Addison's disease warrants large package of care costs due to substantial comorbidity Ross IL¹, Biden C², Leisegang R³

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Background: Patients with Addison's disease are burdened by substantial comorbidity and likely require a large package of care. There is a proportion of South African patients who can afford private health-care, comparable to health-care offered in a developed country. We hypothesised that the comprehensive package of care costs for Addison's disease are likely to be greater than patients with both hypertension and hyperlipidaemia and care for AIDS patients.

Methods: A medical insurance company database screen identified 131 patients with Addison's disease. Demographic, co-morbidity and cost analysis data were collected as of November 2015 for the duration that the patients were members of a medical insurance company.

Results: The median (IQR) age was 51 (37-67) years in 2015; age at membership was 46 (33-62.5) years and medical insurance membership duration 61.9 (36.4-103.5) months.

There were 73 (56%) female, 98 (75%) received hydrocortisone and 131 (100%) treated with fludrocortisone.

Admissions	Indication	Proportion
	At least one adrenal crisis	15%
	Ischaemic heart disease	7%

Cape Town

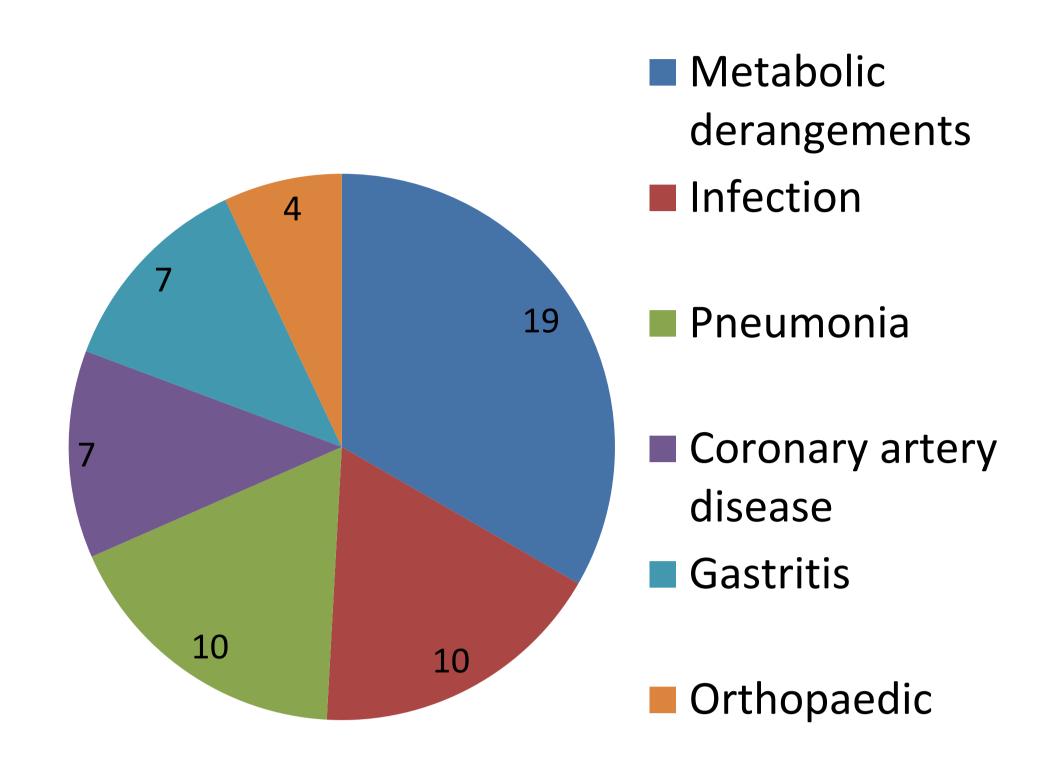
Comorbidity	Number	Percentage
Hypothyroidism	45	34%
Hypertension	42	32%
Hyperlipidaemia	37	28%
Gastro- oesophageal reflux disease	16	12%
Congestive cardiac failure	10	8%
Depression	10	8%
Ischaemic heart disease	9	7%
Type 2 diabetes mellitus	8	6%

Cost in Euros(€)

