Annual Cost Of Conservative Treatment Of Supraventricular Tachycardias In Poland

MM Farkowski, Institute of Cardiology, Warsaw
D Golicki, HealthQuest, Warsaw
M Czech, Medical University of Warsaw
M Pytkowski, Institute of Cardiology, Warsaw
A Maciag, Institute of Cardiology, Warsaw
Kathryn Wood, Emory University
I Kowalik, Institute of Cardiology, Warsaw
H Szwed, Institute of Cardiology, Warsaw

Journal Title: Value in Health
Volume: Volume 17, Number 7
Publisher: Elsevier | 2014-11-01, Pages A485-A485
Type of Work: Article | Post-print: After Peer Review
Publisher DOI: 10.1016/j.jval.2014.08.1419
Permanent URL: https://pid.emory.edu/ark:/25593/s6fsq

Final published version: http://dx.doi.org/10.1016/j.jval.2014.08.1419

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Accessed December 26, 2019 12:37 AM EST
ANNUAL COST OF CONSERVATIVE TREATMENT OF SUPRAVENTRICULAR TACHYCARDIAS IN POLAND

Farkowski MM¹, Golicki D², Czech M³, Pytkowski M¹, Maciag A¹, Wood KA⁴, Kowalik I¹, Szwed H¹
¹Institute of Cardiology, Warsaw, Poland, ²HealthQuest, Warsaw, Poland, ³Medical University of Warsaw, Warsaw, Poland, ⁴Duke University School of Nursing, Durham, NC, USA

OBJECTIVES Supraventricular tachycardias (SVT) are a group of arrhythmias which result in significant impairment of health-related quality of life (HRQoL). While not as common as atrial fibrillation, SVT are still a significant healthcare problem since an average time from the onset of symptoms to successful ablation exceeds 10 years both in highly and less developed countries. The aim of this study was to calculate an annual cost of conservative treatment of SVT in Poland. METHODS This was an economical part of The PPRA study (NCT01594814). PPRA was a single-center, prospective, cohort study conducted in tertiary care cardiology center in Poland. All data concerning health care resources utilization: outpatient and inpatient visits, emergency room (ER) consultations, drugs etc. were derived from the study. Costs of disease related groups (DRG), outpatient visits and reimbursed drugs were derived from official price lists of Polish National Health Fund (NHF). Costs of ER visits were calculated as a mean cost of visit derived from seven hospitals of different levels of care. Costs of medical transport were calculated as a mean cost derived from four different centers providing ambulance services. Cost of non-reimbursed drugs and of outpatient visits and diagnostic tests in private sector were calculated as a mean cost of those resources available on official websites of nation-wide providers. All costs are presented in Euro (EUR) as median [interquartile range]. RESULTS During 1.5 years, 82 patients were enrolled and the data for this analysis was available for all patients. The yearly median cost of conservative treatment of SVT was EUR 415 [237-727] from the NHS perspective and EUR 468 [280-793] from the societal perspective. Those costs were mainly driven by costs of hospitalizations and ER. CONCLUSIONS Annual cost of conservative treatment of SVT is substantial and driven mainly by hospital services.
Disease/Disorder:
Cardiovascular Disease-Arrhythmia
Health Care Treatment:
Health Services

Digest:
Undecided

Guarantor:
Michal M. Farkowski

Session Assignment:
RESEARCH POSTER PRESENTATIONS - SESSION III

First author
Michal M. Farkowski, MD
Resident
II Dept. of CAD
Institute of Cardiology
Spartanska 1
Warsaw, 02-637
Poland

Phone Number: +48 962422357
Fax Number: +48 22 844 95 10
Email Address: mfarkowski@gmail.com

Second author
Presenting Author
Dominik Golicki, MD, PhD
Partner
HealthQuest
ul. Wyspiańskiego 4 lok. 5
Warsaw, 01-577
Poland

Phone Number: +48501078203
Email Address: dominik.golicki@healthquest.pl

Third author
Marcin Czech, MD, PhD
Assistant Professor
Medical University of Warsaw
Zwirki i Wigury 81
Warsaw, 02-091
Poland

Phone Number: +48 22 57 20 855
Email Address: marcin.czech@wum.edu.pl

Fourth author
Mariusz Pytkowski, MD, PhD
Assistant Professor
II Dept. of CAD
Institute of Cardiology
Spartanska 1
Warsaw, 02-637
Poland

Phone Number: +48 22 343 4050
Fax Number: +48 22 844 95 10
Email Address: mpytkowski@ikard.pl

Fifth author
Aleksander Maciag, MD, PhD
Assistant
II Dept. of CAD
Institute of Cardiology
Spartanska 1
Warsaw, 02-637
Poland

Phone Number: +48 22 343 4050
Fax Number: +48 22 844 95 10
Email Address: amaciag@ikard.pl

Sixth author
Kathryn A. Wood, PhD, RN
Assistant Professor
Duke University School of Nursing
307 Trent Drive
Durham, NC, 27710
USA

Phone Number: (919) 684-9621
Email Address: kathryn.wood@duke.edu

Seventh author
Ilona Kowalik, MA, PhD
Biostatistician
II Dept. of CAD
Institute of Cardiology
Spartanska 1
Warsaw, 02-637
Poland

Phone Number: +48 22 343 4050
Fax Number: +48 22 844 95 10
Email Address: ikowalik@ikard.pl

Eighth author
Hanna Szwed, MD, PhD
Professor
II Dept. of CAD
Institute of Cardiology
Spartanska 1
Warsaw, 02-637
Poland

Phone Number: +48 22 343 4050
Fax Number: +48 22 844 95 10
Email Address: hszwed@ikard.pl