Pharmacoeconomics of Cyclamen europaeum (Nasodren®/Sinuforte®) in the management of Acute Rhinosinusitis

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Key Messages from this study

❖ Nasodren®/Sinuforte® increases the cure rate without increasing healthcare costs.
❖ Nasodren®/Sinuforte® based therapies show a lower cost per cured patient.
❖ Nasodren®/Sinuforte® improves the quality of life of rhinosinusitis sufferers and reduces the economic impact of this condition.

Study Design: Prospective observational study to compare the effectiveness and cost-effectiveness between therapies in the management of acute rhinosinusitis.

Objective: Pharmacoeconomic study of Cyclamen europaeum [(CE), Nasodren® / Sinuforte®] in the management of acute rhinosinusitis.

Patients: 2,610 patients visited by 286 ENT specialists throughout Spain.
RESULTS

❖ CE (Nasodren®/Sinuforte®) in monotherapy appeared to be more effective in terms of cure rate than any other monotherapies and combination therapies.

❖ The addition of CE (Nasodren®/Sinuforte®) to other monotherapies or combination therapies showed a significant improvement when adding CE to two-drug combination.

❖ Patients receiving CE (Nasodren®/Sinuforte®) monotherapy were 98€ less costly than patients receiving other monotherapies and 61€ than combination therapies.

❖ The combination of CE (Nasodren®/Sinuforte®) with two or more drugs produced similar costs than the same combination without CE (Nasodren®/Sinuforte®). Costs reductions were mainly explained by indirect costs, whereas direct costs were similar in all groups.

❖ CE (Nasodren®/Sinuforte®) based therapies show lower cost per cured patient in all comparison (except when added to combination of three or more drugs, when treatment cost was similar)

❖ CE (Nasodren®/Sinuforte®) provides an added value because it reduces chronification of ARS.

❖ CE (Nasodren®/Sinuforte®) has a purely physiological effect and it is not absorbed, showing a better safety profile compared to other treatments.

DISCUSSION

These results are in line with the conclusions of most of the clinical studies on acute rhinosinusitis carried with CE (Nasodren®/Sinuforte®), including placebo controlled clinical trials and head-to-head clinical studies.

CE (Nasodren®/Sinuforte®) is a safe and well-tolerated treatment that demonstrated a great reduction in individual symptoms scores (nasal obstruction, mucus secretion, facial pain, and loss of smell), an improvement in the mucosal oedema and nasal obstruction evaluated by endoscopy, and a reduction of the sinus occlusion evaluated by CT scan.

Several drugs, such as antibiotics, oral decongestants, antihistamines, and topical corticosteroids are used for the treatment of rhinosinusitis, but these available therapies do not have sufficient evidence to be considered efficacious and often fail
to provide adequate symptoms relief and/or objective cure assessed by endoscopy or CT scan.

Consequently, patients with acute rhinosinusitis are often poorly treated and/or treated using several therapies. Despite continued development of new therapies and more accurate diagnostic procedures, there is no evidence that ARS is being better controlled. CE (Nasodren®/Sinuforte®) could be considered a recommendable option as a first-line treatment, as it has demonstrated in several clinical studies its ability to improve the signs and symptoms of the disease. In addition, CE (Nasodren®/Sinuforte®) provides a good option for acute rhinosinusitis treatment, ensuring personalized treatment and preventing polymedication and inappropriate use of antibiotics.

It is important to note that not properly treated, rhinosinusitis could lead to a recurrence or even to a potential chronification.

CONCLUSIONS

“The results of this study suggest that the use of CE (Nasodren®/Sinuforte®), both as monotherapy or in combination, may be associated with better clinical outcomes, including cure rate, at no additional cost to the healthcare system, with respect to different treatment options commonly used in clinical practices for the treatment of acute rhinosinusitis.”