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Titel des Beitrags: Is prevention of atopic eczema with hydrolyzed formulas cost-effective? A health economic evaluation from Germany.

Abstract: The German Infant Nutritional Intervention (GINI) trial, a prospective, randomized, double-blind intervention, enrolled children with a hereditary risk for atopy. When fed with certain hydrolyzed formulas for the first 4 months of life, the risk was reduced by 26-45% in PP and 8-29% in intention-to-treat (ITT) analyses compared with children fed with regular cow's milk at age 6. The objective was to assess the cost-effectiveness of feeding hydrolyzed formulas. Cost-effectiveness was assessed with a decision tree model programmed in TreeAge. Costs and effects over a 6-yr period were analyzed from the perspective of the German statutory health insurance (SHI) and a societal perspective at a 3% effective discount rate followed by sensitivity analyses. The extensively hydrolyzed casein formula would be the most cost-saving strategy with savings of 478 EUEUR per child treated in the ITT analysis (CI95%: 12 EUEUR; 852 EEUR) and 979 EUEUR in the PP analysis (95%CI: 355 EUR; 1455 EUR) from a societal perspective. If prevented cases are considered, the partially whey hydrolyzed formula is cost-saving (ITT -5404 EUEUR, PP -6358 EEUR). From an SHI perspective, the partially whey hydrolyzed formula is cost-effective, but may also be
cost-saving depending on the scenario. An extensively hydrolyzed whey formula also included into the analysis was dominated in all analyses. For the prevention of AE, two formulas can be cost-effective or even cost-saving. We recommend that SHI should reimburse formula feeding or at least the difference between costs for cow’s milk formula and the most cost-effective formula.

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