Fecal microbiota transplant cost-effective for preventing CDI

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(HealthDay)—Use of fecal microbiota transplantation (FMT) is cost-

effective for recurrent *Clostridium difficile* infection (CDI), according to a study published in the December issue of the *Journal of Gastroenterology and Hepatology*.

Gregory Merlo, from the Queensland University of Technology in Brisbane, Australia, and colleagues examined the cost-effectiveness of FMT compared with vancomycin for the treatment of recurrent CDI. A Markov model was developed to compare cost-effectiveness, with the structure of the model and choice of parameter values informed by a literature review of clinical evidence.

The researchers found that, compared with vancomycin, both nasoduodenal and colorectal FMT resulted in improved quality of life and reduced cost. Compared with vancomycin, the incremental effectiveness of FMT was 1.2 quality-adjusted life-years or 1.4 life-years saved. Vancomycin treatment resulted in increased costs of AU$4,094 and AU$4,045 compared with nasoduodenal and colorectal delivery of FMT, respectively. There was no significant difference in cost between nasoduodenal and colorectal FMT.

"If FMT, rather than vancomycin, became standard care for recurrent CDI in Australia, the estimated national health care savings would be over AU$4,000 per treated person, with a substantial increase in quality of life," the authors write.

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transcript-cost-effective-cdi.html