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BACKGROUND AND IMPORTANCE

AIM AND OBJECTIVE

Iron carboxymaltose (ICM) and iron sucrose (IS) are two types of intravenous iron used for the treatment of irondeficiency anaemia.

Differences between the dosing regimen and hospital length stay have led many centres to perform costeffectiveness studies with variable results.



To compare the **effectiveness** and **cost** of intravenous ICM vs IS for the control of anaemia in hospitalised patients.

MATERIALS AND METHODS

A retrospective (April 2021 -April 2022) cohort study was performed in anemic



- ✓ Total dose administered
- ✓ Hb pre, post-treatment (>6 days)
- ✓ Patients with increased Hb≥1g/dL
- ✓ Prior treatment with oral iron

Cohorts were matched for baseline characteristics (age, gender and hospital service) and initial Hb values. Data was compared using student's t test with SPSS v.22.0.

RESULTS

	ICM	IS
Age (years ± SD)	75.5 ± 13.8	75.9 ± 13.6
Patients (N) (% women)	49 (63.3%)	49 (63.3%)
Total dose administered (mg ± SD)	867.4 ± 233.0 26.5% → 500mg 73.5% → 1000mg	438.8 ± 199.9 42.9% → 300mg 26.5% → 400mg 20.6% → 500mg

Evolution of haemoglobin levels, hospital admission length, prior treatment with oral iron and estimated cost per patient



CONCLUSION AND RELEVANCE

ICM and IS administration resulted in an improvement of Hb levels in both cohorts without showing a significant difference in the hospital length of stay. ICM treatment generated an increase of direct costs.





