COST-UTILITY OF AMISULPRIDE COMPARED WITH FIRST GENERATION ANTIPSYCHOTICS IN TREATMENT OF SCHIZOPHRENIA IN POLAND

Objectives

The aim of the economic analysis was to compare costs and effectiveness of amisulpride (Soltata) in the treatment of schizophrenia and to determine whether it is cost-effective option for schizophrenia patients in Poland.

Methods

- **Comparators for amisulpride (AMI) were first generation antipsychotics (FGA).** The following drugs were considered: haloperidol (HAL), perazine (PER) and flupenthixol (FLU).
- **Cost-effectiveness was assessed in population of adults with schizophrenia.**
- **The analysis was conducted by developing a decision-tree model simulating the clinical care pathways for amisulpride therapy in comparison to FGA (antipsychotics).** The model was based on the results of a systematic review of randomized controlled trials (RCTs) of amisulpride and FGA. The study included the following drugs: haloperidol, perazine and flupenthixol. Analysis was performed from the National Health Fund (NHF) perspective with a time horizon of one year. The range of possible events in the model (including therapy discontinuation, dependability of resources, EPS occurrence, schizophrenia relapse and suicide) and range of events were assumed to be the same for amisulpride and FGA.

Results

The estimated clinical outcomes expressed in terms of QALY associated with amisulpride and FGA are listed in Table 4.

- **As well as clinical outcomes, the total costs are also very similar for amisulpride and FGA.** The estimated clinical outcomes expressed in terms of QALY associated with amisulpride and FGA are listed in Table 4.

- **QALY difference between amisulpride and FGA is equal to 0.04 one-year horizon (Table 4).**
- **The obtained difference in QALY is very small, however, it is the probability that the incremental results are below the acceptability threshold (ca 100k PLN/QALY or ca 25k EUR/QALY). In probabilistic sensitivity analysis (PSA) results indicate that amisulpride is more effective than any of FGA in 100%, while the probability that it is also cost-effective varied between 68% for perazine to 83% for haloperidol.**

Conclusions

Treatment of schizophrenia with amisulpride is a cost-effective option in comparison to FGA in Poland. The obtained difference in QALY is very small, however, it is the probability that the incremental results are below the acceptability threshold (ca 100k PLN/QALY or ca 25k EUR/QALY). In probabilistic sensitivity analysis (PSA) results indicate that amisulpride is more effective than any of FGA in 100%, while the probability that it is also cost-effective varied between 68% for perazine to 83% for haloperidol.

References


Figure 1. Decision tree model

Figure 2. Costs of treatments

Figure 3. Scatter plot, amisulpride vs haloperidol

Figure 4. Scatter plot, amisulpride vs perazine

Figure 5. Scatter plot, amisulpride vs flupenthixol

Table 1. Effectiveness parameters

Table 2. Unit costs

Table 3. Utility parameters

Table 4. Clinical outcomes – QALY

Table 5. Economic outcomes