0.624 mg/dL for each additional (p = 0.017) year of age and triglycerides increased by 1.417 mg/dL for each additional (p = 0.041) year of age. Changes in total cholesterol and HDL-cholesterol over time were not significantly correlated with patient age or time since diagnosis. Therefore, health economic models may assume that these parameters remain stable over time. Sensitivity analyses were performed to address the potential mislabeling of T2DM as T1DM. The results provide relevant inputs for the progression of physiological parameters to model the economic and clinical impacts of T1DM therapies over time.

**PDB30**

**TREND IN PREVALENCE AND DISTRIBUTION OF DIABETES MELLITUS TYPE I AND TYPE II IN THE NETHERLANDS**

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**OBJECTIVES:** To quantify the trend in prevalence and distribution of diabetes mellitus (DM) type I (T1DM) and type II (T2DM) in the Netherlands. **METHODS:** Using the General Practitioner Database and the Out-patient Pharmacy Database of the PHARMO Database Network, the trend in prevalence of DM and distribution of T1DM and T2DM patients with a GP recorded diagnosis for T1DM or T2DM, distribution of T1DM/T2DM patients with T1DM mean (±SD) age decreased from 48 (±22) years in 2005 to 44 (±22) years in 2012. Among patients with T2DM mean (±SD) age decreased from 48 (±22) years in 2005 to 44 (±22) years in 2012. Among patients with T2DM mean age increased from 63 (±12) years in 2005 to 67 (±12) years in 2012. Changes in HbA1c, total cholesterol and HDL-cholesterol over time were not significantly correlated with patient age (p = 0.041). Overbeek J.A. * et al. * Diabetologia 2013;56:1062-1069.

**CONCLUSIONS:** These findings should be interpreted with caution. The results show that adding dapaglifozin to standard therapy will lead to minimal increase in the diabetes type 2 budget in Bulgaria. This increase is considered acceptable in terms of better glycemic control with safe and effective therapy for diabetes type 2.

**PDB34**

**ASSESSMENT OF THE ECONOMIC VALUE OF DFP-4 INHIBITOR ALOGLITIN COMBINED WITH SITAGLITAXIN, SAXAGLITAXIN, AND LINAGLITAXIN**

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**OBJECTIVES:** For the fifth analysis of adding dapaglifozin to T2DM therapy, with a cumulative substantial health and economic gains to the hospitals.

**PDB32**

**THE IMPACT OF TREATMENT OF THYROID DISEASE IN PREGNANT WOMEN TO THE OUTCOME OF FETAL BIRTH**

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**OBJECTIVES:** The most common endocrine clinical symptom is thyroid disease which has impact on pregnant women and fetus. Leading international references recommend that thyroid disease should be well known, therefore relevant experiences in the Hungarian context. Aim of this study is to inspect the thyroid disease and impact of its treatment to outcome of pregnancy. **METHODS:** Study was carried out by Markóócszky Hospital in Ujpest County, Hungary. Retrospective study made by data analysis of pregnant patient with thyroid disease, including hormone parameters, medications and obstetric medical history. Set-up was non-random, convenience sampling with women with mean age 33.7±2.9 between August 2013 – February 2014. Friedmann ANOVA and t-test was applied for analysis with software Statistics for Windows. **RESULTS:** Progresses the gestation period significant reduction of TSH values was observed in hypothyroid patients (p = 0.007). Comparing various treatment of hypothyroid patients, treatment with THI showed the same significant difference. Significant negative correlation was found between TSH value and thyroxin dose in group of hypothyroid patients (r = –0.35, p = 0.05). Premature birth and other obstetric complications occurred more frequently in the thyreotoxical group, especially among older women giving birth. **CONCLUSIONS:** In case of hypothyroid pregnant with increasing dose of thyroxin the TSH levels are well balanced, and obstetric complications did not occur, while in hypothyroid patients can be reported obstetric complications in addition to proper care.

**DIABETES/ENDOCRINE DISORDERS – Cost Studies**

**PDB33**

**BUDGET IMPACT ANALYSIS OF ADDING DAPA GLIF OZIN TO THE TREATMENT OF DIABETES MELLITUS TYPE 2 IN BULGARIA**

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**OBJECTIVES:** Dapaglifozin is a highly potent, selective and reversible inhibitor of sodium glucose co-transporter 2 (SGLT2) and is approved for the treatment of T2DM in adults. Diabetes type 2 is one of the most prevalent chronic diseases that can lead to severe complications. The largest costs are associated with hospitalizations due to the complications, the prevention of which requires a good glycemic control. The objective of the study is to estimate the budget impact of adding dapaglifozin to type 2 diabetes therapy in Bulgaria. **METHODS:** Using a budget impact model was used from the payer perspective for population 7 284 552 people, and of them 45 000 were type 2 diabetes. The retail pharmacy prices were used from the IMS data for the year 2014. The results were incorporated in the model. Net budget impact is presented as costs per-month per-patient (PMMP) and costs per-patient per-year (PPPP). **RESULTS:** An increase in the estimated net budget impact from 70 592 € first year to 1 290 766 € for the fifth year in comparison after adding dapaglifozin to T2DM therapy, with a cumulative substantial health and economic gains to the hospitals.