Cost-Effectiveness Analysis of Infliximab, Adalimumab, and Certolizumab for Crohn's Disease: A Markov Model Study Charles Ajala, PharmD Candidate, Lorenzo Villa Zapata, Ph.D., PharmD

University of Georgia College of Pharmacy, Athens, GA

Background

Biologic therapies, such as infliximab, adalimumab, and certolizumab, have revolutionized the management of Crohn's disease, offering effective treatment options for patients who do not respond adequately to conventional therapies. However, these biologics come at a substantial cost, prompting the need for rigorous cost-effectiveness analyses to inform healthcare decision-making.

Purpose

This study focused on identifying the most cost-effective biologic medication for Crohn's disease among infliximab, adalimumab, and certolizumab, emphasizing economic viability in disease management.

Methods

- The research utilized a Markov Model, developed in R using 'hesim' and 'heemod' packages, to simulate the health outcomes and costs for a cohort of 1,000 Crohn's disease patients over a five-year period, with monthly cycles.
- The model considers four Complete Remission (CR), Remission (R), Non-remission (NR), and Surgery (S).
- A 3% annual discount rate is applied to both costs and quality-adjusted life years (QALYs), with sensitivity analyses for different discount rates.
- A threshold of \$100,000/QALY is used to evaluate cost-effectiveness.



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Resu ts

Table 1: "Cost and Quality of Life Outcomes of TNF-a Inhibitors in Crohn's Disease Management: A Comparative Analysis".

TNF-a Inhibitors	Total Cost	Total QALYs
Adalimumab	\$ 110,042,863	25,883.29
Certolizumab	\$ 128,268,045	24,931.42
Infliximab	\$ 104,951,911	25,883.29





ICER analysis finds infliximab more costeffective than both adalimumab (-\$19,304.53 per QALY) and certolizumab (-\$24,495.04 per QALY), with adalimumab also more costeffective than certolizumab (-\$19,146.68 per QALY).

inhibitors.

- effective cost.



DISCUSSION

- Infliximab is more cost-effective suggests that it may offer superior value for money compared to the other two TNF-a
- This observation aligns with previous research indicating the cost-effectiveness
 - of infliximab in Crohn's disease
 - management, potentially attributed to
 - factors such as dosing frequency,
 - administration method, or clinical efficacy.

Conclusions

 Infliximab emerges as the most costoption for Crohn's disease treatment among the three drugs, staying below the \$100,000/QALY threshold and providing the highest QALYs at the lowest

• The findings are significant for healthcare decision-makers, emphasizing the integration of economic assessments in clinical decisions, particularly in Crohn's disease management.

References

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