Conclusions: The economic burden of DLBCL patients with HSCT is much higher than that of the patients without HSCT, but the period until death was short. The Cost of HSCT is a major contributor to the overall costs in the group with transplantation.

PCN129 DISEASE BURDEN OF DIFFUSE LARGE B-CELL LYMPHOMA(DLBCL) PATIENTS WITH OR WITHOUT HEMATOPOIETIC STEM CELL TRANSPLANTATION: A CROSS-SECTIONAL ANALYSIS FROM NATIONWIDE CLAIMS COHORT DATA

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Objectives: Diffuse large B-cell lymphoma (DLBCL) is known as one of the most common lymphomas in South Korea and the patient usually receives costly treatment such as hematopoietic stem cell transplantation (HSCT). Despite the burden of disease, there is still an absence of a study on the disease burden. This study aimed to provide information on the disease burden of DLBCL patients using real-world data.

Methods: We used data from the National Sample Cohort provided by the Korean National Health Insurance Service (NHIS-NSC). Approximately 1 million Koreans were randomly selected, which accounted for 2% of the Korean population that were eligible in 2002. New cases of DLBCL between 1 January 2011 and 31 December 2015 were used to construct two groups of patients: DLBCL patients with or without HSCT. Patients were followed until the earliest date of death or end of the study period (31 December 2015). We estimated the median cost per patient per month (PPPM) and the median period until death in each group. Results: Four of eight DLBCL patients with HSCT and 59 of 179 DLBCL patients without HSCT died within the follow-up period. The median follow-up period of the patients with HSCT (524.0 days) was longer than that of the patients without HSCT (500.0 days), and the median period until death was approximately twice as long in the group with HSCT (528.5 and 230.0 days, respectively). The median PPPM was about 3.7 times higher in the group with HSCT ($2,218 USD) than in the group without HSCT ($1,681 USD). Conclusions: The economic burden of DLBCL patients with HSCT is much higher than that of the patients without HSCT, but the period until death was short. The Cost of HSCT is a major contributor to the overall costs in the group with transplantation.