

Long-acting erythropoiesis agents can help save resources

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(HealthDay)—Switching from short- to long-acting erythropoiesis-



stimulating agents (ESAs) in patients undergoing hemodialysis (HD) leads to a large reduction in time and subsequent costs, according to a study published online Sept. 12 in the *Journal of Renal Care*.

David W. Johnson, M.D., from the University of Queensland in Brisbane, Australia, and colleagues conducted a time and motion study at four HD units to determine the time and costs associated with preparing and administering ESAs before and after the introduction of long-acting ESAs.

The researchers found that the time costs of preparation and administration per patient per year had a wide variability within each unit and ranged from Australian AUD\$55.75 (38 euros) to AUD\$90.49 (62 euros) before the introduction of long-acting ESAs. The costs dropped by 73 to 80 percent following the introduction of long-acting ESAs. This represented an annual cost savings of between AUD\$2,591 and AUD\$5,914 if all <u>patients</u> on HD were switched to a long-acting ESAs.

"Switching from a short-acting to a long-acting ESA in HD units leads to a significant reduction in time <u>costs</u> of health professionals in preparation and administration of ESAs by up to 80 percent," the authors write.

Several authors disclosed financial ties to pharmaceutical companies, including Roche Products, which funded the study.

More information: Abstract

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