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Cost of medication used to treat IBD

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Background: Inflammatory bowel disease comprising of Crohn's Disease (CD) and Ulcerative Colitis (UC) are chronic diseases with a lifelong burden and often need continuous treatment throughout a patient's life. Data regarding drug costs in IBD patients are limited. No earlier study has evaluated the drug costs of IBD patients in Finland. Our objective in this study was to assess the costs of commonly used drugs in IBD patients.

Methods: A structured questionnaire, hospital records and national registers were combined to assess the true costs of drug purchases by IBD patients. The study sample comprised of 561 patients.

Results: Total annual mean drug costs were 1428 €/patient. CD patients had higher annual costs than UC patients, 2369€ and 902€, respectively. CD patients using immunosuppressants, corticosteroids and biologics also had higher costs. Patients using biologics had higher costs. Faecal calprotectin had a positive correlation with costs. Women reported having a worse QoL but had lower total costs.

Conclusions: Drug costs are developing to be a major cost-driver in the total costs of IBD patients.

Discussion: Inflammatory Bowel Diseases (IBDs) create significant overall treatment costs to a tertiary-level clinic and eventually to taxpayers. In the present study, the costs generated by the study group were significantly higher, almost 17-fold, compared with the costs generated by the age-matched and sex-matched control group during the same period. In this study, all costs are based on true costs collected from registers used to charge the final payer. These include all direct costs from the study period regarding patients both recently diagnosed with IBD and those diagnosed earlier. The present study findings of total costs in both UC and CD are consistent with the data from earlier studies, although there are major differences between these studies.

Biography

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