

European Respiratory Society Annual Congress 2013

Abstract Number: 4576

Publication Number: P284

Abstract Group: 12.2. Ethic and Economics

Keyword 1: Asthma - management **Keyword 2:** Health policy **Keyword 3:** Epidemiology

Title: Current and future costs of asthma in the Netherlands

Anita 29791 Suijkerbuijk anita.suijkerbuijk@rivm.nl ¹, Rudolf 29792 Hoogenveen rudolf.hoogenveen@rivm.nl ¹, Ardine 29793 De Wit Ardine.de.Wit@rivm.nl ¹, Alet 29794 Wijga Alet.Wijga@rivm.nl ¹, Martine 29795 Hoogendoorn hoogendoorn@bmg.eur.nl ², Maureen 29811 Rutten-van Mölken m.rutten@bmg.eur.nl ² and Talitha 29814 Feenstra Talitha.Feenstra@rivm.nl ¹. ¹ Prevention and Health Services Research, RIVM, Bilthoven, Netherlands, 3720 BA and ² iMTA, Erasmus University Rotterdam, Rotterdam, Netherlands, 3000 DR .

Body: Objective To determine costs of care and productivity losses for asthma and to project future prevalence of asthma and its costs. Methods A prevalence-based cost of illness study was performed for the year 2007. National registrations and surveys were used to estimate the different types of health care resource use, specified by age and gender, which were multiplied by unit costs. Absence from work and loss of job were obtained from a linkage study, combining GP registry data with data on productivity losses from Statistics Netherlands. These were valued using the friction cost or human capital method to result in two alternative estimates. Finally a population model was developed to obtain estimates of future costs of care. Results Healthcare costs for asthma in 2007 were estimated to be €287 million or €530 per patient. About 70% of these costs were medication related. Costs of sick leave and early retirement due to asthma totalled €621 or €288 million, that is €2800 or €1300 per employee with asthma for human capital and friction cost method respectively. These costs rose with age. Over the next 25 years, the number of patients with asthma will rise by 28%, reflecting a recent trend in incidence that is now stabilizing. This will lead to a doubling of the costs of care. Conclusions The expected rise in the number of patients with asthma, and especially the number of elderly asthma patients, and the associated costs of healthcare and production losses provide important information for healthcare policy in the Netherlands.