available cost estimates for the Netherlands as costs based on chart reviews were site specific and hence were not appropriate for use.

RESULTS: Estimated average costs per successful clearance for Aldara plus cryotherapy were 1,128 DFL (€512) compared with 1,455 DFL (€660) for the next most cost-effective therapy sequence—Condyline (first line) plus cryotherapy (second line). In terms achieving the therapeutic target of 50% clearance, only sequences in which Aldara was used as first line therapy achieved this.

CONCLUSION: The results of the cost-effectiveness analysis demonstrated that Aldara (as first line therapy) plus cryotherapy (second line) was the most cost-effective therapy sequence in the Netherlands.

A COST-BENEFIT ANALYSIS OF INFLUENZA VACCINATION IN A COMPANY IN ITALY (ENI SPA)

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OBJECTIVE: To estimate costs and benefits of a preventive influenza vaccination in a group of employees of Snamprogetti (an Eni-group company), to define a scheme of cost-benefit analysis to be used for other strategies of vaccination and in other contexts.

METHODS: In an observational study conducted from October 1999 to June 2000, 153 employees (about 10% of the whole staff of Snamprogetti) voluntarily received the vaccine, and were compared to 153 non-vaccinated employees working in the same context and matched for age and gender. The outcome was evaluated by checking absentee records from the personnel department and determining the causes, including influenza. Costs and benefits of the influenza vaccination from the Snamprogetti point of view were subsequently calculated.

RESULTS: The influenza vaccination strategy reduced absence from work by 77% and has decreased the loss of working days by 82%. The relationship between the benefits of the vaccination strategy (less working days lost) and its cost was 12.12. Convenience also becomes evident following sensitivity analysis, which considered the mean cost of a working day for the employees enrolled, and showed that the cost-benefit ratio was 9.45.

CONCLUSIONS: The results of this study suggest that implementation of an influenza vaccination strategy in Snamprogetti was cost effective. The cost-benefit analysis used in this study could also be used for other vaccination strategies and in other contexts.

COST-BENEFIT ANALYSIS OF VACCINATING HEALTHY WORKING ADULTS AGAINST INFLUENZA IN THE NETHERLANDS

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OBJECTIVES: Influenza is a major cause of illness, productivity loss, and work absenteeism among healthy working adults aged between 25 and 64 years. This group is not