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**COST-EFFECTIVENESS OF ATYPICAL ANTIPSYCHOTICS (QUETIAPINE, RISPERIDONE, ARIPIRAZOLE OR OLANZAPINE) FOR THE TREATMENT OF RELAPSE PREVENTION FOR BIPOLAR DISORDER IN RUSSIAN FEDERATION**

I. Komarov<sup>1</sup>, A. Kulikov<sup>1</sup>

<sup>1</sup>Laboratory of pharmaco-economical research, I.M. Sechenov First Moscow State Medical University of the Ministry of Health of the Russian Federation, Moscow, Russia

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**OBJECTIVES:** To estimate the efficiency of the atypical antipsychotics (quetiapine, risperidone, aripiprazole or olanzapine) used to reduce relapses in bipolar disorder, taking into account costs and effectiveness (QALY).

**METHODS:** The Russian health care system perspective and a five year temporal horizon have been used. An annual discount rate assumed was of 5%. Taking into account the last literature review on bipolar disorder, four fundamental aspects related with bipolar disorder management were analyzed: relapse rates, inpatient treatment, outpatient treatment and hospitalization rates. The health care direct costs corresponding to the drug acquisition costs have been analyzed together with the costs of inpatient diagnostics, costs of inpatient treatment and costs of hospitality relapses updated with data from Russian health care system.

**OUTCOMES:** Quetiapine or risperidone treatment presents the lower total costs (€13 562 and €13 097 respectively) versus the other strategies (aripiprazole = €36 328 and olanzapine = €19 957). Quetiapine presents the higher QALY compared with the alternatives (quetiapine = 3.551, risperidone = 3.534, aripiprazole = 3.528 and olanzapine = 3.525). With these results one can emphasize that quetiapine or risperidone treatment is dominant with the cost-effectiveness ratio (CER) of 3 819 and 3 706, respectively, versus aripiprazole or olanzapine groups (CER 10 297 and 5 662 respectively). The incremental CER (quetiapine vs. risperidone) is €27 322 per QALY.

**CONCLUSIONS:** The results illustrate that quetiapine is dominant versus aripiprazole or olanzapine. Also quetiapine therapy is within willingness to pay threshold in case of risperidone substitution in Russian patients with bipolar disorder