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Title: Health care claims analysis to quantify the burden of moderate-to-severe asthma

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Body: Objectives: To describe the economic burden and health services use among moderate to severe asthma patients. Methods: Retrospective cross-sectional cohort analysis using health insurance claims. Study period was 01/07/2006 through 30/06/2007. It included patients age ≥12 who had an asthma diagnosis and used medium to high dose ICS/LABA with or without oral steroids and/or omalizumab (US National Heart Lung and Blood Institute [NHLBI] Steps 4-6) and who did not have chronic obstructive pulmonary disease (COPD). Results:

	Medium Dose ICS/LABA N=25,614, 78%	High Dose ICS/LABA N=6,998	ICS/LABA + Oral Steroids N=241	Total N=32,853	Р
Annual Healthcare Charges (USD), mean (SD)					
Total charges	15,403 (31,509)	19,499 (32,597)	42,855 (68,793)	16,477 (32,294)	<0.001a
Rx charges	3,747 (4,478)	5,670 (6,467)	10,900 (9,900)	4,209 (5,119)	<0.001a
Non-Rx charges	11,657 (30,119)	13,829 (30,685)	31,955 (65,174)	12,268 (30,700)	<0.001a
Annual Asthma-related Utilization					
Office visits, mean (SD)	1.4 (2.6)	2.3 (4.3)	4.4 (6.4)	1.6 (3.1)	<0.001a
≥1 hospitalization, no. (%)	427 (1.7)	222 (3.2)	40 (16.6)	689 (2.1)	<0.001b

^aF-test to compare across three groups; ^bChi-square to compare across three groups

Conclusions: The economic burden of health care on patients with moderate-to-severe asthma is quite high

and increases with disease severity. Although health care utilization by asthma patients has decreased in recent years, patients with severe asthma still spend significantly more time and money on health care than those who have more manageable symptoms. Medications that better target both asthma symptoms and the underlying disease process should reduce these costs.