Addison's

disease

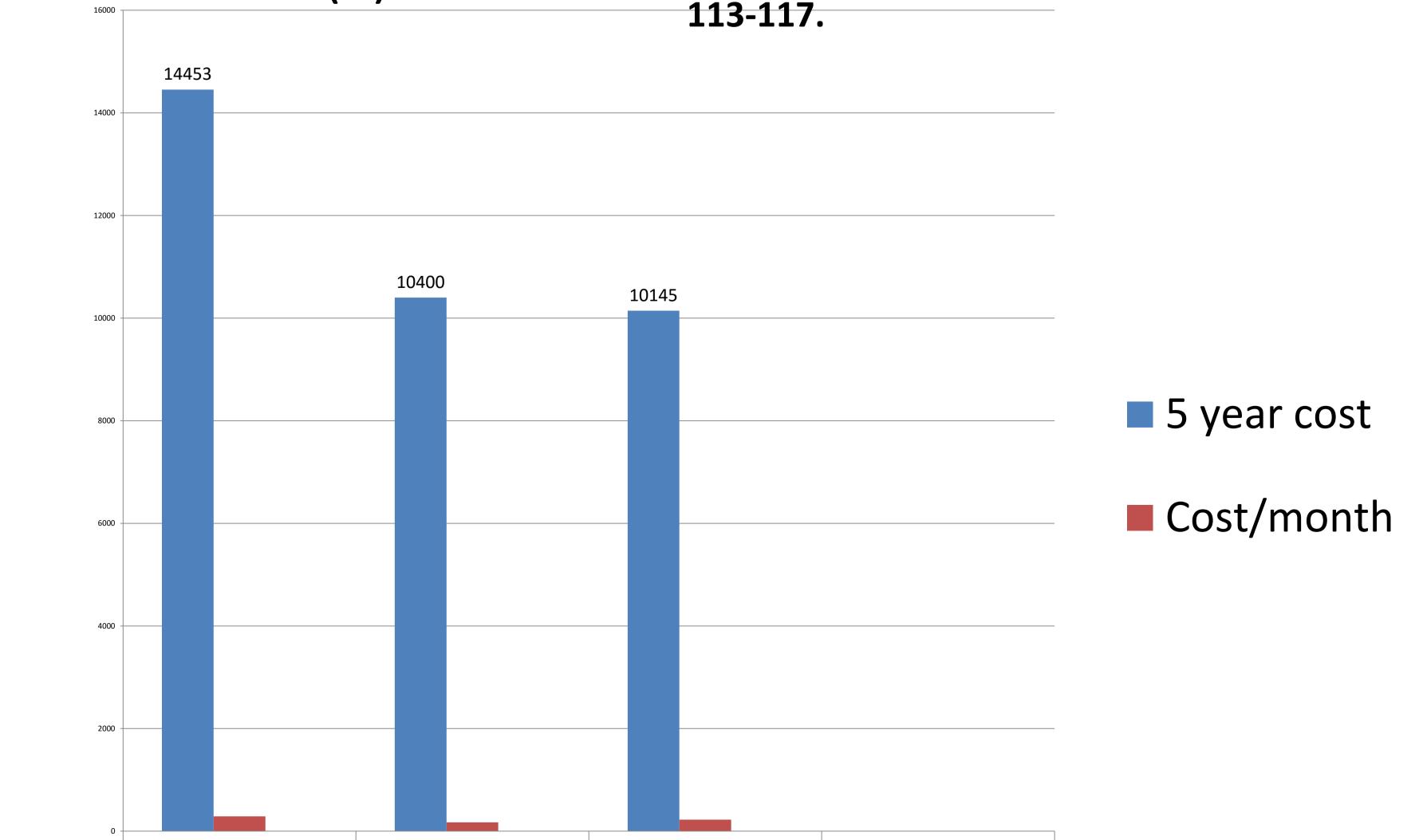
Admissions (%)

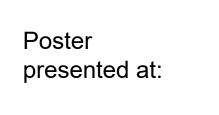


Substantial comorbidity, predisposition to adrenal crises, ischaemic heart disease contribute to the higher average package of care cost of Addison's disease, compared to patients with both hypertension and hyperlipidaemia, and patients on ART.

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Hypertension

and

hyperlipidaemia



AIDS patients

