...with five states, annual cycle and time horizon (TH) of 10 years, with discount rate of 3.5% per annum. Outcomes were estimated across 6 countries ranged from €5.23 billion (a clinical perspective) to €14.26 billion (a societal perspective). Objective: To review the available evidence regarding the association between healthcare resource use and cardiovascular disease (CVD) morbidity and mortality costs. This systematic review comprehensively documented productivity losses and/or early retirement in the UK setting. Edoxaban is dominant compared with the most widely prescribed NOACs in the UK setting. Edoxaban was dominated compared with rivaroxaban and dabigatran 110 mg BD. Edoxaban was dominated by apixaban. The median cost difference across 6 countries ranged from £394 to £287 and 0.08 to -0.08 QALYs. Sensitivity analyses indicated the findings were robust. Conclusions: The model shows that a pharmacogenomic (PGx) test for the diagnosis of statin-induced myopathy has been reported to range from 10% to 20%. The objective of the present study was to evaluate the economic value of a pharmacogenomic (PGx) test for the diagnosis of statin-induced myopathy. A meta-analysis was conducted with a validated model to derive values from published domains. Fatal endpoints were derived after a random effect meta-analysis. Utility measures were calculated with a validated model to derive values from published domains. No additional analysis was performed to account for the uncertainty of inputs in the model. Results: Edoxaban was dominant compared with rivaroxaban and dabigatran 110 mg BD. Edoxaban was dominated by apixaban. The median cost difference across 6 countries ranged from £394 to £287 and 0.08 to -0.08 QALYs. Sensitivity analyses indicated the findings were robust. Conclusions: Accepting the limitations of the model, the model simulations favor the PGx test strategy. Our review shows that there is high burden of hyperkalemia in patients using ACE inhibitors. There is a need for safe, effective treatments for hyperkalemia. Outcomes: Over one million UK patients suffer from non-valvular atrial fibrillation (NVAF), which can lead to stroke and arterial embolism. Vitamin K antagonists (VKA), usually warfarin, are the most frequently prescribed anticoagulants in the UK. This study aimed to estimate the association between healthcare resource use and subsequent bleeding in NVAF patients prescribed VKA in England. Methods: A systematic literature search for epidemiology and the burden of disease related to ACeDs was conducted. This side effect is most common in patients with risk factors such as diabetes mellitus, heart failure, chronic kidney disease, or advanced age. The objective of this research was to conduct a systematic review on hyperkalemia caused due to angiotensin-converting-enzyme inhibitors. Methods: A systematic literature search was used to identify the 12 studies included in this review. The study data included all patients prescribed with angiotensin-converting-enzyme inhibitors (ACEIs). The study found that the intervention was associated with a reduction of 0.1 to 0.2 mg/dL in serum potassium levels. This study found that the effect is most pronounced in patients with diabetes and/or renal impairment. The study also found that the intervention was associated with a reduction of 0.1 to 0.2 mg/dL in serum potassium levels. This study found that the intervention was associated with a reduction of 0.1 to 0.2 mg/dL in serum potassium levels. This study found that the intervention was associated with a reduction of 0.1 to 0.2 mg/dL in serum potassium levels. This study found that the intervention was associated with a reduction of 0.1 to 0.2 mg/dL in serum potassium levels. This study found that the intervention was associated with a reduction of 0.1 to 0.2 mg/dL in serum potassium levels.