CONCLUSIONS: Use of amlodipine can reduce CVD-related hospital admissions and associated costs in patients with coronary artery disease. Amlodipine is a cost-saving agent in the treatment of patients with coronary artery disease.

**COI14**

COST-OF-ILLNESS STUDY OF UNSTABLE ANGINA PECTORIS IN GERMANY

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OBJECTIVES: To install a world-wide-web (WWW, internet) -based registry for the observation of treatment patterns for unstable Angina Pectoris (uAP) and to estimate the economic burden of uAP in Germany from the perspective of the statutory health insurance (Gesetzliche Krankenversicherung) and of hospitals as service providers.

METHODS: Prospective, bottom-up, cross-sectional cost-of-illness (COI) study. Three hundred sixteen patients consecutively included between November 2000 and May 2001 were documented via an Internet-based registry using standardized documentation forms. Inclusion and exclusion criteria were pre-defined. Fifteen centers of different healthcare levels (10 university hospitals, 1 specialized hospital, 4 general hospitals) participated. Direct costs (for diagnostic, medical treatment, surgery, drug therapy) and indirect costs (due to lost productivity) associated with in-patient treatment due to uAP were considered.

RESULTS: Mean age of patients was around 65 years for females (34%) and 69 years for males (66%). In about 99% of cases, uAP was diagnosed at hospital admission: 47% were hospitalized as emergency cases; 26% were referred from other hospitals; 26% from office-based physicians. Mean hospital stay lasts 8.3 days per patient, 6.8 days of them spent in intensive care. Angiography or angioplasty were performed on 78% of patients. About 4% of patients underwent heart surgery, most of them for triple coronary bypass. 30% of patients received one of the new platelet aggregation inhibitors (Abciximab, Eptifibatide, Tirofiban) during hospitalization.

CONCLUSIONS: Because the registry is still ongoing, cost data are under evaluation, but will be finalized for poster presentation. Treatment with platelet aggregation inhibitors is still not very common, despite being recommended by German therapy guidelines for uAP treatment.

**COI15**

CHRONIC VENOUS INSUFFICIENCY (CVI) IN POLAND—A COST OF ILLNESS STUDY

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OBJECTIVE: With a prevalence up to 40% in the adult population, chronic venous insufficiency (CVI) is one of...