Table 1. Demography data on number of women and women using oral contraceptives in USA

|  |  |  |
| --- | --- | --- |
| Variable | Value | Reference |
| Total population of USA (n) | 327,167,439 | (1) |
| Total female population (n) | 166,049,288 | (1) |
| Total female population in reproductive age (n) | 74,719,833 | (1) |
| 15-19 years | 10,472,771 | (1) |
| 20-24 years | 10,596,263 | (1) |
| 25-29 years | 11,451,225 | (1) |
| 30-34 years | 10,912,520 | (1) |
| 35-39 years | 10,780,518 | (1) |
| 40-44 years | 10,026,890 | (1) |
| 45-49 years | 10,479,646 | (1) |
| Percentage of women using oral contraceptives (%) |  | (2) |
| 15-19 years | 16.6 |  |
| 20-24 years | 19.5 |  |
| 25-29 years | 19.5 |  |
| 30-34 years | 11 |  |
| 35-39 years | 11 |  |
| 40-44 years | 5.1 |  |
| 45-49 years | 5.1 |  |

Table 2. Prevalence of potential interaction drug utilization among women of child bearing age who use hormonal contraceptives

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Interacting drug | Acute vs Chronic | Duration assumed | Percentage of HCA users (%) † | Percentage of HCA users to be used in model (%)‡ | Reference |
| Any inhibitor use |  | Generic inhibitor assumed to be used for 1 year | 41.68 | 2.5 (0.1-5) |  |
| Antibiotics | Acute | 27.55 |  |
| Antifungal | Acute | 13.41 |  |
| Antidepressant | Chronic | 8.02 |  |
| Antacid | Acute/Chronic | 4.76 |  |
| Any inducer use |  | Generic inducer assumed to be used for 1 year | 13.99 | 2.5 (0.1-5) |  |
| Steroids | Acute/Chronic | 11.17 |  |
| Antiepileptics | Chronic | 2.15 |  |
| Migraine | Chronic | 1.49 |  |

† Slide 80 of mid-term meeting Gates meeting 10.18.2019

‡ Assumption (conservative estimate of interacting medication usage) since prevalence of DDIs with hormonal contraceptives is not known. 46.4% of females aged 18-44 years use at least 1 prescription drug, 11.6% of females aged 18-44 years use three or more prescription drugs and 3.9% of women aged 18-44 years used five or more prescription drugs in 2009-2012. 10.8% of women aged 18-44 years use anti-depressants and 3.6% of women aged 18-44 years used anticonvulsants (epilepsy, seizure and related disorders) (3)

Table 3. Number of women to be included in the model

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Age group (yrs) | Total number of women in USA† | Women using OCs (%)† | Women using OCs (n) | Women using inducers/ inhibitors (Mean, %)‡ | Women using inducers/ inhibitors (Mean, n) | Women using inducers/ inhibitors (LL, %)‡ | Women using inducers/ inhibitors (LL, n) | Women using inducers/ inhibitors (UL, %)‡ | Women using inducers/ inhibitors (UL, n) |
| 15-19 | 10,472,771 | 16.6 | 1,738,479.99 | 2.5 | 43,462.00 | 0.1 | 1,738.48 | 5 | 86,924.00 |
| 20-24 | 10,596,263 | 19.5 | 2,066,271.29 | 2.5 | 51,656.78 | 0.1 | 2,066.27 | 5 | 103,313.56 |
| 25-29 | 11,451,225 | 19.5 | 2,232,988.88 | 2.5 | 55,824.72 | 0.1 | 2,232.99 | 5 | 111,649.44 |
| 30-34 | 10,912,520 | 11 | 1,200,377.20 | 2.5 | 30,009.43 | 0.1 | 1,200.38 | 5 | 60,018.86 |
| 35-39 | 10,780,518 | 11 | 1,185,856.98 | 2.5 | 29,646.42 | 0.1 | 1,185.86 | 5 | 59,292.85 |
| 40-44 | 10,026,890 | 5.1 | 511,371.39 | 2.5 | 12,784.28 | 0.1 | 511.37 | 5 | 25,568.57 |
| 45-49 | 10,479,646 | 5.1 | 534,461.95 | 2.5 | 13,361.55 | 0.1 | 534.46 | 5 | 26,723.10 |
|  |  |  |  |  |  |  |  |  |  |
| Total |  |  | 9,469,807.66 |  | 236,745.19 |  | 9,469.81 |  | 473,490.38 |

