

Figure 10. Impact of patient age on incremental cost effectiveness of ranibizumab vs. other interventions for CSDME

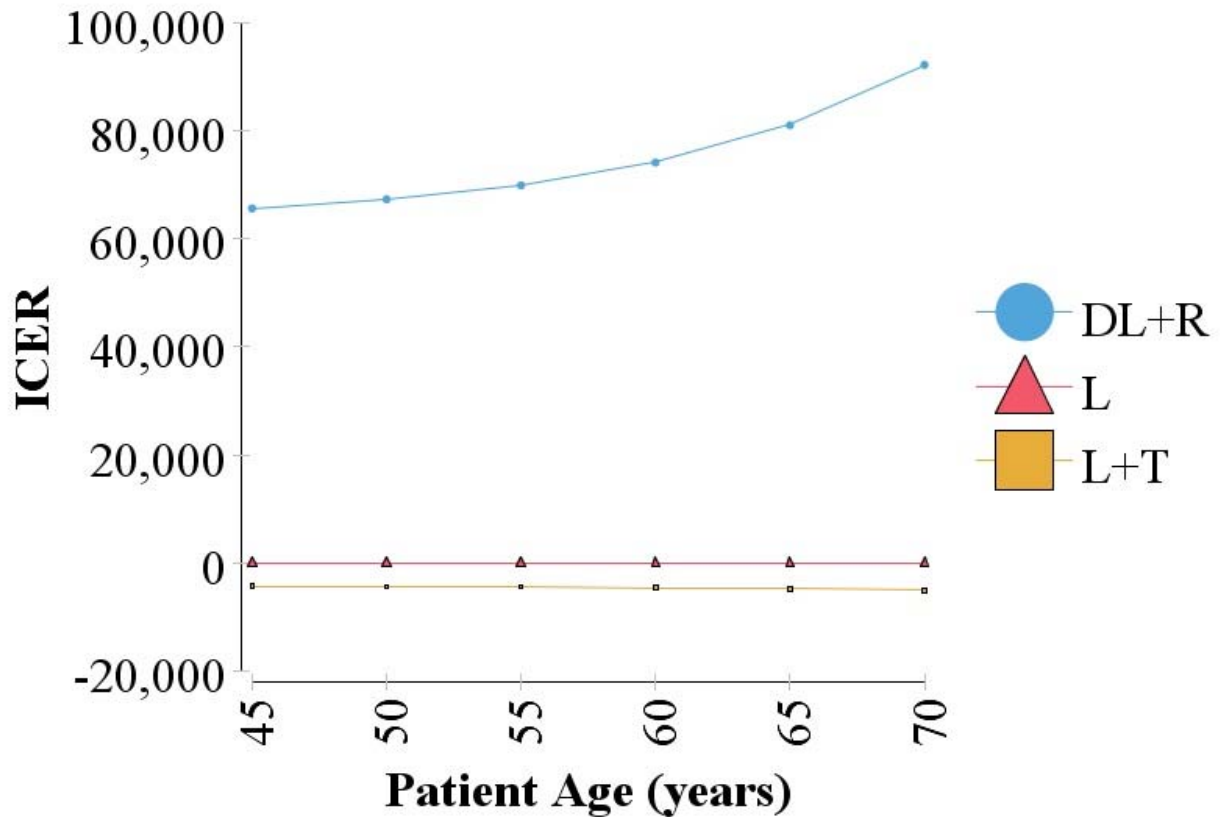


Figure 10 shows how patient age at time of initial treatment affects cost-effectiveness of ranibizumab therapy. As patient age increases, the anti-VEGF therapies become less cost-effective because they still have the high costs of the initial therapy, but higher mortality and thus less time to experience the improved vision from the therapy. For example, if all of the patients in the model started around age 50, the incremental cost effectiveness of DL+R would be \$67,252.00/QALY. If all the patients in the model started at age 65, the incremental cost effectiveness ratio of DL+R would be \$80,949.00/QALY. The negative ICER for triamcinolone means that it is dominated by the other therapies.

ICER = incremental cost-effectiveness ratio; VEGF = vascular endothelial factor; L = laser photocoagulation only; L+T = laser + intravitreal triamcinolone group; DL+R = delayed laser + ranibizumab group; CSDME = clinically significant diabetic macular edema