

Comparative Cost-Utility Analysis of Budesonide and the Six Food Elimination Diet (SFED) for the Prophylaxis of Patients with Eosinophilic Esophagitis (EoE) in the Austrian Setting

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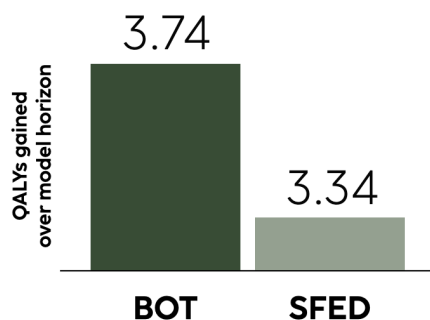
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OBJECTIVES: Budesonide orodispersible tablets (BOT) are the only approved pharmaceutical for the treatment of eosinophilic esophagitis (EoE) and the only reimbursed in-label option in Austria. This research aims to explore the cost-effectiveness of BOT versus a widely used dietary intervention, the six food elimination diet (SFED) since there are no other approved pharmaceuticals for EoE.

METHODS: Using a 9 state Markov model with 12 week cycles, clinical stages of individuals with EoE were simulated over a time horizon of five years. Effectiveness was estimated as patients in histologic remission and utility as QALYs using pooled data from 2 randomized clinical trials for BOT^{5,6} and indirect treatment comparisons based on the Bucher method as well as network meta analyses. Costs were extracted from Austrian cost catalogues. The analysis was performed from the payer perspective restricting it to direct costs. A sensitivity analysis applying a discount rate of 5% was performed.

RESULTS:



In the base case, the cost-utility ratio was €7,050 per QALY. BOT gained 3.74 QALYs over a 5 year horizon, while SFED yielded 3.34 QALYs. Over the same period, the incremental costs of BOT treatment were €2,820. Costs of SFED are not considered as per the analysis' perspective. A consideration of other direct medical costs outside of the payer's remit would yield even more favourable results which makes this result a conservative estimate.

CONCLUSION: In terms of cost-effectiveness, budesonide orodispersible tablets provide very good value for money to the Austrian healthcare system as they provide an average of four months of quality of life to patients with EoE at a highly cost-effective price when compared to the SFED.