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BUDGET IMPACT OF FINGOLIMOD IN THE TREATMENT OF MULTIPLE SCLEROSIS

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BACKGROUND

The high cost of the multiple sclerosis (MS) therapy justifies conducting economic analyzes that reveal the therapeutic alternatives more cost-effective. From the Clinical Management Unit (CMU) of Pharmacy from Granada (Spain), we studied various tools to reduce the economic impact of these drugs on the annual budget without impacting on the health of the individual.

PURPOSE

This paper aims to analyze the budgetary impact of treatment with fingolimod in patients attending CMU Pharmacy Granada.

MATERIAL AND METHODS

Patients receiving specific drugs for the treatment of MS, dispensed from Pharmacy Services of the CMU, were established as the study population. Was chosen a time horizon of 5 years (years 2013-2017) and two scenarios: stage 1, with the standard therapy of MS, and stage 2, with the introduction of fingolimod as monotherapy second line. Were considered only direct healthcare costs: drugs, administration and management of the disease.

RESULTS

The average budget impact of treating patients, considering stage 1, involves an investment of 7.581.418 euros annually, with an average cost per patient per year for 12.872 euros. The introduction of fingolimod as the only treatment option for second-line carries an average annual cost of 7.517.054 euros (average cost per patient per year for 12.762 euros). Therefore, the second line treatment of MS based solely on fingolimod means less spending. In this escene 2, there are cost savings: 64.364 euros. What differentiates the two situations are the costs of administration and management of disease. On the one hand, the use of fingolimod, being an oral drug, eliminates the costs of day hospital. However, increases spending on disease management: cardiac and ophthalmic monitoring.

CONCLUSION

The introduction of fingolimod is not a significant budget impact since it involves an expenditure increase of 13% over the next five years. These results are similar to those published in previous relevant studies.

