



HSRAANZ Webinar Series – How does the cost of medicines to patients influence the use of guidelines-based medicines for asthma in Australia?

Presenter – Tracey Laba, Associate Professor, Centre for Health Economics Research and Evaluation, UTS

Thursday 15 August 2019 at 11:00am Sydney, Melbourne, Canberra

There is no cost to attend the Webinar, but registration is essential. Please register at:

https://zoom.us/webinar/register/WN_W9Ku6I7AQbGKmJE4PdVfZg

The Webinar will be about 1 hour including time for Q and A.

ABSTRACT:

In Australia, one in 9 people are affected by asthma. Over \$AUD600 million was spent on asthma in 2008-9 with half of this spend attributed to prescribed medicines.

Most Australians with asthma are prescribed inhaled corticosteroids (ICS) in a fixed dose combination inhaler with a long-acting beta agonist (ICS-LABA) to control their disease despite guidelines reserving ICS-LABAs for uncontrolled and more severe disease. ICS-LABAs are more expensive than ICS-alone inhalers for the Australian federal government - which subsidises the costs of medicines for Australians- and for patients, who pay a fixed co-payment with each medicine dispensed. Collectively, there is a strong clinical and financial argument to shift utilisation patterns towards ICS-alone therapy in Australia. Yet the impact of cost on the use of asthma medicines in Australia was unclear.

The aim of this project was to improve the guidelines-recommended use of ICS-containing medicines in Australia, conducted in partnership with key stakeholders including respiratory and primary care clinicians, a peak asthma advocacy group, the National Prescribing Service (NPS), and academics. Using quantitative and qualitative methods, including DCE, we found that half of adults and one-third of children with asthma underused their asthma medicines because of cost, and out-of-pocket costs were important when choosing between ICS and ICS-LABA. At the same time, few clinicians appear to be discussing costs with patients, and most were unaware that costs could be an issue in the use of asthma medicines.

BIO:

Tracey is an Associate Professor with the Centre for Health Economics Research and Evaluation (CHERE), a NHMRC Early Career (Sidney Sax) Fellow and registered pharmacist. Over the last 10 years, using an overarching health economics, drug utilisation and policy lens, Tracey has developed a vibrant research program that aims to improve health, especially among disadvantaged populations through better use of high-value medicines for non-communicable diseases. Prior to joining CHERE, Tracey was a senior research fellow at The George Institute for Global Health, UNSW and the Menzies Centre for Health Policy, University of Sydney, and held an honorary postdoctoral

research fellow appointment at The University of British Columbia, Canada where she spent two years establishing ongoing collaborations with leading health economists and pharmacoepidemiologists. She received her PhD from The University of Sydney (2014), was a University Medallist (BPharm, University of Sydney, 2004) and has worked as a clinical pharmacist in the hospital and community pharmacy settings as well as in pharmaceutical industry. Tracey is the first health economist elected onto the inaugural Professional Advisory Council to Asthma Australia, and the first person (outside the PBAC chair) to be an appointed member on both the drug utilisation and the economics subcommittees, which provide expert advice about drug utilisation and health economics to the Pharmaceutical Benefits Advisory Committee – Australia's world-leading Health Technology Assessment agency.

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