

Abstract

Purposes : Tuberculosis (TB) currently is the most serious transmission disease in Taiwan. In addition, the amount of death caused by TB is twice more than those of other transmission diseases. Several treatments have been developed during past several decades. Previous studies have assessed the effectiveness of different treatments for TB. However, rare study focused on economic evaluation for different tuberculosis treatment methods in Taiwan. This study aimed to compare the costs and effectiveness of outpatient treatment and inpatient followed by outpatient treatment for TB. Our study results could assist policy makers as well as medical specialists to deal with TB.

Methods: Our study is a retrospective research. The samples are patients treated for TB in study hospital during 2002. Total of 59 patients were collected. Among of them, 29 patients were treated by outpatient treatment and 30 patients were treated by inpatient followed by outpatient treatment. All cost data including direct and indirect costs were analyzed by using questionnaire and the financial statement of study hospital. The cured rate was used as the outcome in effectiveness analysis. Finally, cost-effectiveness ratios for two groups were calculated.

Findings: Our study indicated that the costs for outpatient and inpatient followed outpatient treatment are NT\$166983.35 and NT\$20,120.68 respectively. In addition, the cured rates for these two modalities are 56.67% and 89.66% respectively. As a result, the cost-effectiveness ratios for two different modalities revealed that the current subsistence allowance for inpatient treatment of TB patient is not cost-effectiveness. The sensitivity analysis also show the inpatient followed by outpatient treatment is not cost-effectiveness even though the cured rate is elevated form 56.67% to 100%.

Suggestions: The results of this study not only assist policy-makers to discuss the appropriate of the current policy of subsidizing TB patients for inpatient treatment but also help physicians to improve the effectiveness of treatment for TB patients

Key words: tuberculosis ; inpatient treatment ; cost-effectiveness analysis