To assess the pharmaceutical cost associated with CF outpatients from the Adult Cystic Fibrosis Unit at third level hospital.

**Methods**
- Retrospective observational study of CF medication in adult patients throughout the year 2017.
- Patients without complete annual monitoring were excluding.
- SPSS program (15.0 version) was used for data analysis.
- CFTR modulators drugs and hypertonic 7% sodium chloride solution as master preparation were not considered for overall costs (purchase price was zero).

**Results**
- **Nº pacientes:** 59
- **Mediana de edad:** 32.2 years (±9.2)
- **Sexo:** 54.2% were female

**Analysis cost**

<table>
<thead>
<tr>
<th>Total cost</th>
<th>EUR 54.7085,70</th>
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<tbody>
<tr>
<td>Median cost</td>
<td>EUR 7.147,58</td>
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**Difference cost by PA colonization**
- **Not colonized vs.**
  - Sensitive PA colonized: EUR 77.183,31
  - Multidrug-resistant PA colonized: EUR 10.272,82

All differences were statistically significant (p<0.007).

**Discussion**
- Treatment costs per patient are similar to those reported in literature.
- Severe dysfunction means lower expenditure than intermediate function, on account of excluding CFTR modulators.
- Homozygous F508 deletion, associated with a worse prognosis, means high expenditure.

**Conclusions**
- CF is a relatively costly disease, although new CFTR modulator drugs will increase costs considerably.
- The pulmonary function and CFTR mutation are related with treatment cost.
- Relationship between treatment adherence and cost should be analyzed in further studies.