

Treatment of established osteoporosis - a systematic review and cost-utility analysis

Core Research on behalf of the NCCHTA - [PDF] Treatment of established osteoporosis: a systematic review and cost



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Utility Values Associated with Osteoporotic Fracture: A Systematic Review of the Literature

The Epidemiology and Quality of Life Working Group of IOF. Neer RM, Genant HK, Wang O et al 2001 Effect of parathyroid hormone 1—34 on fractures and bone mineral density in postmenopausal women with osteoporosis. Hiligsmann M, Rabenda V, Bruyere O, Reginster JY 2010 The clinical and economic burden of non-adherence with oral bisphosphonates in osteoporotic patients.

Articles and position papers

Further sensitivity analyses were undertaken, focussing on those agents with cost-effectiveness grades A or B. It was not cost-effective to treat established osteoporosis with raloxifene in the time frame modelled. Additional benefits from reductions in CHD, with additional risks from an increased incidence of breast cancer, did not markedly change the conclusions on cost-effectiveness.

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Nayak S, Roberts MS, Greenspan SL 2011 Cost-effectiveness of different screening strategies for osteoporosis in postmenopausal women. Mobley LR, Hoerger TJ, Wittenborn JS, Galuska DA, Rao JK 2006 Cost-effectiveness of osteoporosis screening and treatment with hormone replacement therapy, raloxifene, or alendronate.

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Health economics model A model was developed comprising an individual patient-based approach that simulated whether or not events occurred in each subsequent year for each patient.

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