INTRODUCTION & AIMS

NAFLD has an estimated global prevalence of 25%. In Europe, real-time data on the economic burden of NAFLD is lacking. Care provision for patients with NAFLD patients is largely conducted in an ambulatory setting.

- The study will characterize a typical OPD encounter. This will involve summarizing patient profiles, categories of new patient referrals and clinical investigations ordered. Patients with both 'known' and 'suspected' NAFLD will be identified. These cohorts will be followed over the subsequent 11 months and a bottom-up micro-costing study conducted, with a set of NAFLD patients acting as a comparator group.

- The sample of patients recorded will involve patients along the full spectrum of NAFLD related liver disease and thus will be representative of clinical care in Europe.

METHODS

Study Cohort: A prospective observational study of patients attending the outpatient hepatology clinic over a consecutive 4-week period at the Freeman hospital, Newcastle was conducted. Suspected NAFLD was defined as referrals for steatosis, increased LFTs, hyperferritinaemia or cryptogenic cirrhosis. Suspected or already confirmed NAFLD patients were included in a 12 months follow-up study which recorded the final diagnosis, severity of the disease, diagnostic/monitoring work-up with an ALD cohort as a comparator group.

Cost of illness study: The method selected was the “bottom-up approach” where the estimation of costs involved quantification of health inputs and subsequent derivation of unit costs. The model used a “prevalence based” approach, estimating the financial burden over 1 year and was conducted from the ‘health care system’ perspective concerned only with the medical costs of NAFLD.

Statistical Analysis: To investigate associations between patient characteristics at the index appointment and the total number of hepatology clinic appointments, a Poisson regression model was used. To determine the main cost drivers in NAFLD patient care, a multivariable regression model was generated to establish the variables contributing to direct costs.

RESULTS

Summary of Patients Presenting to Hepatology Outpatients

664 patients attended general hepatology outpatient appointments in the Freeman Hospital. A detailed breakdown of the spectrum of liver disease referrals is shown in Table 1. 145 patients were eligible for follow up from the known (n=97) and suspect (n=62) NAFLD patient cohorts. The investigations requested at the initial consultation are summarized in Table 2.