† Source: See Table 1

‡Source: See Table 2

Table. Pregnancy rates for US women in 2009. Rates are pregnancy outcomes per 1000 women in specified group (4)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Age group (years) | All pregnancies | Live births | Induced abortions | Fetal losses |
| 15-19 | 65.3 | 37.9 | 16.3 | 11.1 |
| 20-24 | 153.8 | 96.2 | 36.0 | 21.6 |
| 25-29 | 162.0 | 111.5 | 27.1 | 23.4 |
| 30-34 | 138.0 | 97.5 | 17.7 | 22.9 |
| 35-39 | 77 | 46.1 | 9.8 | 21.1 |
| 40-44 | 19.2 | 10.8 | 3.5 | 4.9 |

Table. Percentage of unintended pregnancies that ended in abortion and rate of unintended pregnancies that ended in birth for all US females, 2011 (5)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Age group (years) | % of pregnancies that were unintended | Total pregnancy rate | Unintended pregnancy rate | % of unintended pregnancies that ended in abortion | % of UP that ended in birth | Rate of unintended pregnancies that ended in birth (per 1000 women aged 15-44 years) |
| 15-19 | 75 | 55 | 41 | 38 | 62 | 21 |
| 20-24 | 59 | 138 | 81 | 44 | 56 | 40 |
| 25-29 | 42 | 157 | 66 | 42 | 58 | 33 |
| 30-34 | 31 | 141 | 43 | 42 | 58 | 21 |
| 35-39 | 34 | 47 | 16 | 46 | 54 | 7 |
| 40-44 | 34 | 47 | 16 | 46 | 54 | 7 |

Table 1. Annual failure rates of contraceptive methods

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Value‡ | Range | Distribution | Reference |
| OC alone | | | | |
| Perfect-use failure rate (%) | 1.11 | 0.3-2.86 | NA | (6-9) |
| OC + enzyme inducer | | | | |
| Perfect-use failure rate (%) | 1.56 |  |  |  |
| OC + enzyme inhibitor | | | | |
| Perfect-use failure rate (%) | 0.82 |  |  |  |
| No method | | | | |
| Perfect-use failure rate (%) | 85 |  |  | (10) |

‡Slide 51 of Mid-term meeting. “There is increase in number pregnancies by 0.45 in 100 women for 1 year of use of LNG when co-administered with rifampicin 600 mg q.d.”

Table 2. Probability estimates for method failure outcomes

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Outcomes | Duration in months (11) | Value | Range | Distribution | Reference |
| Birth | 10.23 | 0.3663 (7) | 0.3663-0.64 (7, 8, 12-23) | NA |  |
| Induced abortion | 2.08 | 0.4554 (7) | 0.207-0.47025 (7, 8, 12-23) | NA |  |
| Spontaneous abortion | 3.62 | 0.1683 (7) | 0.11-0.174 (7, 8, 12-23) | NA |  |
| Ectopic pregnancy | 1.5 | 0.01(7) | 0.005-0.01 (7, 8, 12-23) | NA |  |

Table 3. Probability estimates for side effects

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Value | Range | Distribution | Reference |
| OC alone | | | | |
| Amenorrhea | 0.03 (7, 24) | NA | NA |  |
| Venous thromboembolism † | 0.001 (25) | 0.000264-0.001679 (7, 25, 26) | NA |  |
| Stroke ‡ | 0.00037026 (27) | 0.00001452-0.00085426 (27) | NA |  |
| Myocardial infarction ‖ | 0.000205 (27) | 0-0.004621(27) | NA |  |
| Inter-menstrual bleeding |  |  |  |  |
| OC + enzyme inducer |
| Amenorrhea |  |  |  |  |
| Venous thromboembolism |  |  |  |  |
| Myocardial infarction |  |  |  |  |
| Stroke |  |  |  |  |
| Inter-menstrual bleeding |  |  |  |  |
| OC + enzyme inhibitor |
| Amenorrhea |  |  |  |  |
| Venous thromboembolism |  |  |  |  |
| Myocardial infarction |  |  |  |  |
| Stroke |  |  |  |  |
| Inter-menstrual bleeding |  |  |  |  |

† The point estimate was taken from (25) (Table 2) by multiplying the relative risk point estimate of oral contraceptive use by incidence of venous thrombosis in non-users of OCs per 10,000 person-years for 30-40 year old women.

