Cost Effectiveness of Abemaciclib for Early Breast Cancer in Jamaica

AUTHORS	Lynch, H[1], Johnson, J[1], Campbell, E[1], Keith, D[1], Barnett, J[1], Gooden, M[1], Brown, S[1], Thompson, P[1]
AFFILIATION	[1] Policy Planning and Development Division, Ministry of Health and Wellness, Jamaica

KEYWORDS	breast cancer, abemaciclib, cost-effectiveness

OBJECTIVE

Estimate the value of adding abemaciclib to endocrine therapy for high-risk hormone receptor-positive and HER2-negative early breast cancer.

METHODS

A four-state Markov model estimated lifetime costs and health outcomes from the Jamaican government perspective using clinical trial inputs.

RESULTS

Combination therapy cost approximately J$7.63 million more per patient and improved modelled health outcomes. The incremental cost-effectiveness ratios exceeded the study's willingness-to-pay threshold.

CONCLUSION

Under the model assumptions, adding abemaciclib was unlikely to be cost-effective at the selected threshold.