

IMMUNOTHERAPY AND ACCESS TO MEDICAL CARE IN PATIENTS WITH ALLERGIC RHINITIS AND ASTHMA. THE SIMAP DATABASE STUDY.

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BACKGROUND and OBJECTIVES

The SIMAP study is a longitudinal observational database whose scope is to describe and analyse clinical management of allergic rhinitis (R) with or without asthma (A) in a population of children and adults followed up by allergy centres in Italy. This analysis is focused on the economics of R and A in grass pollen allergy, for subjects treated with sublingual immunotherapy (SLIT) versus standard care controls.

METHODS

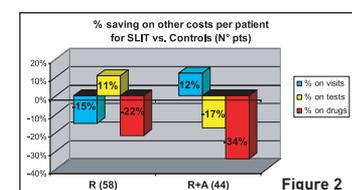
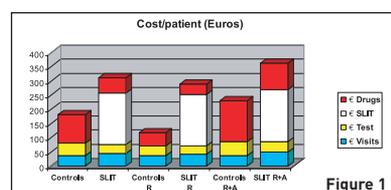
The SIMAP study involved six allergy centres, located in five Italian regions. For a period of three months, each of the participating centres enrolled all patients presenting with a diagnosis of R, A, or both. Patient demographics were recorded into an electronic clinical record form at the time of the first visit (enrolment). Patients were then followed up for a period of twelve months. Outcome measures included use of medications, sublingual immunotherapy (SLIT) (Staloral, Stallergènes), routine care visits and other specialist visits, and tests.

RESULTS

According to selection criteria, the whole SIMAP database included 382 patients (M/F 196/186, mean age 28+13 yrs): of them 197 (52%) were diagnosed with allergic rhinitis (R), 38 (10%) with asthma alone (A), and 147 (38%) with both asthma and rhinitis (R+A).

The grass pollen subset included 102 patients (SLIT/Ctrl 54/48; M/F 56/46; mean age 30+13 years). Demographics are reported in Table 1. Figures 1 illustrates the cost of treatment in the first year after initiation of SLIT therapy: overall cost was higher in patients treated with SLIT, both in the whole sample (€311 vs. €180) and in R (€288 vs. €116) and R+A (€362 vs. €230) subpopulations. Nevertheless as shown in Table 2 considerable savings were obtained in the use of symptomatic drugs (-22% in the AR subset; -34% in the R+A subset) on medical visit costs in the R population (-15%) and on cost of tests in the R+A population (-17%).

Grass Pollen	Patients N°	M/F N°	F-up (days)	Age yrs mean (SD)
ALL	102	56/46	377	30 (13)
Controls	48	32/16	376	32 (14)
SLIT	54	24/30	378	28 (13)
Controls R	21	14/7	368	24 (9)
SLIT R	37	19/18	369	30 (14)
Controls R+A	27	18/9	382	37 (14)
SLIT R+A	17	5/12	397	25 (11)



CONCLUSIONS

Traditionally use of symptomatic drugs has always been considered one of the key outcome indicators of effective allergy control. Other studies have shown that SLIT is able to reduce the use of drugs for asthma and rhinitis 1-4, but this is the first time that this outcome is confirmed in a routine care population and in the medical practice environment of an observational study such as the SIMAP database, and yet at the first year of treatment.

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