METHODS (CONT.)

The costs for drugs that were not available in MarketScan (vemurafenib, panitumumab, mitotane, and acridermin) were based on the listed wholesale acquisition cost (WAC) available in RED BOOK.

CONCLUSIONS

Several innovative treatment options have been approved over the past few years that have improved response and/or survival in metastatic melanoma. However, the current standard treatment options are associated with considerable toxicity (diabetes, hypertension, rashes, etc.). The results suggest that, in addition to the non-drug costs, the overall costs of the NIVO + IPI regimen are lower than those of the IPI monotherapy cohort. This is in line with previous published studies that showed higher overall treatment costs for IPI monotherapy compared with NIVO mono.

The use of non-drug costs as a method to accurately determine the real-world economic impact of new drugs is consistent with the current thinking in health economics. The presented data are the product of a comprehensive analysis of real-world patient data, which can provide valuable insights into the economic impact of new therapies. This approach can help inform healthcare decision-making and resource allocation in the complex field of melanoma treatment.