CONCLUSIONS: This economic evaluation demonstrates that asenapine is a cost-effective strategy compared to olanzapine in the treatment of BPD-I in Canada.

PMH38 COST-EFFECTIVENESS OF ASENAPINE IN THE TREATMENT OF SCHIZOPHRENIA IN CANADA

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OBJECTIVES: Asenapine is a new antipsychotic approved in Canada for the treatment of schizophrenia (SCZ) and bipolar disorder I as monotherapy and co-ther.

Asenapine has shown a comparable efficacy profile to atypical antipsychotics. In contrast, however, to most atypical antipsychotics, asenapine has a favourable metabolic profile as well as with a minimal weight gain. The objective was to assess, from a Canadian perspective, the economic impact of asenapine compared to olanzapine, quetiapine, ziprasidone, aripiprazole. METHODS: A combined decision tree and Markov model were used to examine the relationships between cost and adherence, controlling for patient demographics (age, gender, and job type) and Charlson co-morbidity score. RESULTS: Among the 14,737 individuals in the study, the mean adherence to antidepressant regimens had lower short-term disability costs than did the non-adherent ($239/$year). CONCLUSIONS: In general, patients who were adherent to their antidepressant medications, however, had lower short-term disability costs ($219/year) than did the non-adherent ($249/year). CONCLUSIONS: In general, patients who were adherent to their antidepressant medications, however, had lower short-term disability costs ($219/year) than did the non-adherent ($249/year). CONCLUSIONS: In general, patients who were adherent to their antidepressant medications, however, had lower short-term disability costs ($219/year) than did the non-adherent ($249/year). CONCLUSIONS: In general, patients who were adherent to their antidepressant medications, however, had lower short-term disability costs ($219/year) than did the non-adherent ($249/year). CONCLUSIONS: In general, patients who were adherent to their antidepressant medications, however, had lower short-term disability costs ($219/year) than did the non-adherent ($249/year).