INTRODUCTION

Axial spondyloarthritis (axSpA) is a rheumatic disease that includes ankylosing spondylitis (AS) and non-radiographic axSpA (nr-axSpA).

Czetilizumab pegol (CZP) is a tumour necrosis factor (TNF)-α antagonist indicated for the treatment of axSpA.

OBJECTIVE

The objective of this study was to assess the cost-effectiveness of CZP in axSpA patients in Turkey compared to other anti-TNFs and standard care.

METHODOLOGY

A Markov model was developed to estimate costs and outcomes associated with CZP and comparator treatment.

The study was undertaken from the Turkish health care payer perspective.

The primary endpoint was ASAS20 response.

A mixed treatment comparison was undertaken to compare CZP with adalimumab, infliximab, etanercept and golimumab for the treatment of AS.

Similar comparisons were made for the treatment of nr-axSpA, where CZP was compared with adalimumab.

Costs and effects were evaluated over a lifetime and discounted at 3%.

Results were presented as incremental cost/Life Years Gained.

One-way and probabilistic sensitivity analyses were also conducted.

INPUTS OF THE MODEL

Resource utilization data were obtained from expert clinical opinion and included physician visits, monitoring costs, and others.

Unit costs were taken from the Social Security Institution’s 2015 official price list.

RESULTS

The base case analysis for AS, showed that CZP was equally effective and less costly compared to adalimumab, infliximab, etanercept and golimumab.

In nr-axSpA, CZP dominated adalimumab. Sensitivity analyses confirmed the robustness of the model.

CONCLUSION

The present analyses showed that CZP is a cost-effective alternative therapy for the treatment axSpA patients in Turkey.