



Bilaga 7 till SBU-rapport

1 (4)

Behandling av armfraktur hos vuxna,
rapport 262 (2017)

Bilaga 7 Studier som ligger till grund for resultat och slutsatser (hälsoekonomiska studier)/ Studies used for results and conclusions (health economic evaluations).

Cost-utility analyses of surgical treatments in patients with distal radius fractures

Author Year Reference Country	Study design Population Setting Perspective	Intervention vs control	Incremental cost (95 % CI)	Incremental Effect (95 % CI)	ICER	Study quality and transferability* Further information Comments
Tubeuf et al. 2015 UK {Tubeuf, 2015 #95}	RCT-based CUA, Sub group analysis of patients >50 years (imputed), 12 month time horizon, NHS and Personal Social Services perspective as	Volar locking plate (n=230) versus percutaneous Kirschner wires (n=230)	NHS PSS perspective: GBP 752 (539-921) Societal perspective: GBP 629 (412-845) Costs reported in GBP (£) year 2012.	NHS PSS perspective: 0.014 QALYs (0.002-0.025) Societal perspective: 0.018 QALYs (0.007-0.029)*	NHS PSS perspective: GBP 54 218 per QALY Societal perspective: GBP 35 323 per QALY*	Moderate quality, high transferability. Based on the DRAFFT Trial (Costa 2014, Costa 2015)

	well as societal perspective					
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CA = Cost analysis; CBA = Cost-benefit analysis; CEA = Cost-effectiveness analysis; CUA = Cost-utility analysis; GBP = British pound; ICER = Incremental cost-effectiveness ratio; USD = United States Dollar, * Societal perspective was used as a sensitivity analysis and included a changed incremental effect.



Bilaga 7 till SBU-rapport

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Behandling av armfraktur hos vuxna,
rapport 262 (2017)

Cost-utility analyses comparing surgical with non-surgical (conservative) treatment in patients with proximal humeral fractures

Author Year Reference Country	Study design Population Setting Perspective	Intervention vs control	Incremental cost (95% CI)	Incremental Effect (95% CI)	ICER	Study quality and transferability* Further information Comments
Corbacho et al. 2016 UK {Corbacho, 2016 #97}	RCT-based CUA Proximal humeral fractures, 24 months time horizon, UK NHS and Personal Social Services perspective Mean age 66 years	Surgical (n=54, the surgeons could choose the type of surgery) versus non-surgical treatment (n=46, initially the use of a sling)	Total costs (GBP 2012): 1758 (1126-2389) Costs reported in GBP (£) year 2012	-0.0101 QALYs (-0.13- 0.11)	Dominated, Probability cost-effective at WTP of £30,000 per QALY: 0.23	Moderate quality, high transferability, Complete data (both costs and utilities) was only available for 40% of the patients included in the trial
Fjalestad et al. 2010 Norway {Fjalestad, 2010 #94}	RCT-based CUA Proximal humeral fractures, 60+ years old, 12 month time horizon,	Plate fixation (n=25) versus Conservative treatment (n=25)	Health care perspective EURO: -597 (-5,291-3,777) Societal perspective EURO:	0.009 QALYs (-0.025-0.042)	Health care perspective: Dominating Societal perspective: EURO 230.556	Moderate quality High transferability

	Norwegian societal perspective		2,075 (-1,244-9,436) Costs reported in Euro (€) year 2005			
Nwachukwu et al. US 2016 {Nwachukwu, 2016 #98}	Model-based CUA, Complex proximal humerus, cohort of 70-year old patients, life time horizon, payer and health care perspective	Shoulder hemiarthroplasty (HA), and Reverse shoulder arthroplasty (RSA) vs. non-surgical care	Health care perspective (life time costs): HA vs non-surgical care: USD 63,600 RTSA vs non-surgical care: USD 92,200 Costs reported in US dollars (\$) year 2013	HA vs non-surgical care: 1.73 QALYs RTSA vs non-surgical care: 2.27 QALYs	Health care perspective (life time costs): HA vs non-surgical care: USD 36,700 per QALY RTSA vs non-surgical care: USD 40,600 per QALY RTSA vs HA: USD 53,000 per QALY	Moderate quality, low transferability. Assumed that the non-operative care had no cost. Unclear what the different perspectives include. Based on the results of several different RCTs

* Study quality is a combined assessment of the quality of the study from a clinical as well as an economic perspective [ref till engelska versionen av granskningsmallarna]. CA = Cost analysis; CBA = Cost-benefit analysis; CEA = Cost-effectiveness analysis; CUA = Cost-utility analysis; GBP = British pound; ICER = Incremental cost-effectiveness ratio; USD = United States Dollars