PD09 Comparing Long-term Costs Associated With Intraocular Lens Selection And Nd:YAG Laser Capsulotomy In The UK: A Cost-Consequence Analysis

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Introduction. Cataract surgery is the most frequently performed surgical procedure in the UK and posterior capsule opacification (PCO) is the most common complication post-surgery. Nd:YAG capsulotomy is the standard of care for treating PCO, although it bears a cost and is also associated with complications. The objective of this research was to estimate costs from a budget holders perspective associated with PCO related, post-cataract surgery resource use, comparing different single-piece intraocular lenses (IOLs) and utilizing results from a recently published audit of PCO incidence in the UK (n=601,084).
Methods. This research adapts the findings of the aforementioned audit to develop a cost-consequence analysis. The model is underpinned by the Nd:YAG rates of the included single-piece acrylic IOLs at 5 years. Nd:YAG related additional consultations and reported complications of the procedure were also included as variables of efficiency in the model. Estimates are presented from the perspective of a hospital setting in the UK, performing 3,000 cataract surgeries annually and extrapolated out to the broader cataract population (n=472,000). Costs were sourced from NHS Tariff documentation.
Results. AcrySof IQ was associated with lower Nd:YAG procedures and additional consultations at 5 years post-cataract surgery compared to all other single-piece monofocal acrylic lenses included in UK Audit Report. Assuming 3,000 cataract surgeries carried out annually, this translated into potential cost savings for the AcrySof IQ lens ranging from GBP 7,993 (EUR 9,379) (versus Eyecee One) to GBP 194,502 (EUR 228,243) (versus Akreos Adapt). Extrapolating to the broader population cataract patients in the UK would provide for a cost-saving estimates in the region of GBP 1.25 to GBP 30.6 million (EUR 1.47 to EUR 35.91 million).
Conclusions. This economic analysis highlights that the appropriate choice of IOL for cataract surgery, as a direct consequence of lower ND:YAG capsulotomy rates may translate into significant savings both for UK hospitals and the national healthcare system.

PD10 Quality Of Economic Evaluation Of Coronary Stents Based On CHEERS: A Scoping Review

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Introduction. The study aims to systematically review all articles on the economic evaluation (EE) of coronary stenting, to critically assess the reporting quality, and to summarize the results.
Methods. A systematic search was undertaken through seven databases (PubMed, Web of Science, Embase, CNKI, Wanfang data, Vip data and SinoMed.) from inception until March 2021, to identify economic evaluation articles comparing coronary stenting with other therapies, or among different stenting procedures. After screening articles and extracting data independently, we summarized methods, contents, and outcomes of the included articles and appraised their methodological quality using the CHEERS (Consolidated Health Economic Evaluation Reporting Standards) checklists. Then, the literature scores were standardized as a proportion of the total score, and stepwise multiple regression was constructed to verify the factors that might influence the quality of literature.
Results. Of the 3,622 publications identified, 59 articles were included in this review. There were 33 cost-effectiveness studies and 26 were cost-utility studies. The quality of the reports varied between studies, with a standardized mean score of 0.76 (0.40-0.98). According to the Cheers checklist, "Introduction" had the lowest overall score (0.53), with many articles deficient in the description of the study's perspective; "Discussion" had the highest overall score (0.86), with nearly three-quarters of the articles reporting the full content; "Title and abstract", "Methods", "Results", and "Other" scored 0.71, 0.78, 0.74 and 0.66, respectively. According to the results of the stepwise multiple regression model, "Published year", "National type", and "Type of economic analysis" research were significantly associated with the quality of literature.
Conclusion. The quality of current research reports on the economics of coronary stenting is generally satisfactory, but there is potential for improvement and high quality reports can provide evidence to support decision making for policy makers.

PD12 Quality Assessment Of Health Economic Evaluation On Screening Programs From China

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Introduction. With the increasing use of health economic evaluation (HEE) in decision-making and health resource allocation and management policy design has seen an increase in HEE studies on screening programs in China l. In addition to the quantity of HEE, the quality may be of particular concern as it influences the reliability of HEE evidence adopted in policy formulation. This study sought to assess the reporting quality of HEE on screening programs over the last 20 years in China and identify potential predictors and relevant recommendations to improve the quality of study reporting.
Methods. A search of HEE studies published in PubMed, Embase, CNKI and WANFANG from 2000 to 2021 was performed. Two reviewers independently extracted data and assessed the quality if reporting using the 24 item Consolidated Health Economic Evaluation Reporting *Standards (*CHEERS) checklist. The CHEERS score for each study was converted into standardized 0-1 point scale. General liner regression was used to identify predictors associated with the reporting quality.

https://doi.org/10.1017/S0266462322002720 Published online by Cambridge University Press