Probability (exposed) = RR x Probability (unexposed). The lower-limit of the range was taken from (7) and the upper-limit was from (25) the relative risk of oral contraceptive use 95% CI upper-limit for 40-50 year old women multiplied by the incidence of venous thrombosis in non-users (Table 2) .

‡ Table 2 of (27) provides the adjusted relative risk for stroke (or MI) in contraceptive users (adjusted for age, educational level, calendar year and risk factors) which were multiplied by stroke (or MI) incidence in population of non-users to provide the probability of stroke (or MI) in the exposed population (using hormonal contraceptives). The median value considered the median point estimate of the adjusted relative risk, the lower limit considered the minimum of the lower limit of adjusted relative risk and the upper limit considered the maximum of the upper limit of adjusted relative risk

Table. Effect of concomitant strong CYP3A4 inducer and CHC pill on Intermenstrual bleeding.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | % of women with IMB | | | |
|  | 3 months | 6 months | 9 months | 12 months |
| CHC + Rifampicin | 15 | 10 | 10 | 7 |
| CHC alone | 3 | 2 | 1 | 0.5 |

Table. Probability of mother-to-child transmission of HIV and major malformation frequency for AED monotherapy in utero exposure

|  |  |  |
| --- | --- | --- |
|  | **Probability estimate** | **Reference** |
| Probability of vertical transmission of HIV | 0.0000139 | (28) |
| Probability of teratogenicity in fetus born to mothers using anti-epileptic drugs | 0.0416 | (29) |

Rate 1.4 per 100,000 live births in 2015 (28)

Table 4. Contraceptive method costs

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Value  (US$ 2020) | Range (US$ 2020) | Distribution | Reference |
| OC alone | | | | |
| Total annual costs | 680.352 | 136.5-1133.96 | NA | (7, 11, 15-18, 20, 30-32) |
| OC + enzyme inducer |  |  |  |  |
| Total annual costs | 340 | 50-10000 |  | Assumption |
| OC + enzyme inhibitor |  |  |  |  |
| Total annual costs | 340 | 50-10000 |  | Assumption |

Table 5. Cost of contraceptive side effects

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Value | SD | Distribution | Reference |
| Amenorrhea | 78.39 (7) |  |  |  |
| Venous thromboembolism | 14305.14 (33) |  |  |  |
| Stroke | 28979.14 (34) | 33042.7 (34) |  |  |
| Myocardial infarction | 23528.9 (35) | 11958.63 (35) |  |  |
| Inter-menstrual bleeding |  |  |  |  |

Since only two studies were available mentioning costs of side effects, the literature was scanned to see if those costs were accurate. Costs from newer studies were used.

The cost mentioned by (7) for VTE was $6281.9 whereas the initial VTE cost mentioned by (30) was $22815.9 and recurring costs was $11986.7.

Initial cost of MI by (30) was $ 50967.6 and recurring costs was $16954.4

Initial cost of stroke by (30) was $ 22237 and recurring costs was $11076.4

Table 6. Cost of contraceptive method failure outcomes

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Value | Range | Distribution | Reference |
| Birth | 13252 | 5270-28664 |  | (7, 11, 12, 15-17, 20, 22, 31, 36-39) |
| Induced abortion | 931 | 601-4233 |  | (7, 11, 12, 15-18, 20, 22, 30, 31, 37-39) |
| Spontaneous abortion | 1141 | 601-3594 |  | (7, 11, 12, 15-18, 20, 22, 30, 31, 36-40) |
| Ectopic pregnancy | 6174 | 2840-41644 |  | (7, 11, 12, 15-18, 20, 22, 30, 31, 36-40) |

Table 7. Distinction between unwanted and mistimed pregnancies (11, 16)

The cost of birth will be adjusted to reflect likelihood of unintended pregnancy being simply mistimed rather than unwanted. Costs of induced abortion, spontaneous abortion and ectopic pregnancy will be assumed to be entirely avoided if the pregnancy does not occur (i.e if contraceptive failure had not occurred). It cannot be assumed that an unintended birth if avoided today would have avoided the full direct medical cost of birth because it may have occurred in the future.

