

COST OF THERAPY FOR PATIENTS WITH RHEUMATOID ARTHRITIS

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Introduction. Rheumatoid arthritis is a very common disease, affecting 0.7% of the adult population, with women being 3 times more likely to suffer from the disease than men. The disease peaks between 30 and 35 years of age. During the first two years of the disease, 50% of patients develop narrowing of the joint gap and erosions, and after 10 years half of patients of working age become disabled.

According to the Ministry of Health of Ukraine, the incidence of rheumatoid arthritis has increased by 23.9% over the last 5 years, while the general morbidity of the population in all registered groups has increased by an average of only 11.3% over the same period. In addition to a significant reduction in the quality of life of patients, the financial cost of rheumatoid arthritis leads to significant economic losses and is a heavy economic burden on the entire national health care system. Long-term and costly treatment is required to control this disease.

The purpose of the study. The limitations of traditional treatment regimens for rheumatoid arthritis, especially in the acute stages of the disease, indicate the necessity and advisability of choosing the most effective, safe and affordable treatment option for patients. According to recent studies, the most significant achievements in the field of pharmacotherapy of rheumatic diseases are associated with the use of genetically engineered biological drugs, the action of which is aimed at key components of human immune defence.

In this regard, the implementation of state guarantees in the field of drug provision for patients with rheumatoid arthritis predetermines the need to develop and implement a whole set of organisational and economic measures aimed at more efficient use of resources allocated for these purposes. In this case, the most important is the evaluation of the drugs used from the standpoint of a comprehensive approach to their efficacy, safety and cost, allowing to improve the quality of life of patients and ensure the highest possible efficiency when using the most cost-effective treatment regimens.

In this regard, the choice of medical technologies for the treatment of rheumatoid arthritis in modern healthcare should be considered based on the results of clinical effectiveness and economic evaluation, which can only be ensured by conducting a full pharmacoeconomic analysis, the application of the results of which in practical medicine contributes not only to the optimal choice of effective therapy, but also to adequate financing. However, at present there are no full-fledged data of pharmacoeconomic analysis of studies devoted to the problem of rheumatoid arthritis treatment.

This circumstance determined the choice of the topic, formulation of the main goal and objectives of the study to achieve it.

The information search revealed that rheumatoid arthritis is the most common and costly rheumatic disease. Rheumatoid arthritis patients use health care resources more frequently and more intensively than other rheumatic diseases. It has been found that almost 70% of patients with rheumatoid arthritis become disabled or suffer

functional impairment in professional and daily life.

Main results. Analysis of the scientific literature has shown that several groups of drugs are currently used in the therapy of rheumatoid arthritis, including non-steroidal anti-inflammatory drugs; baseline drugs; glucocorticosteroids; and expensive genetically engineered biological drugs that require more in-depth study.

Conclusions. Data on their clinical efficacy and safety need a comprehensive evaluation, including the possibility of their use, taking into account the results of pharmacoeconomic analysis and comparison of alternative representatives of this class of drugs by clinical and economic indicators.