

# European Respiratory Society Annual Congress 2012

**Abstract Number:** 4816

**Publication Number:** P1297

**Abstract Group:** 12.2. Ethic and Economics

**Keyword 1:** Asthma - management **Keyword 2:** COPD - management **Keyword 3:** COPD - exacerbations

**Title:** Annual direct-cost of asthma and COPD in Turkey

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**Body:** Introduction Asthma and COPD are considered among the top 10 leading chronic conditions with increasing prevalence that translates into increased direct and indirect medical expenditures (1). Aims and objectives The ONDINE study aimed to calculate annual direct medical cost of asthma and COPD in Turkey Methods Patients with asthma or COPD were included in this national, multicenter, cross-sectional, non-interventional study. Direct costs including treatment, tests and healthcare resources utilization were calculated. Results A total of 596 patients with asthma (n=301) or COPD (n=295) were included in the study. Disease control was evident in 38% of COPD and in 51% of asthma patients. COPD was severe in 31% of the patients while asthma was intermittent in 51%. Main drugs administered were long-acting beta-agonist (LABA) and inhaled corticosteroid (ICS) in asthma (68%) and in COPD (71%) patients. The most commonly performed tests in asthma and COPD patients were chest XR (98% and 99%) and spirometry (98% and 98%). Average annual direct cost (including drug, non-drug application, hospital and personnel costs) was 8386 TL (3595 Euro) for asthma and 10798 TL (4629 Euro) for COPD. LABA+ICS combination (1132 TL, 485 Euro) was the highest drug-related cost. Poor control and increased severity of both asthma and COPD caused higher hospital cost and higher total direct cost (for all P<0.001). Conclusions The study revealed that based on the significant relation to direct costs, strategies to enable better disease control and to reduce severity of the disease in asthma and COPD must be considered in healthcare policies to limit economic burden. 1. Shaya FT et al. Burden of concomitant asthma and COPD in a Medicaid population. Chest. 2008;134(1):14-9.