The National Survey of Family Growth reports that most unintended birth (approximately 60%) are simply mistimed while only 40% are truly unwanted and therefore would never have occurred.

Where,  
r is the discount rate (5%),  
d is the number of years by which the birth would have been delayed (1.5-2)  
f is the fraction mistimed among unintended births (60%)

Table 7. Distinction between unwanted and mistimed births. (41)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Mother’s age | Total | Intended births | Total unintended births | Unwanted births | Total mistimed births | Mistimed births as a % of unintended births |
| 15-19 years | 100 | 22.8 | 77.2 | 19.3 | 57.9 | 75% |
| 20-24 years | 100 | 49.9 | 50.1 | 16.5 | 33.6 | 67% |
| 25-44 years | 100 | 74.6 | 25.4 | 11.8 | 13.7 | 53.9% |
| Average | | | | | | 65% |

**Table 8. Utility values for different health states**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Category** | **Condition** | **Method** | **Utility (mean)** | **SD** | **95% CI** | **Range** | **IQR** | **Reference** |
| Pregnancy | Not being pregnant | NA | 1 | NA | NA | NA | NA | (37) |
| Unintended pregnancy | TTO | 0.992 | NA | NA | 0.830-1 | NA | (42) |
| VAS | 0.487 | NA | NA | 0-1 | NA | (42) |
| SG | 0.997 | NA | NA | 0.9-1 | NA | (42) |
| Pregnancy | TTO1 | 0.9625 | NA | NA | 0.9336-0.99314 | NA | (30, 37) |
| Birth | TTO1 | 0.9064 | NA | NA | 0.8792-0.9517 | NA | (30, 37) |
| Vaginal delivery | TTO1 | 0.91667 | NA | NA | NA | NA | (30) |
| C-section | TTO1 | 0.8846 | NA | NA | NA | NA | (30) |
| Induced abortion | TTO1 | 0.9615 | NA | NA | 0.9327-0.9903 | NA | (30, 37) |
| Spontaneous abortion | TTO1 | 0.9423 | NA | NA | 0.9140-0.9894 | NA | (30, 37) |
| Ectopic pregnancy | TTO1 | 0.91667 | NA | NA | 0.8892-0.9625 | NA | (30, 37) |
| Assessment of pre-pregnancy perspectives | Intention- Intended to get pregnant | VAS | 0.9 | 0.17 | NA | NA | NA | (43) |
| Intention- Intentions changing | VAS | 0.9 | 0.17 | NA | NA | NA | (43) |
| Intention- Did not intend to get pregnant | VAS | 0.68 | 0.3 | NA | NA | NA | (43) |
| Intention- Intended to get pregnant | PROMIS GSF-derived | 0.73 | 0.1 | NA | NA | NA | (43) |
| Intention- Intentions changing | PROMIS GSF-derived | 0.71 | 0.12 | NA | NA | NA | (43) |
| Intention- Did not intend to get pregnant | PROMIS GSF-derived | 0.7 | 0.1 | NA | NA | NA | (43) |
| Intention- Intended to get pregnant | SG | 0.994 | 0.023 | NA | NA | NA | (43) |
| Intention- Intentions changing | SG | 1 | 0 | NA | NA | NA | (43) |
| Intention- Did not intend to get pregnant | SG | 0.996 | 0.015 | NA | NA | NA | (43) |
| Intention- Intended to get pregnant | TTO | 0.99999 | 0.0003 | NA | NA | NA | (43) |
| Intention- Intentions changing | TTO | 0.9995 | 0.0016 | NA | NA | NA | (43) |
| Intention- Did not intend to get pregnant | TTO | 0.9996 | 0.0012 | NA | NA | NA | (43) |
|  | Wanted to have a baby | VAS | 0.9 | 0.18 | NA | NA | NA | (43) |
| Mixed feelings | VAS | 0.83 | 0.24 | NA | NA | NA | (43) |
| Did not want to have a baby | VAS | 0.57 | 0.29 | NA | NA | NA | (43) |
