OBJECTIVES: To quantify the financial burden of chronic hepatitis B (CHB) infection and its complications in a cost-of-illness study in Vietnam, a highly endemic country of hepatitis B virus (HBV) infection. METHODS: The study adopted the micro-costing approach. For direct medical cost estimation, data were retrieved retrospectively from medical histories of inpatients and outpatients with various CHB infection stages in 2008 from a large referral hospital in Vietnam. For direct nonmedical and indirect cost estimation, data were obtained from outpatients from the same hospital through face-to-face interviews. One- and two-way analyses were performed on the cost calculated. RESULTS: In 2008, the total cost of CHB infection and its complications was estimated to be around US$10 billion, with 80% attributable to direct medical cost. Antivirals were the major cost driver in treating CHB infections. The per-patient total annual direct medical cost increased with the severity of the disease with the cost amounted to US$943.64 for CHB and US$3916.21 for hepatocellular carcinoma. Based on the results, if all Vietnamese patients received treatment for CHB infections, the estimated cost would be twice as much as the total health budget of Vietnam, highlighting that a significant proportion of CHB infections in Vietnam are not being treated and the patients are bearing the extra cost out-of-pocket, or seeking treatment from traditional medicines. CONCLUSIONS: This study confirms that chronic HBV infection poses an unbearable financial burden for the average patient with a GDP per capita of around $1024, and the lack of access to treatment is a social issue in Vietnam. The current universal newborn vaccination against HBV has not reduced the number of infected subjects, more health-care investment to improve access and provision of affordable medications by re-examining pharmaceutical policies to attain equity in proper treatment for patients with CHB infections would be needed.

Burden and Medical Costs of Anogenital Warts in Bangkok, Thailand

M. Bussaratid, V. Pitisuttithum

Mahidol University, Bangkok, Bangkok, Thailand; Ministry of Public Health, Bangkok, Bangkok, Thailand

OBJECTIVES: 1) Assess the proportion of anogenital warts to the total number of Sexual Transmitted Infection (STI); and 2) Quantify the direct medical costs of anogenital warts from patient perspective. METHODS: A prospective observational study was conducted in STI Clinic at Bangrak Hospital, Bangkok, Thailand from June 2008–September 2009. The proportion of anogenital warts to the total number of STI was calculated from the database of Bangrak Hospital. A total of 131 patients with clinically diagnosed anogenital warts were recruited. After baseline assessment, the patients had three additional follow-up-visits at days 7, month 1, and month 3. On each visit, patients were examined and interviewed for health-care costs, work productivity loss and activities impairment. At month 6, telephone assessment for the signs of disease recurrence was done. Patients were treated according to standard medical practice. RESULTS: The proportion of anogenital warts to the total number of STI in 2008 was 14.6%. The mean age (SD) of the study subjects was 28.2 years (7.4 years). Males and females were approximately equal (males 51.9%, female 48.1%). Most of them were employed (51.1%), the rest were sex workers (25.2%).