THE CLINICAL AND ECONOMIC VALUE OF A SUSTAINED RESPONSE IN THE TREATMENT OF MODERATE-TO-SEVERE PSORIASIS IN SPAIN: THE PSOVALUE PROJECT



Álvaro Hidalgo-Vega^{1,2}, Néboa Zozaya³, María Merino⁴, Fernando Abdalla³, Paulina Maravilla-Herrera⁴, Santiago Alfonso Zamora⁵, Jesús Balea Filgueiras⁶, José Manuel Carrascosa Carrillo⁷, Olga Delgado Sánchez⁸, Francisco Dolz Sinisterra⁹, Antonio García-Ruiz¹⁰, Pedro Herranz Pinto¹¹, Antonio Manfredi⁵, José Martínez Olmos¹², Paloma Morales de los Ríos Luna¹³, Lluis Puig¹⁴, Sandra Ros¹⁵

OBJECTIVES

The PSOVALUE project pursued a triple objective related to the management of patients with moderate-to-severe plaque psoriasis in Spain: 1) to identify and quantify unmet needs; 2) to determine, through a multi-criteria decision analysis (MCDA), the value contribution of a new biologic drug; 3) to analyse the social value of achieving a sustained response to treatment.

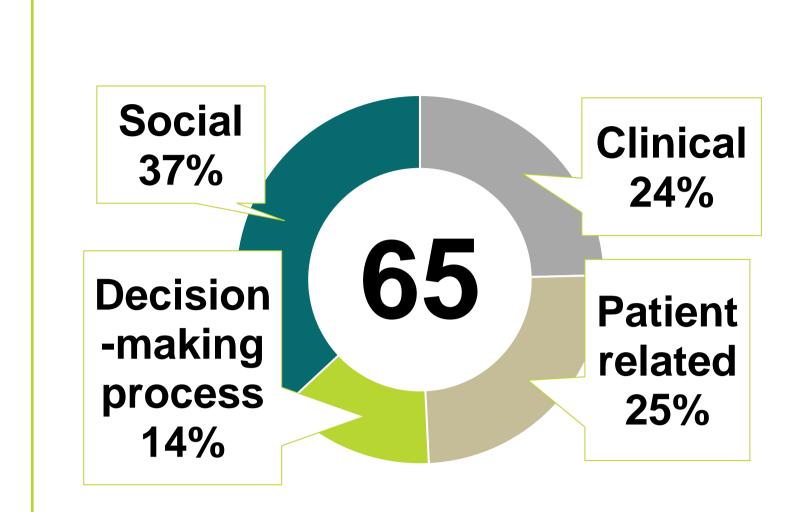
METHODS

A mixed-methods approach was used: scientific literature review, a focus group with patients, and an advisory multidisciplinary committee composed by twelve experts. 1) A structured questionnaire was designed to elicit unmet needs. 2) The estimated added value of bimekizumab, compared to six alternatives, was obtained by combining weights and scores assigned by the committee based on a matrix of evidence created from a literature review. 3) An economic 1-year time horizon model was applied to estimate the social value of having a Psoriasis Area Severity Index (PASI) 90 or PASI 100 response in comparison with a PASI 75 response.

RESULTS

1) A total of 65 unmet needs were identified and categorized into four areas: clinical, patient related, decision-making process, and social. The most relevant unmet needs were to incorporate outcomes that are important to patients and to have treatments that achieve total clearance with a quick onset of action and long-term persistence (Figure 1). 2) Bimekizumab was assessed as an intervention with a positive value contribution in comparison to any of the alternatives, as it combines a higher level of clearance, rapidity, and persistence with a similar safety/tolerability profile (Figure 2). 3) Moving from a partial response (PASI 75) to a complete response (PASI 100) would represent an added social value of € 4,786 per patient, mainly attributed to work productivity gains (Figure 3).

