Pregnant women.

$36,143,550.

51.7 per 1000 pregnant women or the cost per tablet of calcium of 600 mg is greater

supplement is a dominant alternative. If the incidence of preeclampsia is lower than

which may considerably reduce the cost-effectiveness ratio.

represents a good value for money in Romania. The inclusion of societal benefits

to changes in other model parameters.

sensitive to the utility value of the post-hysterectomy health state but responsive

0.021 quality-adjusted life years (QALYs) at an estimated incremental cost of

bleeding disorder; hysterectomy; post-hysterectomy; post-menopause; and death.

was developed using a 10-year time horizon. Ulipristal acetate was compared with

treatment or immediate hysterectomy in Romania.

for moderate to severe symptoms of uterine fibroids in adult women of repro-

which would result in an incremental cost of 17,749

To compare the cost and effectiveness of two emergency contracep-

To estimate the cost-effectiveness of the supply of calcium of 1200mg

COST EFFECTIVENESS OF CALCIUM SUPPLEMENT IN REDUCING PREECLAMPSIA AT MATERNAL MORTALITY

PREGNANCY

Chicaiza Becerra LA1, Garcia-Molina M2, Oviedo S1, Ureño J1, Rincón CJ1, Gomez P1,

Rubio Romero JA1.

1Universidad Nacional de Colombia, Bogotá, Colombia, Facultad de Ciencias Económicas, Universidad Nacional de Colombia, Bogotá, Colombia, 2Universidad Nacional de Colombia, Bogotá, Colombia

OBJECTIVES: To estimate the cost-effectiveness of the supply of calcium of 1200mg per day of pregnancy to all pregnant women or the cost per tablet of calcium of 600 mg is greater

incidence of preeclampsia is lower than 3.1 million neonatal deaths. According to a worldwide analysis, Brazil is one of the top

however, pregnancies is a cost-effective strategy under the Brazilian Healthcare System per-

value of the procedures was calculated by adjusting the values of Tariff Manual ISS 2001 + 30% (2), these values were compared with information of costs supplied by three EPS. All costs are expressed in Colombian pesos in 2010.

The discount rate was 0%. It was performed sensitivity univariate and probabilistic

analyzes for costs and effectiveness. RESULTS: Compared to no intervention, calcium supplement is a dominant alternative. If the incidence of preeclampsia is lower than 51.7 per 1000 pregnant women or the cost per tablet of calcium of 600 mg is greater than $36,143,550, calcium supplement is no longer a cost-effective alternative in Colombia for a threshold of 3 times the GDP per capita in Colombia of 2010 by GDP, equal to 364,155,000.

Calcium supply from week 14 of gestation is a dominant alternative compared to no intervention, which saves 200,000 life years, while it decreases costs in the order of $5,304 million pesos per 100,000 pregnant women.

ECONOMIC EVALUATION OF ULIPRISTAL ACETATE FOR THE TREATMENT OF PATIENTS WITH MODERE AND SEVERE SYMPTOMS OF UTERINE FIBROIDS IN ROMANIA

Lorenzovici L1, Székely A1, Ádám T1, Vamosy S1, Kelemen L1, Finta H1, Kálo Z2

1Syenon Research Romania Ltd, Tirgu Mures, Romania, 2Syenon Research Institute, Budapest, Hungary

OBJECTIVES: Ulipristal acetate is a selective progestogen receptor modulator that has been demonstrated to be an effective 3-month pre-operative treatment for moderate to severe symptoms of uterine fibroids in adult women of reproductive age. The aim of this analysis was to assess the cost-effectiveness of 5 mg of ulipristal acetate as an add-on therapy to standard pre-surgical observation and treatment or immediate hysterectomy in Romania.

METHODS: A Markov model was developed using a 10-year time horizon. Ulipristal acetate was compared with pre-calcium acetate, pre-progesterone, and immediate hysterectomy and the following mutually exclusive health states: mild, moderate, severe, or persistent severe excessive bleeding disorder; myomectomy; post-myomectomy with mildly to moderately excessively bleeding disorder; post-myomectomy with severely excessive bleeding disorder; hysterectomy; post-hysterectomy; post-menopause, and death.

Transition probabilities and utility values were obtained from clinical trials and the scientific literature. Sensitivity analysis was performed by varying all input parameters from the base case scenario.

RESULTS: Ulipristal acetate was the dominant strategy compared to the no-treatment strategy. In the base case, the total costs, the reduced number of PTB (263,052 vs 278,100) and neonatal UTI hospitalization (4,098,543 days vs 4,518,056 days) resulted in a total economic saving.

COST-EFFECTIVENESS OF PALUVIZUMAB USE IN HIGH RISK CHILDREN FROM BRAZILIAN HEALTH SYSTEM PERSPECTIVE

Perez-Ara J1, Nishikawa A.M2, Paladini L1, García JC3

1Universidade Federal da Paraíba, João Pessoa, Brazil, 2Facultad de Ciencias Económicas, Universidad Nacional de Colombia, Bogota, Colombia

OBJECTIVES: To compare the cost and effectiveness of two emergency contraceptives methods in minors in France.

Schmidt R

HRAs Pharma, Paris, France

OBJECTIVES: To compare the cost and effectiveness of two emergency contracep-

tive methods in minors in France and to support the payer’s analysis if it is worth to
deliver ulipristal acetate for free to minors. METHODS: Based on a decision-
analytical model, the cost-effectiveness of two emergency contraceptive meth-

ods is compared. Pregnancy rates, outcome of unintended pregnancy in minors and

resource utilization are derived from literature. Resources and their costs are considered until termination or a few days after delivery Costs are taken from a collec-
tive of French publications. Analyses are performed by varying the most important parameters.

RESULTS: Using emergency contraception is superior to no method.

The cost of an unintended pregnancy in a French minor is estimated to be 1630€ (1350€–1803€). Almost 4 millions (3.1 ± 1.7 millions) could have been saved by using ulipristal acetate instead of levonorgestrel in 2010. The incremental cost of avoid-

ing an additional unintended pregnancy with ulipristal acetate as compared to levonorgestrel is estimated to be 418€ (384€–452€). Ulipristal acetate is most cost-effective in the subgroup of intake within 24 hours, where it is more efficacious at a lower cost compared to levonorgestrel.

COST-EFFECTIVENESS ASSESSMENT WITH PALUVIZUMAB IN THE PREVENTION OF PRETERM BIRTH: A STRATEGY BASED ON COST-EFFECTIVENESS

Tonseca EB1, Nishikawa AM2, Paladini L1, García JC3

1Universidade Federal de Paraíba, João Pessoa, Brazil, 2Facultad de Ciencias Económicas, Universidad Nacional de Colombia, Bogota, Colombia

OBJECTIVES: To estimate the cost-effectiveness of the supply of calcium of 1200mg per day of pregnancy to all pregnant women or the cost per tablet of calcium of 600 mg is greater than $36,143,550, calcium supplement is no longer a cost-effective alternative in Colombia for a threshold of 3 times the GDP per capita in Colombia of 2010 by GDP, equal to 364,155,000.

Calcium supply from week 14 of gestation is a dominant alternative compared to no intervention, which saves 200,000 life years, while it decreases costs in the order of $5,304 million pesos per 100,000 pregnant women.

The results of this analysis compared to a no-prophylactic strategy scenario resulting in economic savings as compared to a no-prophylactic strategy scenario resulting in economic savings to the Brazilian health care system.