Oral Communications

DRUG ECONOMIC ANALYSIS OF THE DOSE SPACING OF BIOLOGICAL DRUGS IN ATOPIC DERMATITIS AND PSORIASIS

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Introduction. Biologic therapies for psoriasis and atopic dermatitis represent a substantial share of expenditure for the Italian National Health Service (NHS), with annual per-patient costs in psoriasis exceeding €10,000–15,000 and accounting for up to 13.7% of public pharmaceutical spending. Real-world evidence confirms a significant increase in direct healthcare costs compared with conventional therapies; however, these treatments are associated with improved clinical outcomes and quality of life, with incremental cost-effectiveness ratios (ICERs) generally considered acceptable. In the Italian setting, access to these therapies is influenced by regional cost-containment policies (AIFA registries, authorized prescribing centers, and eligibility criteria), leading to geographical variability in prescribing patterns and actual availability of biologic agents. These limitations are particularly relevant in atopic dermatitis as well, where the high cost of newly available biologics affects regional uptake, resulting in disparities in access and potential inequities in patient care.

Materials and Methods. We performed a comparison between the dosing regimen approved in the Summary of Product Characteristics (SmPC) and spacing strategies.

Results and Conclusions. We conducted an economic and financial impact analysis (Budget Impact Analysis) of high-cost immunomodulatory drugs used for the treatment of the diseases under investigation. The analysis aimed to evaluate and compare the annual economic impact associated with the treatment of moderate-to-severe psoriasis and atopic dermatitis. Specifically, the comparison was performed between the dosing regimen approved in the Summary of Product Characteristics (SmPC) and spacing strategies (extension of the dosing interval) applicable in clinical practice to improve the economic sustainability of the Regional Health Service. Assuming that 50% of treated patients are eligible for a spacing strategy, an estimated annual cost saving of nearly 20% could be achieved.

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