

## PHARMAQCOECONOMIC ASSESSMENT OF TREATMENT PATIENTS WITH HYPERTENSION AND DYSLIPIDEMIA

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The aim of research is pharmacoeconomic assessment the feasibility of using polypills amlodipine and atorvastatin versus monodrugs in patients with hypertension and dyslipidemia from the Ukrainian perspectives point of view.

Materials and methods: The results of clinical trials AVALON [1] were used. Cost minimization analysis was carried out.

The results of the clinical research AVALON found, that the use of PP AmlAt provides significant clinical benefit - the largest number of patients reached target levels of blood pressure (BP) and low-density lipoprotein cholesterol (LDL-C) (45,5%), versus Aml (8,3%), At (28,6%), placebo (3,5%). The scheme Aml is the most expensive (€ 20,28), the regimen At (€ 10,46) and PP AmlAt (€ 17,72) are less costly. PP AmlAt is more cost effective versus Aml (CER= € 38,95 versus € 244,34 per patient with target levels of BP and LDL-C) and less cost effective compared At (CER= € 36,57).

**Conclusion.** Pharmacotherapy of patients with hypertension and DYS based on PP amlodipine + atorvastatin provides significant clinical benefit in comparison with monodrugs and pharmacoeconomic advantages versus amlodipine therapy.

References: 1. Efficacy and safety of coadministered amlodipine and atorvastatin in patients with hypertension and dyslipidemia: results of the AVALON trial / F. H. Messerli, G.L. Bakris, D. Ferrera et al. // J Clin Hypertens (Greenwich). – 2006. – Vol. 8(8). – P. 571-581. 2. Pharmacoeconomics: manual for students of higher schools / L.V. Iakovlieva, O.Ya. Mishchenko. – Kharkiv: NU Ph: Golden Pages, 2012. – 144 p.