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IMPROVED WOUND MANAGEMENT AT LOWER COST: A SENSIBLE GOAL FOR AUSTRALIA

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Statement of the Problem: Chronic wounds cost the Australian health system at least USD 2.85 billion per year. Wound care services in Australia involve a complex mix of treatment options, health care sectors and funding mechanisms. It is clear that implementation of evidence-based care improves wound healing, reduces recurrence as well as hospitalisation due to complications, amputation and overall burden, yet the majority of Australians with chronic wounds do not receive evidence-based treatment. High initial treatment costs, inadequate reimbursement, poor financial incentives and lack of skilled health care professionals proficient in evidence-based practice are major barriers to the adoption of best practice. In order to secure funding for better services in a competitive environment, evidence of cost-effectiveness is required.

Methodology: This study developed Markov models to analyse the cost-effectiveness of implementing optimal care in comparison with the continuation of usual care for patients with chronic wounds in Australia. Optimal care was defined as wound care that follows the set of recommendations from the Australian official guidelines with full Medicare Benefits Schedule (MBS) and Pharmaceutical Benefits Scheme (PBS) reimbursement linked to services, devices and consumables. Findings: Economic modelling results demonstrate that implementing and funding best practice systems to manage chronic wounds is a cost-saving strategy in Australia and improves health outcomes. Probabilistic sensitivity analysis showed that optimal care always had a higher probability of costing less and generating more health benefits.

Conclusion & Significance: We recommend high-level policy development and investment in evidence-based care to improve affordability and support access to health professionals and multidisciplinary teams. Incentivising cost-effective evidence-based wound care within MBS and listing evidence-based wound products and services on MBS/PBS will not only ease patients' financial burden but also save considerable costs for the Australian health system.

Biography

Rosana Pacella Norman is a Senior Research Fellow at the Australian Centre for Health Services Innovation (AusHSI), at the Queensland University of Technology. She currently leads a large health economics project to reveal the social and economic benefits of optimal wound care across Australia. She also provides health economics expertise for Wound Management Innovation Collaborative Research Centre funded projects assessing cost-effectiveness. She is widely recognized for her leading role in burden of disease assessments carried out over the last 16 years and continues to serve as an expert advisor to the Global Burden of Disease Collaboration and the Australian and South African National Burden of Disease Studies. She has played an important role in Australia, and internationally, in building capacity in burden of disease, health services research and cost-effectiveness analysis among researchers who are employed or contracted by governments. She has published widely in leading international journals.

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