

ECONOMIC SAVINGS OF ERENUMAB REDOSING IN A THIRD-LEVEL HOSPITAL

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Background and Importance

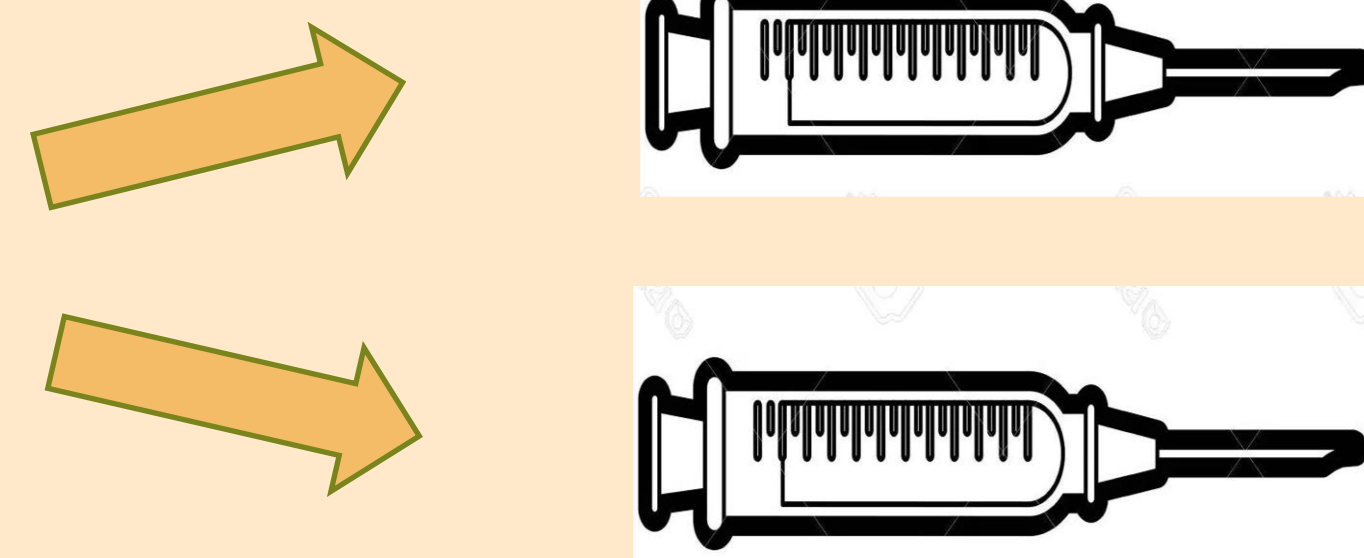
Erenumab which is a new monoclonal antibody for the treatment of migraine that binds to the calcitonin gene-related peptide (CGRP) receptor to inhibit its function. Is a drug with a considerable economic impact on the hospital's annual budget.

Aim and Objectives

To evaluate the budgetary impact of the redosification of the commercial dose of erenumab 140 mg into doses of 70 mg.

Materials and Methods

- **Study design:** An observational, retrospective study.
- **Setting:** Tertiary care hospital with a clean room.
- **Patients included:** Treated with Erenumab between 01/01/2019 and 30/08/2022 were included.
- **Variables collected:** Sex, age, dose prepared per patient, number of redoses per patient, and number of syringes of erenumab used.



A pharmacoeconomic study was carried out in which the savings obtained by the redosification of 140 mg in doses of 70 mg were evaluated since both commercial presentations have the same price.

The actual cost of the treatments with redosing and the theoretical cost without redosing were calculated, considering the number of doses and the duration of treatment in each patient.

Results

- **281 patients** were treated with erenumab.
- Age: 46 years (range 17-75),
- Sex: Women 86.8% (n=244). Men 13.2% (n=37)
- 1,133 syringes of erenumab 70 mg (mean: 2; range 0-29) and 1,875 of 140 mg (mean 4; range 0-28) were consumed.

Redosing annual cost	Theoretical annual cost without redosing
€ 519,827	€ 629,282

Saving/patient: €389.52

Saving/year: €109, 455
547.28 syringes of Erenumab 140mg

Conclusion and Relevance

The results show that the repackaging of the 140 mg dose into 70 mg it is a great economic saving practice and easy to implement in hospitals

