Although Hepatitis B (HB) drugs have strong antiviral activity, they cannot eradicate the virus, so they must be administered for long periods of time, making long term adherence difficult to keep. Non adherent patients are more likely to have virologic failure, so it is necessary to promote optimal adherence to treatments.

**BACKGROUND**

Although Hepatitis B (HB) drugs have strong antiviral activity, they cannot eradicate the virus, so they must be administered for long periods of time, making long term adherence difficult to keep. Non adherent patients are more likely to have virologic failure, so it is necessary to promote optimal adherence to treatments.

**PURPOSE**

To describe the evolution of HB treatment management from a regional perspective, and to step beyond health outcomes (effectiveness and adherence) using integrated patient-centered computer tools.

**MATERIAL AND METHODS**

- Descriptive study of the information obtained by indicators that hospital pharmacy services submit to the Regional Pharmacy Department every 3 months. The indicators are focussed on the most relevant pathologies, including HB.

- Indicators collected:
  1. Since 2010, total cost for antiviral treatment, number of average dispensed patients and cost per average dispensed patient/year.
  2. Since 2015, the percentage of patients with treatment and virological response (viral DNA<20IU/ml) and the percentage of patients with treatment and adherence ≥90% (records of dispensing).

**RESULTS**

From 2010 to 2016, total HB treatment expenditure has decreased by 35%.

- Patients with HB treatment have increased by 89% (1,594 patients in 2010 and 3,019 in 2016).
- The cost per average dispensed patient has been 18% lower in 2016 than in 2010 (3,728€ in 2010 and 3,064€ in 2016).

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Year 2015</th>
<th>Year 2016</th>
<th>Improvement/Decreasing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Virological response</td>
<td>89.9% (rango: 71-98.7%)</td>
<td>91.6% (rango: 72-100%)</td>
<td>Improvement of 1.8 percentage points</td>
</tr>
<tr>
<td>Adherence</td>
<td>93.5% (rango: 84.6-100%)</td>
<td>93.2% (rango: 82.8-100%)</td>
<td>Decreasing 0.3 percentage points</td>
</tr>
</tbody>
</table>

**CONCLUSIONS**

- The cost per patient has been reduced without decreasing the effectiveness at least in last years, with 91% of patients with virological response and 93% adherence.
- Making progress in getting results in effectiveness and adherence adds value to simple economical indicators and allows clinical professionals useful tools for the management of therapeutic resources.