

**P116**

**Budget Impact Analysis of Cladribine Tablets in Relapsing-Remitting Multiple Sclerosis (RRMS) Patients in Kingdom of Saudi Arabia**

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**Background:** Multiple sclerosis (MS) is a common, chronic and degenerative neurological condition which is associated with neurological impairment and severe disability. It majorly affects young adults. Relapsing-remitting MS (RRMS) is the most common form and constitutes approximately 85% of MS cases. Current treatment options for RRMS patients mainly include disease-modifying drugs (DMDs) across Kingdom of Saudi Arabia (KSA). Most of the currently available DMDs involve long-term administration and/or monitoring costs. However, recently launched cladribine tablets is the first short-course oral treatment for RRMS patients with a favourable benefit risk profile. It includes maximum of 20 days of treatment over 2 years that deliver up to four years of disease control.

**Objective(s):** To assess the budgetary impact of introducing cladribine tablets, compared with other DMDs currently used to treat RRMS patients in KSA, a Microsoft Excel® based budget impact model was adapted from KSA payer's perspective.

**Method(s):** The data were retrieved from literature and validated by key opinion leaders. The comparators considered were alemtuzumab, dimethyl fumarate, fingolimod, interferon-beta (IFN $\beta$ )-1a, IFN $\beta$ -1b, natalizumab and teriflunomide. The model calculated the total cost associated with the treatment of RRMS patients with and without cladribine tablets over 5 years' time horizon. The total costs included acquisition and administration costs and the costs of monitoring, relapse and adverse event management.

**Result(s):** The budget impact analysis showed that the introduction of cladribine tablets resulted in 0.9% (Saudi Riyal [SAR] 385,394, (\$USD 1 =3.75 SAR).) savings in the overall payers' budget over a span of five years. The results demonstrated that cost savings were predominantly driven by the reduction in the cost associated with drugs administration (-46.5%), followed by adverse event management (-5.5%).

**Conclusion:** Cladribine tablets could be a cost saving treatment option for RRMS patients from the payer perspective in KSA, freeing more healthcare resources for other diseases management