

Outpatient uterine polypectomy more costeffective

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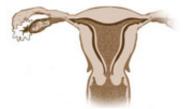


Illustration courtesy: U.S. National Cancer Institute "Outpatient treatment of uterine polyps associated with abnormal uterine bleeding appears to be more cost-effective than inpatient treatment at willingnessto-pay thresholds acceptable to the National Health Service," the authors write.

More information: <u>Abstract</u> <u>Full Text (subscription or payment may be required)</u>

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(HealthDay)—For women with abnormal uterine bleeding and hysteroscopically diagnosed endometrial polyps, outpatient treatment is more cost-effective than inpatient treatment, according to research published online May 25 in *BJOG: An International Journal of Obstetrics and Gynaecology.*

Lavanya Diwakar, from the University of Birmingham in the United Kingdom, and colleagues conducted a cost-effectiveness analysis of outpatient uterine polypectomy versus standard inpatient treatment under general anesthesia. Data were included for 507 women with <u>abnormal</u> <u>uterine</u> bleeding and hysteroscopically diagnosed endometrial <u>polyps</u>. Within the allocated setting, clinicians were free to choose the technique for polypectomy.

The researchers found that inpatient treatment was slightly more effective than outpatient treatment, but costs were higher, resulting in relatively high incremental cost-effectiveness ratios. Compared with outpatient treatment, inpatient treatment cost an additional £9,421 per successfully treatment patient, and £1,099,167 per additional qualityadjusted life-year (QALY) gained at six months. These costs were £22,293 per additional effectively treated patient and £445,867 per additional QALY gained at 12 months.



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