

P-147 - A COMPARATIVE COST-ANALYSIS OF INITIATING PREGABALIN OR SSRI/SNRI THERAPY IN BENZODIAZEPINE RESISTANT PATIENTS WITH GENERALIZED ANXIETY DISORDER

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Objectives: To compare healthcare costs from the perspective of the Spanish National Healthcare System (NHS) of initiating treatment with pregabalin or SSRI/SNRI as add-on therapies in patients with generalized anxiety disorder (GAD), who are resistant to benzodiazepine-based therapy (BR).

Methods: BR patients with GAD (DSM-IV criteria) included in a prospective, multicentre, observational cohort study carried out in outpatients attending mental health centers, were selected in this post-hoc analysis. BR was defined as insufficient response with persistence of symptoms of anxiety (HAM-Anxiety scale ≥ 16) after a 6-month course of BR (standard dose). Healthcare resource utilization (HRU) associated with GAD included drug treatments, medical visits, hospitalization and non-pharmacologic therapies which were collected twice (baseline and end-of-trial visits) during a 6-month period. Related costs were estimated in each visit and adjusted changes between visits compared using ANCOVA models.

Results: A total of 128 patients received pregabalin and 126 SSRI/SNRI. Compared with SSRI/SNRI, pregabalin was associated with significantly lower adjusted mean increment use of anxiolytics; 0.55 vs. 1.12, $p < 0.001$, and greater reduction in medical visits; -15.12 vs. -12.99, $p = 0.029$. Mean adjusted healthcare costs were significantly decreased in both medication cohorts; -€289: pregabalin ($p = 0.003$) and -€95 ($p = 0.052$) with SSRI/SNRI. Drug acquisition costs for SSRI/SNRI were lower than pregabalin, however adjusted healthcare cost reduction was numerically higher with pregabalin; -€289 versus -€194, $p = 0.488$.

Conclusion: Initiating treatment with pregabalin was associated with significant reduction in HRU and total cost for GAD compared to SSRI/SNRI in BR patients in the Spanish NHS setting.