

COST-EFFECTIVENESS BASED PHARMACOECONOMIC ANALYSIS IN A BRONCHOALVEOLITIS THERAPY

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Pneumonia is one of the major health and social problems in our country and around the world because of its substantial prevalence and high mortality. Pneumonia treatment is carried out in accordance with the national protocol, according to which the following drugs are prescribed: antibiotics, expectorants, antipyretics, and sometimes, antihistamines.

Bronchoalveolitis treatment requires as early as possible antibiotics prescribing, taking into account clinical, X-ray and microbiological data; suitable combination of different groups drugs is required. In the treatment of a pneumonia penicillins, cephalosporins, fluoroquinolones are traditionally used by courses 10-14 days at least.

The objective of the study was to conduct a comparative pharmacoeconomic evaluation of three drug regimens of bronchoalveolitis treatment with antibiotics of different groups: penicillin, cephalosporin and fluoroquinolone groups.

The method of the research was "cost-effectiveness" based pharmacoeconomic analysis.

The objects of the research included 109 patient medical records of Almaty clinical hospital No.21 (period of study – 2011-2012 years).

The results of the study were as follows.

A comparative "cost-effectiveness" pharmacoeconomic evaluation of three drug regimens of bronchoalveolitis treatment with antibiotics of different groups (penicillin, cephalosporin, fluoroquinolone) was performed.

According to the "cost-effectiveness" analysis bronchoalveolitis pharmacotherapy with cephalosporin antibiotics was the most effective compared with a group of penicillin and fluoroquinolone and it had a lower cost, which allows to consider these drugs more cost effective in the treatment of bronchoalveolitis.

Analysis of treatment costs allows to plan medical institution finances in the future.