The cost-effectiveness and budget impact of BoNTA treatment for severe primary axillary hyperhidrosis inadequately managed with topical agents.

INTRODUCTION

Severe primary axillary hyperhidrosis has been reported to be similar to moderate to severe psoriasis in terms of emotional, physical, and psychological symptomatology. It may be a condition of excessive, bilateral, and relatively symmetric sweating occurring either as a focal or primary hyperhidrosis. When primary focal hyperhidrosis is a disorder of excessive, bilateral, and relatively symmetric sweating occurring prior to the age of 11 years.

METHODS

For a 1 million-member US managed care plan, the incremental per member per month (PMPM) total pharmacy and medical cost for the treatment algorithm with BoNTA compared to the algorithm without BoNTA is $0.002 (Table 3A). The perspective was that of a 1 million-member US managed care plan over a time horizon of 1 year.

RESULTS

The incremental cost-effectiveness ratio (ICER) for the treatment algorithm with BoNTA compared to the algorithm without BoNTA was $48 in the treatment algorithm with BoNTA and $26 in the treatment algorithm without BoNTA. (Table 3B) The effectiveness rates for the treatment algorithm with BoNTA and the treatment algorithm without BoNTA were 48% and 30-70% respectively. The effectiveness rates for the treatment algorithm with BoNTA compared to the algorithm without BoNTA were 75% (0.0075% of the plan population). (Figure 4)

CONCLUSIONS

The incremental pharmacy budget impact of the treatment algorithm with BoNTA for severe primary axillary hyperhidrosis inadequately managed with topical agents is $1400 per successfully treated patient over 1 year. In conclusion, to optimize the cost-effectiveness and potential payer budget impact of bilateral BoNTA treatment (50U per axilla) for severe primary axillary hyperhidrosis, the 1 million-member US managed care plan should consider the following factors:

- The development of this poster was supported by Allergan, Inc.

REFERENCES

1. Jonathan W. Kowalski, Arline Ravelo, and Jeff Lee are employees of Allergan, Inc. David R. Strutton was the Medical Director of Allergan’s manufacture of BoNTA during the years 2001-2005. David R. Strutton has also been involved in the development and writing of a number of clinical studies investigating the use of BoNTA to treat primary axillary hyperhidrosis.

- 2004 revised final rule payment for CPT 32664 (local excision of sweat glands) was $1,355.00. Private payer fee for CPT code 11451; Medicare reimbursement was $582.50. Botulinum toxin type A, manufactured by Allergan, Inc.