Costs were €56.77 and €39.18, respectively. "The cost-efficiency" analysis demonstrated that the GER in main group was €67.58 and GER in control group was €72.56.

CONCLUSIONS: The "cost-efficiency" analysis demonstrated that administration of tizanidine acid morpholinum salt in combination with standard therapy is more effective and less expensive in ACS patients. The obtained results allow to optimize treatment expenditures for a state, insurance companies and patients.

PCV74

COST OF ILLNESS IN AORTIC STENOSIS PATIENTS

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OBJECTIVES: The innovative technologies for aortic stenosis (AS) treatment require in-depth analysis of the costs associated with disease and comorbidities. To quantify health care resources consumed by AS patients’ treatment (drugs, diagnostic tests, hospital outpatient and inpatient) and estimate the total direct costs.

METHODS: We conducted a retrospective observational cohort analysis using data from administrative databases of Local Health Authority of Milan in Italy. The study population included all subjects hospitalised with principal or secondary AS diagnosis between January 1, 2007 and December 31, 2011 (enrollment period). All subjects were observed for two years after the first hospitalization (index hospitalization). Patient characterisation was related to the two years before index hospitalization (characterisation period). Data related to hospitals, drug and hospital outpatient during both periods were collected for each patient to quantify the resources consumed. Hospitalisation costs were estimated using DRG tariffs and hospital outpatient costs with regional tariffs. The drugs consumption was evaluated through the tear-off tab prices.

RESULTS: 919 patients were included (mean age 78.8 ± 11.6 years). 251 males, mean age 51.5 years; patients treated with AS valve treatment.

The “cost-efficiency” analysis demonstrated that administration of tizanidine acid morpholinum salt in combination with standard therapy is more effective and less expensive in ACS patients. The obtained results allow to optimize treatment expenditures for a state, insurance companies and patients.

PCV75

TRENDS IN EMERGENCY ROOM VISITS DUE TO HYPERKALEMIA IN THE UNITED STATES

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OBJECTIVES: Hyperkalemia is a metabolic abnormality seen frequently in the Emergency Department. The most common condition leading to hyperkalemia is muscle damage in a patient receiving diuretics. Other conditions can predispose an individual to hyperkalemia, such as acute renal failure, extensive burns, trauma, or severe rhabdomyolysis or severe acidosis. The objective of this study was to examine trends in emergency room departments due to hyperkalemia.

METHODS: The number of emergency room (ER) visits due to hyperkalemia, with International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9) code 27.7, were estimated using the Centers for Medicare and Medicaid Services (CMS) Agency for Healthcare Research and Quality (AHRQ) 2011 data for ED visits. A review of recent publications on hyperkalemia management was also conducted using the databases Pubmed, Embase, Biostat, Google Scholar and Cochrane. RESULTS: The annual number of ED visits with Hyperkalemia as one of the diagnoses was estimated to be 814,181 (SE 23,526). The annual number of ED visits with Hyperkalemia as the first listed diagnosis is estimated to be 66,899 (SE 124,448). Among the age groups 18-44, 45-64, 65-84, 85+ the majority of ED visits were in the 44-54 (36.04%) and 65-84 (39.44%) groups (hyperkalemia as the first listed diagnosis). Among the five payer types, Medicare, Medicaid, Private insurance, Uninsured and Other, the majority of patients belonged to Medicare (68.41%).

The trend was similar for patients with Hyperkalemia as one of the diagnosis or first diagnosis.

CONCLUSIONS: This analysis confirms previous findings that hyperkalemia is common in the emergency department. There is a need for quick, safe and effective treatments for hyperkalemia, which can be easily administered in emergency department setting.

PCV76

ECONOMIC BURDEN IN DIRECT COSTS OF OBESITY AND OVERWEIGHT IN RUSSIA

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OBJECTIVES: The high prevalence of obesity and overweight leads to frequent use of health care resources. Studies aimed at assessment of damages caused by this condition are rare in Russia. The problem of overweight is one of the objectives of this study was to assess burden of obesity and overweight in Russia taking as an example three main social diseases: stroke, heart attack, and diabetes mellitus.

METHODS: Available evidence on assessment of costs of management and treatment of obese and overweight per diagnosed individual was used. To measure costs of obesity and overweight for the state budget were used "cost of illness" analysis with consideration of risks of stroke, heart attack, and diabetes mellitus in the population (G. Osterman et al, 2009) taking into account specific features of cost assessment and based on publicly available data were developed.

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