Economic Burden of Adults Hospitalized with Respiratory Syncytial Virus Infection in Spain, 2016–2019

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INTRODUCTION

- Among older adults, an estimated 787,000 Respiratory Syncytial Virus (RSV)-related hospitalizations are projected to be occurring annually in high-income countries¹. In Spain, hospitalization rates have been reported to be approximately 1.7/100,000 in adults aged ≥60 years (2012-2020)² but this rate is underestimated due to infrequent testing³
- There is currently no adult cost data of RSV hospitalization in Spain

OBJECTIVES

- To estimate and compare the costs of hospitalized episodes of RSV and influenza by age and risk group
- To quantify the annual hospitalization cost burden of RSV and influenza to the Spanish National Healthcare System

METHODS

Study design

Retrospective observational study

Data source

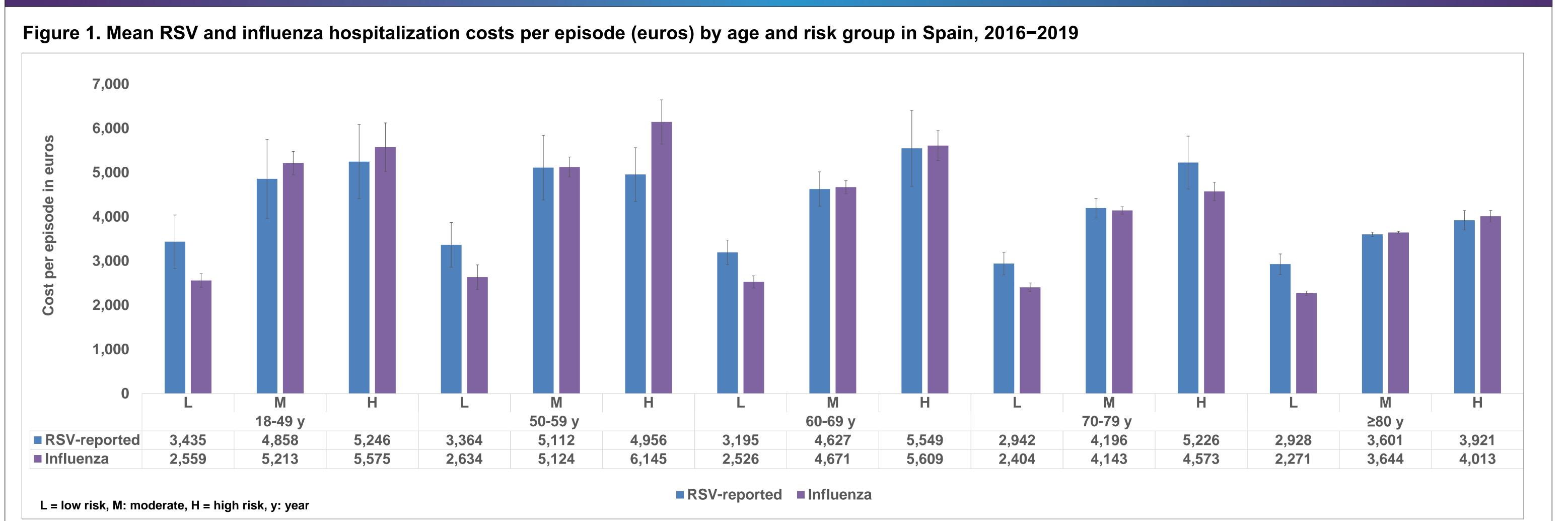
Study outcomes

- Mean cost per hospitalization episode (€, 2022) stratified by age group and risk profile: Low (L): immunocompetent without chronic medical condition, Moderate (M): immunocompetent with chronic medical condition and High (H): immunocompromised
- Minimum Basic Data Set (MBDS), hospital discharge database covering >90% of admissions in Spain⁴