| Wanted to have a baby | PROMIS GSF-derived | 0.74 | 0.1 | NA | NA | NA | (43) |
| Mixed feelings | PROMIS GSF-derived | 0.68 | 0.1 | NA | NA | NA | (43) |
| Did not want to have a baby | PROMIS GSF-derived | 0.71 | 0.1 | NA | NA | NA | (43) |
| Wanted to have a baby | SG | 0.995 | 0.022 | NA | NA | NA | (43) |
| Mixed feelings | SG | 1 | 0 | NA | NA | NA | (43) |
| Did not want to have a baby | SG | 0.992 | 0.020 | NA | NA | NA | (43) |
| Wanted to have a baby | TTO | 0.9999 | 0.0007 | NA | NA | NA | (43) |
| Mixed feelings | TTO | 0.9997 | 0.0013 | NA | NA | NA | (43) |
| Did not want to have a baby | TTO | 0.9994 | 0.0014 | NA | NA | NA | (43) |
| London measures- planned | VAS | 0.91 | 0.17 | NA | NA | NA | (43) |
| London measures- ambivalent | VAS | 0.79 | 0.25 | NA | NA | NA | (43) |
| London measures- unplanned | VAS | 0.6 | 0.33 | NA | NA | NA | (43) |
| London measures- planned | PROMIS GSF-derived | 0.74 | 0.1 | NA | NA | NA | (43) |
| London measures- ambivalent | PROMIS GSF-derived | 0.71 | 0.1 | NA | NA | NA | (43) |
| London measures- unplanned | PROMIS GSF-derived | 0.67 | 0.1 | NA | NA | NA | (43) |
| London measures- planned | SG | 0.999 | 0.008 | NA | NA | NA | (43) |
| London measures- ambivalent | SG | 0.997 | 0.018 | NA | NA | NA | (43) |
| London measures- unplanned | SG | 0.989 | 0.023 | NA | NA | NA | (43) |
| London measures- planned | TTO | 0.9999 | 0.0001 | NA | NA | NA | (43) |
| London measures- ambivalent | TTO | 0.9996 | 0.0012 | NA | NA | NA | (43) |
| London measures- unplanned | TTO | 0.9993 | 0.0015 | NA | NA | NA | (43) |
| Assessment of post conception perspective | Timing- right time | VAS | 0.89 | 0.17 | NA | NA | NA | (43) |
| Timing- Ok but not quite right | VAS | 0.79 | 0.26 | NA | NA | NA | (43) |
| Timing-Wrong time | VAS | 0.57 | 0.31 | NA | NA | NA | (43) |
| Timing- right time | PROMIS GSF-derived | 0.75 | 0.09 | NA | NA | NA | (43) |
| Timing- Ok but not quite right | PROMIS GSF-derived | 0.68 | 0.1 | NA | NA | NA | (43) |
| Timing-Wrong time | PROMIS GSF-derived | 0.68 | 0.09 | NA | NA | NA | (43) |
| Timing- right time | SG | 0.996 | 0.019 | NA | NA | NA | (43) |
| Timing- Ok but not quite right | SG | 0.998 | 0.010 | NA | NA | NA | (43) |
| Timing-Wrong time | SG | 0.992 | 0.021 | NA | NA | NA | (43) |
| Timing- right time | TTO | 0.9999 | 0.0006 | NA | NA | NA | (43) |
| Timing- Ok but not quite right | TTO | 0.9996 | 0.0013 | NA | NA | NA | (43) |
| Timing-Wrong time | TTO | 0.9993 | 0.0015 | NA | NA | NA | (43) |
| Desired- Yes | VAS | 0.91 | 0.16 | NA | NA | NA | (43) |
| Desired- Not sure | VAS | 0.63 | 0.30 | NA | NA | NA | (43) |
| Desired- No | VAS | 0.57 | 0.30 | NA | NA | NA | (43) |
| Desired- Yes | PROMIS GSF-derived | 0.73 | 0.09 | NA | NA | NA | (43) |
| Desired- Not sure | PROMIS GSF-derived | 0.69 | 0.11 | NA | NA | NA | (43) |
| Desired- No | PROMIS GSF-derived | 0.67 | 0.10 | NA | NA | NA | (43) |
| Desired- Yes | SG | 0.997 | 0.017 | NA | NA | NA | (43) |
| Desired- Not sure | SG | 0.998 | 0.010 | NA | NA | NA | (43) |