Figure 1. Unmet needs in moderate-to-severe psoriasis



Most relevant: To incorporate outcomes that are important to patients (8.3 / 10.0)

 To have treatments that achieve total clearance with a quick onset of action and long-term persistence (8.2 / 10.0)

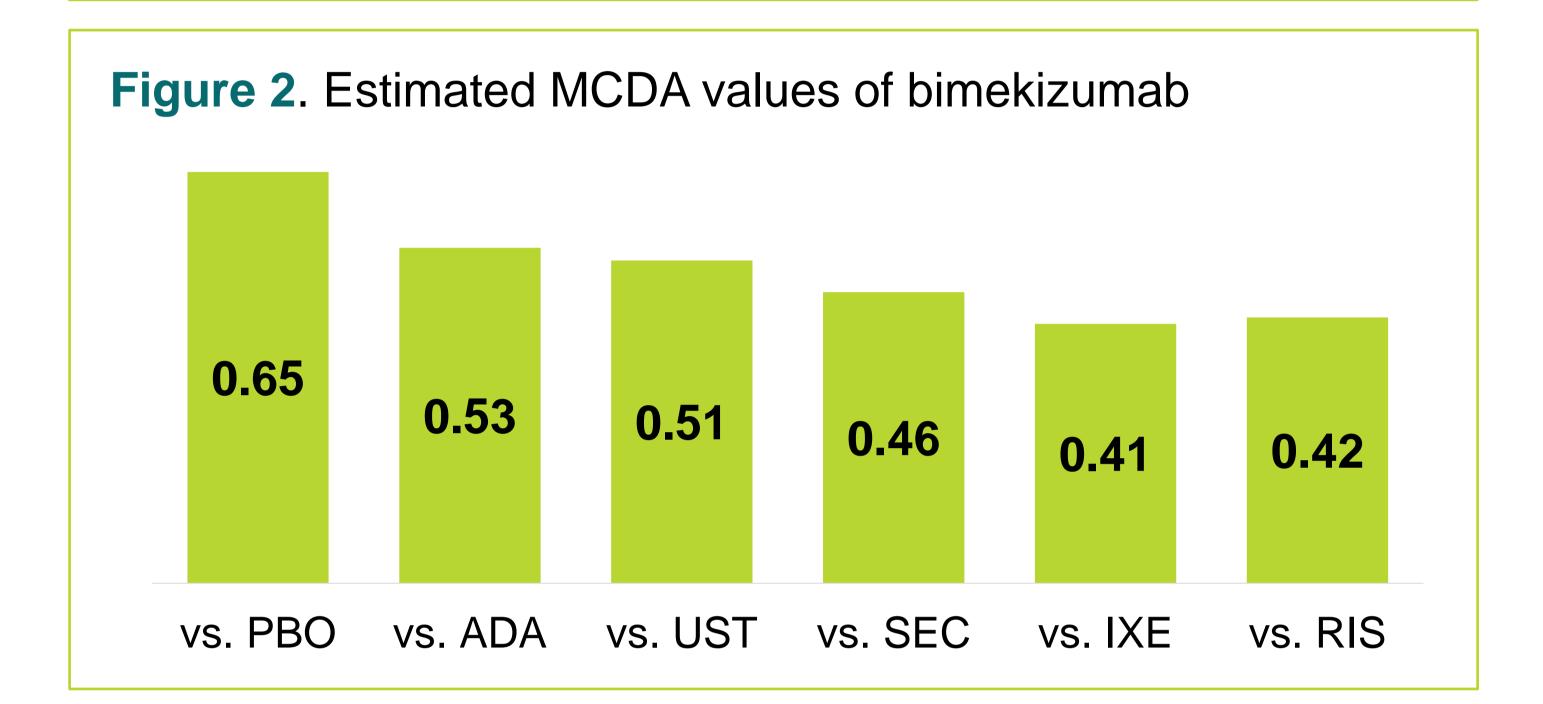
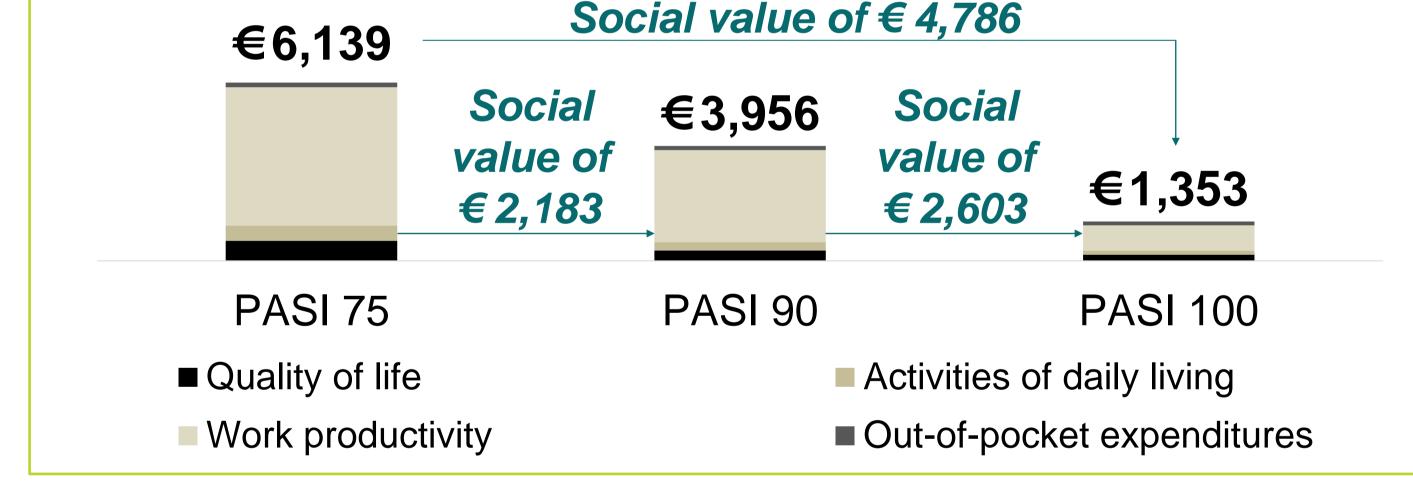


