



COST-EFFECTIVENESS ANALYSIS OF HOME-BASED PALLIATIVE CARE FOR END-STAGE CANCER PATIENTS

Parnian kubor

Health Management and Economics Research Center, Isfahan University of Medical Sciences, Isfahan, Iran

Abstract:

OBJECTIVES: This study evaluates cost-effectiveness of home-based palliative care vs alternative institutional palliative care for end-stage cancer patients.

METHODS: The cost of care and outcomes for two groups of end-stage cancer patients are compared: (1) Intervention group that consists of 94 patients who received home-based palliative care including medical, nursing and psycho-social care; (2) Control group consists of 113 patients who were not supported by the home care services and referred to hospitals and cancer out-patient clinics to receive palliative care. The aforementioned groups were matched in terms of type and stage of cancer and patient's age and gender. The cost of care included all inpatient and outpatient clinical/para-clinical services and the effectiveness was measured as length of stay in the hospital (LOS) and percentage of death occurred at home. A time horizon of 6 months was considered.

RESULTS: More death occurred at home among the intervention group compared with the control group (45.74% VS 23.89%; $p=0.001$). The reported length of stay (LOS) in hospital was lower for the intervention group compared to the control group (14.75 Day VS



20.45 Day; $p=0.052$). Regarding the cost, the mean total costs were lower for intervention group (\$3,714 VS \$5,521; $P=0.019$). This resulted in an incremental cost-effectiveness ratio (ICER1) of \$316.60 per LOS and an incremental cost-effectiveness ratio (ICER2) of \$-82.70 per percentage of death in home. Our findings indicated that home-based palliative care was a dominant strategy.

CONCLUSIONS: Home-based palliative care appeared to be a dominant strategy for caring end stage cancer patients. As it decreased the cost of care and increased the death at home at one hand and the length of stay at hospital on the other hand. So this type of care could be considered for including in benefit package to meet needs of end-stage cancer patients.

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