Health Care Resource Use and Costs of Adrenocorticotropic Hormone in Relapses of Multiple Sclerosis

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ABSTRACT

Background

2. Adrenocorticotropic hormone (ACTH) has a rapid onset of action and is approved for treatment of relapses, with evidence supporting its use as an add-on therapy for patients who have failed to respond to other therapies.

METHODS

RESULTS

DISCUSSION

CONCLUSIONS

3. The aim of this study was to evaluate healthcare utilization, outcomes, and costs resulting from adrenocorticotropic hormone in relapses of multiple sclerosis (MS).

METHODS

- The analysis included patients who received ACTH or gel (IVIG or PMP), thereby supporting the value of ACTH in MS relapse.

- Hospitalizations (-0.4, 95% CI: -0.6 to -0.2) and outpatient visits (-17, 95% CI: -22 to -11) in the first 12 months, with MS patients having about ten fewer quality-adjusted life years (QALYs) compared to non-MS patients.

- The analysis controlled for measured baseline patient characteristics and prior resource use.

- The relative rate of hospitalizations was calculated, and the model did not converge.

- The study was designed to evaluate the effects of ACTH on healthcare utilization in relapses of MS.

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