Study population

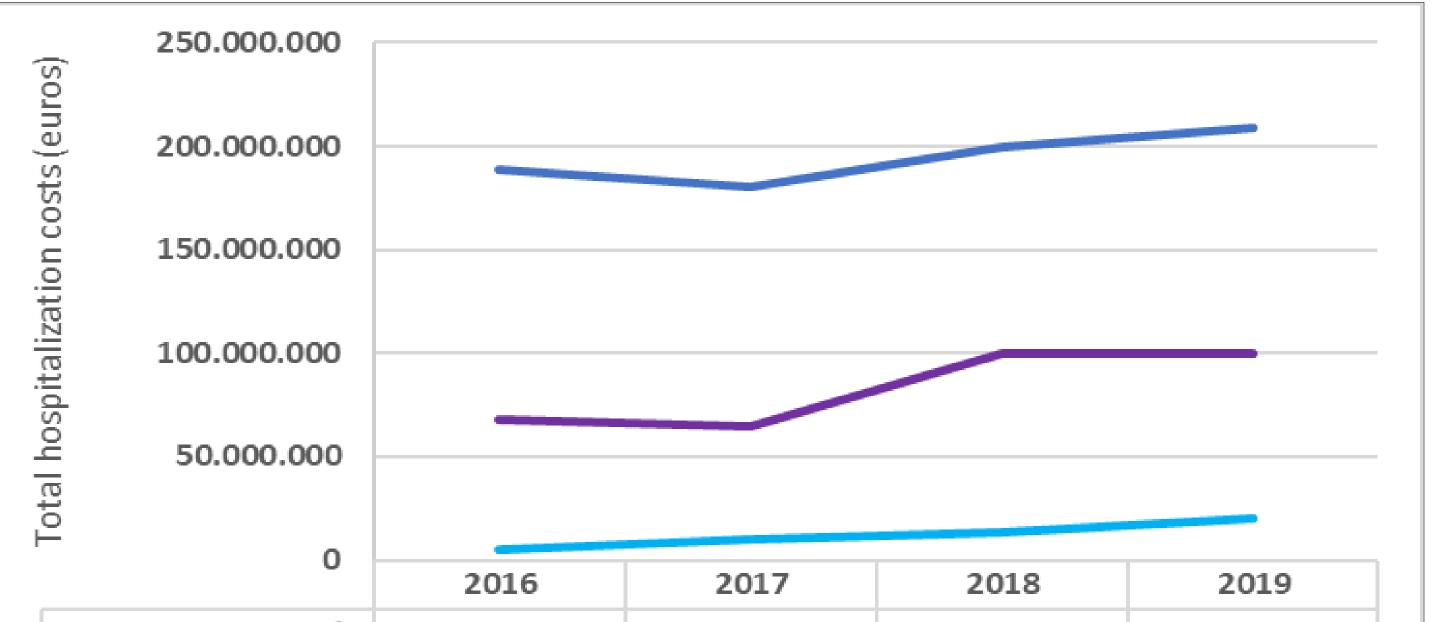
- Adults aged ≥18 years hospitalized for RSV-specific ICD-10 codes (B97.4, J21.0, J12.1, J20.5) and influenza-specific codes (J9, J10, J11) between January 1, 2016 to December 31, 2019
- Total annual hospitalization costs were estimated by combining mean costs per hospitalization episode from this study with hospital incidence data:
 - For RSV, two incidences were considered:
 - 'RSV-reported' based on RSV-specific ICD-codes
 - 'RSV-attributed' based on modelled RSV incidence data (previously reported in the same population) that accounts for the under-ascertainment of RSV⁴
 - Influenza incidence was based on current study

RESULTS



- A total of 11,662 adults were hospitalized with RSV-specific codes between 2016–2019 and 79,319 with influenza
- Mean length of stay: 5–12 days for RSV and 5-11 days for influenza, with a higher length of stay in high-risk groups
- Intensive care unit admission: among adults with risk factors (moderate/high-risk) 2–15% for RSV and 2–16% for influenza
- Mean costs per hospitalization episode ranged from €2,928–5,549 for RSV and €2,271–6,145 for influenza (Figure 1)
- RSV mean costs per episode appear higher than influenza costs in lowrisk patients of all ages (22% to 34%) and in high-risk patients aged 70-79 years (14%). But seem to be lower in high-risk patients aged 50–59 years (21%) and generally comparable in the rest (<10%) (Figure 1)





 Total mean annual hospitalization costs for RSV in adults were estimated at M(million) €12.1 for RSV-reported incidence and M€194.3 for RSVattributed incidence vs M€83.2 for influenza (Figure 2)

RSV-reported	5.308.508	10.127.735	13.097.097	19.802.655
RSV-attributed	188.378.461	180.349.106	199.526.897	209.014.223
	68.025.520	64.725.020	100.102.530	99.813.763

CONCLUSIONS

In adults, RSV has a substantial economic burden to the Spanish National Healthcare System

The large difference in total hospitalization costs between the RSVreported and RSV-attributed definitions highlights how total economic burden can be vastly underestimated if RSV hospitalizations are not appropriately corrected for under-ascertainment

If corrected for under-ascertainment, RSV likely has an economic burden greater than influenza

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DISCLOSURES

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REFERENCES

- 1. Li Y, Kulkarni D, Begier E et al. Infect Dis Ther. 2023 Apr;12(4):1137-1149
- 2. Heppe-Montero M, Gil-Prieto R, del Diego Salas J et al. Int J Environ Res Public Health 2022
- 3. McLaughlin JM, Khan F, Begier E et al. Open Forum Infect Dis 2022
- 4. Registro de Actividad de Atención Especializada: RAE-CMBD. Ministerio de Sanidad; 2022
- 5. Haeberer M, Torres A, Bruyndonckx R, et al. European Respiratory Society International Congress 2023; September 9-13, 2023, Milan, Italy