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ECONOMIC ANALYSIS OF COSTS FOR PATIENTS WITH END STAGE LIVER DISEASE OVER THE LAST YEAR OF LIFE

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Introduction Liver disease is the third largest cause of death in the UK in people under the age of 65. With predicted increases in alcohol consumption, viral hepatitis and obesity, it is anticipated that the economic burden on the healthcare system will continue to rise.

Aim(s) and method(s) To evaluate costs of hospital admissions for patients with end-stage liver disease over the 12 months prior to death obtained from hospital records and case-note audit. The analysis includes all costs incurred during the admission, such as bed and board, nursing, specialist consultations, medications, investigations and surgery.

We also compared costs of care for a cohort with terminal hospital admission and costs of care for those who spent the last days at a hospice.

Results The mean cost per patient in the twelve months prior to death was £18,458, (SD=15,267), the mean total cost per hospital admission was £6,863 (SD=£6,631), the mean cost for individual admissions that ended in the patient's death i.e. the terminal admission, was £9,615 (SD=£8,443). Comparatively, for the patients who had a terminal admission at a hospice, the mean cost per terminal admission was £4,598 (SD=£5,818). There was no statistically significant difference in costs between patients with and without alcohol-related liver disease.

Conclusion(s) Our analysis underlines the significant economic burden placed on the healthcare system by patients with end stage liver disease. On average, compared to costs associated with hospice death, costs for hospital deaths were double. With rates of liver disease set to increase, government policy needs to address challenges for future funding of care.