| Desired- No | SG | 0.991 | 0.022 | NA | NA | NA | (43) |
| Desired- Yes | TTO | 0.9998 | 0.0008 | NA | NA | NA | (43) |
| Desired- Not sure | TTO | 0.9996 | 0.0014 | NA | NA | NA | (43) |
| Desired- No | TTO | 0.9992 | 0.0015 | NA | NA | NA | (43) |
| Happy- Happy | VAS | 0.88 | 0.19 | NA | NA | NA | (43) |
| Happy- Neither happy/ unhappy | VAS | 0.67 | 0.25 | NA | NA | NA | (43) |
| Happy - Unhappy | VAS | 0.28 | 0.17 | NA | NA | NA | (43) |
| Happy- Happy | PROMIS GSF-derived | 0.72 | 0.1 | NA | NA | NA | (43) |
| Happy- Neither happy/ unhappy | PROMIS GSF-derived | 0.69 | 0.09 | NA | NA | NA | (43) |
| Happy - Unhappy | PROMIS GSF-derived | 0.66 | 0.12 | NA | NA | NA | (43) |
| Happy- Happy | SG | 0.997 | 0.016 | NA | NA | NA | (43) |
| Happy- Neither happy/ unhappy | SG | 0.997 | 0.011 | NA | NA | NA | (43) |
| Happy - Unhappy | SG | 0.985 | 0.028 | NA | NA | NA | (43) |
| Happy- Happy | TTO | 0.9998 | 0.0010 | NA | NA | NA | (43) |
| Happy- Neither happy/ unhappy | TTO | 0.9996 | 0.0013 | NA | NA | NA | (43) |
| Happy - Unhappy | TTO | 0.9990 | 0.0017 | NA | NA | NA | (43) |
| Adverse events | Amenorrhea |  |  |  |  |  |  |  |
| VTE-Acute DVT2 | SG | 0.81 | NA | NA | NA | 0.55-0.94 | (44) |
| VTE-Acute PE2 | SG | 0.75 | NA | NA | NA | 0.45-0.91 | (44) |
| Acute Stroke | TTO | 0.33 | 0.46 | NA | NA | NA | (45) |
| Acute Myocardial infarction | TTO | 0.67 | 0.34 | NA | NA | NA | (45) |
| Inter-menstrual bleeding | EQ-5D | 0.78 |  |  |  |  | (46) |
| Co-morbid conditions | Epilepsy-(Level 2)3 | TTO | 0.66 | 0.08 | NA | 0.56-0.78 | NA | (47) |
| Epilepsy-withdrawal4 | TTO | 0.303 | 0.354 | NA | NA | NA | (48) |
| VAS | 0.211 | 0.122 | NA | NA | NA | (48) |
| EQ-5D | 0.261 | 0.344 | NA | NA | NA | (48) |
| Active Tuberculosis | SF-6D | 0.68 | NA | 0.65-0.72 | 0.32-1 | NA | (49) |
| HUI3 | 0.76 | NA | 0.7-0.82 | -0.26-1 | NA | (49) |
| HUI2 | 0.85 | NA | 0.8-0.89 | 0.13-1 | NA | (49) |
| VAS | 0.66 | NA | 0.61-0.71 | 0.08-1 | NA | (49) |
| HIV 5  (CD4+ 0-99) | Predicted SF-6D | 0.742 | 0.058 | NA | NA | NA | (50) |
| HIV 5  (CD4+ 100-199) | Predicted SF-6D | 0.750 | 0.058 | NA | NA | NA | (50) |
| HIV 5  (CD4+ 200-349) | Predicted SF-6D | 0.778 | 0.053 | NA | NA | NA | (50) |
| HIV 5  (CD4+ 350-499) | Predicted SF-6D | 0.784 | 0.059 | NA | NA | NA | (50) |
| HIV 5  (CD4+ 500+) | Predicted SF-6D | 0.798 | 0.052 | NA | NA | NA | (50) |
|  | Pregnant women living with HIV | EQ-5D | 0.77 | NA | 0.74-0.79 | NA | NA | (51) |

TTO- time trade-off, SG- standard gamble, VAS- Visual analog scale

1 Utilities were obtained from convenience sample of female members of research team and advisory panel using time-tradeoff technique

2 Median values

3 Level 2 – no response, with substantial maintenance of baseline clinical status

4 Withdrawal stage was defined as a reduction of seizure episodes by less than 50%. Other health states measured were seizure free, and seizure reduction, which was defined as reduction of seizures experienced by 50% and over

5 CD4+ range units cells/mm3

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