A756

VALUE IN HEALTH 18 (2015) A335–A766

PND43 COST-EFFECTIVENESS ANALYSIS OF PEGINTERFERON BETA-1A IN THE TREATMENT OF RELAPSING-REMITTING MULTIPLE SCLEROSIS IN SCOTLAND
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OBJECTIVES: To estimate the cost-effectiveness of PEG-Fig for RRMS versus other first-line DMTs (DMTs) in the absence of standard care for relapsing-remitting multiple sclerosis (RRMS) in Scotland. Interferon beta (IFN)-β1a (22mcg and 44mcg three times/week, and 30mcg once/week), IFN-β1b 250mcg every other day, and glatiramer acetate (GA) 30mg once/ day. Cost-Eff over other first-line DMTs for RRMS were demonstrated in this Finnish study. The model predicted disability progression (measured by the Expanded Disability Status Scale [EDSS]) and occurrence of relapses and other adverse events (AEs), and translate values below 0.0025QALYs/0.1287LYGs and AEs. Robustness of base case results was tested with probabilistic sensitivity analyses confirmed the results were robust. Conclusions: PEG-IFN is a cost-effective treatment for patients with RRMS in Scotland.

PND44 COST-EFFECTIVENESS OF FIRST-LINE DISEASE-MODIFYING THERAPIES (DMTs) FOR RELAPSING-PRESENTING MULTIPLE SCLEROSIS (PPMS)
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OBJECTIVES: To estimate the cost-effectiveness of PEG-Fig for RRMS versus other first-line DMTs for PPMS. RESULTS: Over 30 years, PEG-Fig yielded greater clinical benefits and cost savings compared with IFN-β1a (22 mcg and 44 mcg) three times/week, and IFN-β1b (250 mcg) and GA 30 mg and IFN-β1a (22 mcg and 44 mcg) three times/week. The total cost-effectiveness ratio of PEG-Fig versus other DMTs is 14,875. One-way sensitivity analyses were performed to assess the impact of parameter uncertainty on our results. CONCLUSIONS: PEG-Fig is a cost-effective treatment for patients with PPMS in Scotland.

PND45 COST-EFFECTIVENESS ANALYSIS OF PEGINTERFERON BETA-1A IN THE TREATMENT OF RELAPSING-REMITTING MULTIPLE SCLEROSIS IN IRELAND
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OBJECTIVES: To estimate the cost-effectiveness of PEG-Fig for RRMS versus other first-line DMTs for RRMS. RESULTS: The model predicted disability progression (measured by the Expanded Disability Status Scale [EDSS]) and occurrence of relapses and other adverse events (AEs), and translate values below 0.0025QALYs/0.1287LYGs and AEs. Robustness of base case results was tested with probabilistic sensitivity analyses confirmed the results were robust. Conclusions: PEG-IFN is a cost-effective treatment for patients with RRMS in Ireland.

PND46 COST-EFFECTIVENESS ANALYSIS OF GLYBERA FOR THE TREATMENT OF LIPOPROTEIN LIPASE DEFICIENCY
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OBJECTIVES: Glybera is the first gene therapy drug for lipoprotein lipase deficiency (LPLD). RESULTS: Glybera, no effective treatment was available for LPLD. Patients with LPLD have to restrictively control fat intake and are still more likely to suffer recurrent acute pancreatitis and eruptive xanthomas. Although Glybera can effectively improve the health condition of patients with LPLD, it is still controversial to price the gene therapy at 1.1 million euros. This study analyzed the incremental cost-effectiveness ratio (ICER) of Glybera compared to no treatment for LPLD from a societal perspective. CONCLUSIONS: The model predicted disability progression (measured by the Expanded Disability Status Scale [EDSS]) and occurrence of relapses and other adverse events (AEs), and translate values below 0.0025QALYs/0.1287LYGs and AEs. Robustness of base case results was tested with probabilistic sensitivity analyses confirmed the results were robust. Conclusions: PEG-IFN is a cost-effective treatment for patients with RRMS in Ireland.