Figure 3. Economic impact by PASI response, and social value of a sustained response to treatment



CONCLUSION

A sustained response in the treatment of moderateto-severe psoriasis would address relevant unmet needs and generate a substantial social value. Bimekizumab would add value to current treatment options.

AFFILIATIONS

¹Weber Foundation, Madrid, Spain; ²Department of Economic Analysis and Finances, University of Castilla-La Mancha. Toledo, Spain. ³Department of Health Economics, Weber, Madrid, Spain; ⁴Department of Health Outcomes Research, Weber, Madrid, Spain; ⁵Department of Management, Psoriasis and Psoriatic Arthritis Patient and Family Association (Acción Psoriasis), Barcelona, Spain; ⁶Department of Pharmacy, Ferrol University Hospital Complex, La Coruña, Spain; ⁷Department of Dermatology, Germans Trias i Pujol University Hospital, Badalona, Spain; ⁸Department of Management, Spanish Society of Hospital Pharmacy (SEFH). Department of Pharmacy, Son Espases University Hospital, Illes Balears, Spain; ⁹Department of Management, Doctor Peset University Hospital, Valencia, Spain; ¹⁰Health Economics and Rational Use of Medicines. Department of Pharmacology and Clinical Therapeutics. Biomedical Research Institute of Malaga (IBIMA). University of Malaga, Malaga, Spain; ¹¹Department of Dermatology, La Paz University Hospital, Madrid, Spain; ¹²Andalusian Public Health School (EASP), Granada, Spain; ¹³Department of Nursing, Gregorio Marañón University Hospital, Madrid, Spain; ¹⁴Department of Dermatology, Hospital de la Santa Creu i Sant Pau, Universitat Autònoma de Barcelona, Barcelona, Spain; ¹⁵Pshycologist, Department of Dermatology, Rheumatology and Cardiac Transplantation, Hospital de la Santa Creu i Sant Pau, Barcelona, Spain.