THE IMPACT OF MYELOMA MULTIPLE CLINICAL TRIALS ON MEDICATION COST SAVINGS

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BACKGROUND

Medication costs are increasing and the hospital budget are short. Clinical trials may be an alternative for medication cost savings.

PURPOSE

To assess the savings brought about on medication by the inclusion of patients in myeloma multiple (MM) clinical trials (CT).

MATERIALS AND METHODS

Retrospective, observational and descriptive study.

Conducted in the Pharmacy Clinical Trials Department of an University Hospital from January 2013 to December 2015

Data collected:

a) Protocol number.
b) Study design.
c) Phase.
d) Arms (experimental vs control).
e) Medication information:
   - Provided or not by the CT sponsor, marketed or not.
f) Patient information:
   - Randomization number, assigned arm, start and end date of the treatment, total quantity of medicines dispensed.

Economic evaluation with Gestockwin®

Direct costs recorded in the application were used for the medication management. Indirect costs for not marketed medication were estimated.

The MM CT medication cost per patient was compared with standard clinical practice cost.

RESULTS

Ongoing MM CT during the study period n=17

CT excluded n=11 (64,7%)

- 5 CT had not enrolled any patient.
- 6 CT had not patients on treatment.

CT Included n=6 (35,3%)

Total number of patients n=42
\[ \bar{x} = 7 \text{ patients per CT} \]

Cost savings per patient 16,283€

Cost savings per CT 113,981€

TOTAL cost savings were 683,886€

CONCLUSIONS

- Conducting MM clinical trials has led to important cost savings for the hospital.