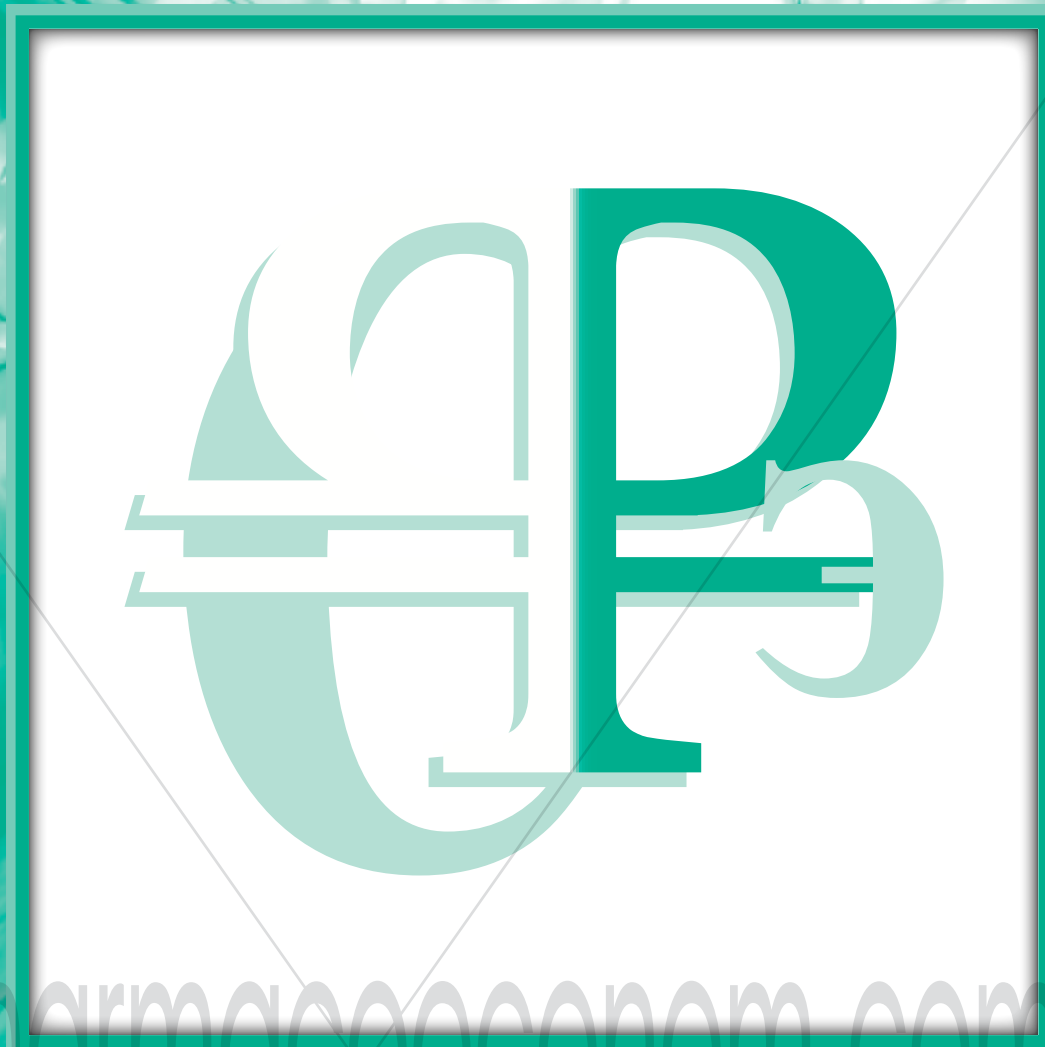


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PHARMACOECONOMIC ANALYSIS OF NIVOLUMAB IN TREATMENT OF NONRESECTABLE STAGE III-IV MELANOMA AMONG TREATMENT-NAÏVE BRAF-MUTATED PATIENTS IN THE RUSSIAN FEDERATION

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Abstract: In conducted pharmacoeconomic study we analyzed treatment of nonresectable stage III-IV melanoma among BRAF-mutated treatment-naïve patients: monotherapy with nivolumab, scheme dabrafenib + trametinib and scheme vemurafenib + cobimetinib. Cost-effectiveness analysis and budget-impact analysis were based on a modeling approach. Progression free survival (PFS) was used as an effectiveness criteria. Only direct costs of medical help at first-line of antitumor treatment were taken into account. Time horizon was equal to PFS of mentioned treatment schemes. Results of cost-effectiveness analysis showed that the lowest CERPFs was on the monotherapy with nivolumab. In budget-impact analysis using of nivolumab instead of dabrafenib + trametinib and vemurafenib + cobimetinib led to decrease of both antitumor treatment costs and total medical costs of first-line treatment of melanoma, resulting in possibility of treatment in 3,3 and 3,6 times more patients within equal budget, respectively (in case of treatment with nivolumab). Obtained results of cost-effectiveness analysis were stable to increase of nivolumab price within 1,5-2,0 or to decrease of alternative schemes prices within 1,5-2,0.

Key words: melanoma, nonresectable, stage III-IV, BRAF-mutated, treatment-naïve, antitumor treatment, cost analysis, effectiveness analysis, cost-effectiveness analysis, budget impact analysis.

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