treatment. **CONCLUSIONS:** Inclusion of a novel IBS diagnostic blood panel in the diagnostic pathway has the potential for significant cost savings due to the avoidance of unnecessary testing.

**PMD34**

**A NOVEL IBS DIAGNOSTIC BLOOD PANEL CAN ENHANCE A POSITIVE DIAGNOSTIC STRATEGY VERSUS A STRATEGY RELYING ON CLINICAL PRESENTATION AND LABORATORY TESTS FOR PATIENTS WITH DIARRHEA PREDOMINANT IRritable BOWEl SYNDROME (IBS-D): COST IMPLICATIONS FOR DENMARK**

Purdy C1, Bytzer P2, Fimtenel M1, Magar R1

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**OBJECTIVES:** Current guidelines recommend a positive strategy based on symptoms alone for the diagnosis of IBS-D. The IBS diagnostic blood panel includes laboratory tests and diagnostic procedures to exclude other organic conditions such as inflammatory bowel disease (IBD). A new IBS diagnostic blood panel was developed from a healthcare payer perspective to assess the impact of potentially introducing this testing into the diagnostic pathway. **METHODS:** An economic evaluation indicates that the inclusion of a novel IBS diagnostic blood panel in the diagnostic process has the potential for significant cost savings due to the avoidance of downstream testing.

**PMD36**

**THE POTENTIAL FOR IMPROVED INHALATION TECHNIQUE WITH DUROSIP® SPIROMAX® (Budesonide + Formoterol Fumarate dihydrate) COMPARED WITH COMMONLY PRESCRIBED DRY POWDER INHALERS FOR THE MANAGEMENT OF ASThma AND CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD) IN SPAIN: ESTIMATION ON NUMBER AND COST OF UNSCHEDULED HEALTHCARE EVENTS**

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**OBJECTIVES:** DFG® and BD® are the most common inhalation devices reported with estimated utilization rates of 35%, 35% and 15%, respectively. Corresponding charges were €200, €400 and €400, respectively. Net savings in the base case of ES7 favored the IBS diagnostic blood panel pathway (assumes 75% of test positive patients receive IBS-D treatment) vs the exclusionary pathway. If clinicians use the test 50% of the time for the 30% of the estimated 466,382 people who might have IBS-D who do not receive IBS-D treatment, the potential savings were €88,899. **CONCLUSIONS:** Inclusion of a novel IBS diagnostic blood panel in the diagnostic pathway has the potential for significant cost savings due to the avoidance of downstream testing.

**PMD37**

**IMPACT OF A NOVEL IBS DIAGNOSTIC BLOOD PANEL FOR MEXICAN COST CONSUMERS TO THE MEXICAN PRIVATE PRACTICE FOR DIARRHEA PREDOMINANT IRritable BOWEl SYNDROME (IBS-D)**

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**OBJECTIVES:** Irritable bowel syndrome presents a significant burden to patients and the healthcare system in Mexico. An IBS diagnostic blood panel based on Rome criteria, however, laboratory tests and diagnostic procedures are required to exclude organic conditions such as inflammatory bowel disease (IBD). A new IBS diagnostic blood panel was developed to assess the costs associated with IBS-D. **METHODS:** The model estimated the potential of two biomarkers associated with IBS-D. This analysis estimates the potential of two biomarkers associated with IBS-D. The BIA predicts a net savings to the Mexican healthcare system of $794,158.235. **CONCLUSIONS:** Inclusion of a novel IBS diagnostic blood panel in the diagnostic process has the potential for significant cost savings due to the avoidance of downstream testing.