

PSORIASIS

THE COST OF PSORIASIS IN PATIENTS UNDER CONVENTIONAL SYSTEMIC TREATMENT OR BIOLOGIC: THE RESULTS OF A RETROSPECTIVE ANALYSIS CARRIED OUT IN AN ITALIAN CENTER

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INTRODUCTION: given the high prevalence of psoriasis, it becomes important to investigate its management, in terms of costs borne by the Healthcare Service or by society.

OBJECTIVE: the objective of this analysis is to present – in a Real World Setting – an update of the cost profile of psoriasis in patients under conventional systemic therapy or biologic referring to a single center.

MATERIALS AND METHODS: a retrospective, observational, non-interventional cohort study was conducted to estimate the (direct and indirect) cost of the treatment with conventional systemic therapy or biologic of adult patients diagnosed with psoriasis referring to the "University Dermatology Department Dermo II" in Turin, Italy.

RESULTS: overall, 181 patients were therefore considered: 83 (45.9%) treated with a biologic and 98 (54.1%) with a conventional systemic therapy. No significant differences were found in the mean number of concomitant therapies. At baseline a picture emerged of a more compromised disease activity in patients with the biologic versus those with the conventional systemic therapy (mean PASI score 19.8 vs. 13.9; p = 0.0005). For both treatments, it was to be noted an improvement in the 6-month follow-up, both in terms of QALYs (Quality Adjusted Life Years) and VAS (Visual Analogic Assessment) score. During the 6-month follow-up, the patient treated with the biologic generated a cost of \in 5,657 (±1,667), of which 99.2% were direct medical costs for the NHS. The semi-annual average cost for a patient in treatment with a conventional systemic therapy was equal to \in 321 (±201); in this case direct medical costs covered 84.1% of the total amount.





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CONCLUSIONS: The data collected – albeit limited to a single experience related to a Center of Northwest Italy – seem to be sufficient to state that psoriasis is a severe disease with a quite high overall cost for the NHS and/or society.



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