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# Cost Effectiveness of a Program to Promote Screening for Cervical Cancer in the Vietnamese-American Population

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# Background

- The American Cancer Society recommends a Pap test once every 3 years
- Fewer Vietnamese-American women adhere to this regimen than other ethnic groups
- Cervical cancer incidence rate among Vietnamese women in the US is over twice the cervical cancer incidence rate among non-Latina white women (16.8 versus 8.1 per 100,000)
- Data from Lay Health Worker intervention trial
- During 2008, 234 non-compliant Seattle-area Vietnamese women were selected to participate in a randomized trial

# Lay Health Worker Trial Results

_	Arm			
Ever Screened	Inter.	Control	Diff.	p-value
Yes	20.3%	6.3%	14.06%	0.04
No	9.3%	7.7%	1.57%	1.00
All	15.3%	6.9%	8.36%	0.07

# Objective of Our Study

To measure the cost effectiveness of the lay health worker intervention

#### **Cost Effectiveness**

- Incremental Cost Effectiveness Ratio (ICER)
- Ratio of Δcost and Δeffectiveness
- Pap ICER:

ΔPapCost/ΔQuality Adjusted Life Year

Intervention ICER:

cost of intervention + ( $\Delta$ PapFreq ×  $\Delta$ PapCost)

 $\Delta$ PapFreq  $\times \Delta$ QALY

# ICER Component Values

ICER Component	Mean	SE
Cost of intervention	\$94.35	\$6.00
ΔPapFreq	8.36%	4.59%
ΔPapCost	\$146.52	?
ΔQALY	17 days	?

#### Pap ICER

- Arr Arr
- Eddy (1990): \$13,300 per Life Year Saved
- Marle (2002): \$6,700 per LYS
- Maxwell (2002): \$4,017 per LYS
- Goldie (2004): \$9,950 per QALY

#### Intervention ICER

ICER 
$$\equiv \frac{\text{cost of intervention } + (\Delta \text{PapFreq} \times \Delta \text{PapCost})}{\Delta \text{PapFreq} \times \Delta \text{QALY}}$$

$$= \frac{\$94.35 + 0.0836 \times \$146.52}{0.0836 \times 16.95 \text{ QAL days}}$$

$$= \frac{\$94.35 + \$12.25}{0.00388 \text{ QALY}}$$

$$= $27,457 \text{ per QALY}$$

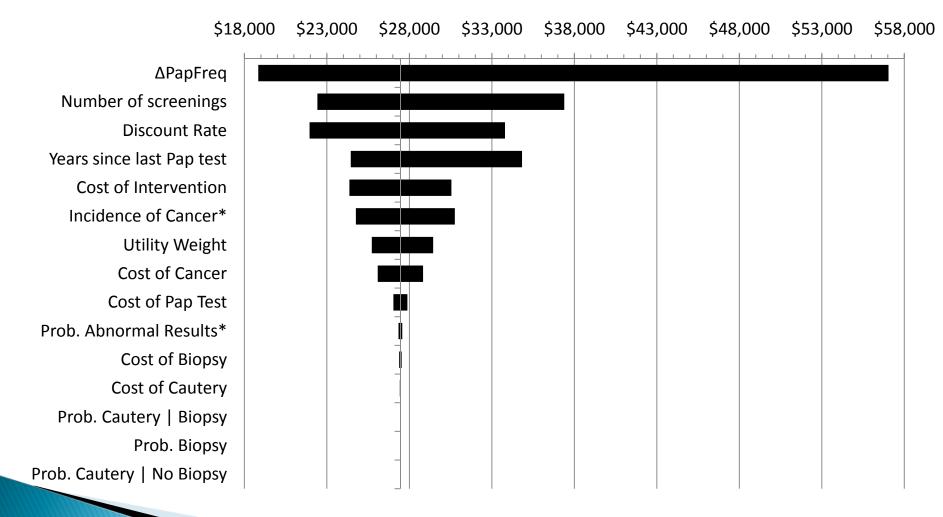
# Comparisons of Lay Health Worker Interventions

- \$27,457 per QALY
- Mandelblatt (2004) study of breast cancer screening for AA women: \$89,539 per QALY
- Thompson (2007) study of cervical cancer screening for Chinese North Americans:

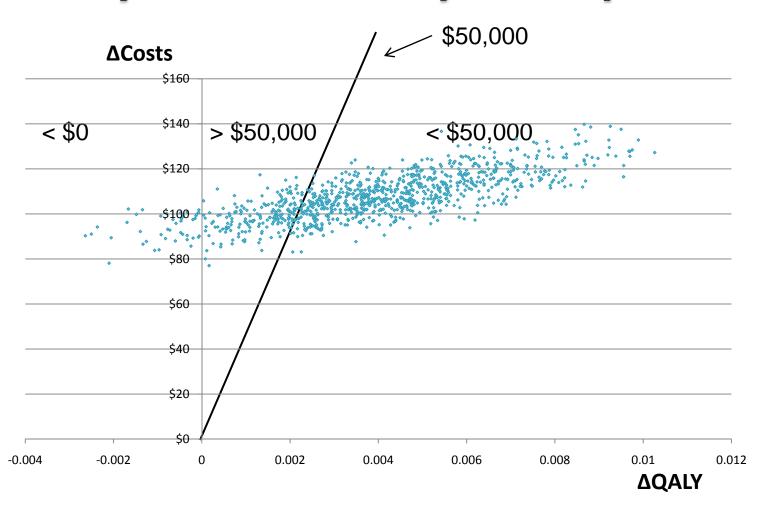
Cost of intervention  $/\Delta PapFreq$ 

= \$414.86 vs. \$1,129 in our study (\$12,088 vs. \$27,247).

#### Tornado Diagram



#### N-way Uncertainty Analysis



#### Conclusion

- Compared to a strategy of no interventions the incremental cost-effectiveness of a layhealth-worker program to improve adherence to cervical cancer screening in Vietnamese women is \$27,457/QALY
- ▶ 80% probability that ICER < \$50,000
- Results are sensitive to patient history and duration of effect