P281 RETROSPECTIVE BUDGET IMPACT ANALYSIS ON THE USE OF THE ONCOTYPE DX® TEST IN IRELAND

Poster Abstracts II

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Goals: Oncotype DX® is a genomic test providing information on the likely benefit of adjuvant chemotherapy in patients with early stage, ER+, HER2-, N0 breast cancer. Ireland was the first country in Europe to publicly reimburse the Oncotype DX® test in October 2011. This study aimed at analysing the real life budget impact associated with the use of the Oncotype DX® test in the Irish clinical practice from the perspective of the Health Service Executive (HSE).

Methods: A model was developed to assess the impact on treatment decisions and cost to the HSE associated with the use of the Oncotype DX® test in the Irish clinical practice. The Oncotype DX® test results (i.e. Recurrence Score) for patients covered through HSE were collected retrospectively for each hospital (Cork University hospital, St Vincents', St James, Midwestern, Mater, Beaumont, Galway and Waterford) from the Genomic Health commercial database. All publicly insured patients were referred to these hospitals and treatment decisions were discussed in multi-disciplinary teams. Clinical decisions before and after the availability of the Oncotype DX® test results were collected through a survey of clinical practice among physicians practicing in each hospital. Chemotherapy cost data including chemotherapy drugs, administration, monitoring and adverse events was collected from the hospitals and from the Casemix database.

Results: Physicians consistently indicated that they were using the test in patients who were candidates for chemotherapy in order to save un-necessary treatments. Physicians reported consistent decision making following low scores (no chemotherapy) and high scores (chemotherapy). However, clinical practice differed in the group of patients with intermediate scores. Between 1st of October 2011 and 29th of September 2012, 342 Oncotype DX® tests were ordered for patients covered through the HSE. Among those, 256 (75%) patients were not given adjuvant chemotherapy. Taking into account the public price of the Oncotype DX® test, it is estimated that € 856,440 were saved by the HSE. Unlike cost-effectiveness analyses, this budget impact analysis only takes into account the short term cost of chemotherapy. It is providing important information on how the test was used and what impact it had on the HSE budget.

Conclusion: Since it got reimbursed in Ireland in October 2011, the Oncotype DX® test allowed the HSE to save a significant chemotherapy budget.Mike Falahee is an employee of Genomic Health Int.