

Expert Centers Prove Cost-Effective In Managing Ovarian Cancer

Atlanta 2007/03/12 -A new study finds that while “expert centers” with extensive experience in managing cancer have higher overall costs, the approach is more cost-effective over time than referring patients to a less experienced medical center. Published in the April 15, 2007 issue of *CANCER*, a peer-reviewed journal of the American Cancer Society, a cost-effectiveness study of a hypothetical cohort of patients with advanced-stage ovarian cancer, performed using decision-analysis modeling, reveals that an expert center can provide significantly longer quality-adjusted survival compared to less experienced centers, leading to a lower cost per quality of life year gained.

Ovarian cancer is diagnosed in over 200,000 women worldwide each year, of which only 38 percent will survive five years. Most women are diagnosed with advanced disease, contributing to poor survival. The most important prognostic factors include the thoroughness of the surgical resection and the compliance with recommended contemporary adjuvant chemotherapy treatment.

Interestingly, the medical professional that manages the ovarian cancer patient impacts the quality of each of those factors. Studies have shown that gynecologic oncologists have better outcomes than other surgeons. Furthermore, better outcomes are observed when ovarian cancer patients are managed at a high-volume, multidisciplinary medical centers compared to low-volume medical centers. However, the cost-effectiveness of referring patients to an expert medical center versus a less experienced center has not been carefully studied.

Led by Robert E. Bristow, M.D. of the Kelly Gynecologic Oncology Service at the Johns Hopkins Medical Institutions in Baltimore, researchers compared the treatment efficacy, costs, and cost-effectiveness of these two referral strategies in a modeling study.

The researchers discovered that though the overall cost of managing ovarian cancer at an expert center was more (\$50,652 versus \$39,957), quality of life and survival as measured by quality-adjusted life years (QALYs) were significantly better (5.12 QALYs versus 2.33 QALYs). Cost effectiveness analysis further demonstrated that an expert facility was more cost-effective at only \$9,893/QALY at an expert center compared to \$17,149/QALY at a less experienced center.

Clearly a strategy utilizing a centralized expert referral center, “with a high proportion of patients undergoing optimal primary cytoreduction and receiving combined IP/IV chemotherapy, is cost-effective from the perspective of society compared to referral of patients to a less-experienced center,” conclude the authors.

Article: “Centralization of Care for Patients With Advanced-Stage Ovarian Cancer: A Cost-effectiveness Analysis,” Robert E. Bristow, Antonio Santillan, Teresa P. Diaz-Montes, Ginger J. Gardner, Robert L. Giuntoli II, Benjamin C. Meisner, Kevin D. Frick, Deborah K. Armstrong, *CANCER*; Published Online: March 12, 2007 (DOI: 10.1002/cncr.22561); Print Issue Date: April 15, 2007.

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