

PP33 The Cost-effectiveness Of Regorafenib In The Treatment Of Advanced Hepatocellular Carcinoma From A Canadian Perspective

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Introduction: Hepatocellular carcinoma (HCC) is the most common form of liver cancer and the fourth leading cause of cancer-related death globally. There are unmet needs for effective systematic therapy. The findings of the RESORCE trial highlighted the improvement in overall survival with regorafenib in advanced HCC patients progressing on sorafenib treatment. This study aimed to assess the cost-effectiveness of regorafenib compared with best supportive care (BSC) for advanced HCC from the Canadian healthcare system perspective.

Methods: We developed a Markov model based on four health states: live with adverse events, live without adverse events, progression, and dead. Health outcomes were measured using life-years (LYs), and quality-adjusted life-years (QALYs), and costs were presented in Canadian dollars (CAD). Clinical inputs were derived from the RESORCE trial. A 1.5 percent discount rate was applied to costs and outcomes. One-way and probabilistic sensitivity analyses were performed to assess the uncertainty in findings due to variability in parameters. TreeAge Pro software was used for model implementation.

Results: The use of regorafenib results in a gain of 0.38 LYs and 0.25 QALYs as compared to BSC with a high incremental cost of CAD26,954 (USD22,313). The ICER for regorafenib compared with BSC was CAD105,850/QALY (USD87,624/QALY) in the base-case analysis. Further, probabilistic sensitivity analyses revealed regorafenib not to be cost-effective at a willingness-to-pay threshold of CAD50,000/QALY.

Conclusions: Regorafenib was not found to be cost-effective in the treatment of advanced HCC because of the lower health benefits and higher incremental costs. Lowering the official price of regorafenib or use for only selected patients who can achieve maximum benefits would enhance its cost-effectiveness and treatment preference value.

PP36 Immersion In Water During Childbirth

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Introduction: Immersion in water is a non-pharmacological method for pain relief during childbirth. The aim was to describe the experiences, values and preferences of women regarding water immersion during childbirth identified in the evidence.

Methods: A systematic review and thematic synthesis of qualitative evidence was conducted. Databases were searched from 2009 to 2022 and screened for inclusion using pre-determined criteria. Studies that used qualitative methods for data collection and analysis to investigate the opinions of women or health professionals in hospital settings were included. Non-qualitative studies, mixed methods studies that did not separately report qualitative findings and studies in languages other than English or Spanish were excluded. The Critical Appraisal Skills Programme Qualitative Research Checklist was used to assess study quality and findings were synthesized using thematic synthesis, as described by Thomas and Harden.

The final report was reviewed by several categories of health professionals that care for mothers and infants, as well women.

Results: Thirteen studies met inclusion criteria and were included in this review. Nine studies have been identified that reflect the experience of women in relation to immersion in water during childbirth, a study exploring the factors that determine the use of immersion during childbirth according to the point of view of both women and midwives, and three more studies on midwives' experience with water immersion during childbirth. In the qualitative studies the following key themes emerged: Reasons identified by the women/professionals for choosing a water birth, benefits experienced in water births and barriers and facilitators of immersion in water during childbirth.

Conclusions: The evidence from qualitative studies indicates that women associated water birth with a sense of autonomy and control over labor, and a lower level of associated pain. Further, a water birth was considered a positive experience. From the point of view of midwives, to make water births safe, there is a need for adequate resources, as well as rigorous standardized protocols.