

Impact of Bortezomib versus VAD as induction therapy for enhancing patients' outcomes and resources utilization for low middle income countries with multiple myeloma patients

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Objectives: Multiple myeloma (MM) is the most prevalent and most serious plasma cell dyscrasias. It accounts for about 10% of hematologic malignancies. The rationale intended for this study is to determine impact of bortezomib plus dexamethazone versus the vincristine, adriamycin, and dexamethasone (VAD) regimen as induction therapy for MM on enhancing quality of life for patients and resources utilization through cost utility study over a time horizon of 10 years.

Methods: A cost utility analysis from the perspective of the National Fund was conducted. A Markov model was applied with three health states. Utility data were incorporated in the model to make adjusted results. The structure of this model reflects the natural history of MM and current treatment strategy compared to the medical literature related to the disease. The model conforms to real practice of management of MM in Egypt. Costs used were the local ones according to the national fund list. Discounting was applied at 3.5% annually both on costs and benefits. The results obtained were in term of quality-adjusted life-years (QALYs) gained.

Results: During the ten-year time horizon, total QALY gained for bortezomib plus dexamethazone was 2.08 QALY. Total QALY gained for VAD was 2.02 QALY. That yields a difference of 0.06 QALY.

Conclusions: The introduction of bortezomib to the National Fund was found to have positive impact on enhancing quality of life through QALY gained and cost saving for resources used.

Biography

Abdalla Abotaleb is one of the most profound experts in healthcare policy and regulations in the Middle East. His expertise extends from HTA & Reimbursement policies to regulatory and supply chain strategies in the public sector. He has been involved in the fields of health economics, outcomes research, and reimbursement policy within the healthcare industry for 15 years, with experience across the pharmaceutical, biologicals and vaccines. Currently he works for WHO as a Project Manager at health care reforming area. He has graduated in Faculty of Pharmacy and then obtained a Post-graduate in Health Economics followed by a PhD in Health Economics & Policy from York University.

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